SENATE BILL REPORT SHB 1276

As of March 19, 2021

Title: An act relating to providing for certain emergency medical services personnel to work in diversion centers.

Brief Description: Providing for certain emergency medical services personnel to work in diversion centers.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Bronoske, Lovick, Fitzgibbon, Cody, Hackney, Fey, Macri, Leavitt, Ormsby, Harris-Talley and Stonier; by request of Department of Health).

Brief History: Passed House: 2/23/21, 97-0.

Committee Activity: Health & Long Term Care: 3/15/21 [w/oRec-BH]. Behavioral Health Subcommittee to Health & Long Term Care: 3/19/21.

Brief Summary of Bill

- Expands the scope of practice of an emergency medical technician by allowing them to provide medical evaluation or initial treatment to sick or injured people within a law enforcement agency, disaster management organization, search and rescue operation, diversion center, or businesses with an industrial safety team.
- Allows these organizations to provide unlicensed ambulance services or aid services within the scope of their duties.

SENATE COMMITTEE ON BEHAVIORAL HEALTH SUBCOMMITTEE TO HEALTH & LONG TERM CARE

Staff: Kevin Black (786-7747)

Background: Emergency Medical Services Personnel. Emergency medical services

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(EMS) personnel are certified by the Department of Health (DOH). There are four primary categories of EMS personnel—paramedics; emergency medical technicians (EMTs); advanced EMTs; and emergency medical responders, also known as first responders. Emergency medical services personnel may only provide services within the scope of care established in the curriculum of the person's level of certification or any specialized training.

Emergency Medical Technicians. Emergency medical technicians are licensed by DOH upon completion of approved training and association with an EMS agency, a law enforcement agency, a business with an organized safety team, or as instructors or coordinators with approved EMS training programs. An EMT is defined as a person who is authorized by the Secretary of Health to render emergency medical care or under the responsible supervision and direction of an approved medical director to participate in a community assistance referral and education services program.

<u>Ambulance Services.</u> An ambulance service or aid service must be licensed by DOH to operate in Washington. Ambulance services and aid services meeting the following exceptions do not have to be licensed:

- services operated by the United States government;
- ambulance services providing service in other states when bringing patients into this state:
- owners of businesses where ambulance or aid vehicles are used exclusively on company property; and
- operators of vehicles pressed into service for transportation of patients in emergencies when licensed ambulances are not available or cannot meet the overwhelming demand.

Summary of Bill: An EMT may participate in an emergency services supervisory organization (ESSO) under the responsible supervision and direction of an approved medical program director, if the participation does not exceed the participant's training and certification. An ESSO is an entity that provides medical evaluation or initial treatment to sick or injured people in the course of duties, including law enforcement agencies, disaster management organizations, search and rescue operations, diversion centers, and businesses with industrial safety teams. The ESSO must provide medical oversight and protocols that enable the EMT to meet certification and training requirements and provide the EMT with necessary medical equipment. An ESSO may provide unlicensed ambulance services or aid services.

Appropriation: None.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: PRO: This bill will authorize diversion centers to be employers of EMTs. The Snohomish County diversion center already does this, and can rely on staff in house to handle a client event without taking them to an emergency room. It is about appropriate care in an appropriate place. This bill will eliminate the need for a waiver, so the bill removes barriers. Some diversion centers use EMTs to perform intakes and monitor the health of residents. Diversion centers do not currently have an exemption for licensure as an EMS service to employ EMTs, so DOH has been issuing temporary variances to certain centers. This bill will provide a permanent solution, and provides for supervision by an EMS program director. The bill creates no new requirements. It supports local efforts to address behavioral health needs. Diversion centers provide innovative critical intervention for people with a range of needs, including homelessness, mental health disorders, and substance use disorders, and people with co-occurring physical conditions. These centers save an enormous amount of costs for hospitals and the criminal justice system.

Persons Testifying: PRO: Representative Dan Bronoske, Prime Sponsor; Christie Spice, Washington State Department of Health; Nick Federici, Pioneer Human Services.

Persons Signed In To Testify But Not Testifying: No one.