

ALASKA LEGISLATURE COMMITTEE FILES 1993-1994 8672

7833 HOUSE HEALTH EDUCATION & SOCIAL SERVICES

Recommendations

- ◆ Aggressively support and pursue a statewide enhanced 911 telephone system.
- ◆ Extend the emergency call box system to all remaining highway corridors and high risk locations not adequately covered by some other system.
- ◆ *Survey EMS communications capabilities across the state to provide current inventory, leading to a needs assessment.*
- ◆ *Develop and periodically update a State EMS Communications Plan.*
- ◆ Review and plan for possible application of new technology (e.g. land/mobile satellite systems) to address special communications challenges in state.
- ◆ Develop and promote accessible emergency medical dispatch training on a statewide basis.
- ◆ Train all dispatchers involved with EMS calls in emergency medical dispatch.
- ◆ Build interagency communications capabilities through State EMS Communications Plan, funding, and other opportunities.

G. PUBLIC INFORMATION AND EDUCATION

Standard

Public awareness and education about the EMS system is essential to a quality system and is often neglected. Public information and education (PI&E) efforts must serve to enhance the public's role in the system, its ability to access the system, and the prevention of injuries. In many areas, EMS personnel provide system access information and present injury prevention programs which ultimately lead to better utilization of EMS resources and improved patient outcome.

Status

Extensive efforts in public information and education have been developed and implemented throughout Alaska. The State EMS Section has successfully sought and received a number of key prevention grants, including EMS for Children and CDC injury prevention. Efforts have been aimed at targeted areas such as drowning emergencies, child safety, EMS access, and tourism ("Help along the way"). Clearly, one of the strengths of the EMS program is the public information and education and injury prevention programs. At the regional level, activities are also numerous, with the southern region providing PI&E events throughout the state. A range of activities is present from newsletters, PSA's, T.V. and radio announcements, health fairs, and school based programs. Each year the governor and legislature recognize EMS by proclaiming EMS week within Alaska. Other activities include efforts to teach the public and educate legislators about the benefits of a comprehensive EMS program, by the Advisory Committee on EMS, the participation in the Safe Kids campaign, and the Children's Health and Injury Prevention Program (CHIPP). There is strong evidence as to the community support for EMS, including the networking among and between agencies to meet PI&E goals, and cooperative arrangements among the participating agencies. There is a real commitment to provide PI&E throughout the state. This can be seen in the innovative approaches the EMS community institutes to meet the unique needs of the Alaska community and the scope and depth of these programs.

Recommendations

- ◆ *Maintain and expand PI&E efforts at the state and regional levels.*
- ◆ Continue to work on the development of a comprehensive PI&E plan focused on:
 - building an EMS constituency
 - identifying a specific set of PI&E goals (like 70% by '92)
 - developing evaluation criteria for PI&E programs to assess their effectiveness in the community
 - studying and reporting on the cost of injury in Alaska, including health and medical care costs, societal costs and years of potential life lost.
- ◆ *Publicize and create public awareness that trauma is the leading cause of death in Alaska and constitutes a major public health problem. This can be accomplished by using the trauma registry data to:*
 - *target specific trauma prevention activities*
 - *identify the epidemiology of trauma in Alaska and target prevention goals toward the at-risk groups.*
- ◆ Emphasize PI&E regarding EMS in schools, particularly focused on early childhood education and carried forward through all grade levels.

H. MEDICAL DIRECTION

Standard

EMS is a medical care system that includes medical practice as delegated by physicians to non-physician providers who manage patient care outside the traditional confines of office or hospital. As befits this delegation of authority, it is the physician's obligation to be involved in all aspects of the patient care system.

Specific areas of involvement include the following:

- planning and protocols
- on-line medical direction and consultation
- audit and evaluation of patient care.

Status

Alaska EMS standards provide for both off-line and on-line medical direction, as well as some treatment protocols and evaluation of care.

The EMS Section has contracts with two physicians for statewide off-line medical direction. One physician is charged with the responsibility for prehospital medical direction, while the other focuses on trauma system development. Each region has an off-line medical director, some with contracts to provide this service.

All state certified ground and air ambulance services, BLS as well as ALS, are required to have a designated medical director, who acts as the physician sponsor for its EMT's and paramedics. In some regions, this physician is also the regional medical director. In addition, individual EMT's/paramedics, not affiliated with an organized EMS service, are required to be under the sponsorship of a medical director in order to provide advanced life support services.

Regional or service medical directors are expected to provide off-line medical direction, although specific performance based standards do not exist. An excellent example was presented by the regional medical director of the Matanuska-Susitna Borough. Examples of off-line medical direction at the regional or service level include: on-site quarterly reviews, run reviews, yearly assessment of standing orders, and the teaching and testing of EMT's.

A yearly meeting is held between the State prehospital and regional medical directors and other physician sponsors. However, there is not a specific description of the responsibility of the state EMS prehospital medical director, nor clear lines of authority between this position and the regional medical director. An EMS Medical Director's Manual, including an instructional video has been prepared to orient designated off-line medical directors. Although there are some treatment guidelines in the Manual, comprehensive statewide treatment protocols do not exist. There appears to be liability protection for the physician sponsor or off-line medical director for

certified ambulance services.

When possible, on-line medical direction is provided by either a physician or designee. Although emphasis has been placed on improving the communication system, gaps still exist, which make on-line medical direction difficult.

A creative orientation program for all physicians applying for a state license has been developed. As part of this interview process, physicians receive a description of the State EMS Program.

Recommendations

- ◆ The EMS Medical Director's Manual should include updated, nationally recognized standards for medical direction, published by organizations such as the American College of Emergency Physicians and the National Association of Emergency Medical Services Physicians.
- ◆ State comprehensive treatment protocols for both BLS and ALS should be developed. These protocols should serve as minimal criteria that each service should adopt or exceed.
- ◆ *A comprehensive job description for off-line regional or EMS service medical directors should be adopted. This job description should include specific tasks as well as the appropriate line of authority for reporting to the State EMS Medical Director.*
- ◆ *The job description for the State EMS Medical Director should be re-evaluated and clearly outlined. Included should be a description of the lines of authority and accountability, the specific evaluation of all regional or service medical directors, and the appropriate involvement with certification and decertification procedures.*
- ◆ *A statewide standardized run sheet should be developed and required for all certified services. This run sheet should be updated periodically to keep pace with new treatment protocols, drugs, and procedures.*
- ◆ An evaluation of the current laws should be performed to ensure appropriate liability protection for EMS medical direction.
- ◆ *The State should adopt a minimum scope of practice for all EMS providers. Further, the State should adopt a procedure for authorizing optional skills and a mechanism to review and evaluate optional skills or new treatment modalities, and study their effectiveness for statewide applicability.*

I. TRAUMA SYSTEMS

Standard

To provide a quality, effective system of trauma care, each State must have in place a fully functional EMS system. Enabling legislation should exist for the development of the trauma system component of the EMS system. This should include Trauma Center designation (using ACS-COT, APSA-COT and other national standards as guidelines), triage and transfer guidelines for trauma patients, data collection and trauma registry definitions and mechanisms, mandatory autopsies, systems management, and quality assurance for the systems effect on trauma patients. Rehabilitation is an essential component of any statewide trauma system.

Status

There is no Alaska State Trauma Care System Plan. Therefore, integrated trauma care, assuring prompt patient identification and timely delivery to an appropriate facility with an organized response, cannot be guaranteed. The absence of statutory authority for the EMS Section to designate trauma hospitals undermines any attempt to formalize and improve trauma care.

There are, however, some very positive factors in health care in Alaska that could enhance trauma system development. A Trauma System Task Force has been proposed and the Section has appointed a statewide Medical Director for Trauma System development. The needs of the community over the years has resulted in a geographic structure that has made available appropriate human resources at every level, and a rudimentary system of resuscitation and transfer.

