

1 TO THE HONORABLE SENATE:

2 The Committee on Health and Welfare to which was referred Senate Bill
3 No. 243 entitled “An act relating to establishing the Emergency Service
4 Provider Wellness Commission” respectfully reports that it has considered the
5 same and recommends that the bill be amended by striking out all after the
6 enacting clause and inserting in lieu thereof the following:

7 Sec. 1. 18 V.S.A. § 7257b is added to read:

8 § 7257b. EMERGENCY SERVICE PROVIDER WELLNESS

9 COMMISSION

10 (a) As used in this section:

11 (1) “Chief executive of an emergency service provider organization”
12 means a person in charge of an organization that employs or supervises
13 emergency service providers in their official capacity.

14 (2) “Emergency service provider” means a person:

15 (A) currently or formerly recognized by a Vermont Fire Department
16 as a firefighter;

17 (B) currently or formerly licensed by the Department of Health as an
18 emergency medical technician, emergency medical responder, advanced
19 emergency medical technician, or paramedic;

1 (C) currently or formerly certified as a law enforcement officer by
2 the Vermont Criminal Justice Training Council, including constables and
3 sheriffs;

4 (D) currently or formerly employed by the Department of
5 Corrections as a probation, parole, or correctional facility officer; or

6 (E) currently or formerly certified by the Vermont Enhanced 911
7 Board as a 911 call-taker or employed as an emergency communications
8 dispatcher providing service for an emergency service provider organization.

9 (3) “Licensing entity” means a State entity that licenses or certifies an
10 emergency service provider.

11 (b) There is created the Emergency Service Provider Wellness Commission
12 within the Agency of Human Services for the following purposes:

13 (1) to identify where increased or alternative supports or strategic
14 investments within the emergency service provider community, designated or
15 specialized service agencies, or other community service systems could
16 improve the physical and mental health outcomes and overall wellness of
17 emergency service providers;

18 (2) to identify how Vermont can increase capacity of qualified clinicians
19 in the treatment of emergency service providers to ensure that the services of
20 qualified clinicians are available throughout the State without undue delay;

1 (3) to create materials and information, in consultation with the
2 Department of Health, including a list of qualified clinicians, for the purpose of
3 populating an electronic emergency service provider wellness resource center
4 on the Department of Health’s website;

5 (4) to educate the public, emergency service providers, State and local
6 governments, employee assistance programs, and policymakers about best
7 practices, tools, personnel, resources, and strategies for the prevention and
8 intervention of the effects of trauma experienced by emergency service
9 providers and law enforcement officers;

10 (5) to identify gaps and strengths in Vermont’s system of care for
11 emergency service providers;

12 (6) to recommend how peer support services and qualified clinician
13 services can be delivered regionally or statewide;

14 (7) to recommend how to support emergency service providers in
15 communities that are resource challenged, remote, small, or rural;

16 (8) to recommend policies, practices, training, legislation, rules, and
17 services that will increase successful interventions and support for emergency
18 service providers to improve health outcomes, job performance, and personal
19 well-being and reduce health risks, violations of employment, and violence
20 associated with the impact of untreated trauma, including whether to amend
21 Vermont’s employment medical leave laws to assist volunteer emergency

1 service providers in recovering from the effects of trauma experienced while
2 on duty; and

3 (9) to consult with federal, State, and municipal agencies, organizations,
4 entities, and individuals in order to make any other recommendations the
5 Commission deems appropriate.

6 (c)(1) The Commission shall comprise the following members:

7 (A) the Chief of Training of the Vermont Fire Academy or designee;

8 (B) a representative appointed by the Vermont Criminal Justice
9 Training Council;

10 (C) the Director of the Office of Emergency Services within the
11 Department of Health or designee;

12 (D) the Commissioner of Health or designee;

13 (E) the Commissioner of Public Safety or designee;

14 (F) the Commissioner of the Department of Corrections or designee;

15 [X] the Commissioner of Mental Health or designee;]

16 [X] the Secretary of Human Services or designee;]

17 (G) the Commissioner of Human Resources or designee;

18 (H) a law enforcement officer who is not a chief or sheriff, appointed
19 by the President of the Vermont Police Association;

20 (I) a representative appointed by the Vermont Association of Chiefs
21 of Police;

1 (J) a representative appointed by the Vermont Sheriffs’ Association;

2 (K) a volunteer firefighter appointed by the Vermont State

3 Firefighters’ Association;

4 (L) a representative of the designated and specialized service

5 agencies, appointed by Vermont Care Partners;

6 (M) a representative appointed by the Vermont State Employees

7 Association;

8 (N) a representative appointed by the Vermont Troopers’

9 Association;

10 (O) a professional firefighter appointed by the Professional

11 Firefighters of Vermont;

12 (P) a clinician associated with a peer support program who has

13 experience in treating workplace trauma, appointed by the Governor;

14 (Q) a professional emergency medical technician or paramedic,

15 appointed by the Vermont State Ambulance Association;

16 (R) a volunteer emergency medical technician or paramedic,

17 appointed by the Vermont State Ambulance Association;

18 (S) a person who serves or served on a peer support team, appointed

19 by the Governor;

20 (T) a representative appointed by the Vermont League of Cities and

21 Towns;

1 (U) a Chief appointed by the Vermont Career Fire Chiefs Association;

2 and

3 (V) a Chief appointed by the Vermont Fire Chiefs Association.

