

**GENERAL ASSEMBLY OF NORTH CAROLINA  
SESSION 2003**

**SESSION LAW 2003-392  
SENATE BILL 661**

AN ACT TO PROVIDE THAT WHEN A LOCAL CONFINEMENT FACILITY TRANSFERS A PRISONER TO ANOTHER LOCAL CONFINEMENT FACILITY THE TRANSFERRING FACILITY PROVIDES TO THE RECEIVING FACILITY HEALTH INFORMATION ABOUT THE TRANSFERRED PRISONER; AND TO MAKE CHANGES TO THE EMERGENCY MEDICAL SERVICES ACT, TO INCREASE THE CRIMINAL PENALTY FOR DAMAGING A PUBLIC BUILDING WITH AN EXPLOSIVE OR INCENDIARY DEVICE OR MATERIAL, AND TO CREATE THE OFFENSE OF ARSON OR OTHER UNLAWFUL BURNINGS THAT RESULT IN SERIOUS INJURY TO A FIREFIGHTER OR EMERGENCY MEDICAL TECHNICIAN.

The General Assembly of North Carolina enacts:

**SECTION 1.** G.S. 153-225 is amended by adding the following new subsection to read:

**"§ 153A-225. Medical care of prisoners.**

(b1) Whenever a local confinement facility transfers a prisoner from that facility to another local confinement facility, the transferring facility shall provide the receiving facility with any health information or medical records the transferring facility has in its possession pertaining to the transferred prisoner."

**SECTION 2.(a)** G.S. 131E-155 reads as rewritten:

**"§ 131E-155. Definitions.**

As used in this Article, unless otherwise specified:

- (7) "Emergency medical services personnel" means all the personnel defined in subdivisions (5), (7a), (8), (9), (10), ~~(11)~~, ~~(12)~~, (13), (14), and (15) of this section.
- (7a) "Emergency medical services instructor" means an individual who has completed educational requirements approved by the Department and has been credentialed as an emergency medical services instructor by the Department.
- (8) "Emergency medical services-nurse practitioner" means a registered nurse who is licensed to practice nursing in North Carolina and approved to perform medical acts by the North Carolina Medical Board and the North Carolina Board of ~~Nursing~~ Nursing. Upon successful completion of an orientation program conducted under the authority of the medical director and approved by the Department, emergency medical services-nurse practitioners shall be approved by the medical director to issue instructions to EMS personnel. These instructions shall be and credentialed by the Office of Emergency Medical Services to issue instructions to ALS professionals in accordance with protocols approved by the sponsor hospital-EMS system and Office of Emergency Medical Services and under the direction of the medical director.

- (9) "Emergency medical services-physician assistant" means a physician assistant who ~~has been~~ is licensed by the North Carolina Medical Board ~~Board~~. Upon successful completion of an orientation program conducted under the authority of the medical director and approved by the Department, emergency medical services-physician assistants shall be approved by the medical director to issue instructions to EMS personnel. These instructions shall be and approved by the Office of Emergency Medical Services to issue instructions to ALS professionals in accordance with protocols approved by the sponsor hospital-EMS system and Office of Emergency Medical Services and under the direction of the medical director.
- ~~(11) "Emergency medical technician defibrillation" means an individual who has completed an educational program in emergency medical care approved by the Department and has been credentialed as an emergency medical technician defibrillation by the Department.~~
- ~~(15) "Mobile intensive care nurse" means a registered nurse who is licensed to practice nursing in North Carolina and who has completed an educational program in emergency medical care approved by the Department and has been credentialed as a mobile intensive care nurse by the Department.~~ is approved by the medical director, following successful completion of an orientation program conducted under the authority of the medical director and approved by the Department, to issue instructions to EMS personnel. These instructions shall be in accordance with protocols approved by the EMS system and Office of Emergency Medical Services and under the direction of the medical director.
- ~~(16a) "Emergency Medical Services Peer Review Committee" means a panel composed of EMS program representatives to be responsible for analyzing patient care data and outcome measures to evaluate the ongoing quality of patient care, system performance, and medical direction within the EMS system. The committee membership shall include physicians, nurses, EMS personnel, medical facility personnel, and county government officials. Review of medical records by the EMS Peer Review Committee is confidential and protected under G.S. 143-518. An EMS Peer Review Committee, its members, proceedings, records and materials produced, and materials considered shall be afforded the same protections afforded Medical Review Committees, their members, proceedings, records, and materials under G.S. 131E-95.~~
- (17) "Practical examination" means a test where an applicant for credentialing as an emergency medical technician, medical responder, ~~emergency medical technician defibrillation,~~ emergency medical technician-intermediate, or emergency medical technician-paramedic demonstrates the ability to perform specified emergency medical care skills."