The clinic and hospital system that has evolved to provide the current level of care includes primary care facilities, six potential Level III (ACS) facilities, and two potential Level II (ACS) facilities in Anchorage, that could provide tertiary trauma care for the state. Early EMS trauma self assessment evaluations, based on ACS criteria, have confirmed this conclusion. Geography, as well as clinical capabilities, confirm Anchorage as the critical center for trauma care in the state. The importance of initial resuscitation skills to outcome is evidenced by the extensive IHS and civilian training in ATLS. The regionalized administrative structure of the EMS Section is compatible with trauma system development.

It is apparent from testimony that there is a basic misunderstanding of the character and goals of modern trauma systems development, i.e. to provide optimal care within the constraints of available resources. The most important factor in the provision of optimal care is commitment. Because there is a lack of understanding regarding trauma system development, this commitment does not appear to be present at this time.

The core of any trauma care system is the commitment of the tertiary care centers, which is inherently related to the interest and commitment on the part of surgeons in that community. At this time there appears to be no recognition of the importance of commitment to system

development and trauma care on the part of most general surgeons in Anchorage.

The institution of a voluntary trauma registry by the EMS Section and 100% commitment on the part of the state's hospitals is a laudable accomplishment. The extensive involvement of prehospital and hospital staff across the state lends optimism to the possibility of improved interest in trauma systems development in the future.

Recommendations

- ◆ *Provide the Development of Trauma Systems (DOTS) Course to key providers and decision makers in the state, either centrally or on a regional basis.*
- ◆ *The EMS Section must be given statutory authority for System Development and Trauma Hospital Designation.*
- ◆ Provide a State sponsored ACS trauma consultative visit to the two potential Level II hospitals in Anchorage.
- ◆ Use Trauma Registry data to assess current trauma care patterns and outcome in order to define needs for system development and trauma care improvement.
- ◆ *Develop a State Trauma Care Plan whose criteria allow for inclusion of all providers and facilities.*
- ◆ Develop and implement statewide trauma triage, patient delivery, and transfer guidelines and protocols.
- ◆ Obtain statutory authority for mandatory autopsy of all trauma deaths and access to that data for prevention and system evaluation.
- ◆ Define and assure access to rehabilitation services for trauma patients.
- ◆ Establish funding mechanisms for ongoing support of trauma systems and care.

J. EVALUATION

Standard

A comprehensive evaluation program is needed to effectively plan and implement a statewide EMS system. Each EMS system must be responsible for evaluating the effectiveness of services provided adult and pediatric victims of medical or trauma related emergencies. The statewide EMS system should be able to state definitively what impact has been made on the patients served by the system. EMS system managers must be able to evaluate resource utilization, scope of service, patient outcome, and the effectiveness of operational policies, procedures, and protocols. An effective EMS system evaluates itself against pre-established standards and objectives, so that improvements in service, particularly direct patient care, can occur. These requirements are part of an ongoing quality assurance (QA) system to review system performance. The evaluation process should be educational and ongoing. QA reviews should occur at all phases of EMS system management, so that needed policy changes or treatment protocol revisions can be made.

Status

Currently there is not a comprehensive evaluation program for the EMS system in Alaska. Despite this deficiency, limited success has been achieved in certain areas through the determination and commitment of EMS personnel. A primary example is the voluntary trauma registry currently in place. This recently developed statewide trauma registry, including data from every hospital in Alaska, plus Harborview Hospital in Seattle, provides information along the continuum of acute care of the trauma patient. However, data from the trauma registry has not yet been widely distributed or utilized for patient outcome studies.

Another example of attempts to establish an evaluation program was the success of a task force which developed criteria for a uniform statewide run sheet. The run sheet is not mandatory for certified ambulance services and has not yet been widely utilized. One positive outcome was the identification of the need for medical directors at the regional and ambulance service level. This particular identification placed responsibility for quality assurance activities at the regional level. However, preestablished performance standards and quality assurance methodology have not been developed by the state for use at the regional or service level. The lack of uniform data collection and monitoring impedes the development of a comprehensive evaluation program.

One component of the evaluation program recognized by the state is the current testing and certification for EMT's. Although this particular component is recognized, it remains a weak link in the evaluation program since it is not tied to any identifiable standards or routinely reported to instructors or medical directors for appropriate corrective action.

Other recognized components of an evaluation plan exist but in a fragmented fashion and also do not provide consistent feedback or related improvements. The definition and adoption of preestablished statewide system performance standards and program goals is an essential

component of an EMS evaluation system. Other components of a comprehensive evaluation program include the analysis of the annual ambulance survey and reports from medical advisory boards. The recognition of medical directors involvement in the evaluation program is essential as well as linking data bases from different sources.

Recommendations

- ◆ *Develop a comprehensive statewide continuous quality improvement program. The program at a minimum should provide for:*
 - a. *Recognition of the diversity as well as the common features and needs of each region and subregion in Alaska.*
 - b. *The establishment of a common data set to be shared with regional medical directors for use in evaluation.*
 - c. *The use of a standardized run sheet routinely left at the receiving facility.*
 - d. *Performance standards developed for all level of providers.*
- ◆ The plan should outline the responsibilities for state, regional, and service EMS medical directors. Successful regional plans such as the Matanuska-Susitna Borough should be shared statewide.
- ◆ *More assistance with evaluation and correction of problems from regional centers to the more remote areas should be provided.*
- ◆ The comprehensive plan should allow for developmental stages and appropriate implementation for individual components, beginning with focused areas to pilot test in individual regions and remote areas. For example, prehospital performance could be judged against narrowly selected current standards, i.e. effectiveness of airway management or transport and scene times from remote areas.
- ◆ Comprehensive feedback including education and appropriate preventive measures should be provided to all remote areas.
- ◆ Future educational symposiums should include tracks on continuous quality improvement.
- ◆ Continue the pursuit of Section 402 dollars to analyze deaths and injuries related to highways. Only data on deaths or admitted patients should be collected since the collection of outpatient data would not be feasible.
- ◆ Build on the success of voluntary reporting achieved with the trauma registry in other components of the continuous quality improvement program.
- ◆ Seek funding for rural preventable mortality studies.
- ◆ Evaluate and enact, if necessary, statutory protection from disclosure for continuous quality improvement activities.

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ORGANIZATIONS/APPOINTMENTS

EMT-1 Legislative Task Force
Emergency Medical Training Standards Task Force
EMT-1 and EMT-P Curriculum/Testing Standards Task Force
California Trauma Standards Advisory Task Force
California EMS Data Collection and Evaluation Advisory Task Force
San Diego Chapter, American Heart Association
Executive Secretary and Member, Board of Directors
American Public Health Association
American Heart Association
California EMS Administrators
American Red Cross
San Diego Community College District Emergency Medical Care Advisory Committee
Lincoln High School Medical Magnet Emergency Medical Care Advisory Committee
National Committee on Accreditation of Trauma Centers Founding Member
ASTM F.30 Committee on Emergency Medical Services

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ORGANIZATIONS/APPOINTMENTS

National Association of State EMS Directors
Past Chairman, Government Affairs Committee
Past President
American Trauma Society
Founding Member, Past Speaker, House of Delegates
Association for the Advancement of Automotive Medicine
Membership Committee, Member
ASTM Committee F.30 on Emergency Medical Services
USDOT/NHTSA
National Faculty, Development of Trauma Systems Course
EMT Curriculum Revision Project
Member Curriculum Development Group
Institute of Medicine/National Research Council
Member, Pediatric EMS Study Committee
World Association for Emergency and Disaster Medicine
Executive Committee Member
Editorial Reviewer for "Prehospital and Disaster Medicine"
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Virginia Council on Traumatic Brain Injury
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ORGANIZATIONS/APPOINTMENTS

