## CHAPTER 326 FORMERLY HOUSE BILL NO. 315 AS AMENDED BY HOUSE AMENDMENT NO. 1

## AN ACT TO AMEND TITLE 16 OF THE DELAWARE CODE RELATING TO EMERGENCY MEDICAL SERVICES SYSTEMS.

WHEREAS, in the United States 30 million children need emergency care each year. Traumatic injuries, such as those attributed to motor vehicles, bicycles, burns, drowning, and firearms are the most common cause of death in children over the age of one, and children have an unacceptably high death rate in these emergency situations. It has been estimated that between 8,000 and 12,000 of the 22,000 American children who die from injuries each year could be saved by the establishment of injury prevention programs and emergency medical systems for children;

WHEREAS, in Delaware from 1996-2005, 343 children ages 0-19 died due to unintentional injuries. Of these deaths due to unintentional injuries, motor vehicles crashes were the leading cause of injury. Also, from 2002-2005, 2,568 children ages 0-19 years were hospitalized due to unintentional injuries. Falls were the leading cause of unintentional injuries requiring hospitalization;

WHEREAS, the average hospital charge for an injured child is \$13,224. The total hospital charges for unintentional injuries in children from 2002-2005 in Delaware, was over 31 million dollars;

WHEREAS, in 2010, ambulances in Delaware responded to over 9,400 calls and paramedics responded to approximately 3,500 calls to provide emergency medical care for children. The most frequent calls for children ages 0-14 years were for pain and for difficulty breathing. In children ages 15-19 the most frequent calls were for motor vehicle crashes.

WHEREAS, in Delaware it is estimated that there are 30,653 Children With Special Health Care Needs (CSHCN). When a crisis occurs and CSHCN access the emergency medical system they are left vulnerable because of a lack of access to information about their medical problems;

WHEREAS, in Delaware, asthma, a potentially life-threatening respiratory disorder, affects almost 14,000 children. Many of these children require prompt age-appropriate emergency medical treatment of flare-ups to avoid disability and sometimes death;

WHEREAS, each year in the United States, one out of every 400 children requires admission to a pediatric intensive care unit, yet only 55 percent of those in need of this care actually receive it. Of those children requiring such care, 80 percent suffer from medical illnesses such as acute asthma, meningitis and other infectious diseases, seizures, and poisonings. Twenty-one thousand (21,000) American children die annually from such illnesses;

WHEREAS, children react differently than adults to stress, metabolize medications differently, and suffer different illnesses and injuries. Because of these differences, children's emergency and critical care medical needs should be recognized separately within this State's existing emergency medical services system;

WHEREAS, hospital and prehospital emergency care providers do not always have the appropriate pediatric equipment to treat children in need of emergency care;

WHEREAS, emergency medical services training programs typically focus on adults and therefore offer fewer hours of pediatric training. In addition, many emergency medical services personnel have limited clinical experience with children, indicating the need to improve training of these personnel in pediatric emergencies; and

WHEREAS, the Institute of Medicine of the National Academy of Sciences found that emergency medical services for children systems are needed to ensure that children receive adequate and appropriate emergency medical care necessary to prevent loss of life and human potential;

## NOW THEREFORE:

## BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF DELAWARE:

Section 1. Amend § 9703(a), Title 16 of the Delaware Code by making insertions as shown by underlining as follows:

- § 9703. Delaware Emergency Medical Services Oversight Council.
- (a) There is established the Delaware Emergency Medical Services Oversight Council (DEMSOC). The Council shall consist of the following members:
  - (1) A representative of the Office of the Governor appointed by the Governor:
  - (2) The Secretary of the Department of Safety and Homeland Security;
- (3) The Secretary of the Department of Health and Social Services, or at the discretion of the Secretary, the Director of Public Health;
- (4) The Chair of the Delaware State Fire Prevention Commission or another Commissioner selected by the Chair;
  - (5) The President of the Delaware Volunteer Firefighter's Association;
- (6) The Colonel of the New Castle County Police Department or, at the Colonel's discretion, the Director of New Castle County Emergency Medical Services;
  - (7) The Kent County Administrator or, at the Administrator's discretion, the Kent County EMS Chief;

