33-560C-99

A bill to be entitled 1 2 An act relating to emergency medical services; amending s. 401.117, F.S.; providing additional 3 4 guidelines for the Department of Health to 5 consider when developing grant-disbursement procedures; amending s. 401.211, F.S.; 6 7 declaring additional legislative intent; amending s. 401.23, F.S.; defining and 8 9 redefining terms for use with respect to 10 emergency medical services; amending s. 11 401.245, F.S.; revising provisions relating to 12 calling meetings and maintaining records of the 13 Emergency Medical Services Advisory Council; amending s. 401.25, F.S.; revising 14 qualifications for licensure as basic or 15 16 advanced life support service; amending s. 401.251, F.S.; revising standards for licensing 17 air ambulance services; amending s. 401.252, 18 19 F.S.; revising regulations governing the 20 conduct of interfacility transfers; amending s. 401.265, F.S.; revising standards for 21 22 employment and duties of medical directors; 23 creating s. 401.2651, F.S.; providing for a 24 state emergency medical services medical director; amending s. 401.27, F.S.; revising 25 standards for certification of emergency 26 27 medical technicians and paramedics; creating s. 401.2701, F.S.; providing for treatment of 2.8 impaired emergency medical technicians and 29 30 paramedics; amending s. 401.30, F.S.; providing for use and maintenance of records; creating s. 31

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401.305, F.S.; requiring licensees and certificateholders to maintain an address of record; amending s. 401.31, F.S.; revising procedures for correction of violations by licensees; amending s. 401.321, F.S.; revising procedures for changing a licensee's location or service name; amending s. 401.33, F.S.; exempting certain specialty vehicles from regulation; amending s. 401.34, F.S.; increasing fees; providing legislative findings with respect to fees; authorizing the department to adopt rules with respect to fees; amending s. 401.41, F.S.; deleting a criminal penalty for falsely acting as or holding oneself out as an ambulance driver; amending s. 401.411, F.S.; revising provisions relating to discipline of licensees, certificateholders, and permittees; amending s. 401.414, F.S.; authorizing the department to adopt rules relating to complaint investigation procedures; amending s. 401.421, F.S.; providing additional penalties for violations; providing for cease and desist orders; providing for administrative fines; amending s. 401.425, F.S.; redefining the makeup of "emergency medical review committees"; providing that confidential documents circulated internally for educational purposes do not lose their status of confidentiality; amending s. 401.435, F.S.; revising provisions regulating first responder agencies and training; amending s. 401.45,

mortality and injuries.

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           F.S.; requiring responses by licensed service
           providers; creating s. 401.49, F.S.; providing
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           for licensing emergency medical technician and
           paramedic education programs; creating s.
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           401.50, F.S.; providing guidelines for
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           recertification training; creating s. 401.51,
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           F.S.; providing complaint investigation
           procedures; creating s. 401.52, F.S.; providing
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           for disciplinary action by the department;
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           providing penalties; creating s. 401.53, F.S.;
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           prescribing the power to take depositions,
           administer oaths, and issue subpoenas; creating
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           s. 401.55, F.S.; providing for health, welfare,
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           safety, and infection control; amending s.
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           395.3025, F.S.; providing for emergency medical
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           services licensees' access to patient records;
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           amending s. 395.1027, F.S.; conforming a
           cross-reference; requiring a study of
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           regulating and licensing emergency medical
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           services systems; requiring a report; providing
           effective dates.
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    Be It Enacted by the Legislature of the State of Florida:
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           Section 1. Subsections (6) and (7) are added to
    section 401.117, Florida Statutes, to read:
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           401.117 Grant agreements; conditions.--The department
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    shall use the following guidelines in developing the
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    procedures for grant disbursement:
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          (6) The impact of prevention and other projects upon
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1 (7) The impact of projects upon the efficient
2 management of emergency medical services resources.
3 Section 2. Section 401.211, Florida Statutes

Section 2. Section 401.211, Florida Statutes, is amended to read:

401.211 Legislative intent.--The Legislature recognizes that the systematic provision of emergency medical services saves lives and reduces disability associated with illness and injury. In addition, that system of care must be equally capable of assessing, treating, and transporting children, adults, and frail elderly persons. Further, it is the intent of the Legislature to encourage the development and maintenance of emergency medical services because such services are essential to the health and well-being of all citizens of the state. The purpose of this part is to protect and enhance the public health, welfare, and safety through the establishment of an emergency medical services state plan, advisory council, minimum standards for emergency medical services personnel, vehicles, services and medical direction, and the establishment of a statewide inspection program created to monitor the quality of patient care delivered by each licensed service and appropriately certified personnel, and a quality management education and technical assistance program.

Section 3. Section 401.23, Florida Statutes, is amended to read:

- 401.23 Definitions.--As used in this part, the term:
- (1) "Advanced life support" means treatment of life-threatening medical emergencies through the use of techniques such as endotracheal intubation, the administration of drugs or intravenous fluids, telemetry, cardiac monitoring,

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and cardiac defibrillation by a qualified person, pursuant to rules of the department.

- (2) "Advanced life support nontransport vehicle" means any vehicle equipped with advanced life support medical equipment and supplies which is operated by a licensee and dispatched to provide medical assistance but which is not used to provide patient transport.
- (3)(2) "Advanced life support service" means any emergency medical transport or nontransport service which uses advanced life support techniques.
- (4) "Air ambulance" means any fixed-wing or rotary-wing aircraft used for, or intended to be used for, air transportation of sick or injured persons requiring or likely to require medical attention during transport.
- (5) "Air ambulance service" means any publicly or privately owned service, licensed in accordance with the provisions of this part, which operates air ambulances to transport persons requiring or likely to require medical attention during transport.
- (6)(5) "Ambulance" or "emergency medical services vehicle" means any privately or publicly owned land or water vehicle that is designed, constructed, reconstructed, maintained, equipped, or operated for, and is used for, or intended to be used for, land or water transportation of sick or injured persons requiring or likely to require medical attention during transport.
- (7)(6) "Ambulance driver" means any person who meets the requirements of s. 401.281.
- (8) "Basic life support" means treatment of medical emergencies by a qualified person through the use of 31 | techniques such as patient assessment, cardiopulmonary

resuscitation (CPR), splinting, obstetrical assistance, bandaging, administration of oxygen, application of medical antishock trousers, administration of a subcutaneous injection using a premeasured autoinjector of epinephrine to a person suffering an anaphylactic reaction, and other techniques described in the Emergency Medical Technician Basic Training Course Curriculum of the United States Department of Transportation. The term "basic life support" also includes other techniques which have been approved and are performed under conditions specified by rules of the department.

- (9) "Basic life support service" means any emergency medical service which uses only basic life support techniques.
- (10) "Certification" means any authorization issued pursuant to this part to a person to act as an emergency medical technician or a paramedic.
 - (11) (10) "Department" means the Department of Health.
- $\underline{(12)(11)}$ "Emergency medical technician" means a person who is certified by the department to perform basic life support pursuant to this part.
- (13) "Education program licensee" means any individual, institution, school, corporation, partnership, or government entity licensed under this part.
- (14) "Education program medical director" means a physician licensed under chapter 458 or chapter 459 and practicing in this state who is employed or contracted by an education program licensee and reviews and approves the educational content of the program curriculum and the quality of medical instruction and supervision delivered by the facility.
 - $\underline{\text{(15)}}$ "Interfacility transfer" means:

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- (a) The transportation, pursuant to this part, by ambulance or air ambulance of a patient between or among health care facilities, including, but not limited to, two facilities licensed under chapter 393, chapter 394, chapter 395, chapter 397, or chapter 400 or an office, clinic, diagnostic center, or other health care facility operated or staffed by physicians; or
- (b) The transportation by ambulance between any such health care facility or physician's office, clinic, center, or facility and the patient's home. The term does not include transportation from a patient's home to an emergency roompursuant to this part.
- (16)(13) "Licensee" means any basic life support service, advanced life support service, or air ambulance service licensed pursuant to this part.
- (17)(14) "Medical direction" means direct supervision by a physician through two-way voice communication or, when such voice communication is unavailable, through established standing orders, pursuant to rules of the department.
- (18)(15) "Medical director" means a physician licensed under chapter 458 or chapter 459 and practicing in this state who is employed or contracted by a licensee and who provides medical supervision for medical practice and medical training activities performed by that licensee's emergency medical technicians and paramedics, including supervising an appropriate quality management program assurance but not including administrative and managerial functions, for daily operations and training pursuant to this part.
- (19)(16) "Mutual aid agreement" means a written agreement between two or more entities whereby the signing 31 parties agree to lend aid to one another under conditions

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body of each affected county. (20)(17) "Paramedic" means a person who is certified by the department to perform basic and advanced life support pursuant to this part. (21)(18) "Permit" means any authorization issued pursuant to this part for a vehicle to be operated as a basic life support or advanced life support transport vehicle or an advanced life support nontransport vehicle providing basic or advanced life support. (22)(19) "Physician" means a practitioner who is licensed under the provisions of chapter 458 or chapter 459. For the purpose of providing "medical direction" as defined in subsection(17) $\frac{(14)}{(14)}$ for the treatment of patients immediately prior to or during transportation to a United States Department of Veterans Affairs medical facility, "physician" also means a practitioner employed by the United States Department of Veterans Affairs.

specified in the agreement and as sanctioned by the governing

 $\underline{(23)(20)}$ "Registered nurse" means a practitioner who is licensed to practice professional nursing pursuant to chapter 464.

(24) (21) "Secretary" means the Secretary of Health.

(25)(22) "Service location" means any permanent location in or from which a licensee solicits, accepts, or conducts business under this part.

