



Emergency Medical Services Regulation

Adopted October 1, 2009

WHEREAS, the Boston Public Health Act established the Boston Public Health Commission ("Commission") as the board of health for the City of Boston ("City) and to administer, enhance, and expand public health services in the City, including emergency medical services;

WHEREAS, the Boston Public Health Act empowers the Commission to prescribe rules, regulations and policies in connection with the performance of its duties and to adopt, amend and repeal reasonable health regulations not inconsistent with any public health regulation of the Commonwealth of Massachusetts;

WHEREAS, Massachusetts General Laws Chapter 111C governs the provision of emergency medical services throughout the Commonwealth and requires that all cities and towns submit to the Massachusetts Department of Public Health a service zone plan that defines the local EMS resources used and coordinated by the primary ambulance service;

WHEREAS, Boston EMS is the designated primary ambulance service provider for the City of Boston as defined by 105 CMR 170.000 pursuant to a Service Zone Plan as approved by the Massachusetts Department of Public Health;

WHEREAS, Boston EMS is responsible for planning, guiding, and coordinating emergency medical services in the City of Boston, including emergency medical services necessitated by special events in the City of Boston;

WHEREAS, it is in the interest of public health, safety, and welfare that hospitals in the City of Boston provide Boston EMS with health information about patients who received pre-hospital emergency medical services, including but not limited to semi-automatic external defibrillation, in order that the quality and effectiveness of emergency medical services can be evaluated and enhanced;

WHEREAS it is in the interest of public health, safety and welfare that all "Private First Responders" operating in the City of Boston use compatible equipment and follow standardized medical and quality assurance protocols;

NOW, THEREFORE, the Commission enacts the following regulation:

DEFINITIONS

For Purposes of all sections of this regulation, the terms listed below shall have the following meanings:

“Acute Care Hospital” – any hospital licensed under M.G.L. c. 111 § 51 which contains a majority of medical-surgical, pediatric, obstetric, and maternity beds as defined by 105 CMR 130.026.

“AED”-Automatic external defibrillator.

“Boston EMS”- Boston Emergency Medical Services, a bureau of the Boston Public Health Commission.

“Commission”- the Boston Public Health Commission.

“Emergency medical services” or “EMS”- the pre-hospital assessment, treatment, transport, and other services utilized in responding to an emergency or during the transport of patients to appropriate health care facilities.

“Emergency medical technician”, or “EMT”- a person who has successfully completed a full course in emergency medical care approved by the Massachusetts Department of Public Health Office of Emergency Medical Services and who is certified in accordance with 105 CMR 170.000 to provide emergency medical services to sick or injured persons in accordance with the Statewide Treatment Protocols. The term "emergency medical technician" shall include EMT-Basic, EMT-Intermediate and EMT-Paramedic.

“EMS First Response Service”- the business or regular activity, whether for profit or not, by a licensed EMS provider, designated as a service zone provider pursuant to Department - approved service zone plan for purposes of providing rapid response and EMS.

“EMS special event coverage”- emergency medical services beyond that which the Commission routinely provides that are necessary as a result of a special event. EMS special event coverage is paid for by an organizer under the terms of this regulation.

“Executive Director”- the Executive Director of the Boston Public Health Commission.

“Health information”- information relating to the physical and mental condition of a patient in any form or media, whether electronic, paper or oral, which is attendant to or arises from the request for transport by Boston EMS.

“Hospital” - any institution, however named, whether conducted for charity or for profit, which is advertised, announced, established or maintained for the purpose of caring for persons admitted thereto for diagnosis, medical,

surgical or restorative treatment which is rendered within said institution and which is licensed by the Massachusetts Department of Public Health pursuant to M.G.L. c.111 section 51.

"Organizer"- any person, organization, or entity that organizes, sponsors, promotes or otherwise plans any special event.

"Primary ambulance service"- the designated primary ambulance service for the City of Boston pursuant to a Service Zone Plan as approved by the Massachusetts Department of Public Health pursuant to General Laws Chapters 111C.

"Private First Responder"- a person, other than an EMT working for a licensed ambulance service or a First Responder, as defined by state regulation, who provides defibrillation services to the public in a setting outside a hospital, clinic, skilled nursing facility, health center or physician's office, within the City of Boston.

