

SJR 5 Study: Emergency Medical Services

LCS5-7: Audit Followup Legislation

August 2008

Background

In June 2008, the Legislative Audit Division completed its EMS performance audit involving the Department of Public Health and Human Services and the Board of Medical Examiners. The audit made 12 recommendations, including two that suggested legislation to clarify:

- medical direction issues for emergency medical service providers, and
- the handling of complaints filed with the state about EMS care.

Senator Laible asked that legislation be prepared for the committee's consideration. At the same time, DPHHS sought and received approval to introduce agency legislation to address the audit recommendations.

LCS5-7: Clarify Medical Direction and Complaint Handling Issues

Since the June meeting, legislative staff and staff from DPHHS and the Board of Medical Examiners have met twice to work on legislation. In addition, DPHHS attended a Board of Examiners meeting to work on ways to resolve issues. The discussions resulted in LCS5-7.

The bill draft contains the following elements:

- Changes to existing laws requiring interdepartmental cooperation to specify that DPHHS and the Board must cooperate on EMS issues. This corrects out-of-date language.
[Sections 1 and 4]
- Changes to existing law on the Board's authority to oversee requirements for emergency medical technicians (EMTs), to provide authority for additional oversight requirements.
[Section 3]
- New language to create a review process [Section 2] that requires all complaints to be filed initially with the Board and reviewed using the screening panel process already in place for all occupational licensing boards. Complaints would then be referred as follows:
 - ▶ A complaint involving the operation or condition of an EMS agency would be referred to DPHHS for review and investigation as provided in current law. Amendments to current law specify the matters that DPHHS may review and investigate. [Section 6]
 - ▶ A complaint involving patient care provided by an EMT would be referred to the Board for investigation as provided in current law.
 - ▶ A complaint involving a combination of patient care and EMS agency issues would be referred to both agencies, and each would handle the matters that fall within its jurisdiction.
- Changes to existing definitions [Section 5] to strike the definition of "medical control" and replace it with more specific definitions for "offline medical direction" (overall medical oversight, supervision, and review authority) and "online medical direction" (direction, advice, or orders to an EMT).
 - ▶ Changes in Sections 6 and 7 use the appropriate new definition in place of the former definition of medical control.