

H.465

An act relating to boards and commissions

The Senate proposes to the House to amend the bill as follows:

First: By adding a reader assistance heading and new section to be Sec. 7a to read as follows:

\* \* \* Emergency Service Provider Wellness Commission \* \* \*

Sec. 7a. 18 V.S.A. § 7257b is amended to read:

§ 7257b. EMERGENCY SERVICE PROVIDER WELLNESS

COMMISSION

(a) As used in this section:

(1) “Chief executive of an emergency service provider organization”

means a person in charge of an organization that employs or supervises emergency service providers in their official capacity.

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

(A) currently or formerly recognized by a Vermont fire department as a firefighter;

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

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

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

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

(F) currently or formerly registered as a ski patroller at a Vermont ski resort with the National Ski Patrol or Professional Ski Patrol Association.

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

(b) There is created the Emergency Service Provider Wellness Commission within the Agency of Human Services that, in addition to the purposes listed below, shall consider the diversity of emergency service providers on the basis of gender, race, age, ethnicity, sexual orientation, gender identity, disability status, and the unique needs that emergency service providers who have experienced trauma may have as a result of their identity status:

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

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

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

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

(5) to identify gaps and strengths in Vermont's system of care for both emergency service providers who have experienced trauma and their immediate family members to ensure access to support and resources that address the impacts of primary and secondary trauma;

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

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

(8) to recommend policies, practices, training, legislation, rules, and services that will increase successful interventions and support for emergency service providers to improve health outcomes, job performance, and personal well-being and reduce health risks, violations of employment, and violence associated with the impact of untreated trauma, including whether to amend Vermont's employment medical leave laws to assist volunteer emergency service providers in recovering from the effects of trauma experienced while on duty; and

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

(c)(1) The Commission shall comprise the following members and, to the extent feasible, include representation among members that reflects the gender, gender identity, racial, age, ethnic, sexual orientation, social, and disability status of emergency service providers in the State:

\* \* \*

(W) a representative, appointed by the Vermont Association for Hospitals and Health Systems; ~~and~~

(X) the Executive Director of the Enhanced 911 Board or designee; and

(Y) a member of the National Ski Patrol appointed by consensus agreement of the National Ski Patrol Northern Vermont and Southern Vermont Regional Directors.

\* \* \*

Second: In Sec. 8, 32 V.S.A. § 1010, in subdivision (e)(1), following the last sentence of the subdivision, by inserting the following:

Prior to submitting this schedule, the Governor shall consult with each elective officer or State officer who administers per diems that are not funded by the General Fund.

Third: In Sec. 8, 32 V.S.A. § 1010, in subdivision (e)(2), following the last sentence of the subdivision, by inserting the following:

The agency or department shall include within its annual budget documentation the justification for any current or projected per diem rate that is greater than \$50.00, including the justification for authorizing a per diem rate of greater than \$50.00 for a board, commission, council, or committee created by executive order pursuant to subsection (g) of this section.

Fourth: In Sec. 8, 32 V.S.A. § 1010, in subsection (e), by inserting a new subdivision to be subdivision (3) to read as follows:

(3) When the General Assembly is not in session, a department or agency may only increase the per diem rate above the level included in their budget submission if approved by the Commissioner of Finance and

Management after review of written justification for the per diem rate adjustment.

Fifth: By striking out Sec. 9, effective date, and its reader assistance heading in their entireties and inserting in lieu thereof two new sections to be Secs. 9 and 10 and a reader assistance heading to read as follows:

Sec. 9. DEPARTMENT OF FINANCE AND MANAGEMENT; FISCAL  
YEAR 2024; PER DIEM MAXIMUM; REPORT

(a) Fiscal year 2024. The fiscal year 2024 annual budget report of the Governor and the fiscal year 2024 annual budget documentation submitted by agencies and departments shall include the documentation and information required in Sec. 8 of this act regarding current and proposed per diem rates for boards, commissions, councils, and committees.

(b) Report. On or before December 1, 2024, the Department of Finance and Management shall submit a written report to the House and Senate Committees on Appropriations and on Government Operations with a recommendation on whether to establish a maximum per diem rate for boards, commissions, councils, or committees and any legislative actions necessary to increase uniformity and equality of per diem rates across State government.

\* \* \* Effective Dates \* \* \*

Sec. 10. EFFECTIVE DATES

This act shall take effect on passage, except that Sec. 8 shall take effect on  
July 1, 2023.