"SAED"- Semi-automatic external defibrillator.

"Special Event"-

1. Any event held in the City at which the anticipated attendance is greater than five thousand (5,000) people; or
2. Any event held in the City that requires the organizer to complete a City of Boston Public Event Application, or Film Permitting Request; or
3. Any event held in the City that because of its nature or the activities performed therein may adversely impact public health or the administration of timely and adequate emergency medical services to event attendees or the surrounding public. Examples of special events include, but are not limited to, professional athletic/sports events, performances, exhibitions, concerts, festivals, marches, parades, processions, road races, contests, and film events.

Notwithstanding any provision of this regulation, the term "Special Event" shall not include:

- i. An event held by a governmental agency, including but not limited to events sponsored by the City,
- ii. certain expressive activity protected by the laws of Massachusetts and the United States; or
- iii. An event having an anticipated attendance of less than one hundred (100) people.

SECTION 1. PLANNING, GUIDANCE, AND COORDINATION OF EMS SERVICES

1. The Commission, through Boston EMS the primary ambulance service for the City of Boston, shall plan, guide, and coordinate emergency medical services for the City under the direction of and at the discretion of the Executive Director pursuant to General Laws Chapters 111 App. §2-1 et seq., 111C and the EMS Service Zone Plan

for Boston, Massachusetts as approved by the Massachusetts Department of Public Health.

2. Boston EMS shall coordinate necessary emergency medical services within the City of Boston, which shall include but are not limited to the following:
 - a. Service accessibility through the designated emergency telephone numbers;
 - b. Telecommunications screening to determine an appropriate EMS response for each call for emergency medical services received;
 - c. Pre-hospital assessment, treatment, and transport;
 - d. Access to appropriate health care facilities in the City including trauma centers within the City or its neighboring communities;
 - e. Planning, coordination and implementation of emergency medical services, including patient tracking, during mass casualty incidents, natural disasters, mass meetings, declared states of emergency and for certain special events;
 - f. Development and implementation of protocols for the effective use of SAEDs, including training for the public on defibrillation services;
 - g. Establishment of reporting requirements for acute-care hospitals in the City for training and quality assessment and improvement of health outcomes;
 - h. Development of a standardized patient data collection system which covers all phases of the EMS system in the City; and,
 - i. Periodic review and evaluation of EMS services.

SECTION 2. SPECIAL EVENT EMS COVERAGE REQUIREMENTS

2.1 Purpose

The Commission enacts the following regulation to establish procedures for determining what emergency medical services are needed for special events in the City and ensuring that such emergency medical services are provided.

2.2 Special Event Requirements

1. An organizer must obtain EMS special event coverage as determined by Boston EMS in accordance with the provisions of this regulation.
2. An organizer must provide written notice to the Commission of the size, nature, duration, location of the event, and any other information regarding the special event as may be required, at least fifteen (15) days in advance of the first day of

the special event, unless such notice is waived by the Commission. The Commission may determine the form on which such notice shall be made.

3. Upon notification of a special event, the Commission will determine what, if any, EMS special event coverage is required. If EMS special event coverage is required, the Commission will inform the organizer what EMS special event coverage is required and specify acceptable coverage provider or providers.
4. The organizer must remit to the Commission the required fees for any EMS special event coverage that will be provided by Boston EMS. If any EMS special coverage will be provided by any other provider or providers, the organizer must submit proof acceptable to the Commission that the organizer has obtained such coverage prior to the event.
5. After the organizer has successfully complied with all applicable provisions of this regulation, the Commission will certify that the organizer has fulfilled the EMS coverage requirements of this regulation for the special event to take place.
6. The Executive Director is hereby authorized to establish fee scales for the issuance of a certification of an event which may vary according to size of the event.
7. Whoever violates any provision of Section 2 of this regulation shall be subject to a fine and the cost of any EMS special event coverage assigned to the event.

SECTION 3. REPORTING REQUIREMENTS FOR HOSPITALS

3.1 Purpose

The Commission has determined that it is in the interest of the public's health, safety and welfare that hospitals receiving certain patients from the emergency medical system provide certain information to the Commission.