American Board of Surgery

Diplomate

Montana Medical Association

Emergency Medical Services Committee

Montana Trauma Registry Task Force

Montana ATLS, National Faculty

Rocky Mountain Rural Trauma Symposium

Program Director

American College of Surgeons

Fellow

ACS Committee on Trauma

ATLS Committee

AD HOC Committee for Revision of Optimal Resources Document

Chairman, Emergency Services/Prehospital Subcommittee

Centers for Disease Control

Consensus Committee on Trauma Registries

Task Force for Acute Care Systems

Injury Prevention Conference, 1991 Participant

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ORGANIZATIONS/APPOINTMENTS

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Subcommittee F30.02 Personnel Training and Education
Subcommittee F30.03 Organization/Management
Development of Trauma Systems: A State and Community Guide
Project Director
National Trauma System Development Conferences
Project Director
NHTSA Research on Trauma System Development
Project Director
Dade County Trauma Task Force
Project Director
Lifesavers/National Conference on Highway Safety Priorities
National Association of State EMS Directors
Liaison Member
National Council of State EMS Training Coordinators
Liaison Member
Federal Interagency Committee on EMS
Agency Representative
Centers for Disease Control, National Agenda for Injury Control
Trauma Care Systems Panel Member
National Registry of Emergency Medical Technicians
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ORGANIZATIONS/APPOINTMENTS

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Former National Councillor from the State of Georgia for
American College of Emergency Physicians
Former Member-Board of Directors, Georgia Chapter,
American College of Emergency Physicians
Former member-Board of Directors, Oklahoma Chapter,
American College of Emergency Physicians
Former Member-Toxicology and Trauma Committees
American College of Emergency Physicians
Member-Board of Directors, American Trauma Society
Member-Board of Trustees, Emergency Medical Services
Authority
Member-Board of Directors, Oklahoma Chapter,
American College of Emergency Physicians
Chairman-Physicians Advisory Board,
City of Tulsa
Chairman, Institutional Ethics Committee,
St. Francis Hospital
Member, Executive Committee,
American Trauma Society
Chairman, Trauma Committee
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ORGANIZATIONS/APPOINTMENTS

National Association of State EMS Directors
Finance Committee
Past Liaison, American Ambulance Association
Past Liaison, National Council of State EMS Training Coordinators
Past Liaison, American College of Emergency Physicians
Past Liaison, National Registry of Emergency Medical Technicians
American Trauma Society
Steering Committee, Mississippi Division
Mississippi Emergency Medical Technicians Association
Founding/Charter Member
Mississippians for Emergency Medical Services
Founding/Charter Member
President
Mississippi State Paramedic Committee
Mississippi Public Health Association
Past President
Legislative Liaison
JEMS
Contributor
EMS Physicians Text
Contributor
NHTSA Faculty for Development of Trauma Systems

POSITION PAPER

CS FOR SPONSOR SUBSTITUE FOR SENATE BILL 71 (FIN) Am

REVISED APRIL 6, 1993

The major provisions of CS SS SB 71 (FIN) Am for Senate Bill amends AS 18.08. Emergency Medical Services.

- 1) Expand authority of the EMS Section, Department of Health and Social Services to set standards for Mobile Intensive Care Paramedic training programs;
- 2) Expand the authority of the Department of Health and Social Services to address statewide trauma care system development and to establish standards for the certification of trauma centers;
- 3) Provide authority for the Department of Health and Social Services to establish an patient care information system for EMS organizations and hospitals;
- 4) Change the name of the State Advisory Council on Emergency Medical Services to the Alaska Council on Emergency Medical Services, provide that the Council advise the Governor and the Commissioner of Health and Social Services on EMS issues, and specify the types of EMS system providers to be appointed by the Governor;
- 5) Expand the authority of the department to adopt regulations to charge fees for certification and licensing of organizations;
- 6) Provide for certification of emergency medical dispatchers;
- 7) Provide for the disclosure of medical records information to pre-hospital EMS providers for quality of care review and education; and
- 8) Include state certified EMT instructors in the immunity from liability protections listed in AS 18.08.086.

Other provisions of this bill would delete references to the Statewide Health Coordinating Council and health systems agencies, which no longer exist, and delete the words "physician trained" in statutory references to mobile intensive care paramedics (MICP's), to more accurately reflect that MICP's are trained by a combination of physicians, nurses, and other paramedics.

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Currently, under AS 18.08, the EMS Section in the Department of Health and Social Services has the responsibility for the development, implementation, and maintenance of a statewide comprehensive emergency medical services system and has adopted regulations for the certification of basic and advanced level emergency medical technicians (EMT's), EMT instructors, EMT training courses, basic and advanced life support ambulance services, medevac services, critical care air ambulance services, specialty aeromedical transport teams, defibrillator technicians, and Emergency Trauma Technician instructors and courses. A comprehensive planning guide has been developed and periodically updated listing goals and recommendations for a comprehensive, statewide EMS system.

The EMS Section also administers grants to EMS Regions for EMS system development. Most of the money from these grants is used to support regional EMS offices and to provide resources for EMS training, continuing medical education, and certification testing.

The amendments to state EMS legislation provided in Senate Bill No. 71 address recommendations made by a national team of EMS experts who visited Alaska in September, 1992, to conduct a comprehensive review and evaluation of Alaska's EMS system. The review team identified several strengths and a few weaknesses in Alaska's EMS system and noted that, "The current statutes are not comprehensive in that they lack the ability to fully develop, implement, enforce, and monitor the complete development of EMS activities. Such essential elements as facility assessment, categorization of facilities, trauma center designation, emergency medical dispatch training and certification, dedicated system funding for administration and service provision (*sic*), and comprehensive immunity for all system participants is missing." (A copy of this report is available from the EMS Section, DHSS).

Discussion

- 1) Expand authority of the EMS Section, Department of Health and Social Services to set standards for Mobile Intensive Care Paramedic training programs.

Mobile Intensive Care Paramedics are the highest trained members of the pre-hospital EMS system. Currently, the EMS Section certifies the ambulance services that MICP's work with, and EMS Section staff review all initial MICP applications prior to licensing by the Alaska State Medical Board, according to a Memorandum of Agreement. All MICP regulations and amendments adopted by the

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Medical Board were written with input and extensive involvement from EMS Section staff and the Advisory Council on EMS.

The national team of EMS experts which evaluated Alaska's EMS system in September, 1992, recommended that, "Alaska should re-establish EMT-Paramedic (MICP) training within the State." Although the Alaska State Medical Board currently has authority to license mobile intensive care paramedics, according to an Attorney General's opinion, it does not have the authority under existing statutes to license instructors or paramedic courses in Alaska. By expanding the authority of the EMS Section, DHSS, a process could be established to certify paramedic instructors and courses.

- 2) Expand the authority of the Department of Health and Social Services to address statewide trauma care system development and to establish standards for the certification of trauma centers.

Traumatic injury, both intentional and unintentional combined, is still the number one cause of death and disability in Alaska. To address this serious public health problem requires a comprehensive statewide trauma care system focusing on three major components: injury prevention, trauma treatment, and rehabilitation. According to a national consensus standard developed by the National Highway Traffic Safety Administration: "To provide a quality, effective system of trauma care, each state must have in place a fully functional EMS system. Enabling legislation should exist for the development of the trauma system component of the EMS system. This should include Trauma Center designation (using American College of Surgeons Committee on Trauma, American College of Emergency Physicians Committee on Trauma, and other national standards as guidelines), triage and transfer guidelines for trauma patients, data collection and trauma registry definitions and mechanisms, mandatory autopsies, systems management, and quality assurance for the system's effect on trauma patients. Rehabilitation is an essential component of any statewide trauma system."