Section 4. Paragraph (b) of subsection (2) and subsection (4) of section 401.245, Florida Statutes, are amended to read:

401.245 Emergency Medical Services Advisory Council.-(2)

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- (b) Representation on the Emergency Medical Services Advisory Council shall include: two licensed physicians who are "medical directors" as defined in s. 401.23 s. 401.23(15) or whose medical practice is closely related to emergency medical services; two emergency medical service administrators, one of whom is employed by a fire service; two certified paramedics, one of whom is employed by a fire service; two certified emergency medical technicians, one of whom is employed by a fire service; one emergency medical services educator; one emergency nurse; one hospital administrator; one representative of air ambulance services; one representative of a commercial ambulance operator; and two laypersons who are in no way connected with emergency medical services, one of whom is a representative of the elderly. Ex officio members of the advisory council from state agencies shall include, but shall not be limited to, representatives from the Department of Education, the Department of Management Services, the Department of Insurance, the Department of Highway Safety and Motor Vehicles, the Department of Transportation, and the Department of Community Affairs. (4) The council shall hold meetings at the call of the
- chair, upon the written request of five members of the council, or at the call of the bureau chief staff director of the Bureau of Emergency Medical Services program office. A majority of the members of the council shall constitute a quorum. Minutes shall be recorded for all meetings of the council and shall be maintained on file in the Bureau of Emergency Medical Services program office.

Section 5. Paragraph (b) of subsection (2) of section 401.25, Florida Statutes, is amended, paragraphs (e) and (f) 31 are added to that subsection, subsection (4) of that section

is amended, and subsections (7) and (8) are added to that section, to read:

401.25 Licensure as a basic life support or an advanced life support service.--

- (2) The department shall issue a license for operation to any applicant who complies with the following requirements:
- (b) The ambulances, equipment, vehicles, personnel, communications systems, staffing patterns, and services of the applicant meet the requirements of this part, including the appropriate rules for either a basic life support service or an advanced life support service, whichever is applicable.
- (e) The applicant has obtained approval of trauma transport protocols in accordance with the rules of the department.
- (f) The applicant has contracted with or employed a medical director who meets the qualifications of and provides medical direction services pursuant to s. 401.265.
- automatically expires 2 years after the date of issuance and shall be renewable biennially upon application for renewal and payment of the fee prescribed by s. 401.34, provided the applicant meets the standards established under this part and in rules. An application for renewal of a license shall be made no more than 90 days, nor less that 60 days, before its expiration, on forms provided by the department. If the department denies an application for renewal of a license within the 90-day period, the expiration of the applicant's current license is tolled pending final agency action. Failure to comply with this subsection constitutes a violation of this part and is subject to penalty in accordance with s. 401.52.

Each license issued in accordance with this part will expire automatically 2 years after the date of issuance.

- (7)(a) Each basic-life-support-permitted ambulance of a licensee not specifically exempted from this part, when transporting a person who is sick, injured, wounded, incapacitated, or helpless, must be occupied by at least two persons: one patient attendant who is a certified emergency medical technician, certified paramedic, or licensed physician and one ambulance driver who meets the requirements of s. 401.281. This subsection does not apply to interfacility transfers governed by s. 401.252(1).
- (b) Each advanced-life-support-permitted ambulance of a licensee not specifically exempted from this part, when transporting a person who is sick, injured, wounded, incapacitated, or helpless, must be occupied by at least two persons: one who is a certified paramedic or licensed physician and one who is a certified emergency medical technician, certified paramedic, or licensed physician who also meets the requirements of s. 401.281 for drivers. The person with the highest medical certifications shall be in charge of patient care. This subsection does not apply to interfacility transfers governed by s. 401.252(1).
- c) Each advanced-life-support-permitted nontransport vehicle of a licensee not specifically exempted from this part must be occupied by at least two persons: one patient attendant who is a certified paramedic or licensed physician and one who is a certified emergency medical technician, certified paramedic, or licensed physician. An advanced-life-support-permitted nontransport vehicle may operate as a basic-life-support nontransport vehicle if the paramedic is temporarily providing patient care on another

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vehicle for a maximum of 4 hours in a 24-hour period when deemed by the licensee to be necessary to the operation of the 2 3 service as a result of unplanned events. This action may only be taken in lieu of placing the unit completely out of 4 5 service. The licensee will ensure that the advanced life 6 support service level is not routinely, intentionally, or 7 repeatedly compromised as the result of this type of action. 8 The licensee will ensure that the closest 9 advanced-life-support-permitted unit is dispatched to the 10 incident with the basic life support nontransport unit.

(8) The department shall adopt and enforce all rules necessary to administer this section, including, but not limited to, requirements for forms, documents, and information submitted to the department to be made under oath and minimum standards for storage, use, and security of controlled substances, medications, and fluids.

Section 6. Section 401.251, Florida Statutes, is amended to read:

401.251 Air ambulance service; licensure.--

- (1) Each person, firm, corporation, association, or governmental entity that owns or acts as an agent for the owner of any business or service that furnishes, operates, conducts, maintains, advertises, engages in, proposes to engage in, or professes to engage in the business or service of transporting by air ambulance persons who require or are likely to require medical attention during transport must be licensed as an air ambulance service, before offering such service.
- The application for this license must be submitted to the department on forms provided for this purpose. 31 application must include documentation that the applicant

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meets the appropriate requirements for an air ambulance service as specified by rule of the department.

- (3) An applicant who seeks licensure as an air ambulance service must:
- (a) Submit a completed application to the department on such forms and including such information as specified by rule of the department.
- Submit the appropriate fee as provided in s. (b) 401.34.
- Specify the location of all required medical equipment and provide documentation that all such equipment is available and in good working order.
- (d) Provide documentation that all aircraft and crew members meet applicable Federal Aviation Administration (FAA) regulations.
- (e) Provide proof of adequate insurance coverage of not less than \$100,000 per person and \$300,000 per incident, or a greater amount if specified by rule of the department, for claims arising out of injury or death of persons and damage to property of others resulting from any cause for which the owner of such business or service would be liable. Self-insurance is an acceptable alternative as specified in s. 401.25(2)(c).
- (f) Specify whether the service uses either fixed-winged or rotary-winged aircraft, or both.
- (g) Employ or contract with a medical director who meets the qualifications of and provides medical direction pursuant to s. 401.265.
- (4)(a) If a service provides interhospital air transport, air transport from hospital to another facility, 31 air transport from hospital to home, or similar air transport,

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the service must provide evidence that it has employed or contracted with a medical director <u>as provided in s. 401.265</u> to advise the service on the appropriate staffing, equipment, and supplies to be used for the transport of any patient aboard an air ambulance and must provide information to referring physicians regarding special medical requirements and restrictions when transporting by air ambulance.

- (b) If the air ambulance service uses rotary-winged aircraft in conjunction with another emergency medical service, the air ambulance service must meet the provisions of this section and must meet separate basic life support and advanced life support requirements unique to air ambulance operations as is required by rules of the department. Such service is subject to the provisions of s. 401.25 relating to a certificate of public convenience and necessity; however, a service may operate in any county under the terms of mutual aid agreements.
- (c) Unless, in the opinion of the attending physician, the patient has an emergency medical condition as defined by s. 395.002, the service must provide each person using the service, before rendering the service, a written description of the services to be rendered and the cost of those services.
- automatically expires 2 years after the date of issuance and shall be renewable biennially upon application for renewal and payment of the fee prescribed by s. 401.34, provided the applicant meets the requirements established under this part and in rules. An application for renewal of a license shall be made no more than 90 days, or less than 60 days, before its expiration, on forms provided by the department. If the department denies an application for renewal of a license

within the 90-day period, the expiration of the applicant's current license shall be tolled pending final agency action.

Failure to comply with this subsection constitutes a violation of this part and is subject to penalty in accordance with s.

401.52.

 $\underline{(6)}$ (5) In order to renew a license for air ambulance service, the applicant must:

- (a) Submit a renewal application to the department <u>in</u> accordance with subsection (5) not more than 90 days nor less than 60 days before the license expires.
- (b) Submit the appropriate renewal fee as provided in $s.\ 401.34.$
- (c) Provide documentation that current standards for issuance of a license are met.
- (7) (6) Any advanced life support service licensee may engage in air ambulance operations by complying with the appropriate provisions of this section and requirements specified by rule of the department.
- (8) The department shall adopt and enforce all rules necessary to administer this section, including, but not limited to, requirements for forms, documents, and information submitted to the department to be made under oath and require minimum standards for storage, use, and security of controlled substances, medications, and fluids.

Section 7. Section 401.252, Florida Statutes, is amended to read:

401.252 Interfacility transfer.--

(1) A licensed basic <u>life support</u>, or advanced life support, or air ambulance service may conduct interfacility transfers in a permitted ambulance <u>or air ambulance</u>, using a registered nurse, physician, or respiratory technician in

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place of <u>or in addition to</u> an emergency medical technician or paramedic, if:

- (a) The registered nurse, physician, or qualified medical personnel is licensed or certified and operates within the scope of chapter 458, chapter 459, chapter 464, or part V of chapter 468 holds a current certificate of successful course completion in advanced cardiac life support;
- (b) The <u>transferring</u> physician <u>has ensured that such</u> transfer is to be conducted by qualified medical personnel and appropriate transportation in charge has granted permission for such a transfer, has designated the level of service required for such transfer, and has deemed the patient to be in such a condition appropriate to this type of ambulance staffing; and
- (c) Equipment as may be required, including necessary and appropriate life support measures during transport, is available; The registered nurse operates within the scope of chapter 464.
- (d) One member of the interfacility transfer crew has successfully completed a course in advanced cardiac life support from an organization specified by rule by the department.
- (e) The medical director or his or her designee has provided concurrence with the staffing, equipment, and resources as proposed by the transferring physician.
- (2) <u>A licensed basic life support, advanced life</u> support, or air ambulance service may conduct interfacility transfers in a permitted ambulance or air ambulance if:
- (a) The transferring physician certifies that the transfer is medically appropriate.

