House Bill 3097

Sponsored by Representatives MATTHEWS, WEIDNER; Representatives BARKER, BOONE, FREEMAN, HARKER, KRIEGER, OLSON, SCHAUFLER, G SMITH, VANORMAN

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Allows applicant for certification as emergency medical technician or first responder to substitute certification by National Registry of Emergency Medical Technicians for completion of training course approved by Department of Human Services.

A BILL FOR AN ACT

2 Relating to emergency medical personnel; amending ORS 682.025, 682.208, 682.216 and 682.220.

3 Be It Enacted by the People of the State of Oregon:

4 **SECTION 1.** ORS 682.208 is amended to read:

5 682.208. (1) [For any person to be certified as an emergency medical technician or first responder,

6 an application for certification shall be made to the Department of Human Services. The application

7 shall be upon forms prescribed by the department and shall contain:] A person may apply to the

8 Department of Human Services for certification as an emergency medical technician or first

9 responder. The application must contain:

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10 (a) The name and address of the applicant.

(b)(A) Proof that the applicant successfully completed a training course approved by the
 department, including the name, date and location of the training course [successfully completed
 by the applicant and the date of completion.]; or

(B) Proof that the applicant is certified by the National Registry of Emergency Medical
 Technicians.

(c) Certification that to the best of the applicant's knowledge the applicant is physically and mentally qualified to act as an emergency medical technician or first responder, is free from addiction to controlled substances or alcoholic beverages, or if not so free, has been and is currently rehabilitated and is free from epilepsy or diabetes, or if not so free, has been free from any lapses of consciousness or control occasioned thereby for a period of time as prescribed by rule of the department.

(d) Such other information as the department may reasonably require to determine compliance
 with applicable provisions of this chapter and the rules adopted thereunder.

(2) [The application shall be accompanied by proof as prescribed by rule of the department of the
applicant's successful completion of a training course approved by the department, and] If the applicant submits proof of successful completion of a training course approved by the department
and an extended period of time has elapsed since the completion of the course, the applicant shall
submit proof of a satisfactory amount of continuing education.

(3) The department shall adopt a schedule of minimum educational requirements in emergency
 and nonemergency care for emergency medical technicians and first responders. The department,

with the advice of the State Emergency Medical Service Committee, may establish levels of emergency medical technician certification as [may be] necessary to serve the public interest. A course approved by the department [shall] **must** be designed to protect the welfare of out-of-hospital patients, to promote the health, well-being and saving of the lives of such patients and to reduce their pain and suffering.

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SECTION 2. ORS 682.216 is amended to read:

682.216. (1) When application has been made as required under ORS 682.208, the Department of
Human Services shall certify the applicant as an emergency medical technician or as a first
responder if it finds:

10 (a)(A) The applicant has successfully completed a training course approved by the 11 department[.]; or

(B) The applicant is certified by the National Registry of Emergency Medical Technicians.
 (b) The applicant's physical and mental qualifications have been certified as required under ORS
 682.208.

(c) No matter has been brought to the attention of the department [which] that would disqualify
the applicant.

17 (d) A nonrefundable fee has been paid to the department pursuant to ORS 682.212.

(e) The applicant for emergency medical technician certification is 18 years of age or older and
the applicant for first responder certification is 16 years of age or older.

20 (f) The applicant has successfully completed examination as prescribed by the department.

21 (g) The applicant meets other requirements prescribed by rule of the department.

(2) The department may provide for the issuance of a provisional certification for emergencymedical technicians.

(3) The department may issue by indorsement certification for emergency medical technician 24 25without proof of completion of an approved training course to an emergency medical technician who is licensed to practice emergency care in another state of the United States or a foreign country if, 2627in the opinion of the department, the applicant meets the requirements of certification in this state and can demonstrate to the satisfaction of the department competency to practice emergency care. 28The department [shall be] is the sole judge of credentials of any emergency medical technician ap-2930 plying for certification without proof of completion of an approved training course under this 31 subsection.