- (8) The Sussex County Administrator, or at the Administrator's discretion, the Sussex County EMS Director:
  - (9) The President of the Delaware Chapter of the American College of Emergency Physicians;
  - (10) The State EMS Medical Director;
  - (11) The Chair of the Trauma Systems Committee;
  - (12) A practicing paramedic, certified and employed in the State, appointed by the Governor;
  - (13) The Chair of the DVFA Ambulance Advisory Committee;
  - (14) Three additional at-large members, 1 from each county, appointed by the Governor; and
- (15) The President of the Delaware Healthcare Association or, at the President's discretion, a representative of the Delaware Healthcare Association.
- (16) The Executive Director of the Medical Society of Delaware or, at the Executive Director's discretion, a representative of the Medical Society of Delaware;
- (17) The Chair of the Delaware Police Chiefs' Council or, at the Chair's discretion, a representative of the Delaware Police Chief's Council; and
  - (18) The Paramedic Commander of the Delaware State Police Aviation Unit.
- (19) The Chair of the Emergency Medical Services for Children (EMSC) Advisory Committee, or at the discretion of the EMSC Advisory Committee Chair, the EMSC Program Manager.
- Section 2. Amend § 9705, Title 16 of the Delaware Code by making insertions as shown by underlining as follows:
  - § 9705. Office of Emergency Medical Services -- Functions.
- (q) Emergency Medical Services for Children. -- The Office shall provide a program to address the specific emergency medical care of children. This program shall be known as the Emergency Medical Services for Children (EMSC) program.
  - (1) The EMSC program shall have the power to:
- (A) Advise EMS medical direction on the development and implementation of statewide protocols that emphasize pediatric emergency care;
- (B) Support pediatric emergency medical technician and paramedic education and training programs; which shall include training in the emergency care of infants and children;
- (C) Develop pediatric emergency care standards and a voluntary program to recognize hospitals able to treat and manage pediatric emergencies;
- (D) Develop programs for parents and communities which shall identify and reduce barriers to emergency care for children;
  - (E) Provide information relating to child-specific health promotion and injury prevention;
  - (F) Focus on recognition of emergencies;
  - (G) Assist in improving access to appropriate use of the local EMS systems;
- (H) Develop and maintain a Special Needs Alert Program to educate EMS providers, and, on a voluntary basis, identify for EMS providers Children with Special Health Care Needs in the community; and
- (I) Analyze pediatric injury/illness data collected through the Office for the purpose of quality management purposes. All quality management proceedings shall be confidential.
- (2) There is established the EMSC Advisory Committee. The Committee shall advise the Office on issues concerning EMS care for children, and shall consist of the following representatives:
  - (A) The State EMS Medical Director;
  - (B) The State EMS Director;
  - (C) The Director of Children with Special Health Care Needs of the Division;
- (D) The Chair of the Delaware State Fire Prevention Commission or another Commissioner selected by the Chair;
  - (E) The Chair of the State Trauma System Committee or another member selected by the Chair;
- (F) The Chair of School Health Services in the Department of Education or another member selected by the Chair;
- (G) Advanced Life Support Agency County EMS Chiefs or Directors in Delaware or another member of the Advanced Life Support Agency selected by the Chief or Director;
  - (H) The Commander of the State Police EMS Aviation Section;
- (I) The President of the Delaware Chapter of the American College of Emergency Physicians or, at the President's discretion, a representative of the Chapter;
- (J) The President of the Delaware Chapter of the American Academy of Pediatrics or, at the President's discretion, a representative of the Chapter;

- (K) The President of the Delaware Healthcare Association or, at the President's discretion, a representative of the Delaware Healthcare Association;
- (L) The President of the Delaware Emergency Nurses Association or, at the President's discretion, a representative of the Emergency Nurses Association who is an emergency nurse licensed and practicing in Delaware;
- (M) The President of the Delaware Volunteer Firefighter's Association or, at the President's discretion, a representative of the Delaware Volunteer Firefighter's Association;
- (N) The President of the Delaware EMS Association or, at the President's discretion, a representative of the Delaware EMS Association;
  - (O) The Chair of Safe Kids Delaware or, at the Chair's discretion, a member of Safe Kids;
- (P) The Commander of the Health Care Clinic at the Dover Air Force Base or at the Commander's discretion a medical care representative from the Dover Air Force Base;
  - (Q) A Pediatric Emergency Medicine Physician practicing in the State of Delaware; and
- (R) Three lay parent representatives of children ages 0-19, 1 from each county, appointed by the Director of the Division of Public Health.
- Section 3. Amend § 9707, Title 16 of the Delaware Code by making insertions as shown by underlining and deletions as shown by strike through as follows:
  - § 9707. Confidentiality of quality review program and participants.
- (c) Confidentiality of Emergency Medical Services for Children Advisory Committee. -- Records of the EMSC Advisory Committee, its quality care review committee and members, attendees and visitors at meetings held for stated purposes of pediatric emergency care system medical review or quality care review and audit shall be confidential and privileged and shall be protected from direct or indirect means of discovery, subpoena or admission into evidence in any judicial or administrative proceeding. Raw data shall not be available for public inspection nor is it a public record within the meaning of the Delaware Freedom of Information Act.
- (e) (d) Immunity. -- No person shall be subject to, and shall be immune from, any claim, suit, liability, damages or any other recourse, civil or criminal, arising from any act or proceeding, decision or determination undertaken or performed, or recommendation made while discharging any duty or authority under this chapter, so long as such person acted in good faith without malice, and within the scope of his or her duty or authority under this chapter or any other provisions of the Delaware law, federal law or regulations or duly adopted rules and regulations providing for the administration of this chapter, good faith being presumed until proven otherwise, with malice required to be shown by the complainant.
  - Section 4. This Act shall be known as the Delaware Emergency Medical Services for Children Act.

Approved July 12, 2012