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(b) The transferring physician has ensured that such transfer is to be conducted through qualified medical personnel and transportation equipment, as may be required, including the use of necessary and appropriate life support measures during transfer. A licensed basic or advanced life support service may conduct interfacility transfers in a permitted ambulance if the patient's treating physician certifies that the transfer is medically appropriate and the physician provides reasonable transfer orders. An interfacility transfer must be conducted in a permitted ambulance if it is determined that the patient needs, or is likely to need, medical attention during transport. emergency medical technician or paramedic believes the level of patient care required during the transfer is beyond his or her capability, the medical director, or his or her designee, must be contacted for clearance prior to conducting the transfer. If necessary, the medical director, or his or her designee, shall attempt to contact the treating physician for consultation to determine the appropriateness of the transfer.

- (3) An interfacility transfer must be conducted in a permitted ambulance or air ambulance if it is determined that the patient needs, or is likely to need, medical attention during transport.
- (4)(3) Infants less than 28 days old or infants weighing less than 5 kilograms, who require critical care interfacility transport to a neonatal intensive care unit, shall be transported in a permitted advanced life support, or basic life support transport, or air ambulance, or in a permitted advanced life support, or air ambulance that is recognized by the department as meeting

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designated criteria for neonatal interfacility critical care transport.

(5) For purposes of any transfer conducted under this section, if an emergency medical technician, paramedic, or nurse who is employed by the licensee believes that the level of patient care required during the transfer is beyond his or her capability, he or she must contact the medical director or the medical director's designee before conducting the transfer and may request additional or alternative staffing, equipment, and resources that meet the patient's medical needs. The medical director or the medical director's designee, when so contacted, must approve the transfer before it may take place.

(6)(4) The department shall adopt and enforce <u>all</u> rules <u>necessary</u> to <u>administer</u> carry out this section, including, but not limited to, rules for permitting, equipping, and staffing transport ambulances and that govern the medical direction under which interfacility transfers take place.

Section 8. Section 401.265, Florida Statutes, 1998 Supplement, is amended to read:

401.265 Medical directors; medical direction; licensees.--

medical director for medical direction services. A contract for medical direction services may be with a corporation, an association, or a partnership, and must specify an individual physician or individual physicians to personally execute the responsibilities of medical director. Effective July 1, 2005, licensees may contract only with a medical director who has emergency medical services experience and education, as provided by rule of the department. basic life support

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transportation service or advanced life support service must employ or contract with a medical director. The medical director must be a licensed physician; a corporation, association, or partnership composed of physicians; or physicians employed by any hospital that delivers in-hospital emergency medical services and employs or contracts with physicians specifically for that purpose. Such a hospital, physician, corporation, association, or partnership must designate one physician from that organization to be medical director at any given time. The medical director must supervise and assume direct responsibility for the medical performance of the emergency medical technicians and paramedics operating for that emergency medical services system. The medical director must perform duties including advising, consulting, training, counseling, and overseeing of services, including appropriate quality assurance but not including administrative and managerial functions.

- (2) A licensee that contracts for medical direction services must maintain on file the current written contract for medical direction services and shall provide a copy to the department upon request. The contract shall, at a minimum, include the following provisions:
 - (a) The identity and relationship of the parties.
 - (b) The term of the contract.
- (c) Insurance coverage, including, but not limited to, general, liability, and malpractice coverage.
- (d) A description of medical direction services
 including: supervisory responsibility for medical performance
 of medical personnel, but not including administrative and
 managerial functions; oversight of continuing medical training
 and education of medical personnel; development and review of

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standing orders and protocols, including those for trauma transport as required by chapter 395, part II, and those for transport, triage, and treatment of adult and pediatric patients; shared oversight of security, control, and storage of medications, fluids, and controlled substances; emergency medicine professional organization participation; shared development and oversight of quality management activities; and the resources to be provided by the licensee in support of medical direction responsibilities. Each medical director shall establish a quality assurance committee to provide for quality assurance review of all emergency medical technicians and paramedics operating under his or her supervision. medical director has reasonable belief that conduct by an emergency medical technician or paramedic may constitute one or more grounds for discipline as provided by this part, he or she shall document facts and other information related to the alleged violation. The medical director shall report to the department any emergency medical technician or paramedic whom the medical director reasonably believes to have acted in a manner which might constitute grounds for disciplinary action. Such a report of disciplinary concern must include a statement and documentation of the specific acts of the disciplinary concern. Within 7 days after receipt of such a report, the department shall provide the emergency medical technician or paramedic a copy of the report of the disciplinary concern and documentation of the specific acts related to the disciplinary concern. If the department determines that the report is insufficient for disciplinary action against the emergency medical technician or paramedic pursuant to s. 401.411, the report shall be expunged from the record of the emergency medical technician or paramedic.

(3) A licensee that employs a medical director for medical direction services shall maintain on file the medical director's current written job description and shall provide a copy to the department upon request. The job description must, at a minimum, include the medical direction services as required in paragraph (2)(d). The licensee shall also maintain on file and make available to the department upon request documentation of insurance coverage, including, but not limited to, general, liability, and malpractice coverage.

service shall require its medical director to provide proof of current registration as a physician with the United States

Department of Justice, Drug Enforcement Administration, who may provide controlled substances to an emergency medical services licensee, and require its medical director to provide a written statement of compliance with all Federal Drug Enforcement Administration requirements. Proof of Federal Drug Enforcement Administration registration shall be maintained on file with the licensee and made available for inspection by the department.

(5)(3) Any medical director who in good faith gives oral or written instructions to certified emergency medical services personnel for the provision of emergency care shall be deemed to be providing emergency medical care or treatment for the purposes of s. 768.13(2).

(6) Licensees performing emergency medical dispatch shall ensure that the medical director directs and supervises clinical aspects of the dispatch system, including supervisory responsibility over medical quality management of the licensee's dispatch system.

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- (7) Medical directors shall periodically observe the licensee's emergency medical technicians and paramedics during emergency calls. Observation criteria shall be specified by rule of the department, and time records showing the observation must be maintained by the licensee for inspection by the department.
- (8) Medical directors shall biennially complete a minimum of 20 hours of continuing education in emergency medicine topics. Such continuing education may include 10 hours of emergency medicine instruction. The licensee shall maintain documentation of such compliance on file for inspection by the department.
- The medical director shall report to the department any emergency medical technician or paramedic who has had the authority to provide patient care removed by the medical director in accordance with chapter 458 or chapter 459. Such removal of authority to provide patient care does not include temporary suspension of clinical privileges for remediation or other temporary removal of clinical care for purposes of quality management or related clinical improvement or medical training activities prescribed by the medical director. The report to the department must be in writing and must outline the circumstances leading to the removal of authority. The report will be processed by the department as provided in s. 401.414.
- (10) (4) Each medical director who uses a paramedic or emergency medical technician to perform blood pressure screening, health promotion, and wellness activities, or to administer immunization on any patient under a protocol as specified in s. 401.272, which is not in the provision of 31 emergency care, is liable for any act or omission of any

31 but need not be limited to:

paramedic or emergency medical technician acting under his or 2 her supervision and control when performing such services. 3 (11) (5) The department shall adopt and enforce all rules necessary to administer this section. 4 5 Section 9. Section 401.2651, Florida Statutes, is 6 created to read: 7 401.2651 State emergency medical services medical 8 director. -- The department's Bureau of Emergency Medical 9 Services shall contract with an individual or individuals to 10 serve as the state emergency medical services medical 11 director. The state emergency medical services medical director shall, effective July 1, 2005, be board-certified in 12 emergency medicine as provided by rule of the department and 13 must annually complete a minimum of 10 hours in continuing 14 education in emergency medicine topics. 15 Section 10. Section 401.27, Florida Statutes, is 16 17 amended to read: 401.27 Personnel; standards and certification. --18 19 (1) Each permitted ambulance not specifically exempted 20 from this part, when transporting a person who is sick, 21 injured, wounded, incapacitated, or helpless, must be occupied 22 by at least two persons, one of whom must be a certified emergency medical technician, certified paramedic, or licensed 23 24 physician and one of whom must be a driver who meets the requirements for ambulance drivers. This subsection does not 25 apply to interfacility transfers governed by s. 401.252(1). 26 27 (1) The department shall establish by rule 28 educational and training criteria and examinations for the certification and biennial recertification of emergency 29 30 medical technicians and paramedics. Such rules must require,

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- 1 (a) For emergency medical technicians, proficiency in techniques identified in s. 401.23(8) s. 401.23(7) and in 2 3 rules of the department. (b) For paramedics, proficiency in techniques 4 5 identified in s. 401.23(1) and in rules of the department. 6 (2) Any person who desires to be certified or 7 recertified as an emergency medical technician or paramedic must make application apply to the department on a form prepared and furnished forms provided by the department, which 9 10 form shall require the social security number of the 11 applicant. The department shall determine whether the applicant meets the requirements specified in this section and 12 in rules of the department and shall issue a certificate to 13 any person who meets such requirements. 14 (3) (4) An applicant for certification or 15 16 recertification as an emergency medical technician or 17 paramedic must: 18 (a) Have completed an appropriate training course 19 conducted by a licensed emergency medical technician or paramedic education program in accordance with s. 401.49; as 20 21 follows: 22 1. For an emergency medical technician, an emergency
 - medical technician training course equivalent to the most recent emergency medical technician basic training course of the United States Department of Transportation as approved by the department;
 - 2. For a paramedic, a paramedic training program equivalent to the most recent paramedic course of the United States Department of Transportation as approved by the department;

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- (b) Certify under oath that he or she is not addicted to alcohol or any controlled substance;
- (c) Certify under oath that he or she is free from any physical or mental defect or disease that might impair the applicant's ability to perform his or her duties;
- (d) Within 1 year after course completion have passed an examination developed or required by the department;
- (e)1. For an emergency medical technician, hold either a current and valid course completion card for American Heart Association cardiopulmonary resuscitation from an organization approved by the department by rule course card or an American Red Cross cardiopulmonary resuscitation course card;
- 2. For a paramedic, hold a <u>current and valid</u> certificate of successful course completion <u>card</u> in advanced cardiac life support from <u>an organization approved by the department by rule</u> the American Heart Association or its equivalent;
- (f) Submit the <u>nonrefundable</u> certification fee and the nonrefundable examination <u>fees</u> fee prescribed in s. 401.34.

