



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

TESTIMONY PRESENTED BEFORE THE Public Health Committee January 27, 2008

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Senate Bill 414 - An Act Reducing the Imposition of State Mandates on Volunteer Ambulance Services and Personnel

The Department of Public Health **opposes** Senate Bill 414

Although we support efforts to enhance the delivery of Emergency Medical Services (EMS) statewide, we stand behind the currently recognized National EMS personnel and service standards. These standard such as in the areas of training, blood borne and airborne pathogens are a safety net for both providers and patients.

I would like to highlight two examples of how these standards affect service delivery. The first is the OSHA Blood Borne standards required under federal safety standards as part of CFR 1910.1030. This standard requires that all EMS providers or others who have exposure to blood or bodily fluids must be trained on an annual basis in protections of exposure during patient rescue and treatments. These courses ordinarily are from 2 to 4 hours each year and are designed to review EMS and Fire service agency policies on use and availability of personal protective equipment. Engineering and work control practices that outline how soiled patient care equipment will be decontaminated in a safe and effective manner.

The second example I will provide is in the area of EMS personnel refresher training requirements. These requirements are based on both state and national standards to assure high quality patient care is delivered. One such example is the requirement for re-licensure or certification that providers be exposed to emergency childbirth procedures and safe guards.

Each year in our state 44,000 children are born. A small percentage of these occur in non-hospital settings and require the intervention of an Emergency Medical Technician. This small number of prehospital births and the frequency of exposure to these births specifically in rural areas leads often times to degradation of knowledge and skill retention.

The EMS refresher programs are delivered to providers either on a 2 or 3 year cycle. It will also expose the providers to updates and changes for the most up to date information on emergency childbirth, in addition to other emergencies that the providers may not encounter on a regular basis.

The Department recognizes that many of our services have experienced reductions in their available staffing. However, a look at the total number of licensed or certified providers continues to rise each year by 3 to 5 percent to its current level of 20,949.

The Department has been working regularly with the services statewide that have moved to sharing of human resources to cover time periods when local staff is unavailable. The concept of regionalization that is currently being discussed here in our state, gives the opportunity to partner together services and providers and will offer a wonderful opportunity for cost savings while assuring high quality of reliable EMS to our community.

We cannot however advocate for creating dual standards of practice for those who volunteer and one for all others. We do want to recognize the dedication made by each of our providers.

Thank you for your consideration of the Department's views on this bill.

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