(4) Each person holding a certificate under ORS 682.208 and this section shall submit, at the
time of application for renewal of the certificate to the department, evidence of the applicant's satisfactory completion of a department approved program of continuing education and other requirements prescribed by rule by the department.

(5) The department shall prescribe criteria and approve programs of continuing education in
 emergency and nonemergency care to meet the requirements of this section.

(6) The department shall include a fee pursuant to ORS 682.212 for late renewal and for issuance of any duplicate certificate. Each certification issued under this section, unless sooner suspended or revoked, [*shall expire and be renewable*] **expires** after a period of two years. Each certificate must be renewed on or before June 30 of every second year or on or before [*such date as may be*] **a date** specified by department rule. The department by rule shall establish a schedule of certificate renewals under this subsection and shall prorate the fees to reflect any shorter certificate period.

44 (7) Nothing in this chapter authorizes an emergency medical technician or first responder to 45 operate an ambulance without a driver license as required under the Oregon Vehicle Code.

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1	SECTION 3. ORS 682.220 is amended to read:
2	682.220. (1) The Department of Human Services may deny, suspend or revoke licenses for am-
3	bulances and ambulance services in accordance with the provisions of ORS chapter 183 for a failure
4	to comply with any of the requirements of ORS 820.350 to 820.380 and this chapter or the rules
5	adopted thereunder.
6	(2) The department may deny, suspend or revoke the certification of an emergency medical
7	technician [may be denied, suspended or revoked] in accordance with the provisions of ORS chapter
8	183 for any of the following reasons:
9	(a) [A] Failure to [have completed successfully a department approved course] meet the re-
10	quirements set forth in ORS 682.216.
11	[(b) In the case of provisional certifications, failure to have completed successfully a department
12	approved course.]
13	[(c) Failure to meet or continue to meet the physical and mental qualifications required to be cer-
14	tified under ORS 682.208.]
15	[(d)] (b) The use of fraud or deception in receiving a certificate.
16	[(e)] (c) Practicing skills beyond the scope of practice established by the Oregon Medical Board
17	under ORS 682.245.
18	[(f)] (d) Rendering emergency or nonemergency care under an assumed name.
19	[(g)] (e) The impersonation of another EMT.
20	[(h)] (f) Unprofessional conduct.
21	[(i)] (g) Obtaining a fee by fraud or misrepresentation.
22	[(j)] (h) Habitual or excessive use of intoxicants or drugs.
23	[(k)] (i) The presence of a mental disorder that demonstrably affects an EMT's performance, as
24	certified by two psychiatrists retained by the department.
25	[(L)] (j) Subject to ORS 670.280, conviction of any criminal offense that reasonably raises
26	questions about the ability of the EMT to perform the duties of an EMT in accordance with the
27	standards established by this chapter. A [copy of the record of conviction, certified to by the clerk of
28	the court entering the conviction, shall be] certified copy of the conviction is conclusive evidence
29	of the conviction.
30	[(m)] (k) Suspension or revocation of an emergency medical technician certificate issued by an-
31	other state:
32	(A) For a reason that would permit the department to suspend or revoke a certificate issued
33	under this chapter; and
34	(B) Evidenced by a certified copy of the order of suspension or revocation.
35	[(n)] (L) Gross negligence or repeated negligence in rendering [emergency medical assistance]
36	emergency or nonemergency care.
37	[(o)] (m) Rendering emergency or nonemergency care without being certified except as provided
38	in ORS 30.800.
39 40	[(p)] (n) Rendering emergency or nonemergency care as an EMT without written authorization and standing orders from a supervising physician who has been approved by the board in accordence
40	and standing orders from a supervising physician who has been approved by the board in accordance with OPS 682.245
41 42	with ORS 682.245. $[(q)]$ (o) Refusing an invitation for an interview with the department as specified in this section.
42 43	
43 44 45	(3) The department may investigate any evidence that appears to show that an EMT certified by the department is [or may be] medically incompetent, guilty of unprofessional or dishonorable conduct or mentally or physically unable to safely function as an EMT. The department may inves-

1 tigate the off-duty conduct of an EMT to the extent that such conduct may reasonably raise 2 questions about the ability of the EMT to perform the duties of an EMT in accordance with the 3 standards established by this chapter. Upon receipt of a complaint about an EMT or applicant, the 4 department shall conduct an investigation as described under ORS 676.165[. An investigation shall 5 be conducted] and in accordance with ORS 676.175.