 The nonrefundable, which examination fee will be required for each <u>time the applicant is scheduled for the examination</u> administered to an applicant; and
- (g) Submit a completed application to the department, with documentation of which application documents compliance with subparagraph (e)1. or 2. and paragraphs (a), (b), (c), (d), and(e), (f), (g), and, if applicable, (d). The application must be submitted so as to be received by the department at least 30 calendar days before the next regularly scheduled examination for which the applicant desires to be scheduled.

	(4)	An	appli	cant	for	rece	ertif	icat:	ion	as	an	emergency
medica	l ted	chni	cian	or p	parame	edic	must	<u>:</u>				

- (a) Have completed recertification training conducted in accordance with s. 401.50 or pass the certification examination required in paragraph (3)(d). The department shall accept the written affirmation of a licensee's or education program licensee's medical director as documentation that the certificateholder has completed a minimum of 30 hours of recertification training pursuant to s. 401.50;
- (b) Certify under oath that he or she is not addicted to alcohol or any controlled substance;
- (c) Certify under oath that he or she is free from any physical or mental defect or disease that might impair his or her ability to perform his or her duties;
- (d)1. For an emergency medical technician, hold a current and valid course completion card for cardiopulmonary resuscitation from an organization approved by the department by rule; or
- 2. For a paramedic, hold a current and valid course completion card in advanced cardiac life support from an organization approved by the department by rule;
- (e) Submit the nonrefundable recertification fee as prescribed in s. 401.34;
- (f) If an applicant elects to take the certification examination in lieu of recertification training as provided in paragraph (a), remit a nonrefundable examination fee as prescribed in s. 401.34 each time the applicant is scheduled for the examination; and
- (g) Submit a completed application to the department with documentation of compliance with this subsection as prescribed by the department by rule.

(5) The certification examination must be offered monthly. The department shall issue an examination admission notice to the applicant advising him or her of the time and place of the examination for which he or she is scheduled. Individuals achieving a passing score on the certification examination may be issued a temporary certificate with their examination grade report. The department must issue an original certification within 45 days after the examination.

(6)(a) The department shall establish by rule a procedure for biennial renewal certification of emergency medical technicians. Such rules must require a United States Department of Transportation refresher training program of at least 30 hours as approved by the department every 2 years. The refresher program may be offered in multiple presentations spread over the 2-year period. The rules must also provide that the refresher course requirement may be satisfied by passing a challenge examination.

(b) The department shall establish by rule a procedure for biennial renewal certification of paramedics. Such rules must require candidates for renewal to have taken at least 30 hours of continuing education units during the 2-year period. The rules must provide that the continuing education requirement may be satisfied by passing a challenge examination.

(6)(7) A physician, dentist, or registered nurse may be certified as a paramedic if the physician, dentist, or registered nurse is certified in this state as an emergency medical technician, has passed the required emergency medical technician curriculum in accordance with s. 401.49, has successfully completed an advanced cardiac life support course from an organization specified by the department by rule, has

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passed the examination for certification as a paramedic, <u>has</u> <u>provided documentation of 1 year's continuous employment in emergency medical services</u>, and has met other certification requirements specified by rule of the department. A physician, <u>dentist</u>, or registered nurse so certified must be recertified under this section.

(7)8) Each emergency medical technician certificate and each paramedic certificate will expire automatically and may be renewed if the holder meets the qualifications for renewal as established by the department. A certificate that is not recertified by renewed at the end of the 2-year period will automatically revert to an involuntary inactive status for a period not to exceed 180 days. During such time, the certificateholder may not perform the functions of an emergency medical technician or paramedic. Such certificate may be reactivated and renewed within the 180 days if the certificateholder meets the all other qualifications required by subparagraph (4)(d)1. or 2. and paragraphs (5)(a), (b), (c), (e), and (f) for renewal and pays a\$25 late fee established by the department by rule, not to exceed \$100. Reactivation shall be in a manner and on forms prescribed by rule of the department rule. The holder of a certificate that expired on December 1, 1996, has until September 30, 1997, to reactivate the certificate in accordance with this subsection.

(9) The department may suspend or revoke a certificate at any time if it determines that the holder does not meet the applicable qualifications.

(8)(10) The department may provide by rule for physically disabled persons to take and be provided with the results of the written portion of the emergency medical technician certification examination or paramedic

certification examination. However, such persons may not receive any special assistance in completing the examination. An individual who achieves a passing grade on the emergency medical technician certification examination or paramedic certification examination may be issued a limited emergency medical technician certificate or a limited paramedic certificate. An individual issued a limited certificate may not perform patient care or treatment activities.

(9)(11)(a) A certificateholder may apply to the department to place his or her certification request that his or her emergency medical technician certificate or paramedic certificate be placed on a voluntary inactive status by applying to the department before the his or her current certification expires and by paying a fee set by the department not to exceed \$50 biennially.

- (b)1. A certificateholder whose certificate has been on voluntary inactive status for 2 years 1 year or less following the date his or her emergency medical technician certificate or paramedic certificate expired may reactivate renew his or her certificate pursuant to the rules adopted by the department and upon payment of a reactivation late renewal fee established set by the department by rule not to exceed \$100.
- 2. A certificateholder whose certificate has been on voluntary inactive status for more than 2 years 1 year may reactivate renew his or her certificate by passing the certification examination, completing continuing education requirements, and meeting other criteria provided by rule of pursuant to rules adopted by the department. To renew, the certificateholder must pass the certification examination and

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complete continuing education requirements and a field internship.

(c) A certificate that which has been on voluntary inactive status for more than 6 years automatically expires and may not be reinstated.

(10)(12) In lieu of the requirement in paragraph (3)(a),an applicant for certification who is an out-of-state trained emergency medical technician or paramedic must provide proof of current emergency medical technician or paramedic certification or registration based upon successful completion of the United States Department of Transportation emergency medical technician or paramedic training curriculum and must hold a valid current certificate of successful course completion, from an organization specified by the department by rule, in cardiopulmonary resuscitation (CPR) or advanced cardiac life support for emergency medical technicians or paramedics, respectively, to be eligible for the certification examination. An The applicant for certification as a paramedic must have completed a paramedic program accredited, at the time of program completion, by the Commission on Accreditation of Allied Health Education Programs in conjunction with the Joint Review Committee on Education Programs for the Emergency Medical Technician-Paramedic. If the applicant's paramedic training was received from a nonaccredited program, the applicant must provide proof of at least 1 year of continuous employment as a paramedic with a licensed ambulance service or an ambulance service authorized by law to operate in that state. The emergency medical technician and paramedic applicants must successfully complete the certification examination within 1 year after the date of the receipt of his 31 or her application by the department. After 1 year, the

applicant must submit a new application, meet all eligibility requirements, and submit all fees to reestablish eligibility to take the certification examination.

(11)(13) The department shall adopt a standard state insignia for emergency medical technicians and paramedics. The department shall establish by rule the requirements to display the state emergency medical technician and paramedic insignia. The rules may not require a person to wear the standard insignia but must require that if a person wears any insignia that identifies the person as a certified emergency medical technician or paramedic in this state, the insignia must be the standard state insignia adopted under this section. The insignia must denote the individual's level of certification at which he or she is functioning.

(12) The department shall adopt and enforce all rules necessary to administer this section, including, but not limited to, requirements that forms, documents, and information be submitted to the department under oath.

Section 11. Section 401.2701, Florida Statutes, is created to read:

401.2701 Impaired emergency medical technicians and paramedics.--

(1)(a) Whenever the department receives a legally sufficient complaint as defined in s. 401.414 alleging that a certificateholder under the jurisdiction of the department is impaired as a result of the misuse or abuse of alcohol or drugs, or both, or due to a mental condition that could affect the certificateholder's ability to practice with skill and safety, and no complaint against the certificateholder other than the one alleging the impairment exists, the reporting of such information shall not constitute a complaint within the

meaning of s. 401.414 if, after preliminary inquiry, the department finds:

- $\underline{\text{1. The certificateholder acknowledges the impairment}}$ problem.
- 2. The certificateholder has voluntarily enrolled in and attended a treatment program approved by the licensee or approved by the department if the certificateholder is employed by a licensee without an approved treatment program or is not currently employed as an emergency medical technician or paramedic.
- 3. The certificateholder has voluntarily withdrawn from performing emergency medical technician or paramedic functions or has agreed to operate under restrictions established by the treatment program, with the approval of the medical director, if applicable, until such time as the certificateholder has successfully completed an approved treatment program.
- (b) Whenever the department receives a legally sufficient complaint alleging that a certificateholder is impaired as described in paragraph (a) and no other complaint against the certificateholder exists, the department shall maintain the information received in a file separated from the complaint files.
- (c) A finding of probable cause shall not be made as long as the department is satisfied, based upon information it receives from the licensee or the treatment program, that the certificateholder is progressing satisfactorily in an approved treatment program.
- (2) In any disciplinary action for a violation other than impairment in which a certificateholder establishes an impairment defense and further establishes through the

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licensee-approved or department-approved treatment program that the certificateholder is satisfactorily progressing through or has successfully completed an approved treatment program pursuant to this section, such information shall be considered by the department as a mitigating factor in determining the appropriate penalty. This subsection does not limit mitigating factors the department may consider.

