

TITLE 22. SOCIAL SECURITY
DIVISION 9. PREHOSPITAL EMERGENCY MEDICAL SERVICES
CHAPTER 2. EMERGENCY MEDICAL TECHNICIANS

[Notice published on August 5, 2016]

NOTICE OF PROPOSED RULEMAKING

The Emergency Medical Services Authority (“EMSA”) proposes to adopt regulations described below after considering all comments, objections, and recommendations regarding the proposed action.

PUBLIC HEARING

EMSA will hold a public hearing on September 27, 2016. The hearing will begin at 10:00 am and end at 12:00 pm. The location of the public hearing is: 10901 Gold Center Drive, Suite 400, Rancho Cordova, CA 95670. EMSA requests that persons making oral comments at the hearing also submit a written copy of their testimony at the hearing.

WRITTEN COMMENT PERIOD

Any interested person, or his or her authorized representative, may submit written comments relevant to the proposed regulatory action to the EMSA. Comments may also be submitted by facsimile (FAX) at (916) 324-2875 or by e-mail to corrine.fishman@emsa.ca.gov. The written comment period closes at **5:00 p.m.** September 27, 2016. The EMSA will consider only comments received at the EMSA offices by that time. Submit comments to:

Corrine Fishman, Program Analyst
EMS Authority
10901 Gold Center Drive, Suite 400
Rancho Cordova, CA 95670

AUTHORITY AND REFERENCE

The Health and Safety Code, Section 1797.107 authorizes the EMSA to adopt the proposed regulations, which would implement, interpret, or make specific Section 1797.170, 1797.184, of the Health and Safety Code.

INFORMATIVE DIGEST/ POLICY STATEMENT OVERVIEW

The Legislature passed SB1438 (Pavley, Chapter 491, Statutes of 2014) amending Sections 1797.170, 1797.197, and 11601 of the Health and Safety Code (HSC). The major provisions of 1797.170 and 1797.197 charge the EMSA with developing and adopting regulations and training standards to include the

use and administration of naloxone hydrochloride and other opioid antagonists in the training and scope of practice for EMT certification.

These regulations are proposing to further expand the EMT basic scope of practice to include the use of a glucometer, the administration of epinephrine by auto-injector and training in tactical casualty care (TCC). Under current regulations only advanced EMTs and paramedics are able to utilize a glucometer, which may delay patient assessment for diabetic emergencies. The administration of epinephrine by auto-injector is currently permitted as an optional skill, which presents a barrier for state wide accessibility for patients suffering from anaphylaxis. TCC has been added to the course content in response to AB1598 (Rodriguez, Chapter 668, Statute of 2014) to better prepare public safety personnel to provide TCC and coordinate with emergency medical services during terrorism and active shooter incidents. This is consistent with the public safety regulations (Chapter 1.5, Division 9, Title 22, CCR) that were revised to allow public safety personnel to be trained in elements of TCC.

This rulemaking action clarifies and makes specific the EMT basic scope of practice and required training for EMTs in the administration of naloxone, epinephrine, the use of a glucometer and training in TCC, thereby improving the emergency medical service provided to the public.

The regulations proposed in this rulemaking action intend to: add the administration of naloxone to the basic scope of practice for all EMTs as authorized in statute; add the administration of epinephrine to the EMT scope of practice; add the use of a glucometer to the EMT scope of practice; add training in tactical casualty care; improve the clarity of EMT certification requirements; specify the components all EMT training programs shall include in their training in the use and administration of naloxone hydrochloride, epinephrine, the use of a glucometer, and training in TCC; eliminate the skills competency verification form; eliminate the recertification requirement for individuals whose certification has lapsed over 24 month.

Anticipated Benefits of the Proposed Regulation:

The broad objective of the regulation is to expand the basic scope of practice and required training for EMTs in the administration of naloxone, epinephrine by auto-injector, the use of a glucometer and TCC; thereby improving the emergency medical service provided to the public. Expanding the basic scope of practice and training as proposed will enable EMTs to provide service to the public in a standardized and consistent manner as deemed necessary by the medical director of each local EMS agency. The proposed regulations also improve the clarity of EMT certification requirements, which will lead to consistent state wide application of the requirements.

Determination of Inconsistency/Incompatibility with Existing State Regulations:

EMSA has determined that this proposed regulation is not inconsistent or incompatible with existing regulations. Existing regulations already require EMTs to complete a specified number of continuing education hours and the proposed regulations do not increase those requirements. Existing EMT training programs are available and will revise their course curriculum to meet the new requirements proposed in these regulations. Finally, the proposed regulations do not impose any requirements upon EMS service providers. EMSA has determined that these regulations will not cause inconsistency or incompatibility with other existing regulations that concern EMTs.

