

SCR52

Measure Title:	REQUESTING THE DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS TO AMEND THE DEFINITIONS OF "EMERGENCY MEDICAL TECHNICIAN-BASIC" AND "EMERGENCY MEDICAL TECHNICIAN-PARAMEDIC" UNDER SECTION 16-85-53.5, HAWAII ADMINISTRATIVE RULES.
Report Title:	DCCA; Emergency Medical Technician-Basic; Emergency Medical Technician-Paramedic
Description:	
Companion:	
Package:	None
Current Referral:	CPH
Introducer(s):	DELA CRUZ, S. Chang, Inouye, Kanuha, Keith-Agaran, Kidani, Nishihara, Shimabukuro

Testimony of the Hawaii Medical Board

**Before the
Senate Committee on Commerce, Consumer Protection, and Health
Wednesday, March 20, 2019
10:00 a.m.
State Capitol, Conference Room 229**

**On the following measure:
S.C.R. 52, REQUESTING THE DEPARTMENT OF COMMERCE AND CONSUMER
AFFAIRS TO AMEND THE DEFINITIONS OF "EMERGENCY MEDICAL
TECHNICIAN-BASIC" AND "EMERGENCY MEDICAL TECHNICIAN-PARAMEDIC"
UNDER SECTION 16-85-53.5, HAWAII ADMINISTRATIVE RULES**

Chair Baker and Members of the Committee:

My name is Ahlani K. Quiogue, and I am the Executive Officer of the Hawaii Medical Board (Board). The Board offers comments on this concurrent resolution.

The purpose of this concurrent resolution is to request that the Department of Commerce and Consumer Affairs amend the definitions of “emergency medical technician-basic” and “emergency medical technician-paramedic” under Hawaii Administrative Rules (HAR) section 16-85-53.5.

For the Committee’s information, HAR section 16-85-53.5 was repealed on October 15, 2016. Instead, HAR section 16-85-59 sets forth the scope of practice for the three levels of emergency medical personnel the Board certifies. HAR section 16-85-59 provides that:

- (a) The scope of practice of an EMT shall be restricted to the performance of basic emergency medical care and transportation of patients, cardiac defibrillation, and IV access.
- (b) The scope of practice of an AEMT shall include the EMT scope of practice and be restricted to the performance of limited advanced skills focused on the acute management and transportation of patients and basic, limited advanced, and pharmacological interventions.
- (c) The scope of practice of a Paramedic shall include the AEMT scope of practice and be restricted to the performance of advanced skills focused on the acute management and transportation of patients and invasive and pharmacological interventions.

For the above reasons, the Board does not believe this concurrent resolution is necessary and respectfully requests that this measure be held.

Thank you for the opportunity to testify on this concurrent resolution.



KAUA'I FIRE DEPARTMENT
THE COUNTY OF KAUA'I
DEREK S. K. KAWAKAMI, MAYOR
MICHAEL A. DAHLIG, MANAGING DIRECTOR

KILIPAKI VAUGHAN
DEPUTY FIRE CHIEF

The Honorable Rosalyn H. Baker, Chair
The Honorable Stanley Chang, Vice Chair
Senate Committee on Commerce, Consumer Protection and Health

March 20, 2019; 10:00 am
Conference Room 229

In consideration of
Senate Concurrent Resolution (SCR) 52
Relating to EMT

Aloha Chair Baker, Vice Chair Chang and Members of the Committee:

I am Kilipaki Vaughan, Deputy Fire Chief of the Kauai Fire Department (KFD). The KFD is in **support** of SCR 52, in its recommendation to amend the definition to mean "an individual certified by the Board of Medical Examiners to perform basic and advanced life support." An amendment would provide clarity in EMS scope of practice and expand the healthcare workforce qualified to perform EMS care.

Kauai is a rural federally-designated Health Professional Shortage Area (HPSA) for primary care, dental, and mental health. KFD's workforce of 145 Firefighters and 56 Ocean Safety Officers (Lifeguards) supplements the healthcare workforce in servicing State and County jurisdictions in a pre-hospital setting. KFD currently has 61 NREMT including 56 Firefighter EMT and 5 Ocean Safety Officer EMT. Our workforce is embedded in the Kauai community we serve and is a major contributor to the health stabilization and well-being of residents and visitors. A change in definition would acknowledge the State of Hawaii's needed depth of healthcare workers in the form of County Fire Departments, State ARFF, Federal partners, and reciprocity-eligible EMTs.

The current definitions of Emergency Medical Technician-Basic (EMT-B) and Emergency Medical Technician-Paramedic (EMT-P) in Hawaii Administrative Rules (HAR) Section 16-85-53.5 are ambiguous and appears to narrow the performance of emergency medical service (EMS) care to personnel operating in "transit" or "transport" via ambulance. These definitions are 22 to 31 years old, limit the performance of care in a pre-hospital scope of practice, do not provide for enhancement of personnel training to a higher level of established care, and inadvertently hold back the quality of healthcare to blossom to its fullest potential for the Kauai community we serve.