3.2 Sudden Cardiac Death Prevention Program

1. All hospitals that receive patients who have had treatment with an SAED or other such device by a first responder including, first responder agencies such as the Boston Fire Department, Boston EMS, or a private first responder service, shall report the condition and disposition of the patient, within forty-eight hours of admission, to Boston EMS in a manner and form proscribed by the Boston EMS Medical Director.
2. Upon request by Boston EMS or at such intervals as specified by the Boston EMS Medical Director, the reporting hospital and any subsequent hospital in which the patient receives treatment, shall provide any further information they may have regarding the condition and disposition of the patient.

3.3 Quality Assessment and Improvement Reporting Program

1. All Acute Care Hospitals in the City of Boston that provide in-patient care and treatment to patients transported by Boston EMS, and any subsequent hospital(s) in which the patient receives further treatment, shall, upon request by the Medical Director of Boston EMS, provide health information regarding the diagnosis, condition and disposition of the patient for purposes of quality assessment and improvement.
2. The provisions of this regulation do not amend, modify or otherwise relieve any hospital of any other regulatory, administrative or statutory reporting requirements.

SECTION 4. TRAINING, EVALUATION, EQUIPMENT AND QUALITY ASSURANCE REQUIREMENTS FOR PRIVATE FIRST RESPONDERS

1. Boston EMS, as the lead agency for the provision of pre-hospital emergency medical services in the City of Boston, shall specify medically appropriate protocols for all Private First Responders.
2. Prior to offering defibrillation services, and at least annually thereafter or at such other interval as is specified by the Boston EMS Medical Director, a Private First Responder must undergo a training evaluation as determined by the Boston EMS Medical Director.
3. A Private First Responder shall utilize cardiac defibrillation equipment which is compatible with or is augmented with plugs and/or adapters such that the equipment is compatible with a defibrillation pad as designated from time to time by the Boston EMS Medical Director.
4. A Private First Responder shall participate in the Boston EMS Quality Assurance Program as determined by the Boston EMS Medical Director.
5. A Private First Responder shall utilize cardiac defibrillation equipment which provides on-site retrieval of the following quality assurance data: 1) time SAED turned on; 2) date; 3) time analysis begun; 4) initial rhythm; 5) time each shock delivered; 6) cardiac rhythm pre and post each shock; and, 7) energy level delivered for each shock. Such information shall be provided to Boston EMS in accordance with its Quality Assurance Program.

4.1 Application

1. Neither this section nor Section 3.2 of this regulation shall apply to individual household use of SAED or AED as prescribed by a private physician.
2. Neither this section nor Section 3.2 of this regulation shall apply to use of a semi-automatic external cardiac defibrillation or other such device in a hospital, health center or other clinic licensed by the Massachusetts Department of Public Health, by staff of that facility.

SECTION 5. GUIDELINES

The Executive Director may issue guidelines for the implementation of one or more sections of these regulations, including but not limited to, definitions of terms as used in these regulations and in the guidelines. In the event of a conflict between these regulations and the guidelines, as either may be amended, the regulations shall control.

SECTION 6. ENFORCEMENT

1. Authority to enforce these regulations shall be held by the Commission, its subsidiary divisions, programs or designees, including Boston EMS, and the City of Boston and its subsidiary departments, offices, or designees.
2. Any violation of this regulation may be enforced in the manner provided in M.G.L. c. 111, § 187, by the Commission, its subsidiary divisions, programs or designees, including Boston EMS.

SECTION 7. SEVERABILITY

If any provision, clause, sentence, paragraph or word of these regulations or the application thereof to any person, organization, entity or circumstances shall be held invalid, such invalidity shall not affect the other provisions of these regulations which can be given effect without the invalid provisions or applications and to this end the provisions of these regulations are declared severable.

SECTION 8. CONSTRUCTION

Nothing in these Regulations shall be construed to conflict with any regulation or statute of the Commonwealth of Massachusetts.

SECTION 9. VIOLATIONS

Whoever violates any provisions or sections of these regulations shall be subject to a fine of not less than one hundred dollars (\$100) nor more than one thousand dollars (\$1,000).

Authority: M.G.L. c. 111, 31; M.G.L. c. 111, App. §§2-1, 2-6(b) and 2-6(j), 2-7(a)(1) and 2-7(a)(15).