Currently, almost one-half of the states have the authority to designate trauma centers. According to an Attorney General's opinion, the Alaska Department of Health and Social Services currently does not have this authority. Under this bill, the department would have

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the authority to establish standards for various levels of trauma care centers, and hospitals and clinics could voluntarily decide to apply for certification. Applications for certification at a particular level of trauma center would demonstrate a commitment of medical care facilities to a certain standard of care, and it would help pre-hospital care providers, EMS medical directors, and others to determine the levels of capabilities of various facilities throughout the state. A statewide task force recently has been formed to help set trauma care standards for prehospital emergency medical services and medical facilities throughout Alaska.

- 3) Provide the authority to the Department of Health and Social Services to establish an EMS patient care information system and for EMS organizations and hospitals.

Most of a comprehensive EMS patient care information system has already been developed, but at this time participation is voluntary. A statewide trauma registry has been developed and all 25 acute care hospitals in Alaska have agreed to participate. This system collects data on all traumatic injury patients whose injuries are serious enough to result in hospitalization or death. Data is used for quality of care review and to study the epidemiology of serious injuries so injury prevention programs can be developed and evaluated. An annual survey of pre-hospital emergency medical services also is conducted, with approximately 75% to 80% of Alaska's EMS organizations providing data on numbers and types of responses, available resources, etc.

- 4) Change the name of the Advisory Council on Emergency Medical Services to the Alaska Council on Emergency Medical Services, provide that the Council advise the Governor and the Commissioner of Health and Social Services, and mandate a particular mix of providers and consumers.

The Advisory Council on Emergency Medical Services was established in 1977 under AS 18.08.020. Eleven members are appointed by the Governor, of which four must be consumers. Current legislation does not specify the types of providers who should be appointed. Recognizing that the EMS system includes physicians, nurses, paramedics, EMT's, etc., it seems appropriate that the State EMS Council should include representatives from all

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of these provider groups. The Council also addresses some issues which go beyond the authority of the Department of Health and Social Services, such as EMS radio communication systems, 911 central access numbers, medical aspects of disaster response, etc.

- 5) Expand the authority of the Department of Health and Social Services to charge fees for certification and licensing of organizations.

Currently the EMS Section charges fees for certification testing. To keep costs to the state on this legislation as low as possible, it would be necessary for the department to charge fees to implement the new requirements of this bill. For example, if it is determined that a site review team is necessary in order to verify that a hospital meets a certain level of trauma center criteria, the department may require the applicant to pay for all or part of the cost of the site visit. Hospitals and other medical providers may charged fees to support the statewide data collection system, such as the Statewide Trauma Registry.

- 6) Certification of Emergency Medical Dispatchers.

In recent years, new courses have been developed to provide specialty training for dispatchers of emergency medical services. This training includes pre-arrival instructions to callers, so certain types of first aid procedures can be initiated by bystanders or family members prior to the arrival of the ambulance. Expanding the authority of the EMS Section to certify these people would provide them with similar immunity from liability protections that EMT's and mobile intensive care paramedics already have, and it may provide an incentive for more dispatchers to receive this training.

- 7) Provide for disclosure of medical records information to pre-hospital EMS providers for quality of care review and education.

Currently, Alaska law does not address the issue of providing hospital medical records information to pre-hospital providers. This would help clarify the legalities of this issue for EMS medical directors who need to use medical records information to give feedback to pre-hospital EMS providers in order to review the care that was provided to a patient. It also would clarify

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the issues pertaining to the confidentiality of this data.

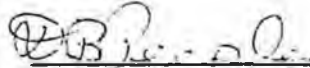
- 8) Include state certified EMT instructors in the immunity from liability protections listed in AS 18.08.086.

Recently, the University of Alaska Fairbanks Risk Management Office established a requirement that contract EMT Instructors must carry malpractice insurance to cover the possibility of injury to students during EMT training classes. This insurance is expensive, difficult to obtain, and may result in a reduction in the number of EMT Instructors willing to teach courses on a part time, contractual basis.

Position

The Department of Health and Social Services strongly supports passage of CS for Sponsor Substitute for Senate Bill No. 71 FIN, (am) because it would give the department the authority to fully implement, enforce, and monitor the continued development of a comprehensive Emergency Medical Services system in Alaska, and it should provide the direction to further improvements in Alaska's EMS system for the benefit of all EMS patients.

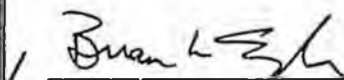
Recommended By:



Peter M. Nakamura, MD, MPH
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4/6/93
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Theodore A. Mala, MD, MPH
Commissioner
Department of Health & Social Services

4/6/93
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INTERIOR REGION EMERGENCY MEDICAL SERVICES COUNCIL, INC.

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Date: April 6, 1993

TO: Members of House of Representatives
Health, Education and Social Services Committee

From: Craig Lewis, Executive Director
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Subject: CS for SS for Senate Bill 71

It is our understanding CS for SS Senate Bill 71 will be coming before your Committee on April 7. We would like to ask for your support, with qualifications, for this bill.

The Board of Directors of Interior Region EMS believes that this legislation appropriately addresses many of the weak areas outlined in the recent state-wide review of the Emergency Medical Services system completed by the National Highway Traffic Safety Administration-EMS Assessment Program.

One of the primary concerns addressed by this legislation is the increased need for trauma training and a higher level of statewide monitoring of trauma events. We agree that is a valid need, however CS for SS Senate Bill 71 as proposed, has a major flaw regarding this issue. It will place a statute requirement without providing additional funds to meet that requirement. When SB 71 was initially introduced, it included a \$200,000 fiscal note. That note was reduced to zero in the Senate Finance Committee proceedings. We seek your support in mandating increased trauma training for EMS providers and a higher level of statewide monitoring of trauma events. We also request that your Committee includes a means of funding for the regional centers to implement this vital program. In this process, it is also paramount that this funding source be a perpetual one. The statute does not address a single year program or a single year need. Its requirements must be met in the future as well as in FY 94.

An additional area of concern the IREMSC Board of Directors would like to see addressed is the proposed revision of Section 12 AS 18.08.030 in SB 71. This includes

deletion of the mandated geographical representation on the Advisory Council on EMS. This change could reduce the vital contributions of rural and cross-cultural representation the Advisory Council currently possess. While the proposed change incorporates the assurance that the Governor will maintain "appropriate geographical equity", it does not define what "appropriate geographical equity" means. In the past, judicial boundaries were used to select state-wide representatives. We would like to see that mandate remain.

Of further concern is the reduction of Emergency Medical Services representation, to be replaced by clinical representatives (doctors, nurses and a hospital administrator). The Advisory Council on Emergency Medical Services's primary goal revolves around the planning and implementation of a statewide emergency medical services system, of which the prehospital care providers are a main component. While it is important to include clinical practitioners in this process, it is equally important to maintain a balance of representation for the prehospital care provider.

We must emphasize that overall we support SB 71 and ask that your committee support it as well. The concerns we address are ones that can be worked out, with your assistance. In summary, that assistance could include:

- 1) Adding a minimum \$150,000 to the grants section of the fiscal note for the provision of emergency medical services. Failing to recognize that there are costs associated with meeting the additional requirements places the providers in jeopardy. Also it is important to include funding for a position in the State MS Office, DHSS, that will interact with hospitals and compile information provided by those hospitals that meet the criteria established in the legislation for a Trauma Care Hospital.
- 2) Insure that funding is perpetual to guarantee that the mandated program continues to function appropriately in the future.
- 3) Insure that a balance of MS providers, rural and cross-cultural representatives is maintained on the Advisory Council by continuing with the current use of judicial boundaries to select representatives and maintaining, at a minimum, the current number of MS representatives on the Council.

We appreciate your assistance in supporting a high quality emergency medical services system in the State.