6 (4) Any health care facility licensed under ORS 441.015 to 441.087 and 441.820, any medical or 7 osteopathic physician licensed under ORS chapter 677, any owner of an ambulance licensed under 8 this chapter or any EMT certified under this chapter shall report to the department any information 9 [*the person may have*] that appears to show that an EMT is or may be medically incompetent, guilty 10 of unprofessional or dishonorable conduct or mentally or physically unable to safely function as an 11 EMT.

12(5) If, in the opinion of the department, it appears that the information provided to it under 13 [provisions of] this section is [or may be] true, the department may request an interview with the EMT. At the time the department requests an interview, the department shall provide the EMT 14 15 [shall be provided] with a general statement of the [issue or] issues of concern to the department. 16 The request [shall] must include a statement of the procedural safeguards available to the EMT, 17 including the right to end the interview on request, the right to have counsel present and the fol-18 lowing statement: "Any action proposed by the Department of Human Services shall provide for a 19 contested case hearing."

20(6) Information regarding an ambulance service provided to the department pursuant to this section is confidential and [shall not be] is not subject to public disclosure[, nor shall it be] or ad-2122missible as evidence in any judicial proceeding. Information that the department obtains as part of 23an investigation into emergency medical technician or applicant conduct or as part of a contested case proceeding, consent order or stipulated agreement involving emergency medical technician or 2425applicant conduct is confidential as provided under ORS 676.175. Information regarding an ambulance service does not become confidential due to its use in a disciplinary proceeding against an 2627emergency medical technician.

(7) Any person who reports or provides information to the department under this section and
who provides information in good faith shall not be subject to an action for civil damage as a result
thereof.

31 (8) In conducting an investigation under subsection (3) of this section, the department may:

32 (a) Take evidence;

(b) Take depositions of witnesses, including the person under investigation, in the manner pro vided by law in civil cases;

(c) Compel the appearance of witnesses, including the person under investigation, in the manner
 provided by law in civil cases;

37 (d) Require answers to interrogatories; and

(e) Compel the production of books, papers, accounts, documents and testimony pertaining to the
 matter under investigation.

(9) The department may issue subpoenas to compel compliance with the provisions of subsection
(8) of this section. If any person fails to comply with a subpoena issued under this subsection, or
refuses to testify on matters on which the person may lawfully be interrogated, a court may compel
obedience as provided in ORS 183.440.

44 **SECTION 4.** ORS 682.025 is amended to read:

45 682.025. As used in this chapter, unless the context requires otherwise:

1 (1) "Ambulance" or "ambulance vehicle" means any privately or publicly owned motor vehicle, 2 aircraft or watercraft that is regularly provided or offered to be provided for the emergency trans-3 portation of persons who are ill or injured or who have disabilities.

4 (2) "Ambulance service" means any person, governmental unit, corporation, partnership, sole 5 proprietorship or other entity that operates ambulances and that holds itself out as providing pre-6 hospital care or medical transportation to persons who are ill or injured or who have disabilities.

(3) "Board" means the Oregon Medical Board.

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(4) "Department" means the Department of Human Services.

9 (5) "Emergency care" means the performance of acts or procedures under emergency conditions 10 in the observation, care and counsel of persons who are ill or injured or who have disabilities; in 11 the administration of care or medications as prescribed by a licensed physician, insofar as any of 12 these acts is based upon knowledge and application of the principles of biological, physical and so-13 cial science as required by a completed course utilizing an approved curriculum in prehospital 14 emergency care. However, "emergency care" does not include acts of medical diagnosis or pre-15 scription of therapeutic or corrective measures.