4 (2) The members of the Commission specified in subdivision (1) of this
5 subsection shall serve three-year terms. Any vacancy on the Commission shall
6 be filled in the same manner as the original appointment. The replacement
7 member shall serve for the remainder of the unexpired term.

8 (3) Commission members shall recuse themselves from any discussion
9 of an event or circumstance that the member believes may involve an
10 emergency service provider known by the member and shall not access any
11 information related to it. The Commission may appoint an interim
12 replacement member to fill the category represented by the recused member
13 for review of that interaction.

14 (d)(1) The Commissioner of Health or designee shall call the first meeting
15 of the Commission to occur on or before September 30, 2020.

16 (2) The Commission shall select a chair and vice chair from among its
17 members at the first meeting and annually thereafter.

18 (3) The Commission shall meet at such times as may reasonably be
19 necessary to carry out its duties, but at least once in each calendar quarter.

20 (4) The Department of Health shall provide technical, legal, and
21 administrative assistance to the Commission.

1 (e) The proceedings and records of the Commission describing or referring
2 to circumstances or an event involving an emergency service provider,
3 regardless of whether the emergency service provider is identified by name,
4 are confidential and are not subject to subpoena, discovery, or introduction into
5 evidence in a civil or criminal action. The Commission shall not use the
6 information, records, or data for purposes other than those designated by this
7 section.

8 (f) Commission meetings are confidential and shall be exempt from
9 1 V.S.A. chapter 5, subchapter 2 (the Vermont Open Meeting Law) when the
10 Commission is discussing circumstances or an event involving a specific
11 emergency service provider regardless of whether that person is identified by
12 name. Except as set forth in subsection (e) of this section, Commission records
13 are exempt from public inspection and copying under the Public Records Act
14 and shall be kept confidential.

15 (g) To the extent permitted under federal law, the Commission may enter
16 into agreements with agencies, organizations, and individuals to obtain
17 otherwise confidential information.

18 (h) Notwithstanding 2 V.S.A. § 20(d), the Commission shall report its
19 conclusions and recommendations to the Governor and General Assembly as
20 the Commission deems necessary, but not less frequently than once per
21 calendar year. The report shall disclose individually identifiable health

1 information only to the extent necessary to convey the Commission's
2 conclusions and recommendations, and any such disclosures shall be limited to
3 information already known to the public. The report shall be available to the
4 public through the Department of Health.

5 Sec. 2. 18 V.S.A. § 908 is amended to read:

6 § 908. EMERGENCY MEDICAL SERVICES SPECIAL FUND

7 (a) The Emergency Medical Services Fund is established pursuant to
8 32 V.S.A. chapter 7, subchapter 5 comprising such sums as may be
9 appropriated or transferred thereto from time to time by the General Assembly,
10 the State Emergency Board, or the Joint Fiscal Committee during such times as
11 the General Assembly is not in session and revenues, not to exceed
12 \$150,000.00, received by from the Department from the Fire Safety Special
13 Fund, pursuant to 32 V.S.A. § 8557(a), that are designated for this Special
14 Fund and public and private sources as gifts, grants, and donations together
15 with additions and interest accruing to the Fund. The Commissioner of Health
16 shall administer the Fund to the extent funds are available to support online
17 and regional training programs, licensure, data collection and analysis, and
18 other activities relating to the training and licensure of emergency medical
19 personnel and delivery of emergency medical services and ambulance services
20 in Vermont, as determined by the Commissioner, after consulting with the
21 EMS Advisory Committee established under section 909 of this title. The

1 Commissioner of Health shall administer the Fund to cover all fees associated
2 with licensure, training, and licensure renewal requirements for a prospective
3 or current emergency medical technician, advanced emergency medical
4 technician, or paramedic, provided that the person is currently affiliated with or
5 will be affiliated with an emergency service provider organization employing
6 or supervising emergency service providers as defined in section 7257b of this
7 title. Any balance at the end of the fiscal year shall be carried forward in the
8 Fund.

9 * * *

10 Sec. 3. EFFECTIVE DATE

11 This act shall take effect on July 1, 2020.

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18 (Committee vote: _____)

19 _____

20 Senator _____

21 FOR THE COMMITTEE