- (3)(a) A licensee shall notify the department of a certificateholder's impairment and participation in, progress in, and completion of the treatment program. Failure to provide such information to the department is a violation of this part and is subject to the penalties provided in s. 401.52.
- (b) If the department determines, after consultation with the licensee, that an impaired certificateholder has not progressed satisfactorily in a treatment program, all information regarding the issue of a certificateholder's impairment and participation in a treatment program in the department's possession shall constitute a complaint pursuant to the general provisions of s. 401.414.
- (c) If the certificateholder is not employed as a paramedic or emergency medical technician and if the department determines after consultation with the treatment program that the impaired certificateholder has not progressed satisfactorily in a treatment program, all information regarding the issue of the certificateholder's impairment and participation in a treatment program in the department's possession shall constitute a complaint pursuant to the general provisions of s. 401.414.
- (4) The department shall adopt and enforce all rules necessary to administer this section.

Section 12. Section 401.30, Florida Statutes, 1998 Supplement, is amended to read:

401.30 Records.--

- (1) Each licensee must maintain accurate records of emergency calls which on forms that contain such information as is required by the department. Such records may be maintained in either paper or electronic form. Such paper or electronic records These records must be available for review inspection by the department at any reasonable time, and copies thereof must be furnished to the department upon request. The department shall, by rule, give each licensee notice of what information such records forms must contain.
- (2) A copy of an individual patient care record for each patient who is provided prehospital transport must be provided to the hospital to which a prehospital patient is transported. Such information shall be provided in accordance with rules of the department.

(3)(2) Reports to the department from licensees which cover statistical data are public records, except that the names of patients and other patient-identifying information contained in such reports are confidential and exempt from the provisions of s. 119.07(1). Any record furnished by a licensee at the request of the department must be a true and certified copy of the original record and may not be altered or have information deleted.

 $\underline{(4)(3)}$ Records of emergency calls which contain patient examination or treatment information are confidential and exempt from the provisions of s. 119.07(1) and s. 24(a), Art. I of the State Constitution and may not be disclosed without the consent of the person to whom they pertain, but

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appropriate limited disclosure may be made without such consent:

- To the person's guardian, to the next of kin if (a) the person is deceased, or to a parent if the person is a minor;
- To hospital personnel for use in conjunction with the treatment of the patient or for use in quality management activities;
 - (c) To the department;
- (d) To the service medical director of the licensee that generated the record;
- (e) For use in a critical incident stress management debriefing. Any such discussions during a critical incident stress debriefing shall be considered privileged communication under s. 90.503;
- (f) In any civil or criminal action, unless otherwise prohibited by law, upon the issuance of a subpoena from a court of competent jurisdiction and proper notice by the party seeking such records, to the patient or his or her legal representative; or
- (g) To a local trauma agency or a regional trauma agency, or a panel or committee assembled by such an agency to assist the agency in performing quality assurance activities in accordance with a plan approved under s. 395.401. Records obtained under this paragraph are confidential and exempt from s. 119.07(1) and s. 24(a), Art. I of the State Constitution.

The exemptions from s. 119.07(1) provided in this subsection are subject to the Open Government Sunset Review Act in accordance with s. 119.15. This subsection does not prohibit 31 the department or a licensee from providing information to any

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law enforcement agency or any other regulatory agency responsible for the regulation or supervision of emergency medical services and personnel.

(4) The department shall adopt and enforce all rules necessary to administer this section.

Section 13. Section 401.305, Florida Statutes, is created to read:

401.305 Address of record.--

- (1) Each licensee or certificateholder is responsible for notifying the department in writing, by certified mail return receipt requested, of the licensee's or certificateholder's current mailing address. Failure to notify the department of a change of address within 30 days of such change constitutes a violation of this section, and the licensee or certificateholder may be subject to penalty, not to exceed a reprimand, by the department as provided in ss. 401.411 and 401.52.
- (2) This section does not alter the requirements for service of process in administrative or civil legal actions.
- (3) The department shall adopt and enforce all rules necessary to administer this section.

Section 14. Subsection (4) of section 401.31, Florida Statutes, is amended, and subsection (5) is added to that section, to read:

401.31 Inspection and examination. --

(4) Upon completion of an inspection, the department may request an inspection corrective action plan statement from a licensee stating the process and actions by which that any violation found during the inspection will be has been corrected. The department shall adopt, by rule, procedures 31 | which provide for categories of violations, the type of

 violations in each category, the time for correcting violations in each category, and the time for returning the inspection corrective action statement to the department. Failure of a licensee to comply with submit the inspection corrective action plan statement within the agreed-upon required time is a ground for discipline under s. 401.52 s. 401.411.

(5) The department shall adopt and enforce all rules necessary to administer this section.

Section 15. Section 401.321, Florida Statutes, is amended to read:

- 401.321 Transferability of license; effect of sale, transfer, assignment, or lease of service.--
- (1) Each license is valid only for the licensee to whom it is issued and is not subject to sale, assignment, or other transfer, voluntary or involuntary. A license or permit is valid only for the service location for which it was originally issued.
- location or name registered with the department, the licensee must notify the department in writing of the proposed change. The department shall establish by rule an application procedure for such changes, which procedure must include the requirement for payment of a \$30 fee. A license will automatically expire when a licensee changes his or her service location or service name as registered with the department. The expired license must be surrendered by the licensee, and the department shall issue a new license for the balance of the term under the expired license upon receipt of a completed application and a fee of \$30.
 - (3) An application for a new license is required when:

1	(a) A majority of the ownership or a controlling
2	interest of a service is transferred or assigned; and
3	(b) A lessee agrees to undertake or provide services
4	to the extent that legal liability for the service rests with
5	the lessee.
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7	The application for a new license showing such change must be
8	submitted <u>within 30 days after</u> so as to be received by the
9	department at least 60 days prior to the date of the sale,
10	transfer, assignment, or lease.
11	(4) The department shall adopt and enforce all rules
12	necessary to administer this section.
13	Section 16. Present subsections (3), (4), and (5) of
14	section 401.33, Florida Statutes, are redesignated as
15	subsections (4), (5), and (6), respectively, and a new
16	subsection (3) is added to that section to read:
17	401.33 ExemptionsThe following are exempt from this
18	part:
19	(3) Specialty vehicles, as defined by the department
20	by rule, used by an emergency medical services licensee to
21	move patients to a permitted transport vehicle from scenes
22	that are inaccessible in a permitted ambulance.
23	Section 17. Effective October 1, 1999, subsection (1)
24	of section 401.34, Florida Statutes, is amended to read:
25	401.34 Fees
26	(1) Each organization or person subject to this part
27	must pay to the department the following nonrefundable fees:
28	(a) Basic life support service license application:
29	\$1,000 <mark>\$660</mark> , to be paid biennially.
30	(b) Advanced life support service license application:

31 \$1,500\$1,375, to be paid biennially.

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1 (c) Original or renewal vehicle permit application for 2 basic or advanced life support:\$45\\$25, to be paid 3 biennially. (d) Emergency medical technician certification 4 5 examination application: \$60\$40. 6 (e) Emergency medical technician original certificate 7 application: \$55\$35. 8 Emergency medical technician renewal certificate (f) 9 application:\$40\$, to be paid biennially. 10 (g) Paramedic certification examination application: 11 \$60\$40. 12 Paramedic original certificate application:\$65 (h) 13 \$45. (i) Paramedic renewal certificate application:\$65 14 15 \$45, to be paid biennially. (j) Air ambulance service application: \$1,500\$1,375, 16 17 to be paid biennially. (k) Original or renewal aircraft permit application 18 19 for air ambulance: \$45\\$25, to be paid biennially. 20 Section 18. Subsections (8) and (9) are added to section 401.34, Florida Statutes, to read: 21 401.34 Fees.--22 23 (8) Fees established in subsection (1) are based on 24 the actual costs incurred by the department in carrying out 25 its licensure, certification, registration, and inspection responsibilities under this chapter, including costs of 26 27 salaries, expenses, inspection equipment, supervision, and 28 program administration. 29 The department shall adopt and enforce all rules (9)

necessary to administer this section.

1 Section 19. Subsection (1) of section 401.41, Florida 2 Statutes, is amended to read: 3 401.41 Penalties.--4 (1) Any person who: 5 (a) Uses or attempts to use a certificate, license, or 6 permit that has been suspended, revoked, or terminated; 7 (b) Practices or holds himself or herself out as an 8 emergency medical technician or, paramedic, or ambulance 9 driver without being so certified; 10 (c) Knowingly conceals information relating to 11 violations of this part; or (d) Knowingly makes false or fraudulent claims to 12 13 procure, attempt to procure, or renew a certificate, license, 14 or permit 15 is guilty of a misdemeanor of the first degree, punishable as 16 17 provided in s. 775.082 or s. 775.083. 18 Section 20. Section 401.411, Florida Statutes, 1998 Supplement, is amended to read: 19 20 401.411 Disciplinary action; penalties; paramedics and 21 emergency medical technicians .--(1) The department may deny, suspend, or revoke a 22 license, certificate, or permit or may reprimand or fine any 23 24 licensee, certificateholder, or other person operating under 25 this part on for any of the following grounds: (a) The violation of any rule of the department or any 26 27 provision of this part. (b) Being found quilty of, or pleading nolo contendere 28 29 to, regardless of adjudication in any jurisdiction, a crime 30 that relates to practice as an emergency medical technician or

paramedic, or to practice in any other occupation, when operating under this part.

