

From: Ken Williams <kwilliamsmd@gmail.com>
Sent: Monday, June 14, 2021 8:35 AM
To: House Health and Human Services Committee
Cc: O Warren; CATHERINE A CUMMINGS; Jason Rhodes
Subject: 6828 Sub A

Dear House Health and Human Services Committee,

My apologies for submitting email testimony, but given the time constraints and my schedule (I am working in the emergency department later today) I wanted to share my thoughts on this revised proposed legislation.

I am OPPOSED to 6828 Sub A as currently drafted, and offer 3 points:

1] **Why rush to legislation?** The people of Rhode Island deserve the best possible EMS care. As an EMS physician, I stand for that principle. Whenever there is a decision to be made, the test should be "What is best for the patient?" The current issues between the RI DOH and the ASCAB (and again, I serve both) should be resolved through facilitated discussion and collaboration, and not a rush to legislation. Both entities should be focused on working together to provide our people with the best possible EMS system. The pandemic is straining our system and our EMS providers. But the solution should be collaboration to overcome these challenges, not hasty legislative battles. Let's set up some meetings, convene a retreat, or otherwise come to agreement before we rush to legislate change that is not supported by important stakeholders or in the best interest of the best EMS system for our people.

2] **Let's use national standards.** There are existing national standards for ambulance design and equipment, EMS practitioner training, testing, and certification, EMS Physician Medical Director roles and responsibilities, EMS protocols, medication use, CPR and other resuscitation techniques, and other aspects of EMS care. What we need in RI is an advisory board that collaborates with the DOH to implement these national standards in a transparent and sensitive manner to achieve the best possible EMS care for our people. Collaboration to assist with local community needs assessment and implementation, cooperation to obtain the necessary resources to improve our system and compensate our EMS providers, and working together to understand unique circumstances and find solutions that apply these national standards to our system. Rhode Islanders deserve national standards, applied locally.

3] **Don't limit the quality of our EMS system.** When adopting or setting standards for training and involvement they should reflect the **minimum**, and not limit EMS providers from obtaining additional education or EMS Physician Medical Directors from providing requested support and oversight to improve the quality of our EMS care and education. Of course, there must also be state level limits on scope of practice and other features of the system -- otherwise we would have a regulatory nightmare. But please don't legislate limits on quality!

I hope you will consider my testimony as you deliberate, and come to a solution that is in the best interest of the citizens of Rhode Island, who deserve the best possible EMS system.

I would be happy to discuss my thoughts with you at any convenient time.

Best,
Ken

Kenneth A. Williams, MD, FACEP, FAEMS

Director, Division of EMS | Medical Director, LifePACT Critical Care Transport | Professor of Emergency Medicine | Rhode Island Hospital | Brown Emergency Medicine | The Alpert Medical School of Brown University | Medical Director, RI Dept. of Health Center for EMS | Past Chair, Medical Director's Council, National Association of State EMS Officials | Fellow of the American College of Emergency Physicians | Fellow of the Academy of EMS | Member, USCG AUX 1NR-07-08, Boat Crew Certified 45 RB-M | kwilliamsMD@gmail.com | 401-444-2739 | http://brown.edu/go/ems_fellowship