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KAUA'I FIRE DEPARTMENT
THE COUNTY OF KAUAI
DEREK S. K. KAWAKAMI, MAYOR
MICHAEL A. DAHLIG, MANAGING DIRECTOR

KILIPAKI VAUGHAN
DEPUTY FIRE CHIEF

Honorable Rosalyn H. Baker, Chair
Honorable Stanley Chang, Vice Chair
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March 20, 2019

Furthermore, the definitions indirectly ignore the paradigm shift of today's EMS trends and initiatives, including but not limited to Community Paramedicine, Mobile Integrated Health (MIH), as well as, Active Shooter and Mass Casualty Incident (MCI) scenarios. The definitions do not complement the overall movement of the EMS System in Hawaii/US to move beyond the traditional approach of transport and delivery to a hospital.

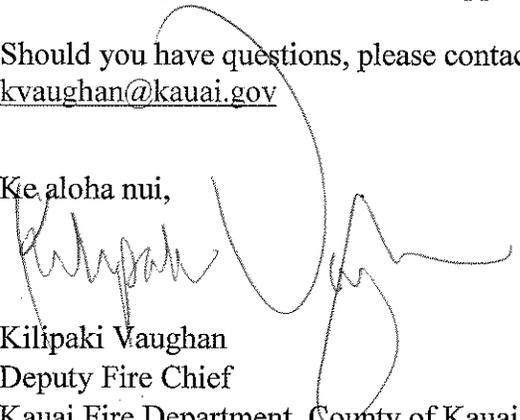
Currently, the Kauai Fire Department (KFD) works collaboratively with our EMS Transport Partner American Medical Response (AMR) to provide emergency response service to a resident population of 71,500 and approximately 30,000 visitors per day. From our eight (8) Fire Stations, KFD corresponds to emergency medical service (EMS) calls with AMR Medics housed in six (6) Medic Bases. In 2018, 80% of our Call Volume were EMS in nature – a 5% increase. In further detail, KFD's EMS Calls have seen a resounding uptick in those involving our Elderly population – Kupuna.

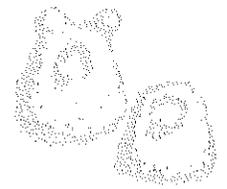
KFD leads the Kauai Fall Prevention & Wellness Program in multi-agency collaboration with AMR, County of Kauai Agency on Elderly Affairs, and Hawaii State Department of Health in providing preventative care (home safety inspections, smoke alarm installation, fall prevention equipment installation, medication management, and social service support). However, the current EMT-B and EMT-P definitions are ambiguous as to whether this type of program could move beyond Fall Prevention to Community Paramedicine or Mobile Integrated Health as mentioned above.

The KFD urges your committee's support of SCR 52.

Should you have questions, please contact me at (808) 241-4980 or via email at kvaughan@kauai.gov

Ke aloha nui,


Kilipaki Vaughan
Deputy Fire Chief
Kauai Fire Department, County of Kauai



SCR-52

Submitted on: 3/19/2019 10:54:32 AM

Testimony for CPH on 3/20/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Michael Jones	Testifying for Honolulu Fire Department	Support	Yes

Comments:

SCR-52

Submitted on: 3/19/2019 9:56:08 AM

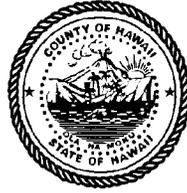
Testimony for CPH on 3/20/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Speedy Bailey	Testifying for American Medical Response	Oppose	Yes

Comments:

The language of SCR 52 is not needed for EMS' Community Paramedicine Programs.

Harry Kim
Mayor



Darren J. Rosario
Fire Chief

Lance S. Uchida
Deputy Fire Chief

County of Hawai'i
HAWAI'I FIRE DEPARTMENT
25 Aupuni Street • Suite 2501 • Hilo, Hawai'i 96720
(808) 932-2900 • Fax (808) 932-2928

March 19, 2019

The Honorable Rosalyn H. Baker, Chair
Committee on Commerce, Consumer Protection,
and Health
The State Senate
State Capitol, Room 229
Honolulu, Hawai'i 96813

Dear Chair Baker:

Subject: SCR 52, RELATING TO EMERGENCY MEDICAL SERVICES
Hearing Date: Wednesday, March 20, 2019
Time/Place of Hearing: 10:00 a.m., Conference Room 229

I am Darren J. Rosario, Fire Chief of the Hawai'i Fire Department of the County of Hawai'i (HCFD). The HCFD supports SCR 52, which request the Department of Commerce and Consumer Affairs to amend the definition of "Emergency Medical Technician-Basic" and "Emergency Medical Technician-Paramedic" under section 16-85-53.5, Hawai'i Administrative Rules.