**SECTION 2.(b)** G.S. 131E-159 reads as rewritten:

**"§ 131E-159. Credentialing requirements.**

(a) ~~An individual~~ Individuals seeking credentials as an emergency medical technician, ~~emergency medical technician defibrillation,~~ emergency medical technician-intermediate, emergency medical technician-paramedic, ~~mobile intensive care nurse, emergency medical services physician assistant, or emergency medical services nurse practitioner~~ medical responder, emergency medical

dispatcher, or emergency medical services instructor shall apply to the Department using forms prescribed by that agency. The Department's representatives shall examine the applicant by either written, practical, or written and practical examination. The Department shall issue appropriate credentials to the applicant who meets all the requirements set forth in this Article and the rules adopted for this Article and who successfully completes the examinations required for credentialing. ~~Emergency medical technician, medical responder, emergency medical dispatcher, emergency medical technician-defibrillation, emergency medical technician-intermediate, emergency medical technician-paramedic, mobile intensive care nurse, emergency medical services physician assistant, and emergency medical services nurse practitioner~~and emergency medical services instructor credentials shall be valid for a period not to exceed four years and may be renewed if the holder meets the requirements set forth in the rules of the Commission. The Department is authorized to revoke or suspend these credentials at any time it determines that the holder no longer meets the qualifications prescribed.

(b) The Commission shall adopt rules setting forth the qualifications required for credentialing of medical responders, emergency medical technicians, ~~emergency medical technician-defibrillation, emergency medical technician-intermediate, technician-intermediates, emergency medical technician-paramedic, technician-paramedics, emergency medical dispatcher, mobile intensive care nurse, emergency medical services physician assistant, and emergency medical services nurse practitioner~~dispatchers, and emergency medical services instructors.

(c) ~~An individual~~Individuals currently credentialed as an emergency medical technician, ~~emergency medical technician-defibrillation, emergency medical technician intermediate, and emergency medical technician paramedic-paramedic, medical responder, and emergency medical services instructor~~ by the National Registry of Emergency Medical Technicians or by another state where the education/credentialing requirements have been approved for legal recognition by the Department of Health and Human Services, in accordance with rules promulgated by the Medical Care Commission, and who is either currently residing in North Carolina or affiliated with a permitted EMS provider offering service within North Carolina, may be eligible for credentialing as an emergency medical ~~technician-technician, emergency medical technician-intermediate, emergency medical technician-paramedic, medical responder, and emergency medical services instructor~~ without examination. This credentialing shall be valid for a period not to exceed the length of the ~~emergency medical technician-defibrillation, emergency medical technician-intermediate, and emergency medical technician-paramedic~~ applicant's original credentialing or four years, whichever is less.

(d) An individual currently credentialed as an emergency medical dispatcher by a national credentialing agency, or by another state where the education/credentialing requirements have been approved for legal recognition by the Department of Health and Human Services, in accordance with rules issued by the Medical Care Commission, and who is either currently residing in North Carolina or affiliated with an emergency medical dispatcher program approved by the Department of Health and Human Services offering service within North Carolina, may be eligible for credentialing as an emergency medical dispatcher without examination. This credentialing shall be valid for a period not to exceed the length of the applicant's original credentialing or four years, whichever is less.

(e) Duly authorized representatives of the Department may issue temporary credentials with or without examination upon finding that this action will be in the public interest. Temporary credentials shall be valid for a period not exceeding 90 days.

