



TESTIMONY REGARDING TITLE 35 AMENDMENTS

Presented to:

THE VETERANS AFFAIRS AND EMERGENCY PREPAREDNESS COMMITTEES
OF THE SENATE AND HOUSE OF REPRESENTATIVES

Presented by:

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MAY 14, 2008

Your Voice in EMS

Good Morning, I am Janette Kearney, the Executive Director of the Pennsylvania Emergency Health Services Council (PEHSC). Thank you for this opportunity to comment on the proposed amendments to Title 35.

The Pennsylvania Emergency Health Services Council (PEHSC) was organized in 1974. The Council is identified in law (Act 45 of 1985) as the state advisory council to the Pennsylvania Department of Health on all aspects of emergency health care. Our membership, which I have attached to this testimony, represents organizations of physicians, nurses, firefighters, emergency medical technicians, paramedics and state, regional and local organizations involved or interested in emergency health care issues.

The PEHSC distributed the draft revisions to Title 35 to our membership for comment and received several responses which we have outlined in our testimony today.

Relationships

As you know, all communities are vulnerable to a variety of hazards, hence the need for the all-hazards component of emergency management theory. The proposed changes have clearly outlined this component. The comprehensive emergency management theory, however, could never be effectively implemented without a network of relationships among partners in the system.

In regard to these partners, it is important to note that relationships between state agencies and the private sector have been in place at the state level for many years. The proposed amendments will solidify and improve these existing relationships, so they can be fully integrated at the time of a disaster. As for daily functions, it is important to maintain the fundamental role of the emergency medical services system, as it has been since 1985, which is to prevent and reduce premature death and disability in this Commonwealth; providing for assistance, coordination and support of the development of a comprehensive emergency medical services system. This role remains vested with the Pennsylvania

Department of Health. The daily operations of EMS, outside of a disaster, require the components of the healthcare delivery system, as found, within the Department of Health to ensure prompt patient care.

Since Emergency Management activity involves participants at all governmental levels and in the private sector. We have received comments requesting that the Pennsylvania Emergency Management and Homeland Security Council structure be expanded to include a specific seat for emergency medical services to be represented.

Regional Task Forces (RTF)

We received specific comments in regard to the regional task forces (RTF). The diversity among the task forces can be debated but in general terms perhaps consideration should be made to establish a direct formal relationship with the task forces and PEMA. A suggestion was made to establish a specific set of task force minimum capabilities in an effort to reduce conflict and confusion. These minimum standards would limit duplication and would assist in identifying and validating the existence of needed services.

Workers Compensation/Immunity Coverage

The addition of language to support workers compensation coverage and immunity protection to support each volunteer who provides emergency services to their community, is appreciated. We receive inquiries on a regular basis associated with workers compensation/immunity protection concerns. This language will provide the security our volunteers deserve.

Incorporated Areas

Concerns were raised regarding incorporated areas with populations of 10,000 or less. The concerns were specific to the role of the counties in relation to local government in these areas and the potential conflict and confusion this could generate.

Special Teams

The recognition of special teams will assist in the growth of additional specialized resources. This addition will support the existing EMS Surge/Strike Team which consists of 150 ambulances. As you may recall, this special team traveled to New Orleans to support efforts there after Hurricane Katrina. The continued need for special teams is evidenced by the increased number of teams identified in the National Incident Management System (NIMS) standards, this language will support the needs of these teams.

Conclusion

In conclusion, this is an important time for Pennsylvania's emergency services community as we today discuss the pending changes to Title 35 and have as a community reviewed suggested changes to Pennsylvania's EMS Act. Combined these efforts to improve operations and authority are certain to enhance operations of emergency services providers, thereby effectively mitigating the delivery of services to the citizen's of Pennsylvania at all levels.

On behalf of our member organizations, I thank you for this opportunity to comment. I am happy to answer any questions you may have.

A few final notations:

1. We respectfully request that any references to protocols be specific as whether it is in regard to operational protocols or clinical protocols or both. If the reference could be interpreted as a clinical protocol, we are requesting that language be added to ensure that medical oversight as available through the PA Department of Health be required prior to approving such a protocol.

2. In section 7503, county coordinators are required to submit the annual report to the Department by January 1 yet the local coordinators do not have to submit the review of their plans till January 1 to the county for inclusion in their annual report. It appears the dates may need to be altered to accommodate the receipt of the local government information for the development of the county's annual report to the Department.