Letter of Intent for SS for Senate Bill 71

Letter of Intent

It is the intent of the legislature that the department will use a computerized database program for the collection of trauma data. A priority in designing the system should be ease of use for pre-hospital and hospital facilities in providing information to the database through their own use of standard desktop software programs. It is further the intent of the legislature that the trauma injury data collection be eventually integrated with a broader effort which includes epidemiology and other state health information.

SENATE

Adopted - 3/24

Senate Letter of Intent

SENATOR LOREN LEMAN

Northwest Anchorage

311 "C" Street Anchorage, AK 99503 561-7614 During Session: State Capitol Juneau, AK 99801 463-2095

CSSSSB71(FIN): An Act relating to emergency medical services; and repealing obsolete references to the Statewide Health Coordinating Council and health systems agencies.

SPONSOR STATEMENT

This legislation allows the Department of Health and Social Services to set standards for Mobile Intensive Care Paramedic training programs in Alaska.

Because traumatic injury continues to be the number one killer of Alaskans, it is important to support a statewide trauma care system. SS SB71 allows the department to regulate VOLUNTARY compliance for trauma centers.

The patient care information system is an efficient method of evaluating standards of care, quality of care and modifies training programs to meet geographic needs. Injury prevention programs can be planned in conjunction with these data.

The EMS program in Alaska crosses all geographic boundaries. There is broad support for this legislation.

Sponsor Statement

Position Paper

CS SS SB 71 (FIN) Am

The major provisions of CS SS SB 71 (FIN) Am for Senate Bill amends AS 18.08. Emergency Medical Services.

- 1) Expand authority of the EMS Section, Department of Health and Social Services to set standards for Mobile Intensive Care Paramedic training programs;
- 2) Expand the authority of the Department of Health and Social Services to address statewide trauma care system development and to establish standards for the certification of trauma centers;
- 3) Require the Department of Health and Social Services to establish an EMS patient care information system and require EMS organizations and hospitals to provide data;
- 4) Change the name of the State Advisory Council on Emergency Medical Services to the Alaska Council on Emergency Medical Services, provide that the Council advise the Governor and the Commissioner of Health and Social Services on EMS issues, and specify the types of EMS system providers to be appointed by the Governor;
- 5) Expand the authority of the department to adopt regulations to charge fees for certification and licensing of organizations;
- 6) Provide for certification of emergency medical dispatchers;
- 7) Provide for the disclosure of medical records information to pre-hospital EMS providers for quality of care review and education; and
- 8) Include state certified EMT instructors in the immunity from liability protections listed in AS 18.08.086. Other provisions of this bill would delete references to the Statewide Health Coordinating Council and health systems agencies, which no longer exist, and delete the words "physician trained" in statutory references to mobile intensive care paramedics (MICP's), to more accurately reflect that MICP's are trained by a combination of physicians, nurses, and other paramedics.

POSITION PAPER

STATE OF ALASKA ★ DEPARTMENT OF HEALTH & SOCIAL SERVICES

Currently, under AS 18.08, the EMS Section in the Department of Health and Social Services has the responsibility for the development, implementation, and maintenance of a statewide comprehensive emergency medical services system and has adopted regulations for the certification of basic and advanced level emergency medical technicians (EMT's), EMT instructors, EMT training courses, basic and advanced life support ambulance services, medevac services, critical care air ambulance services, specialty aeromedical transport teams, defibrillator technicians, and Emergency Trauma Technician instructors and courses. A comprehensive planning guide has been developed and periodically updated listing goals and recommendations for a comprehensive, statewide EMS system.

The EMS Section also administers grants to EMS Regions for EMS system development. Most of the money from these grants is used to support regional EMS offices and to provide resources for EMS training, continuing medical education, and certification testing.

The amendments to state EMS legislation provided in Senate Bill No. 71 address recommendations made by a national team of EMS experts who visited Alaska in September, 1992, to conduct a comprehensive review and evaluation of Alaska's EMS system. The review team identified several strengths and a few weaknesses in Alaska's EMS system and noted that, "The current statutes are not comprehensive in that they lack the ability to fully develop, implement, enforce, and monitor the complete development of EMS activities. Such essential elements as facility assessment, categorization of facilities, trauma center designation, emergency medical dispatch training and certification, dedicated system funding, or administration and service provision (sic), and comprehensive immunity for all system participants is missing." (A copy of this report is available from the EMS Section, DHSS).

Discussion

- 1) Expand authority of the EMS Section, Department of Health and Social Services to set standards for Mobile Intensive Care Paramedic training programs.

Mobile Intensive Care Paramedics are the highest trained members of the pre-hospital EMS system. Currently, the EMS Section certifies the ambulance services that MICP's work with, and EMS Section staff review all initial MICP applications prior to licensing by the Alaska State Medical Board, according to a Memorandum of Agreement. All MICP regulations and amendments adopted by the Medical Board were written with input and extensive

POSITION PAPER

STATE OF ALASKA ★ DEPARTMENT OF HEALTH & SOCIAL SERVICES

involvement from EMS Section staff and the Advisory Council on EMS.

The national team of EMS experts which evaluated Alaska's EMS system in September, 1992, recommended that, "Alaska should re-establish EMT-Paramedic (MICP) training within the State." Although the Alaska State Medical Board currently has authority to license mobile intensive care paramedics, according to an Attorney General's opinion, it does not have the authority under existing statutes to license instructors or paramedic courses in Alaska. By expanding the authority of the EMS Section, DHSS, a process could be established to certify paramedic instructors and courses.

- 2) Expand the authority of the Department of Health and Social Services to address statewide trauma care system development and to establish standards for the certification of trauma centers.

Traumatic injury, both intentional and unintentional combined, is still the number one cause of death and disability in Alaska. To address this serious public health problem requires a comprehensive statewide trauma care system focusing on three major components: injury prevention, trauma treatment, and rehabilitation. According to a national consensus standard developed by the National Highway Traffic Safety Administration: "To provide a quality, effective system of trauma care, each state must have in place a fully functional EMS system. Enabling legislation should exist for the development of the trauma system component of the EMS system. This should include Trauma Center designation (using American College of Surgeons Committee on Trauma, American College of Emergency Physicians Committee on Trauma, and other national standards as guidelines), triage and transfer guidelines for trauma patients, data collection and trauma registry definitions and mechanisms, mandatory autopsies, systems management and quality assurance for the system's effect on trauma patients. Rehabilitation is an essential component of any statewide trauma system."

Currently, almost one-half of the states have the authority to designate trauma centers. According to an Attorney General's opinion, the Alaska Department of Health and Social Services currently does not have this authority. Under this bill, the department would have the authority to establish standards for various levels of trauma care centers, and hospitals and clinics could

POSITION PAPER

STATE OF ALASKA ★ DEPARTMENT OF HEALTH & SOCIAL SERVICES

voluntarily decide to apply for certification. Applications for certification at a particular level of trauma center would demonstrate a commitment of medical care facilities to a certain standard of care, and it would help pre-hospital care providers, EMS medical directors, and others to determine the levels of capabilities of various facilities throughout the state. A statewide task force recently has been formed to help set trauma care standards for prehospital emergency medical services and medical facilities throughout Alaska.

- 3) Require the Department of Health and Social Services to establish an EMS patient care information system and require EMS organizations and hospitals to provide data.

Most of a comprehensive EMS patient care information system has already been developed, but at this time participation is voluntary. A statewide trauma registry has been developed and all 25 acute care hospitals in Alaska have agreed to participate. This system collects data on all traumatic injury patients whose injuries are serious enough to result in hospitalization or death. Data is used for quality of care review and to study the epidemiology of serious injuries so injury prevention programs can be developed and evaluated. An annual survey of pre-hospital emergency medical services also is conducted, with approximately 75% to 80% of Alaska's EMS organizations providing data on numbers and types of responses, available resources, etc.

Under this proposed legislation, participation in these patient care information systems would be mandatory rather than voluntary.