This amendment will result in a more global Emergency Medical Services System involving Fire Departments and Ocean Safety Lifeguards. Having the ability to be perform Basic Life Support and Advanced Life Support treatment while employed by a non-transport public safety organization further expands our EMS System in a positive direction. Restricting Licensure to those organizations that transport EMS patients is not conducive to organizations providing the utmost care needed by our residents and visitors.

As a transport EMS provider, the HCFD is in support of the proposed language change. Having full understanding of what our peer public safety non-transport organizations provide to their staff in training and equipment, it is my opinion that they are fully capable of providing high quality BLS and ACLS care prior to a transport agencies arrival.

Please do not hesitate to call me at 932-2901 or darren.rosario@hawaiicounty.gov should you have any questions. Thank you for the opportunity to provide testimony in support of SCR 52.

Respectfully,

Handwritten signature of Darren J. Rosario.

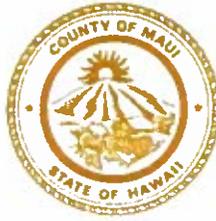
DARREN J. ROSARIO
Fire Chief



MICHAEL P. VICTORINO
Mayor

DAVID C. THYNE
Fire Chief

BRADFORD K. VENTURA
Deputy Fire Chief



DEPARTMENT OF FIRE & PUBLIC SAFETY

COUNTY OF MAUI
200 DAIRY ROAD
KAHULUI, HI 96732

March 19, 2019

The Honorable Roy Takumi, Chair
Committee on Consumer Protection
and Commerce
State Capitol, Room 231
Honolulu, HI 96813

Dear Chair Takumi:

Subject: SCR 52 Relating to the Amendment of the Definitions of “Emergency Medication Technician- Basic” and “Emergency Medical Technician- Paramedic”

I am David C. Thyne, Fire Chief of the County of Maui Department of Fire & Public Safety. The County of Maui Department of Fire & Public Safety workforce of 314 Firefighters and 62 Ocean Safety Officers (Lifeguards) supplements the healthcare workforce in servicing State and County jurisdictions in a pre-hospital setting. Our workforce is embedded in the Maui community we serve and is a major contributor to the health stabilization and well-being of residents and visitors. A change in definition would acknowledge the State of Hawaii’s needed depth of healthcare workers in the form of County Fire Departments, State ARFF, Federal partners, and Reciprocity-eligible EMTs.

The current definitions of Emergency Medical Technician-Basic (EMT-B) and Emergency Medical Technician-Paramedic (EMT-P) in Hawaii Administrative Rules (HAR) Section 16-85-53.5 is ambiguous and seems to narrow the performance of emergency medical service (EMS) care to personnel operating in “transit” or “transport” via ambulance. These definitions are 22 to 31 years old, limit the performance of care in a pre-hospital scope of practice, do not provide for enhancement of personnel training to a higher level of established care, and inadvertently hold back the quality of healthcare to blossom to its fullest potential for the communities we serve.

Furthermore, the definitions indirectly ignore the paradigm shift of today’s EMS trends and initiatives, including but not limited to Community Paramedicine, Mobile Integrated Health (MIH), as well as, Active Shooter and Mass Casualty Incident (MCI) scenarios. The definitions do not complement the overall movement of the EMS System in Hawaii/US to move beyond the traditional approach of transport and delivery to a hospital.

Currently, the Maui Fire Department (MFD) works collaboratively with our EMS Transport Partner American Medical Response (AMR) to provide emergency response service to a resident population of 166,260 and approximately 52,000 visitors per day. From our fourteen (14) Fire Stations, MFD corresponds to emergency medical service (EMS) calls with AMR Medics. In 2018, over 60% of our Call Volume were EMS in nature. In further detail, MFD's EMS Calls have seen a resounding uptick in those involving our Elderly population – Kupuna.

MFD is in SUPPORT of this SCR52 recommendation to amend the definition to mean “an individual certified by the Board of Medical Examiners to perform basic and advanced life support.” An amendment would provide clarity in EMS scope of practice and expand the healthcare workforce qualified to perform EMS care.

Sincerely,

A handwritten signature in black ink, appearing to read 'D.C. Thyne', with a long horizontal flourish extending to the right.