3. In section 7521 (a) Establishment, we believe it should read, "The department, in coordination with Commonwealth agencies . . ."

4. Section 7701 (h) – discusses large event plans – this section should be reviewed against the current EMS rules and regulations (Title 28)– Chapter 1013 Special Event EMS for consistency.

PENNSYLVANIA EMERGENCY HEALTH SERVICES COUNCIL

Membership for 2007-2008

Organization

Albert Einstein Medical Center – EMS Education Center

***Allegheny County EMS Council**

Allegheny General Hospital

Altoona Hospital Center for Medicine

***Ambulance Association of Pennsylvania**

***American Heart Association – PA/DE Affiliate**

American Medical Response Mid Atlantic Inc.

American Red Cross

American Trauma Society - Pennsylvania Division

***Bradford/Susquehanna EMS Council**

Bucks County EHS Council, Inc.

Bucks County Rescue Squad

Bucks County Squad Chief's Association

***Center for Emergency Medicine of Western PA**

Central Bucks Ambulance & Rescue Unit

Central Pocono Ambulance

Chalfont EMS

Chester County Department of Emergency Services

Chester County EMS Council

***City of Allentown EMS**

***City of Pittsburgh EMS**

County of Schuylkill - Office of Public Safety

Danville Ambulance Service

Delaware County EHS Council

***Drexel University**

Eastern Lebanon County School District

***Eastern PA EMS Council**

Emergency Health Services Federation, Inc.

***Emergency Medical Services Institute**

Emergency Medical Services of Northeastern PA

Emergency Nurses Association

***EMMCO East**

***EMMCO West**

EMS Association of York County

Firemen's Legislative Federation

***Fraternal Association of Professional Paramedics**

Harrisburg Area Community College

***Hershey Medical Center**

Hospital & Healthsystem Association
of Pennsylvania

Initial Life Support Foundation

JeffSTAT

J.R. Henry Consulting, Inc.

Keystone Chapter of Fire Service Instructors

Lancaster County EMS Council

Lancaster General Hospital

Levittown-Fairless Hills Rescue Squad

Lewistown Hospital ALS, Medic 29

LTS EMS Council

Luzerne County Community College - EMS Dept.

Lycoming Co. Health Improvement Coalition, Inc.

Medic 9 Paramedic Service, Inc.

Monroe County Ambulance Association

Montgomery County Regional EMS Office

Murrysville Medic One

National Ski Patrol

Network Ambulance Services

Non Profit Emergency Services of Beaver County

North American Ambulance Alliance

Northeast PA Volunteer Ambulance Association

PA Association of Air Medical Services

PA Association of Rehabilitation Facilities

***PA Athletic Trainers' Society, Inc.**

PA Chapter, American College of Emerg. Physicians

PA Coalition Against Rape

***PA Committee on Trauma – ACS**

PA DUI Association

***PA Medical Society**

PA Neurosurgical Society

PA Orthopaedic Society

PA Osteopathic Medical Association

PA Psychological Association

PA Society of Internal Medicine

PA Society of Physicians Assistants

PA State Nurses Association

***PA State University**

***PA Trauma Systems Foundation**

PA Veterinary Medical Association

Philadelphia Firefighters Union, Local #22

Philadelphia Paramedic Association

Philadelphia Regional EMS

***Philadelphia University**

Pittsburgh Mercy Health System

Ross/West View EMS Authority
St. Luke's Regional Trauma Center
Seneca Area Emergency Services
***Seven Mountains EMS Council**
***Southern Alleghenies EHS Council**
Southern Chester Co. EMS, Inc.
***Southwest Ambulance Alliance**
Star Technical Institute - EMS Division
State Firemen's Assoc. of PA
Susquehanna EHS Council
***Susquehanna Health System**
***Tioga County EMS Council**
TransCare Pennsylvania, Inc.
Univ. of PA Dept. of Emergency Medicine
***UPMC Presbyterian**
***Valley Ambulance Authority**
***VFIS/Education and Training Services**
Warrington Community Ambulance Corps
Washington County EMS Council
West Branch Emergency Physicians
Westmoreland County EMS Council
Yellow Breeches EMS, Inc.
***York Hospital**