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HOUSE JOINT RESOLUTION NO. 437

AMENDMENT IN THE NATURE OF A SUBSTITUTE

(Proposed by the House Committee on Rules) (Patron Prior to Substitute—Delegate Orrock) House Amendments in [] — February 4, 1995

Establishing a joint subcommittee to study certain emergency medical services training and governance issues.

WHEREAS, the people of Virginia are fortunate to have an emergency medical services (EMS) system which has received national recognition for excellence; and

WHEREAS, over the years, the funding, staffing, and training of emergency medical services have been, at various times, important issues, e.g., although additional funds were provided within recent years through the "Two-For-Life" program, disagreement continues on the proper and most appropriate use of these funds; and

WHEREAS, although certain densely populated areas have switched to paid or municipally operated emergency medical services, the majority of rural areas and many urban areas are still served primarily by volunteer squads; and

WHEREAS, in this mobile and fluid society, with its ubiquitous automobiles, many sparsely populated rural areas are heavily traveled, resulting in increased need for emergency services; and

WHEREAS, although training is essential to the well-being of the emergency medical services system in this Commonwealth, there is disagreement among emergency medical services personnel about the rigor and frequency of and access to necessary training; and

WHEREAS, recently controversy has occurred within the EMS community concerning the governance of the emergency medical services system, specifically the size and composition of the Advisory Board; and

WHEREAS, high morale, good communications, reasonable compromise, and strong cooperation are vital ingredients for the maintenance of the quality and efficiency of Virginia's emergency medical services system; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That a joint subcommittee be established to study certain emergency medical services training and governance issues. In its deliberations, the joint subcommittee shall examine (i) the composition, size, appropriate membership, and proper role of the State Emergency Medical Services Advisory Board established pursuant to § 32.1-114 of the Code of Virginia; (ii) the distribution, uses, and sufficiency of the "Two-for-Life" Fund established pursuant to subdivision A 13 of § 46.2-694 of the Code of Virginia; (iii) law and regulations governing emergency medical services in Virginia; (iv) availability, access, and substance of EMS training courses; (v) methods to resolve conflicts within and among the various sectors of the EMS community; (vi) the adequacy of emergency medical services throughout the Commonwealth; and (vii) any other relevant issues related to the Virginia emergency medical services system.

The joint subcommittee shall consist of thirteen members as follows: five members of the House of Delegates to be appointed by the Speaker of the House; four members of the Senate to be appointed by the Senate Committee on Privileges and Elections; and four citizen members to be appointed by the Governor, consisting of one representative of each of the following groups: the Virginia Association of Volunteer Rescue Squads, the Virginia regional emergency medical services councils, public safety agencies providing emergency medical services, and a certified EMS volunteer [eurrently working with a rescue squad] .

The Division of Legislative Services shall provide staff support for the study. All agencies of the Commonwealth shall provide assistance to the joint subcommittee, upon request.

The joint subcommittee shall be limited to two meetings and shall complete its work in time to submit its findings and recommendations to the Governor and the 1996 Session of the General Assembly as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative documents.

The direct costs of this study shall not exceed \$8,750.

Implementation of this resolution is subject to subsequent approval and certification by the Joint Rules Committee. The Committee may withhold expenditures or delay the period for the conduct of the study.

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