DAVID C. THYNE
Fire Chief

DCT:ckk

HONOLULU FIRE DEPARTMENT
CITY AND COUNTY OF HONOLULU

636 South Street
Honolulu, Hawaii 96813-5007
Phone: 808-723-7139 Fax: 808-723-7111 Internet: www.honolulu.gov/hfd

KIRK CALDWELL
MAYOR



MANUEL P. NEVES
FIRE CHIEF

LIONEL CAMARA JR.
DEPUTY FIRE CHIEF

March 19, 2019

The Honorable Rosalyn Baker, Chair
Committee on Commerce, Consumer Protection,
and Health
The State Senate
State Capitol, Room 230
Honolulu, Hawaii 96813

Dear Chair Baker:

Subject: Senate Concurrent Resolution 52, Senate Draft 1 (SCR 52, SD 1) Requesting the Department of Commerce and Consumer Affairs to Amend the Scope of Practice of an Emergency Medical Technician (EMT), Advanced EMT, and Paramedic Under Section 16-85-59, Hawaii Administrative Rules (HAR)

I am Manuel P. Neves, Fire Chief of the Honolulu Fire Department (HFD). The HFD supports SCR 52, SD 1, which proposes to correct the language in the HAR, Section 16-85-59, Scope of Practice, by removing the references to the transportation of patients.

The proposed amendment will benefit the City and County of Honolulu (City) by allowing the efficiency of emergency care through the practice of community paramedicine and enhancing the City's resiliency during catastrophic events.

The HFD urges your committee's support of SCR 52, SD1.

Should you have questions, please contact me at 723-7101 or mneves@honolulu.gov.

Sincerely,

A handwritten signature in blue ink, appearing to read "M. Neves", is written over a blue horizontal line.

MANUEL P. NEVES
Fire Chief

From: [Jones, Michael J](#)
To: [CPH Testimony](#)
Subject: Testimony on SCR52
Date: Tuesday, March 19, 2019 4:06:30 PM

Aloha,

Captain Jones Honolulu Fire Department, Training and Research Bureau Medical Section. I am currently both a National Registry of EMTs and State of Hawaii licensed Advanced EMT holding the distinction of being the 1st person in Hawaii licensed as an Advanced EMT.

I am writing to express my support for the resolution however first I would like to provide some statistics for perspective. The data I am providing has been pulled from the Records Management System for the Honolulu Fire Department for calendar years 2016, 17, and 18.

- The HFD had an annual call volume of 52,961 in 16 increasing to -55,826 in 2018
- Of that total approximately 42,000 of those calls are medical in nature.
- Put simply 75% of the time the Honolulu Fire Department is actually responding to a medical incident to provide patient assessments and treatment.
- 23-26,000 times a year the HFD is the first agency on scene assessing and providing lifesaving treatments to patients.

Please also consider that the Revised Charter of the City & County of Honolulu (2017 Edition) Chapter 10 – Fire Department states in:

- Section 6-1004 Fire Chief Powers, Duties and Functions – The Fire Chief Shall: (c) Provide emergency medical care and general safety measures to the public.

I share the previous information 1st and foremost to ensure that when discussing this resolution it is understood that the provision of Emergency Medical care to the citizens of this state can only occur through the cooperative efforts of multiple agencies and providers. The personnel employed by the various ambulance services do an exceptional job with limited resources and personnel.

The provision of emergency medicine can and does occur independent of transportation. The National Highway Safety Traffic Administration (NHTSA) National EMS Scope of Practice Model 02/2007 In the Description of the Profession for EMT, AEMT and Paramedics does say “management and transportation” however it goes on to say:

“This may occur at an emergency scene until transportation resources arrive, from an emergency scene to a healthcare facility, between health care facilities, or in other health care settings.”

The National Registry of EMTs defines personnel who qualify for active status when renewing their certification as “affiliation with an agency that out-of-hospital skills are utilized”. The NREMT further states “actively engaged with an ambulance/rescue service or healthcare/patient care activity.” Recognizing that an EMS professional can be actively using their skills in settings other than just transportation.

All of the information and data I have provided has been to help establish that EMS certification/licensure should not be tied solely to transportation. The language in HAR 16-85-59 as it currently exists can, and has been interpreted as limiting the scope of practice of EMS personnel to transportation service only. With this interpretation it has been argued that if you can only “use” your certification/license during transportation then only personnel who work for a transport service should be allowed to be certified/licensed.

Lastly a brief mention about the movement towards mobile integrated health paramedicine, commonly known as “community paramedicine” which utilizes a team based, multi-discipline, proactive approach to patient care. In this model EMS personnel do community outreach to “prevent” 911 calls requiring transport. This means that EMS personnel are using their certification/license to practice medicine in a non-transport capacity to increase community health and reduce costs to patients, the EMS/hospital system and Insurance companies.

As you can see there is recognition throughout the medical community that EMS provides patient assessment and care in various settings. As the EMS system evolves to meet the ever changing needs of the community, the laws which govern the practice of Emergency Medicine must also evolve to support those providers.

Mahalo for your consideration,

Michael J. Jones

Fire Captain / Advanced - EMT
HFD Training & Research Bureau
Medical - EMT/EMR Section
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Email: mjones2@honolulu.gov