- (c) Addiction to alcohol or any controlled substance.
- (d) Engaging in or attempting to engage in the possession, except in legitimate duties under the supervision of a licensed physician, or the sale or distribution of any controlled substance as set forth in chapter 893.
- (e) The conviction in any court in any state or in any federal court of a felony, unless the person's civil rights have been restored.
- (f) Knowingly making false or fraudulent claims; procuring, attempting to procure, or renewing a certificate—license, or permit by fakery, fraudulent action, or misrepresentation.
- (g) Unprofessional conduct, including, but not limited to, any departure from or failure to conform to the minimal prevailing standards of acceptable practice as an emergency medical technician or paramedic, including undertaking activities that the emergency medical technician or paramedic is not qualified by training or experience to perform.
- (h) Sexual misconduct with a patient, including inducing or attempting to induce the patient to engage, or engaging or attempting to engage the patient, in sexual activity.
- (i) The failure to give to the department, or its authorized representative, true information upon request regarding an alleged or confirmed violation of this part or rule of the department.
- (j) Fraudulent or misleading advertising or advertising in an unauthorized category.

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(i)(k) Practicing as an emergency medical technician, paramedic, or other health care professional operating under this part without reasonable skill and safety to patients by reason of illness, drunkenness, or the use of drugs, narcotics, or chemicals or any other substance or as a result of any mental or physical condition.

(j)(1) The failure to report to the department any person known to be in violation of this part.

- (2) A suspension or revocation of a license or certificate is for all classifications unless the department, in its sole discretion, suspends or revokes one or more classifications thereof.
- (3) One year after the revocation of a license or certificate, application may be made to the department for reinstatement; and the department may authorize reinstatement.
- (4) Any charge of a violation of this part by a licensee affects only the license of the service location from which the violation is alleged to have occurred. Another license may not be issued to the same licensee for a new service location in the same county or any other county for a period of 3 years from the effective date of revocation.
- (4) (4) (5) If the department finds that the terms of any such suspension have been violated, it may revoke such suspension immediately.
- (5)(6) If a person whose license,certificate, or permit has been suspended is found by the department to have violated any of the other provisions of this part, the department may revoke the license, certificate, or permit.
- (6) (7) In addition to any other administrative action authorized by law, the department may impose an administrative fine, not to exceed \$1,000 per violation of this part or rule

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of the department. Each day of a violation constitutes a separate violation and is subject to a separate fine. determining the amount of a fine, the department shall consider the following factors:

- (a) The gravity of the violation, including the probability of death or disability as a result of the violation.
 - (b) Any actions taken to correct the violation.
 - (c) Any previous violations committed by the violator.
- (7) All amounts collected under this section must be deposited into the Emergency Medical Services Trust Fund.
- (8) The department shall adopt and enforce all rules necessary to administer this section.

Section 21. Section 401.414, Florida Statutes, is amended to read:

- 401.414 Complaint investigation procedures; paramedics and emergency medical technicians .--
- (1) The department shall cause to be investigated any complaint that is filed before it if the complaint is in writing, signed by the complainant, and legally sufficient. complaint is legally sufficient if it contains ultimate facts that show that a violation of this part, or of any rule adopted by the department, has occurred. The department may investigate or continue to investigate, and may take appropriate final action on, a complaint even though the original complainant withdraws his or her complaint or otherwise indicates a desire not to cause it to be investigated to completion. When an investigation of any person is undertaken, the department shall notify that person of the investigation and inform him or her of the substance of 31 any complaint filed against him or her. The department may

 conduct an investigation without notifying any person if the act under investigation is a crime.

- (2) The department shall expeditiously investigate each complaint. When its investigation is complete, the department shall prepare an investigative report. The report must contain the investigative findings and the recommendations of the department concerning the existence of probable cause.
- (3) The complaint and all information obtained in the investigation by the department are confidential and exempt from the provisions of s. 119.07(1) until 10 days after probable cause has been found to exist by the department, or until the person who is the subject of the investigation waives confidentiality, whichever occurs first. This subsection does not prohibit the department from providing such information to any law enforcement agency or any other regulatory agency.
- (4) The department shall adopt and enforce all rules necessary to administer this section.
- Section 22. Section 401.421, Florida Statutes, is amended to read:
- 401.421 Injunctive relief; cease and desist notice; civil penalty; enforcement.--
- (1) The secretary may cause to be instituted a civil action in circuit court for preliminary or permanent injunctive relief to remedy or prevent a violation of this part or any rule adopted by the department under this part.
- (2) Penalties may be imposed for operating a basic life support transport service, advanced life support service, air ambulance service, or emergency medical technician or paramedic education program without a license or for operating

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30 31 as an emergency medical technician or paramedic without certification.

(a) When If the department has probable cause to believe that any person or entity is engaging without a license or certificate in activities for which the person or entity is required under this part to obtain a license or certificate and has violated any provision of this chapter or any other statute or any rule that relates to emergency medical services not licensed by the department has provided prehospital or interfacility advanced life support or basic life support procedures or transportation services in this state not specifically authorized by law, the department may issue and deliver to such person a notice to cease and desist from such violation services. The issuance of a notice to cease and desist does not constitute agency action for which a hearing under s. 120.57 may be sought. For the purpose of enforcing a cease and desist order, the department may file a proceeding petition, in the name of the state, seeking issuance of an injunction or a writ of mandamus against any person or entity who violates any provisions of such order. In addition to the other remedies provided in this paragraph, the department may impose an administrative penalty, not to exceed \$5,000 per incident, pursuant to chapter 120. If the department seeks enforcement of the agency order for a penalty pursuant to s. 120.58, it is entitled to collect its attorney's fees and costs, together with any cost of collection.

(b) In addition to or in lieu of any remedy provided in paragraph (a), the department may seek the imposition of a civil penalty by the circuit court for any violation for which the department may issue a notice to cease and desist under

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paragraph (a). The civil penalty must be no less than \$500 and no more than \$5,000 for each offense. The court may, in addition to any other remedy it finds appropriate, award to the prevailing party court costs and a reasonable attorney's fee, and, if the department prevails, the court may also award reasonable costs of investigation. All amounts collected by the department under this paragraph must be deposited into the Emergency Medical Services Trust Fund.

Section 23. Section 401.425, Florida Statutes, is amended to read:

401.425 Emergency medical services quality assurance; immunity from liability.--

- (1) As used in this section, the term "emergency medical review committee" or "committee" means a committee of:
- (a) An emergency medical service provider, a local or regional trauma agency as provided in s. 395.401, participants in the $\frac{1}{2}$ quality management activities of a medical director as defined in s. 401.23 and pursuant to assurance committee as provided in s. 401.265, or a local emergency medical services advisory council;
- (b) A hospital licensed under chapter 395 which is directly responsible for a licensed emergency medical service provider; or
- (c) The department, or employees, agents, or consultants of the department.
- (2) An emergency medical review committee may review and evaluate the professional medical competence of emergency medical technicians and paramedics under the jurisdiction of such committee.
- (3)(a) There shall be no monetary liability on the 31 part of, and no cause of action shall arise against, any

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 person, including any person acting as a witness, incident reporter to, or investigator for, an emergency medical review committee for any act or proceeding undertaken or performed within the scope of the functions of any emergency medical review committee if such action is taken without intentional fraud or malice.

- (b) The provisions of this section shall not affect the provisions of s. 768.28.
- (4) Except as provided in subsection (3), this section shall not be construed to confer immunity from liability on any person while performing services other than as a member of an emergency medical review committee, or upon any person acting as a witness, incident reporter to, or investigator for, an emergency medical review committee for any act or proceeding undertaken or performed outside the scope of the functions of such committee.
- (5) The records obtained or produced by a committee providing quality assurance activities as described in subsections (1) through (4) are exempt from the provisions of s. 119.07(1) and s. 24(a), Art. I of the State Constitution, and committee proceedings and meetings regarding quality assurance activities are exempt from the provisions of s. 286.011 and s. 24(b), Art. I of the State Constitution. Any study or copies of studies produced by quality assurance, quality management, or quality improvement programs for the purposes of individual or system improvement which are shared internally in order to educate and to raise the quality of that system remain confidential and immune from discovery. The investigations, proceedings, and records of a committee providing quality assurance activities as described in subsections (1) through (4) shall not be subject to discovery

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or introduction into evidence in any civil action or disciplinary proceeding by the department or employing agency arising out of matters which are the subject of evaluation and review by the committee, and no person who was in attendance at a meeting of such committee shall be permitted or required to testify in any such civil action or disciplinary proceeding as to any evidence or other matters produced or presented during the proceedings of such committee or as to any findings, recommendations, evaluations, opinions, or other actions of such committee or any members thereof. However, information, documents, or records provided to the committee from sources external to the committee are not immune from discovery or use in any such civil action or disciplinary proceeding merely because they were presented during proceedings of such committee nor should any person who testifies before a committee or who is a member of such committee be prevented from testifying as to matters within the person's knowledge, but, such witness shall not be asked about his or her testimony before a committee or information obtained from or opinions formed by him or her as a result of participating in activities conducted by a committee.

- (6) If the defendant prevails in an action brought by a health care provider against any person who initiated, participated in, was a witness in, or conducted any review as authorized by this section, the court shall award reasonable attorney's fees and costs to the defendant.
- (7) For the purpose of any disciplinary proceeding conducted by the department, the department shall have the power to issue subpoenas which shall compel the production of information, documents, or records from an Emergency Medical 31 Review Committee. Challenges to, and enforcement of, the

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subpoenas and orders shall be handled as provided in s. 120.569.