(f) The Department may deny, suspend, amend, or revoke the credentials of a medical responder, emergency medical technician, ~~emergency medical technician-defibrillation, emergency medical technician-intermediate, emergency medical technician-paramedic, emergency medical dispatcher, emergency medical~~

~~services physician assistant, emergency medical services nurse practitioner, or mobile intensive care nurse~~ or emergency medical services instructor in any case in which the Department finds that there has been a substantial failure to comply with the provisions of this Article or the rules issued under this Article. Prior to implementation of any of the above disciplinary actions, the Department shall consider the recommendations of the EMS Disciplinary Committee pursuant to G.S. 143-519. The Department's decision to deny, suspend, amend, or revoke credentials may be appealed by the applicant or credentialed personnel pursuant to the provisions of Article 3 of Chapter 150B of the General Statutes, the Administrative Procedure Act."

**SECTION 2.(c)** G.S. 131E-162 reads as rewritten:

**"§ 131E-162. Statewide trauma system.**

The Department shall establish and maintain a program for the development of a statewide trauma system. The Department shall consolidate all State functions relating to trauma systems, both regulatory and developmental, under the auspices of this program.

The Commission shall adopt rules to carry out the purpose of this Article. These rules shall be adopted with the advice of the State Emergency Medical Services Advisory Council and shall include the operation of a statewide trauma registry, statewide educational requirements fundamental to the implementation of the trauma system. The rules adopted by the Commission shall establish guidelines for monitoring and evaluating the system including standards and criteria for the denial, suspension, voluntary withdrawal, or revocation of credentials for trauma center ~~designation.~~ designation, and the establishment of regional trauma peer review committees. Each regional trauma peer review committee shall be responsible for analyzing trauma patient care data and outcome measures to evaluate the ongoing quality of patient care, system performance, and medical direction within the regional trauma system. The committee membership shall include physicians, nurses, EMS personnel, trauma registrars, and hospital administrators. Review of medical records by the Trauma Peer Review Committee is confidential and protected under G.S. 143-518. A Trauma Peer Review Committee, its members, proceedings, records and materials produced, and materials considered shall be afforded the same protections afforded Medical Review Committees, their members, proceedings, records, and materials under G.S. 131E-95. The rules adopted by the Commission shall avoid duplication of reporting and minimize the cost to hospitals or other persons reporting under this act. The Office of Emergency Medical Services shall be the agency responsible for monitoring system development, ensuring compliance with rules, and overseeing system effectiveness.

With respect to collection of data and educational requirements regarding trauma, rules adopted by the Medical Care Commission shall limit the authority of the Department to hospitals and Emergency Medical Services providers. Nothing in this Article shall be interpreted so as to grant the Department authority to require private physicians, schools, or universities, except those participating in the trauma system, to provide information or data or to conduct educational programs regarding trauma."

**SECTION 2.(d)** G.S. 143-508 is amended by adding the following subdivision to read:

"(13) Establish occupational standards for EMS systems, EMS educational institutions, and specialty care transport programs."

**SECTION 2.(e)** G.S. 143-509(9) reads as rewritten:

**"§ 143-509. Powers and duties of Secretary.**

The Secretary of the Department of Health and Human Services has full responsibilities for supervision and direction of the emergency medical services program and, to that end, shall accomplish all of the following:

- ...
- (9) Promote a means of training individuals to administer life-saving treatment to persons who suffer a severe adverse reaction to ~~insect stings.~~ agents that might cause anaphylaxis. Individuals, upon

successful completion of this training program, may be approved by the North Carolina Medical Care Commission to administer epinephrine to these persons, in the absence of the availability of physicians or other practitioners who are authorized to administer the treatment. This training may also be offered as part of the emergency medical services training program.

...  
" **SECTION 2.(f)** G.S. 143-510 is amended by adding the following new subsection to read:

**"§ 143-510. North Carolina Emergency Medical Services Advisory Council.**

...  
(f) The Council shall elect annually from its membership a chairperson and vice-chairperson upon a majority vote of the quorum present."

