

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH



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Commissioner

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OFFICE OF EMERGENCY MEDICAL SERVICES *OEMS COMMUNICATIONS STATEMENT 15-01*

Date: July 10, 2015

To: All certified or licensed Connecticut EMS Providers
All Connecticut EMS Organizations
All Connecticut Sponsor Hospitals

From: Raphael M. Barishansky, M.P.H., M.S., CPM
Director, Office of Emergency Medical Services

Re: Changes to Connecticut General Statutes regarding the orderly transfer of patient care at the scene of an emergency

In the 2015 Legislative Session, [Public Act 15-223](#) was passed. Section 1 of this act, effective October 1, 2015, provides clarification on the orderly transfer of patient care at an emergency scene. The language states, in part, that the EMS provider *“who holds the highest classification of licensure or certification from the Department of Public Health under chapters 368d and 384d of the general statutes shall be responsible for making decisions concerning patient care on the scene of an emergency medical call. If two or more providers on such scene hold the same licensure or certification classification, the provider for the primary service area responder, as defined in said section, shall be responsible for making such decisions. If all providers on such scene are emergency medical technicians or emergency medical responders, as defined in said section, the emergency medical service organization providing transportation services shall be responsible for making such decisions.”* The statute additionally states *“Nothing in this section shall be construed to limit the authority of a fire chief or fire officer-in-charge under section 7-313e of the general statutes to control and direct emergency activities at the scene of an emergency.* The relevant section of the public act is attached at the end of this document for reference.

All public safety partners must work collaboratively at emergency scenes to enhance patient care, maintain an orderly scene and allow rapid resolution of any conflicts. When it comes to patient care responsibilities, a hierarchy of clinical responsibility must be established. The EMS provider with the highest level of certification or licensure on scene shall assume responsibility for patient care unless, after assessing the patient's condition, that provider makes a decision to turn patient care over to another provider with a lower level of certification or licensure.

EMS providers should work as a team with a common mission to provide the best patient care. Should a disagreement regarding patient care arise, a professional demeanor and quick resolution in the best



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interest of the patient is paramount. In the event of unresolved conflict, the provider with the highest level of certification or licensure on scene has final authority and responsibility for decisions regarding patient care.

All significant or unresolved conflicts regarding on-scene patient care should be reported via the appropriate EMS organization's chain of command. EMS organizations should develop policies and procedures to ensure a clear and collaborative, best-practices approach to patient management. Said policies must comply with the National Incident Management System/Incident Command System as well as applicable Mass Casualty Incident standards.

If any provider is concerned that a conflict has negatively impacted patient care, the incident should be reported to the Office of Emergency Medical Services as soon as practical. Complaint forms are available on the "Forms" page on the OEMS website www.ct.gov/dph/ems.



Substitute Senate Bill No. 999

Public Act No. 15-223

**AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S
RECOMMENDATIONS REGARDING EMERGENCY MEDICAL SERVICES.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. (NEW) (*Effective October 1, 2015*) A provider, as defined in section 19a-175 of the general statutes, as amended by this act, who holds the highest classification of licensure or certification from the Department of Public Health under chapters 368d and 384d of the general statutes shall be responsible for making decisions concerning patient care on the scene of an emergency medical call. If two or more providers on such scene hold the same licensure or certification classification, the provider for the primary service area responder, as defined in said section, shall be responsible for making such decisions. If all providers on such scene are emergency medical technicians or emergency medical responders, as defined in said section, the emergency medical service organization providing transportation services shall be responsible for making such decisions. A provider on the scene of an emergency medical call who has undertaken decision-making responsibility for patient care shall transfer patient care to a provider with a higher classification of licensure or certification upon such provider's arrival on the scene. All providers with patient care responsibilities on the scene shall ensure such transfer takes place in a timely and orderly manner. For purposes of this section, the classification of licensure or certification from highest to lowest is: Paramedic, advanced emergency medical technician, emergency medical technician and emergency medical responder. Nothing in this section shall be construed to limit the authority of a fire chief or fire officer-in-charge under section 7-313e of the general statutes to control and direct emergency activities at the scene of an emergency.