Section 24. Subsection (2) of section 401.435, Florida Statutes, is amended, and subsection (3) is added to that section, to read:

401.435 First responder agencies and training.--

(2) Effective October 1, 2000, each first responder agency shall must take all reasonable efforts to enter into a memorandum of understanding with the emergency medical services licensee within whose territory the agency operates in order to coordinate emergency services at an emergency scene. The department must provide a model memorandum of understanding for this purpose. The memorandum of understanding should include dispatch protocols, the roles and responsibilities of first responder personnel at an emergency scene, and the documentation required for patient care rendered. The memorandum of understanding must provide for the supervision of a quality management program by the medical director of the emergency medical services licensee. The memorandum of understanding may include provision for emergency medical technician and paramedic recertification training under the direction of the licensee's medical director. For purposes of this section, the term "first responder agency" includes a law enforcement agency, a fire service agency not licensed under this part, a marine lifeguard agency, and a volunteer organization that renders, as part of its routine functions, emergency medical dispatch or on-scene patient care, or both, before emergency medical technicians or paramedics arrive.

(3) The department shall adopt and enforce all rules

31 necessary to administer this section.

1 Section 25. Paragraph (a) of subsection (1) of section 401.45, Florida Statutes, is amended to read: 2 3 401.45 Denial of emergency treatment; civil 4 liability.--5 (1)(a) Each licensed provider shall respond or cause a 6 response of a permitted vehicle to each call for emergency 7 medical assistance. Except as provided in subsection (3), a 8 person may not be denied needed prehospital treatment or 9 transport if the person needs or is likely to need emergency 10 care from any licensee for an emergency medical condition. 11 Section 26. Section 401.49, Florida Statutes, is created to read: 12 401.49 Licensure of emergency medical technician and 13 paramedic education programs; fees; records; site visits; 14 exemptions; transfer of program license; disciplinary action 15 16 and penalties .--17 (1) Each individual, institution, school, corporation, or governmental entity that operates, conducts, maintains, 18 19 advertises, or engages in the business of providing emergency medical technician or paramedic education must be licensed by 20 21 the department as an emergency medical technician or paramedic education program. The application for such license must be 22 submitted to the department on approved forms along with the 23 24 applicable fee. The application must include documentation 25 that the applicant meets the requirements for an emergency medical technician or paramedic education program as specified 26 27 by the department by rule. After June 30, 1999, any entity 28 that meets all requirements in this section, as determined by 29 the department, will not be required to make initial 30 application and pay the applicable fee.

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- (2) The department shall issue an emergency medical technician or paramedic program license to any new applicant that:
- (a) Is a public community college, a public vocational technical center approved to offer the program in 1999, or a private college offering an associate of science or higher degree accredited by the Commission on Colleges of the Southern Association of Colleges and Schools.
 - (b) Has paid the fees required in this section.
- (c) Has complied with all of the applicable statutes and rules of the state Department of Education.
- (d) Has the financial and administrative support; equipment and supplies; qualified faculty, including a full-time program director; physical facility; library and other learning resources; and clinical and field internship contracts and meets all other requirements of this part and the applicable rules.
- (e) Has contracted with an education program medical director with experience and current knowledge of emergency care of acutely ill and traumatized patients and is familiar with base station operation, including communication with, and direction of emergency transport units. In addition, as specified by the department by rule, the education program medical director must be knowledgeable about the United States Department of Transportation National Standard Curricula for emergency medical technicians and paramedics offered by the program, monitor student progress in the clinical phases of the program, maintain up-to-date knowledge in topics related to emergency medical services education, and attest to the competency level of each graduating student.

1	(f) Maintains on file a current, signed contract with
2	the education medical director containing at a minimum the
3	following provisions:
4	1. The identity and relationship of the parties;
5	2. A list of contracted services inclusive of
6	education program medical direction, administrative
7	responsibilities, professional membership, quality management
8	responsibilities, and reporting requirements;
9	3. The term of the contract; and
10	4. Insurance coverage including, but not limited to,
11	general liability and malpractice coverage;
12	(g) Uses the United States Department of
13	Transportation National Standard Curricula for emergency
14	medical technicians and paramedics as adopted by the
15	department, including training in pediatric emergency medical
16	care, HIV/AIDS, other bloodborne pathogens, and hazardous
17	material awareness.
18	(h) Ensures that the education program includes
19	didactic, laboratory, clinical, and field internship
20	experience and is conducted for the number of hours specified
21	by the department by rule.
22	(3) In addition, an applicant for a new paramedic
23	education program license must:
24	(a) Submit the appropriate application and the
25	nonrefundable fee to cover the actual cost of the application
26	process, not to exceed \$2,500;
27	(b) Within 30 days after the date of application to
28	the department, provide the department with proof of
29	application to the Commission on Accreditation of Allied

30 Health Education Programs in conjunction with the Joint Review

Committee on Education Programs for the Emergency Medical Technician-Paramedic; and

- (c) Within 12 months after the date the license is issued by the department, provide the department with proof of submission of the applicable self-study document to the accrediting body and payment of the required fee.
- (4) Each initial paramedic education program license issued in accordance with this section will expire 2 years after the date of issuance and may be renewed only if the program has achieved accreditation and meets all other requirements that are in effect at the time of renewal. The license of an accredited paramedic education program shall remain in effect concurrent with the period of accreditation.
- (5) An applicant for an emergency medical technician education program license must submit the appropriate application and pay the nonrefundable fee to cover the actual cost of the application process, not to exceed \$2,500.
- (6) Each initial emergency medical technician education program license issued in accordance with this section will expire 1 year after the date of issuance and may be renewed for a period of 3 years if the applicant meets the requirements that are in effect at the time of renewal.
- (7) Fees collected under this section must be deposited into the Emergency Medical Services Trust Fund.
- (8) Each education program licensee must maintain accurate records for 5 years and reports, including student applications, records of attendance, records of participation in clinical and field training, student medical records, rosters of graduates, course objectives and course outlines, class schedules, learning objectives, lesson plans, the number of applicants, the number of students accepted, admission

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requirements, a description of the qualifications, duties, and responsibilities of faculty members, including the education program medical director, and any correspondence received from the department. These records must be available for inspection by the department at any reasonable time, and copies must be furnished to the department upon request. Any record furnished by an education program licensee at the request of the department must be the original record and must not be altered.

- (9) Statistical data maintained by the department pertaining to the pass or fail rate on emergency medical technician and paramedic examinations, student enrollment, completion, and placement are public records.
- (10) Each education program license is valid only for the education program licensee to whom it is issued and is not subject to sale or other transfer. A license is valid only for the education program facility location for which it was originally issued.
- (11) No later than 60 days before changing the facility location or name as registered with the department, the education program licensees shall notify the department in writing. The department shall establish by rule an application procedure for such changes.
- (12) The department shall conduct site visits to education program licensees to determine compliance with the requirements of this part and departmental rules. The department shall conduct site visits without impeding the student learning process.
- 29 (13) The refusal of an education program licensee to
 30 allow a site visit by the department provided in subsection
 31 (12) is a ground for discipline as provided in this section.

 the following:

(14)
(14) Upon completion of a site visit, the department
may request a corrective action plan from a licensee stating
the process and actions by which any violations found during
the site visit will be corrected. Failure of an education
program licensee to comply with the corrective action plan
within the agreed-upon time is a ground for discipline as
provided in this section.
(15) The department may deny, suspend, or revoke a
license or may reprimand, fine, or place on probation and
impose conditions on any education program licensee for any of

- (a) The violation of any rule of the department or any provision of this part.
- (b) Making false or fraudulent claims to procure or attempt to procure a license.
- (c) Unprofessional conduct, including, but not limited to, any departure from or failure to conform to the minimal prevailing standards of acceptable practice for an emergency medical technician or paramedic education program.
- (d) The failure to give to the department or its authorized representative true information, upon request, regarding an alleged or confirmed violation of this part or of a rule of the department.
 - (e) Fraudulent or misleading advertising.
 - (f) Fraudulent or misleading financial conduct.
- (g) Loss of national accreditation or disciplinary or other adverse action by the national accrediting body, or revocation or suspension of a license issued by the Department of Education.
- (h) Any disciplinary action by the Department ofEducation resulting in a fine or penalty.

1	(16) In addition to any other administrative action
2	authorized by law, the department may impose an administrative
3	fine, not to exceed \$1,000, for each violation of this part or
4	of a rule of the department. Each day of a violation
5	constitutes a separate violation and subjects the licensee to
6	a separate fine.
7	(17) Fines collected under this section must be
8	deposited into the Emergency Medical Services Trust Fund.
9	(18) Any emergency medical technician or paramedic
10	education program owned, operated, or contracted by the
11	Federal Government for the sole purpose of training its own
12	personnel is exempt from this section. Graduates of an
13	exempted program who pass the National Registry of Emergency
14	Medical Technicians examination and meet all other
15	requirements in s. 401.27 and the applicable rules are
16	eligible to take the state examination for certification as an
17	emergency medical technician or paramedic. If an exempted
18	program chooses to have its graduates initially take the state
19	examination for certification, it must meet the requirements
20	of this section.
21	(19) Any emergency medical technician or paramedic
22	education program that is currently approved by the department
23	on July 1, 1999, has 1 year to comply with all requirements of
24	this section and the applicable rules.
25	(20) The department shall adopt and enforce all rules
26	necessary to implement this section.
27	Section 27. Section 401.50, Florida Statutes, is
28	created to read:
29	401.50 Recertification training
30	(1) The department shall establish by rule criteria
31	for all emergency medical technician and paramedic

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recertification training. The rules shall provide that all recertification training equals at least 30 hours, includes the performance parameters for adult and pediatric emergency medical clinical care specified by the department, by rule, and is documented through a system of recordkeeping.