(6) "Emergency medical technician" or "EMT" means a person [who has received formal training
in prehospital and emergency care, and is state certified to attend any person who is ill or injured or
who has a disability] who is certified as an emergency medical technician under ORS 682.216.
Police officers, firefighters, funeral home employees and other personnel serving in a dual capacity
one of which meets the definition of "emergency medical technician" are "emergency medical technician" are "emergency medical technician" within the meaning of this chapter.

(7) "First responder" means a person [who has successfully completed a first responder training
 course approved by the department and:]

[(a) Has been examined and certified as a first responder by an authorized representative of the department to perform basic emergency and nonemergency care procedures; or]

[(b) Has been otherwise designated as a first responder by an authorized representative of the de partment to perform basic emergency and nonemergency care procedures] who is certified as a first
 responder under ORS 682.216.

(8) "Fraud or deception" means the intentional misrepresentation or misstatement of a material
fact, concealment of or failure to make known any material fact, or any other means by which
misinformation or false impression knowingly is given.

(9) "Governmental unit" means the state or any county, municipality or other political subdivi sion or any department, board or other agency of any of them.

(10) "Highway" means every public way, thoroughfare and place, including bridges, viaducts and
other structures within the boundaries of this state, used or intended for the use of the general
public for vehicles.

(11) "Nonemergency care" means the performance of acts or procedures on a patient who is not expected to die, become permanently disabled or suffer permanent harm within the next 24 hours, including but not limited to observation, care and counsel of a patient and the administration of medications prescribed by a physician licensed under ORS chapter 677, insofar as any of those acts are based upon knowledge and application of the principles of biological, physical and social science and are performed in accordance with scope of practice rules adopted by the Oregon Medical Board in the course of providing prehospital care as defined by this section.

44 (12) "Owner" means the person having all the incidents of ownership in an ambulance service 45 or an ambulance vehicle or where the incidents of ownership are in different persons, the person,

1 other than a security interest holder or lessor, entitled to the possession of an ambulance vehicle

2 or operation of an ambulance service under a security agreement or a lease for a term of 10 or more 3 successive days.

4 (13) "Patient" means a person who is ill or injured or who has a disability and who is trans-5 ported in an ambulance.

6 (14) "Person" means any individual, corporation, association, firm, partnership, joint stock com-7 pany, group of individuals acting together for a common purpose or organization of any kind and 8 includes any receiver, trustee, assignee or other similar representative thereof.

9 (15) "Prehospital care" means that care rendered by emergency medical technicians as an inci-10 dent of the operation of an ambulance as defined by this chapter and that care rendered by emer-11 gency medical technicians as incidents of other public or private safety duties, and includes, but is 12 not limited to, "emergency care" as defined by this section.

(16) "Scope of practice" means the maximum level of emergency or nonemergency care that an
 emergency medical technician may provide.

(17) "Standing orders" means the written protocols that an emergency medical technician fol lows to treat patients when direct contact with a physician is not maintained.

(18) "Supervising physician" means a medical or osteopathic physician licensed under ORS
chapter 677, actively registered and in good standing with the board, who provides direction of
emergency or nonemergency care provided by emergency medical technicians.

(19) "Unprofessional conduct" means conduct unbecoming a person certified in emergency or
 nonemergency care, or detrimental to the best interests of the public and includes:

(a) Any conduct or practice contrary to recognized standards of ethics of the medical profession
or any conduct or practice which does or might constitute a danger to the health or safety of a
patient or the public or any conduct, practice or condition which does or might impair an emergency
medical technician's ability safely and skillfully to practice emergency or nonemergency care;

(b) Willful performance of any medical treatment which is contrary to acceptable medical stan-dards; and

(c) Willful and consistent utilization of medical service for treatment which is or may be con sidered inappropriate or unnecessary.

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