- 4) Change the name of the Advisory Council on Emergency Medical Services to the Alaska Council on Emergency Medical Services, provide that the Council advise the Governor and the Commissioner of Health and Social Services, and mandate a particular mix of providers and consumers.

The Advisory Council on Emergency Medical Services was established in 1977 under AS 18.08.020. Eleven members are appointed by the Governor, of which four must be consumers. Current legislation does not specify the types of providers who should be appointed. Recognizing that the EMS system includes physicians, nurses, paramedics, EMT's, etc., it seems appropriate that the State EMS Council should include representatives from all

POSITION PAPER

STATE OF ALASKA ★ DEPARTMENT OF HEALTH & SOCIAL SERVICES

of these provider groups. The Council also addresses some issues which go beyond the authority of the Department of Health and Social Services, such as EMS radio communication systems, 911 central access numbers, medical aspects of disaster response, etc.

- 5) Expand the authority of the Department of Health and Social Services to charge fees for certification and licensing of organizations.

Currently the EMS Section charges fees for certification testing. To keep costs to the state on this legislation as low as possible, it would be necessary for the department to charge fees to implement the new requirements of this bill. For example, if it is determined that a site review team is necessary in order to verify that a hospital meets a certain level of trauma center criteria, the department may require the applicant to pay for all or part of the cost of the site visit. Hospitals and other medical providers also would be charged fees to support the statewide data collection system, such as the Statewide Trauma Registry.

- 6) Certification of Emergency Medical Dispatchers.

In recent years, new courses have been developed to provide specialty training for dispatchers of emergency medical services. This training includes pre-arrival instructions to callers, so certain types of first aid procedures can be initiated by bystanders or family members prior to the arrival of the ambulance. Expanding the authority of the EMS Section to certify these people would provide them with similar immunity from liability protections that EMT's and mobile intensive care paramedics already have, and it may provide an incentive for more dispatchers to receive this training.

- 7) Provide for disclosure of medical records information to pre-hospital EMS providers for quality of care review and education.

Currently, Alaska law does not address the issue of providing hospital medical records information to pre-hospital providers. This would help clarify the legalities of this issue for EMS medical directors who need to use medical records information to give feedback to pre-hospital EMS providers in order to review the care that was provided to a patient. It also would clarify the issues pertaining to the confidentiality of this data.

POSITION PAPER

STATE OF ALASKA ★ DEPARTMENT OF HEALTH & SOCIAL SERVICES

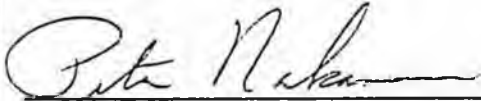
- 8) Include state certified EMT instructors in the immunity from liability protections listed in AS 18.08.086.

Recently, the University of Alaska Fairbanks Risk Management Office established a requirement that contract EMT Instructors must carry malpractice insurance to cover the possibility of injury to students during EMT training classes. This insurance is expensive, difficult to obtain, and may result in a reduction in the number of EMT Instructors willing to teach courses on a part time, contractual basis.

Position

The Department of Health and Social Services strongly supports passage of Sponsor Substitute for Senate Bill No. 71, because it would give the department the authority to fully implement, enforce, and monitor the continued development of a comprehensive Emergency Medical Services system in Alaska, and it should provide the direction to further improvements in Alaska's EMS system for the benefit of all EMS patients.

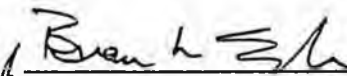
Recommended By:



Peter M. Nakamura, MD, MPH
Director
Division of Public Health

3/30/93
Date

Approved By:



Theodore A. Mala, MD, MPH
Commissioner
Department of Health & Social Services

4/1/93
Date

SSSB 71: "An Act relating to emergency medical services; and repealing obsolete references to the Statewide Health Coordinating Council and health systems agencies."

SSSB 71 seeks to remove the wording "physician-trained" when referring to a mobile intensive care paramedic. This bill also addresses other changes, however, only Sections 1-6 deal with Occupational Licensing; therefore, this position paper only addresses those sections.

Mobile intensive care paramedics will continue to be "physician-trained," however, the training of paramedics is not limited to only physicians; therefore, this bill seeks to remove unnecessary language.

The department supports the change in terminology referenced in SSSB 71 (Sections 1-6) and recommends its passage.

Paul Fuhs for

Paul Fuhs, Commissioner

3-4-93

Date

dgl/105pp.ol

ALASKA
ADVISORY COUNCIL ON EMERGENCY
MEDICAL SERVICES

ACEMS
P.O. Box 110616
Juneau, Alaska 99811-0616
Phone: (907) 465-3027



An Alaskan tradition:
Neighbor helping neighbor

March 5, 1993

Senator Loren Leman
Alaska State Senate
State Capitol
Room 113
Juneau, AK 99801-1182

Dear Senator Leman;

I am writing to support sponsor substitute for Senate Bill 71 that you have introduced in the legislature this session. I consider this a very important piece of legislation in that this bill would provide much needed updated legislation that will facilitate the work of the Emergency Medical Services Section and the Governor's Advisory Council on Emergency Medical Services. Technology and standards of care have changed significantly over the last ten years and it is important to keep the legislation that governs the administration of a statewide emergency medical services system updated to reflect those changes.

Changes in trauma care, emergency medical dispatching, training programs at various levels, and the ability to develop and implement programs are just some of the issues that were identified in a comprehensive review of Alaska's emergency medical services system in September of 1992. These are changes that your proposed legislation would provide for.

I would like to personally thank you and your staff for the time and effort you have put forth to assist us in our effort to update this legislation. These changes will enable us to more effectively plan for the emergency medical services system that the residents of the State of Alaska depend on. If I can be of any assistance or answer any question please call myself at 262-4792 or Mark Johnson at 465-3027.

Sincerely

A handwritten signature in black ink that reads "Steven O'Connor". The signature is written in a cursive style.

Steven O'Connor, Chair
Governors Advisory Council on
Emergency Medical Services

cc: Representative Gary Davis
Representative Mike Navarre
Representative Gail Phillips
Senator Suzanne Little
Senator Judith Salo

Letters of Support

Steven J. Kilkeny, M.D., F.A.C.S.
GENERAL VASCULAR & THORACIC SURGERY

3300 PROVIDENCE DR. SUITE 311
ANCHORAGE, ALASKA 99508

TELEPHONE (907) 261-4808

March 2, 1993

Senator Loren Leman
State Capitol Room 113
Juneau, Alaska 99801-1182

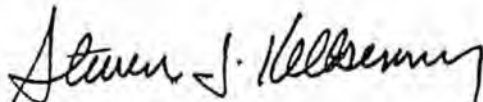
Dear Loren:

I am writing to you to commend you and support you on Senate Bill 71. This Bill will contain some important amendments to the EMS law in the State of Alaska.

As the scope of emergency medical services broaden in the State it is imperative that we have responsible and legitimate representation on the advisory committees to the State Legislature and to the Executive Branch.

I applaud you on your efforts and wish you the best of luck.

Sincerely,



Steven J. Kilkeny, M.D., F.A.C.S.
Chairman, American College of Surgeons'
Committee on Trauma
State of Alaska

SJK/mb

Southern Region
EMERGENCY
Medical Services Council, Inc.

March 3, 1993

Senator Loren Leman
State Capitol, Room 113
Juneau, AK 99801-1182

Dear Senator Leman:

I am writing in support of Senate Bill No. 71. This bill will bring the Alaska Emergency Medical Services statutes more into alignment with national standards, and allow for future system development.

The National Highway Traffic Safety Administration's Technical Assistance Team (TAT) review last September reported on a strong and unique EMS system in Alaska. They made several recommendations relating to legislation. Some of those are addressed in this bill. Your bill will enable us to guide the development of a comprehensive trauma system, train and certify dispatchers, provide immunity from liability for EMT instructors, set standards for paramedic training programs, and more. I have no doubt the writers of the TAT report would applaud your efforts on behalf of emergency medical services.

