

| RECOMMENDATION FOR CONSIDERATION | | | | | | |
|---|---|--------------|--|--|--|--|
| Executive Committee Meetin | Executive Committee Meeting Date: March 27, 2015 | | | | | |
| Subject: Extension of effective date for [portions of] the Scope of Practice for Emergency Medical Services Providers | | | | | | |
| VTR#: 0315-02 | Committee/Task Force: Medio ⊠Recommended Policy Change | cal Advisory | | | | |

Recommendation:

The Department of Health should extend the effective date for items 49-50 in the Scope of Practice for Emergency Medical Services Providers published January 17, 2015 [45 Pa.B 3771] from July 1, 2015 until July 1, 2016.

Rationale [Background]:

| 49 | Airway/Ventilation/Oxygenation | Ventilators, transport – used in multi-modal settings, blended gas transport ventilator on patients >1 year of age and ventilated >48 hours and no anticipated need to actively titrate ventilator settings in patients transported between acute care hospitals. |
|----|--------------------------------|---|
| 50 | Airway/Ventilation/Oxygenation | Ventilators, transport – used in multi-modal settings, blended gas transport ventilator on patients ventilated <48 hours or anticipated need to actively titrate ventilator settings |

In the current scope of practice published on January 17, 2015 [Pa.B 3771], the ALS paramedic will lose the ability to transport patients meeting these descriptions on July 1, 2015. This change is predicated on the assumption that the critical care paramedic and ground critical care ambulance agency will be operational at that point and therefore the sending facility would triage such patients to this higher level of care.

Although PEHSC is working closely with the Bureau of EMS to make the critical care transport program operational, it is unlikely there would be sufficient licensed critical care ground resources available by July 1, 2015. In effect, this would result in a significant shortage of available EMS resources to perform certain ventilator-related transports, especially in rural areas of the Commonwealth. Near the end of the first quarter of CY 2016, the number of licensed ground critical care transport ambulances should be assessed to determine if the effective date of the items 49-50 should be further extended.

To more accurately assess the depth and breadth of this issue, PEHSC recommends data be gathered on scheduled medical transportation involving patients who require mechanical ventilation. This level of data mining is not easily accomplished and the information would not likely be available for analysis until after the current July 1, 2015 deadline.

Medical Review [Concerns]:

See information contained in the background section of this recommendation. The agency medical director possesses the authority to define [restrict] the type(s) of mechanically ventilated patient they feel can safely be transported by a paramedic. Part of this process may involve the medical director communicating with the sending facility(s) that, under the EMTALA, are legally responsible for the patient until the patient's care is assumed by the receiving facility, and will be held responsible for the adequacy and competency of the personnel and equipment used in transport¹.

Fiscal Concerns:

N/A

Educational Concerns:

Agency medical directors are responsible for ensuring paramedics to which they have granted practice privileges have received appropriate education on managing the mechanically ventilated patients and specific training on the multi-mode, gas-blended ventilator utilized by the agency.

Plan of Implementation:

The Department of Health should republish the Scope of Practice for Emergency Medical Services Providers in the Pennsylvania Bulletin and/or issue an EMS Information Bulletin to announce the policy change.

The PEHSC Committee/Task Force offers consultation to the Department in regard to the content of this Vote to Recommend (VTR) and its attached documents. The PEHSC Committee/Task Force specifically offers staff or member support to participate in Department deliberations regarding this recommendation in an effort to convey committee/task force discussions.

Board Meeting Comments/Concerns:

| Signed: | President Date | | | | | | |
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| For PEHSC Use Only – PA Department of Health Response | | | | | | | |
| Accept: | Table: | Modify: | Reject: | | | | |
| Comments: | | | | | | | |
| Date of Departme | ent Response: | | | | | | |

¹ Bitterman, Robert A. "Pg 108." *Providing Emergency Care under Federal Law: EMTALA*. Dallas, TX (P.O. Box 619911, Dallas 75261-9911): American College of Emergency Physicians, 2000. N. pag. Print.