



Guilford County Emergency Services

Chief Tom Mitchell
NC Office of EMS
2701 Mail Service Center
Raleigh, NC 27699

Chief Mitchell,

Please allow this letter to serve as official comments to the memorandum we received, dated June 15, 2016 from Nadine Pfeiffer regarding the proposed revision to 10A NCAC 13P. As an overarching comment, Guilford County agrees with the revisions as proposed. We have several rules that we would like to comment on specifically:

- 10A NCAC 13P .0216 Weapons:
 - We agree to the concept of no weapons on ambulances, except in very specific cases. Specifically, the arming of the majority of EMS providers should be avoided.
 - We do concur with the ability of specially trained personnel/law enforcement affiliated personnel to be allowed to carry a weapon on board an ambulance, if properly secured.
 - The issue for clarification within the rule is the verbiage “whether lethal or non-lethal”. It is believed that this should be more reflective of NC Supreme Court rulings on “dangerous” weapons. Specifically, the majority of EMS providers within the state carry folding knives that are an essential work implement. Nothing in rule should discourage that.
 - The other item for clarification is item (f) with “duly appointed law enforcement officers”. Our attorneys have interpreted that to include armed detention officers. They meet all NCSA standards for firearms, and we believe this wording is adequate for them to legally carry firearms in ambulances when transporting incarcerated subjects.
- 10A NCAC 13P .0506 Practice Settings for EMS Personnel
 - Item (b) seems to try to define “alternative” practice settings, yet allows for the medical direction to be delegated. We question the affiliation to the EMS system, and the scope of practice defined to the level of credential. It appears that this is often functioning within medical offices, clinics, etc., and therefore the provider should be considered a medical office assistant under the medical supervision of the physician, NOT affiliated to the EMS system or EMS credential.
 - The authority for EMS systems clearly resides with County’s, and it would appear that these alternative practice settings’ should be regulated through the County EMS systems as well.

- There has been some conjecture that these alternative practice settings could include “community paramedicine” programs, and we would suggest that these are EMS system functions and should be regulated through the EMS system plans of County’s. Additionally, we would suggest that the Office of EMS consider promulgation of rule specific to the emerging field of “community paramedicine”.
 - Many Community Paramedicine initiatives may be covered under .0506 (a)(4)
- Many positive comments:
 - 10A NCAC 13P 0.0222
 - Much needed rule to define a stretcher bound patient as requiring an ambulance.
 - The American Ambulance Association has a position statement against “stretcher vans”.
 - 10A NCAC 13P .1510
 - Much needed rule for the voluntary surrender of credential or reduction of function.

Sincerely,

James L. Albright, REMT-P
Director, Guilford County Emergency Services