We at Southern Region EMS Council extend our full support of SB 71, and will gladly work with you to facilitate its passage. Please contact my office if we can be of any help. Thank you for your support of Emergency Medical Services, in Anchorage and around the state.

Sincerely,



Ronni Sullivan
President/Executive Director

SB71

ALASKA STATE

HOSPITAL & NURSING HOME

ASSOCIATION

March 2, 1993

Senator Steve Reiger, Chair
Health, Education & Social
Services Committee
Alaska State Senate
State Capitol
Juneau, AK 99801-1182

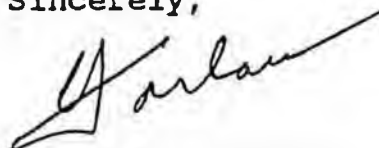
Dear Senator Reiger:

The community hospital and nursing home members of ASHNHA would like to offer their support for the passage of SB 71.

SB 71 broadens the scope of responsibility of the Department of Health & Social Services Section on Emergency Medical Services. It strengthens the EMT educational programs, revises the Council on Emergency Medical Services, and cleans up some outdated statutory language.

We think SB 71 supports that important work.

Sincerely,



Harlan R. Knudson
President/CEO

cc: ✓ Senator Leman
Annette Kreitzer



Southeast Region Emergency Medical Services Council
207 Moller Drive, Room 113 Sitka, Alaska 99835 907-747-8005

RESOLUTION

Whereas the emergency medical services system in Alaska has evolved since its inception in the mid-nineteen seventies;

Whereas the emergency medical services system is inclusive of all prehospital care providers including mobile intensive care paramedics and emergency medical dispatchers;


Whereas emergency medical technician instructors are a critical component in assuring the maintenance of an emergency medical services system and protection from liability encourages participation in emergency medical technician training activities;

Whereas a data set describing the incidence of emergency medical response, patient treatment and patient outcome data is vital to proving the effectiveness of and ensuring the quality of emergency medical care;

Whereas standards for trauma care facilities are instrumental to ensure the quality of patient care provided in Alaska;

Therefore be it resolved that Sponsor Substitute 71 and the fiscal note funding EMS grants to regions and the Trauma Registry be provided full support.

-Approved by unanimous vote by the Southeast Region Emergency Medical Services Council in Sitka on this 15th day of March, 1993.


Shawn L Newell
Executive Director



Alaska Native Medical Center
P.O. Box 107741
Anchorage, Alaska 99510-7741

March 5, 1993

MAR 15 1993

Senator Loren Lemam
319 Seward Street, #11
Juneau, Alaska 99801

Dear Senator Lemam:

I am writing to you as the EMS Medical Director for the Indian Health Service here in Alaska to support Senate Bill 71. More specifically, we here in Alaska Area are committed to the development of a Statewide Trauma System developed along the lines of the National Highway and Traffic Safety Administration consensus. We have been working for a number of years with the State EMS office and with the private hospitals to provide emergency care in both rural Alaska and also serving as a referral center here in Anchorage. The Alaska EMS system has been a great success story. The State of Alaska system and the IHS system here have served as examples for other States and Indian Health Service Emergency Systems. Our next step must be to continue to improve the system. The designation of trauma centers and the system in the establishment of a Statewide Trauma system with established triage and transfer guidelines is mandatory if we are to continue our leadership in the Emergency Medical Systems. Trauma is a leading cause of death among Native Americans in Alaska and we would like to thank you for your sponsorship in this most needed and important legislation.

If you have any questions, please feel free to call me.

Shely,

Frank Sacco

Frank Sacco, M.D.
EMS Medical Director
Alaska Native Medical Center
(907) 257-1284



Southeast Region Emergency Medical Services Council
207 Moller Drive, Room 113 Sitka, Alaska 99835 907-747-8005

3 March 1993

The Honorable Senator Loren Leman
Alaska State Legislature
P.O. Box V (MS 3100)
Juneau, AK 99811

Dear Senator Leman,

I am writing on behalf of Southeast Region Emergency Medical Services Council in support of Senate Bill 71, "An act relating to emergency medical services...". I would like to thank you for the interest and commitment you have shown to EMS in Alaska through your sponsorship of this important piece of legislation.

In addition to removing references to obsolete organizations within the state, this legislation addresses several weaknesses in the state emergency medical services system as identified by the National Highway Traffic Safety Administration Technical Assistance Team during their state EMS system review last September.

The legislation appropriately authorizes the State EMS Section, DHSS, to set standards for paramedic and emergency medical dispatch training programs, a logical extension of current authority to set standards for other prehospital EMS training programs. The legislation also extends immunity from liability provisions to include EMT Instructors, critical to assuring that EMT training remains accessible in the state. Provisions to allow appropriate access to patient care and outcome data support the physician/care-provider quality review process that drives improvement of EMS care.

Proposed changes to the Advisory Council on EMS strengthen that organization by more clearly defining the council's composition and by extending the line of communication authority to the Governor. It is critical that the council retain its nature of representing a broad spectrum of the EMS community: rural, urban, prehospital, facility-based, native, non-native, etc. The legislation goes a long way toward that end, but leaves undefined at least two areas: defining appropriate geographic representation and assuring representation from rural Alaska. It is my request that the legislation be amended to include verbiage addressing these omissions.

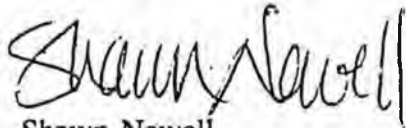
Senator Leman 3/4/93 - 2

Each geographic region of the state has unique conditions and concerns that would likely not be considered if left unrepresented. Defining how to determine appropriate geographic representation is important to eliminate the chance that an area might be overlooked. The methodology used previously to assure geographic representation was through appointing one consumer representative from each judicial district. Since consumer representation was reduced to three, that option no longer exists. A proposal that would address our concern would be to add to Sec. 18.08.030, page 5, line 28 the phrase: "through assuring all judicial districts are represented on the council," following "appointments" and preceding "and shall appoint".

Rural Alaska also has its own distinctly unique needs and concerns with regard to EMS, and should also be assured representation on the council. A suggestion would be to add to section 18.08.030, page 6, line 3 "at least one of whom resides in a community not connected by finished road to a community having a hospital" following "providers" and preceding ";". (Michael Cushing, Research Analyst, Department of Regional Affairs, 465-4751 assisted me in developing this phrase and is available as a resource should you wish to pursue this recommendation.)

These two points are the only concerns Southeast Region EMS Council has with regard to this legislation. It is an excellent piece of work that builds the foundation for providing a solid EMS system in Alaska. Please contact me if I, or my organization, can assist you in any way during the upcoming hearing and approval process.

Sincerely,



Shawn Newell
Executive Director

SB 71

SENATE BILL NO. 71 by Senator Leman, entitled:

"An Act relating to emergency medical services; and repealing obsolete references to the Statewide Health Coordinating Council and health systems agencies."

was read the first time and referred to the Health, Education and Social Services Committee, the Labor and Commerce Committee and the Finance Committee.

February 26, 1993

SENATE JOURNAL

p. 503

SB 71

SPONSOR SUBSTITUTE FOR SENATE BILL NO. 71 by Senators Leman, Ellis, entitled:

"An Act relating to emergency medical services; and repealing obsolete references to the Statewide Health Coordinating Council and health systems agencies."

was read the first time and referred to the Health, Education and Social Services, Labor and Commerce and Finance Committees.

March 9, 1993

SENATE JOURNAL

p. 688

SB 71

The Health, Education and Social Services Committee considered SPONSOR SUBSTITUTE FOR SENATE BILL NO. 71 "An Act relating to emergency medical services; and repealing obsolete references to the Statewide Health Coordinating Council and health systems agencies." Signing no recommendation: Senator Rieger, Chair, Senator Sharp. Signing do pass: Senators Duncan, Ellis, Leman.