Incorporated by Reference Forms

- Request for Approval of Undefined Scope of Practice – Revised (Form #EMSA-0391, Revised 07/16)
- Skills Competency Verification Form (Form EMSA-SCV, Revised 08/10)

DISCLOSURES REGARDING THE PROPOSED ACTION

The EMSA has made the following initial determinations:

- Mandate on local agencies and school districts: None
- Cost or savings to any state agency: EMSA is not aware of any significant cost impacts that a state agency would incur in reasonable compliance with the proposed action. Existing regulations already require EMTs to complete a specified number of continuing education hours and the proposed regulations do not increase those requirements. Existing EMT training programs are available and will revise their course curriculum to meet the new requirements proposed in these regulations. While a training program may incur a cost to revise their curriculum the cost is not anticipated to be significant as the structure for the required training is already in place. State agencies that may be required to revise their course curriculum include: California Department of Parks and Recreation, California Department of Forestry and Fire Protection (CAL FIRE) and California Highway Patrol (CHP).
- Cost to any local agency or school district which must be reimbursed in accordance with Government Code Sections 17500 through 17630: None
- Other nondiscretionary cost or savings imposed on local agencies: None
- Cost or savings in federal funding to the state: None
- Cost impacts on a business: EMSA is not aware of any significant cost impacts that a business would incur in reasonable compliance with the

proposed action. Existing regulations already require EMTs to complete a specified number of continuing education hours and the proposed regulations do not increase those requirements. Existing EMT training programs are available and will revise their course curriculum to meet the new requirements proposed in these regulations. While a training program may incur a cost to revise their curriculum the cost is not anticipated to be significant as the structure for the required training is already in place.

- Significant, statewide adverse economic impact directly affecting business, including the ability of California businesses to compete with businesses in other states: None
- Significant effect on housing costs: None
- The proposed regulations may affect small businesses.

Results of the Economic Impact Analysis/Assessment

The EMSA concludes that it is (1) unlikely that the proposal will eliminate any jobs or training programs (2) unlikely the proposal will create any new jobs (3) unlikely the proposal will create any new businesses providing training programs (4) unlikely the proposal will eliminate any existing businesses, and (5) unlikely the regulations will result in the expansion of businesses currently doing business within the state.

Benefits of the Proposed Action: The proposed regulations will benefit California residents by ensuring that all EMTs receive training in rendering emergency care to a person suffering from an opioid overdose-related emergency, an anaphylaxis emergency, a diabetic emergency and in preparation for active shooter events, thereby improving the emergency medical service provided to the public. The regulations also enable EMTs to provide service to the public in a standardized and consistent manner and improve the clarity of EMT certification requirements leading to consistent state wide application of the requirements.

CONSIDERATION OF ALTERNATIVES

In accordance with Government code section 11346.5, subdivision (a)(13), EMSA must determine that no reasonable alternative it considered or that has otherwise been identified and brought to the attention of the agency would be more effective in carrying out the purpose for which the action is proposed or would be as effective and less burdensome to affected private persons than the proposed action or would be more cost-effective to affected private persons and equally effective in implementing the statutory policy or other provision of law.

EMSA invites interested persons to present statements or arguments with respect to alternatives to the proposed regulations at the scheduled hearing or during the written comment period.

CONTACT PERSON

Inquiries concerning the proposed administrative action may be directed to:

Corrine Fishman, Program Analyst
EMS Authority
10901 Gold Center Drive, Suite 400
Rancho Cordova, CA 95670
(916) 431-3727
Corrine.fishman@emsa.ca.gov

Please direct requests for copies of the proposed text (the “express terms”) of the regulations, the initial statement of reasons, the modified text of the regulations, if any, or other information upon which the rulemaking is based to Corrine Fishman at the above address. If Corrine Fishman is unavailable Priscilla Rivera can be contacted as backup at Priscilla.rivera@emsa.ca.gov or (916) 431-3707.

AVAILABILITY OF STATEMENT OF REASONS, TEXT OF PROPOSED REGULATIONS, AND RULEMAKING FILE

The EMSA will have the entire rulemaking file available for inspection and copying throughout the rulemaking process at its office at the above address. As of the date this notice is published in the Notice Register, the rulemaking file consists of this notice, the proposed text of the regulations, and the initial statement of reasons. Copies may be obtained by contacting Corrine Fishman at the address or phone number listed above or accessed through our website at www.emsa.ca.gov.

AVAILABILITY OF CHANGED OR MODIFIED TEXT

After holding the hearing and considering all timely and relevant comments received, the EMSA may adopt the proposed regulations substantially as described in this notice. If the EMSA makes modifications which are sufficiently related to the originally proposed text, it will make the modified text (with the changes clearly indicated) available to the public for at least 15 days before the EMSA adopts the regulation as revised. Please send requests for copies of the modified regulations to the attention of Corrine Fishman at the address indicated on the previous page. The EMSA will accept written comments on the modified regulations for 15 days after the date on which they were made available.

AVAILABILITY OF THE FINAL STATEMENT OF REASONS

Upon its completion, copies of the Final Statement of Reasons may be obtained by contacting Corrine Fishman at the address listed on the previous page.

AVAILABILITY OF DOCUMENTS ON THE INTERNET

Copies of the Notice of Proposed Action, the Initial Statement of Reasons, and the text of the regulations in underline and strikeout can be accessed through our website at www.emsa.ca.gov.