- (2) Any individual, institution, school, corporation, or governmental entity may conduct emergency medical technician or paramedic recertification training upon application to the department and payment of a nonrefundable fee. The application shall demonstrate that the proposed training meets criteria specified in rules of the department and this chapter. Any entity licensed under this chapter which conducts recertification training is exempt from the application process and payment of fees.
- (3) Fees collected under this section must be deposited into the Emergency Medical Services Trust Fund.
- (4) Entities not licensed under this chapter which conduct recertification training are subject to the disciplinary actions and penalties provided in s. 401.49.

 Entities licensed under this chapter which conduct recertification training are subject to the disciplinary actions and penalties provided in s. 401.51 and s. 401.52.

Section 28. Section 401.51, Florida Statutes, is created to read:

401.51 Complaint investigation procedures; licensees and education program licensees.--

(1) The department shall cause to be investigated any complaint that is filed before it if the complaint is in writing, signed by the complainant, and legally sufficient. A complaint is legally sufficient if it contains ultimate facts that show that a violation of this part, or of any rule

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adopted by the department, has occurred. The department may investigate or continue to investigate, and may take 2 3 appropriate final action on, a complaint even though the original complainant withdraws the complaint or otherwise 4 5 indicates a desire not to cause it to be investigated to 6 completion. When an investigation of any licensee or education 7 program licensee is undertaken, the department shall notify 8 that licensee or education program licensee of the investigation and inform the licensee or education program 9 10 licensee of the substance of the complaint. The department may 11 conduct an investigation without notifying any licensee or education program licensee if the act under investigation is a 12 13 crime.

- (2) The department shall expeditiously investigate each complaint. When its investigation is complete, the department shall prepare an investigative report. The report must contain the investigative findings and the recommendations of the department concerning the existence of probable cause.
- (3) The department may provide information obtained in the investigation to any law enforcement agency or any other regulatory agency.
- (4) The department shall adopt and enforce all rules necessary to administer this section.
- Section 29. Section 401.52, Florida Statutes, is created to read:
 - 401.52 Disciplinary action; penalties; licensees.--
- (1) The department may deny, suspend, or revoke a license or permit or may reprimand or fine any licensee or other person operating under this part for any of the following grounds:

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- (a) Violating any rule of the department or any provision of this part.
- (b) Knowingly making false or fraudulent claims or procuring, attempting to procure, or renewing a license or permit by fakery, fraudulent action, or misrepresentation.
- (c) Failing to report to the department any person known to be in violation of this part.
- (d) Fraudulent or misleading advertising or advertising in an unauthorized category.
- (2) A suspension or revocation of a license is for all classifications unless the department, in its sole discretion, suspends or revokes one or more classifications thereof.
- (3) One year after the revocation of a license, application may be made to the department for reinstatement, and the department may authorize reinstatement.
- (4) Any charge of a violation of this part by a licensee affects only the license of the service location from which the violation is alleged to have occurred. Another license may not be issued to the same licensee for a new service location in any county for a period of 3 years after the effective date of revocation.
- (5) If the department finds that the terms of any such suspension have been violated, it may revoke such license or permit immediately.
- (6) If a person whose license or permit has been suspended is found by the department to have violated any other provision of this part, the department may revoke the license or permit.
- (7) In addition to any other administrative action authorized by law, the department may impose an administrative fine, not to exceed \$1,000 per violation, for violations of

this part or of a rule of the department. Each day of a violation constitutes a separate violation and subjects the 2 3 licensee to a separate fine. In determining the amount of a fine, the department shall consider the following factors: 4 5 The gravity of the violation, including the (a) 6 probability of death or disability as a result of the 7 violation. 8 (b) Any actions taken to correct the violation. 9 Any previous violations committed by the violator. 10 (8) All amounts collected under this section must be 11 deposited into the Emergency Medical Services Trust Fund. The department shall adopt and enforce all rules 12 necessary to administer this section. 13 Section 30. Section 401.53, Florida Statutes, is 14 created to read: 15 401.53 Power to administer oaths, take depositions, 16 17 and issue subpoenas. -- For the purpose of any investigation or proceeding conducted by the department, the department may 18 19 administer oaths; take depositions; make inspections when authorized by statute; issue subpoenas, which must be 20 supported by affidavit; serve subpoenas and other process; and 21 compel the attendance of witnesses and the production of 22 books, papers, documents, and other evidence. The department 23 24 shall exercise this power on its own initiative. Challenges to, and enforcement of, the subpoenas and orders shall be 25 handled as provided in s. 120.569. 26 27 Section 31. Section 401.55, Florida Statutes, is 28 created to read: 29 401.55 Health, welfare, safety, and infection control 30 in the emergency services workplace. --

(1) CRITICAL INCIDENT STRESS MANAGEMENT. --

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- (a) Critical incident stress management is a multicomponent crisis intervention approach to managing traumatic stress. It includes education, spouse support, defusings, debriefings, demobilizations, follow-up services, and referrals.
- (b) A "critical incident" means an incident to which an emergency worker is exposed in the line of duty, including, but not limited to, death or serious injury to a child, mass casualties or fatalities, death, or suicide of a peer.
- (c) Licensees may use teams of peers within the emergency services community which are specially trained to advise, counsel, and assist emergency personnel in coping with a critical incident to conduct critical incident stress management.
- (d) Critical incident stress management services provided under the direct or indirect supervision of a psychotherapist as defined in s. 491.003 or psychiatrist licensed pursuant to chapter 458 are privileged communications under ss. 90.503 and 455.671.
- (2) SURVEILLANCE.--The department may conduct, with voluntary participation of licensees or certificateholders, surveillance of the health, safety, welfare, and infection control issues affecting emergency services personnel, including, but not limited to:
- (a) Ground and air ambulance crashes within the state which result in fatal injury, permanent disability, or injury requiring in excess of 10 days of recovery for emergency services personnel;
- (b) Violence to emergency services personnel in the line of duty; and

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(c) Significant exposure-prevention practices and the incidence of on-the-job significant exposures and infectious diseases among emergency services personnel, including any on-the-job exposure resulting in emergency medical services personnel fatality, permanent disability, or off-duty recovery in excess of 10 days.

Section 32. Paragraph (k) is added to subsection (4) of section 395.3025, Florida Statutes, 1998 Supplement, to read:

395.3025 Patient and personnel records; copies; examination.--

- (4) Patient records are confidential and must not be disclosed without the consent of the person to whom they pertain, but appropriate disclosure may be made without such consent to:
- (k) An emergency medical services licensee, upon the written request of the licensee's medical director. The records shall be used for quality management, assessment, and evaluation of the patient care provided by the licensee. Information that may be obtained by the emergency medical services licensee is limited to patient admission diagnosis, discharge diagnosis, outcome, and disposition of only those patients who were treated or delivered to the hospital by the emergency medical services licensee submitting the request. Access to records pursuant to this paragraph may not be requested more frequently than quarterly unless otherwise agreed to in writing by the parties, and access is limited to records of patients who have been discharged. The emergency medical services licensee may abstract only information specified in this paragraph. Patient information abstracted and maintained by the emergency medical services licensee may

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not include information that would identify the patient. Records obtained by an emergency medical services licensee 2 3 under this paragraph are not subject to discovery and may not be introduced into evidence in any civil action against a 4 5 facility or provider which arose out of matters that are the 6 subject of evaluation and review by the licensee. 7 Section 33. Subsection (4) of section 395.1027, 8 Florida Statutes, 1998 Supplement, is amended to read: 9 395.1027 Regional poison control centers.--10 (4) By October 1, 1999, each regional poison control 11 center shall develop a prehospital emergency dispatch protocol with each licensee as defined in s. 401.23 by s. 401.23(13)in 12 the geographic area covered by the regional poison control 13 center. The prehospital emergency dispatch protocol shall be 14 developed by each licensee's medical director in conjunction 15 with the designated regional poison control center responsible 16 17 for the geographic area in which the licensee operates. The protocol shall define toxic substances and describe the 18 19 procedure by which the designated regional poison control 20 center may be consulted by the licensee. If a call is transferred to the designated regional poison control center 21 in accordance with the protocol established under this section 22 and s. 401.268, the designated regional poison control center 23 24 shall assume responsibility and liability for the call. 25 Section 34. Legislative study of licensing and 26 regulating emergency medical services transportation systems 27 and personnel .--

prepare and submit to the Legislature by February 1, 2000, a

medical services which includes an assessment of alternative

report and proposal on licensing and regulating emergency

The Bureau of Emergency Medical Services shall

1	methods to current licensing, permitting, and staffing of
2	ambulances.
3	(2) As used in this section, the term "emergency
4	medical personnel means certified paramedics and emergency
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	medical technicians.
6	(3) The report and proposal shall include evaluation
7	of a system of licensing and regulating emergency medical
8	personnel through a board similar to those boards established
9	by section 20.43(3)(g), Florida Statutes, and operated
10	pursuant to part II of chapter 455, Florida Statutes. The
11	report and proposal shall further address the feasibility of
12	applying the provisions of part VIII of chapter 112, Florida
13	Statutes, to the regulation of emergency medical personnel.
14	(4) The report and proposal shall include an
15	evaluation of and subsequent plan for requiring an associate
16	of science degree for certification as a paramedic. The plan
17	must address a timetable and process for implementation and
18	include the fiscal impact of requiring such degree.
19	(5) The Secretary of Health shall appoint a committee
20	that is representative of the composition of the Emergency
21	Medical Services Advisory Council membership to participate in
22	the development of the report and proposal.
23	Section 35. This act shall take effect July 1, 1999.
24	beetion 33. This det sharr take criece dary 1, 1999.
25	*******
26	SENATE SUMMARY
27	Revises numerous provisions relating to emergency medical services, emergency medical technicians, and paramedics
28	and their licensure, certification, regulation, and continuing education. (See bill for details.)
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