**SECTION 2.(g)** G.S. 143-518(a) reads as rewritten:

"(a) Medical records compiled and maintained by the ~~Department~~ Department, hospitals participating in the statewide trauma system, or EMS providers in connection with dispatch, response, treatment, or transport of individual patients or in connection with the statewide trauma system pursuant to Article 7 of Chapter 131E of the General Statutes may contain patient identifiable data which will allow linkage to other health care-based data systems for the purposes of quality management, peer review, and public health initiatives.

These medical records and data shall be strictly confidential and shall not be considered public records within the meaning of G.S. 132-1 and shall not be released or made public except under any of the following conditions:

...

**SECTION 2.(h)** G.S. 143-518(a)(5) reads as rewritten:

"(5) Release is made to a Medical Review Committee as defined in G.S. 131E-95, 90-21.22A, or 130A-45.7 or to a peer review committee as defined in G.S. 131E-108, 131E-155, 131E-162, 122C-30, or 131D-21.1."

**SECTION 2.(i)** G.S. 143-519 reads as rewritten:

**"§ 143-519. Emergency Medical Services Disciplinary Committee.**

(a) There is created an Emergency Medical Services Disciplinary Committee which shall review and make recommendations to the Department regarding all disciplinary matters relating to credentialing of emergency medical services personnel.

(b) The Emergency Medical Services Disciplinary Committee shall consist of ~~five~~ seven members appointed by the Secretary of the Department of Health and Human Services to serve four-year terms. Two of the members shall be currently practicing local EMS physician medical directors. One member each shall be a current physician member of the North Carolina Medical Board, a current EMS administrator, a current EMS educator, and ~~a two~~ currently practicing and credentialed EMS personnel, one of whom shall be an emergency medical technician-paramedic.

(c) In order to stagger the terms of the membership of the Committee, the initial appointment for one of the local EMS physician medical directors and the currently practicing and credentialed emergency medical technician-paramedic shall be for a three-year term. The other three initial appointments and all future appointments shall be for four-year terms.

(d) Any appointment to fill a vacancy on the Committee created by a resignation, dismissal, death, or disability of a member shall be for the balance of the unexpired term.

(e) A majority of the Committee shall constitute a quorum for the transaction of business. The Department of Health and Human Services, Division of Facilities Services, Office of Emergency Medical Services, shall supply all clerical and other services required by the Committee.

(f) The Committee shall elect annually from its membership a chairperson and vice-chairperson upon a majority vote of the quorum present."

**SECTION 3.(a)** Article 15 of Chapter 14 of the General Statutes is amended by adding a new section to read:

**"§ 14-69.3. Arson or other unlawful burning that results in serious injury to a firefighter or emergency medical technician.**

A person is guilty of a Class E felony if the person commits a felony under Article 15 of Chapter 14 of the General Statutes and a firefighter or emergency medical technician suffers serious bodily injury while discharging or attempting to discharge the firefighter's or emergency medical technician's duties on the property, or proximate to the property, that is the subject of the firefighter's or emergency medical technician's discharge or attempt to discharge his or her respective duties. As used in this section, the term 'emergency medical technician' includes an emergency medical technician, an emergency medical technician-intermediate, and an emergency medical technician-paramedic, as those terms are defined in G.S. 131E-155."

**SECTION 3.(b)** If Section 1 of Senate Bill 867 of the 2003 General Assembly is enacted by the 2003 General Assembly, then Section 1 of Senate Bill 867 is repealed.

**SECTION 3.(c)** G.S. 14-49 is amended by adding a new subsection to read:

"(b2) Any person who willfully and maliciously damages, aids, counsels, or procures the damaging of the State Capitol, the Legislative Building, the Justice Building, or any building owned or occupied by the State or any of its agencies, institutions, or subdivisions or by any county, incorporated city or town, or other governmental entity by the use of any explosive or incendiary device or material is guilty of a Class E felony."

**SECTION 4.** This act is effective when it becomes law. Section 3 of this act becomes effective December 1, 2003, and applies to offenses that occur on or after that date.

In the General Assembly read three times and ratified this the 20<sup>th</sup> day of July, 2003.

s/ Beverly E. Perdue  
President of the Senate

s/ Richard T. Morgan  
Speaker of the House of Representatives

s/ Michael F. Easley  
Governor

Approved 5:26 p.m. this 7<sup>th</sup> day of August, 2003