Fiscal note from Department of Health and Social Services and zero fiscal note from Department of Commerce and Economic Development published today.

SPONSOR SUBSTITUTE FOR SENATE BILL NO. 71 was referred to the Labor and Commerce Committee.

March 10, 1993

SENATE JOURNAL

p. 723

SB 71

Senator Kelly, Chair, moved and asked unanimous consent that the Labor and Commerce Committee referral be waived on SPONSOR SUBSTITUTE FOR SENATE BILL NO. 71 "An Act relating to emergency medical services; and repealing obsolete references to the Statewide Health Coordinating Council and health systems agencies." Without objection, it was so ordered.

SPONSOR SUBSTITUTE FOR SENATE BILL NO. 71 was referred to the Finance Committee.

March 22, 1993

SENATE JOURNAL

p. 895

SB 71

The Finance Committee considered SPONSOR SUBSTITUTE FOR SENATE BILL NO. 71 "An Act relating to emergency medical services; and repealing obsolete references to the Statewide Health Coordinating Council and health systems agencies" and recommended it be replaced with

Senate Action on SB 71

Yeas: Frank, Halford, Jacko, Kelly, Leman, Miller, Pearce, Phillips, Rieger, Sharp, Taylor

Nays: Adams, Donley, Duncan, Ellis, Kerttula, Lincoln, Little, Salo, Zharoff

and so, CS FOR SPONSOR SUBSTITUTE FOR SENATE BILL NO. 71(FIN) failed to advance to third reading.

March 23, 1993

SENATE JOURNAL

p. 916

SB 71

Senators Taylor, Duncan, Donley, Kerttula, Little, Zharoff moved and asked unanimous consent that they be shown as cosponsors on CS FOR SPONSOR SUBSTITUTE FOR SENATE BILL NO. 71(FIN) "An Act relating to emergency medical services; and repealing obsolete references to the Statewide Health Coordinating Council and health systems agencies." Without objection, it was so ordered.

Bill/Resolution History 05:01 PM 03/23/93 Page 1
 BILL: SB 71 SHORT TITLE: EMERGENCY MEDICAL SERVICES SYSTEM
 BILL VERSION: CSSSSB 71(FIN)
 SPONSOR(S): SENATOR(S) LEMAN, Ellis, Taylor, Duncan, Donley, Kerttula, Little
 Zharoff

CURRENT STATUS: 3RD RDG, 3/24 CAL(S) STATUS DATE: 03/23/93

TITLE: "An Act relating to emergency medical services; and repealing obsolete references to the Statewide Health Coordinating Council and health systems agencies."

Selection=>

PF1 PF2 PF3 PF4 PF5 PF6 PF7 PF8 PF9 PF10 PF11 PF12
 HELP SUBJ EXIT MENU TEXT PRINT BWD FWD FISCAL FIRST LAST QUIT
 SB 71 Bill/Resolution Floor Action Page 2 of 3

Current Status: 3RD RDG, 3/24 CAL(S)

	Jrn-Date	Jrn-Page	Action
1	01/27/93	170	(S) READ THE FIRST TIME - REFERRAL(S)
2	01/27/93	171	(S) HES, LABOR & COMMERCE, FINANCE
3	02/26/93	503	(S) SPONSOR SUBSTITUTE INTRODUCED-REFERRALS
4	02/26/93	503	(S) HES, LABOR & COMMERCE, FINANCE
5	03/09/93	688	(S) HES RPT 3DP 2NR
6	03/09/93	688	(S) FISCAL NOTE (DHSS)
7	03/09/93	688	(S) ZERO FISCAL NOTE (DCED)
8	03/10/93	723	(S) L&C REFERRAL WAIVED
9	03/22/93	895	(S) FIN RPT CS 7DP SAME TITLE
10	03/22/93	895	(S) LETTER OF INTENT WITH FIN REPORT
11	03/22/93	895	(S) ZERO FISCAL NOTE TO CS (S.FIN/DHSS)
12	03/22/93	895	(S) PREVIOUS ZERO FN APPLIES (DCED)
13	03/23/93	912	(S) RULES 2 CALENDAR 1NR 3/23/93
14	03/23/93	913	(S) READ THE SECOND TIME
15	03/23/93	913	(S) FIN CS ADOPTED UNAN CONSENT
16	03/23/93	914	(S) ADVANCE TO 3RD RDG FAILED Y11 N9
17	03/23/93	914	(S) THIRD READING 3/24/93 CALENDAR
18	03/23/93	916	(S) COSPONSOR(S): TAYLOR, DUNCAN, DONLEY,

Selection=>

PF1 PF2 PF3 PF4 PF5 PF6 PF7 PF8 PF9 PF10 PF11 PF12
 HELP SUBJ EXIT MENU TEXT PRINT BWD FWD CMT/JRNL FIRST LAST QUIT
 SB 71 Bill/Resolution Floor Action Page 3 of 3

Current Status: 3RD RDG, 3/24 CAL(S)

	Jrn-Date	Jrn-Page	Action
1	03/23/93	916	(S) KERTTULA, LITTLE, ZHAROFF

NENANA VOLUNTEER FIRE/EMS

P. O. Box 0070 Nenana, Alaska 99760

Office: (907) 832-5632

Fax: (907) 832-5503

Emergency: 911



April 7, 1993

To: Members of House of Representatives
Health, Education and Social Services
Committee

This letter is asking for your support for SB71 with qualifications that a note for \$150,000 be attached.

Also that equal representation be on the Board from Emergency Medical Services, (geographic representation)
It is unfair to have trauma experience from Hospital and to leave out the pre-Hospital since that is the first treatment of a patient who has been injured. With equal representation there is both points of view being stated and the Alaska citizen becomes the winner since all Health Care has the goal to improve chances for survival.

Thank you,

Gene Jensen, Director
Nenana Public Safety

"We still make house calls."



Southeast Region Emergency Medical Services Council
 207 Moller Drive, Room 113 Sitka, Alaska 99835 907-747-8005

7 April 1993

To The House Health, Education and Social Services Committee

From: Shawn Newell, Executive Director *SN*

Re: House HESS Hearing on CS for SS for Senate Bill 71 (FIN) am

The following letters of support for SB 71 were sent to the Committee in care of my office. I am forwarding them plus a copy of the resolution of support from the Southeast Region Emergency Medical Services Board of Directors.

This bill is important for the emergency medical services system in that it supports many of the recommendations given the State of Alaska by the National Highway Traffic Safety Administration Technical Assistance Team last fall. The bill increases the authority for the EMS Section within the Department of Health and Social Services to guide trauma systems development, it adds authority for certification of EMS training programs to include emergency medical dispatchers and mobile intensive care paramedics. The bill adds to existing immunity from liability protection by including dispatchers and EMT instructors. It also clarifies representation and communication authority for the Advisory Council on EMS. The bill facilitates EMS data collection, improving the availability of data for use in improving patient care.

All of these provisions are supports for the primarily volunteer state EMS system.

The EMS community has historically done a lot with little. In order to perform the work proposed through this bill and sustain the existing emergency medical program this bill in intended to enhance, there will need to be funding.

We fully support a fiscal note for this bill of at least \$100,000. State funds allocated to EMS will be used efficiently and will bring a return far in excess of the investment from the largely volunteer EMS force.

Thank you for your consideration of these comments during the Committee hearing process.

P.O. Box 333
 Hyaburg, Ak. 99922
 April 6, 1993

Representative Cynthia Jockey
 Representative Con Bunde

This letter is in support of Senate Bill 71.

I believe emergency medical dispatchers should be certified and trained.

I also believe including the Governor as a member of the Advisory Council on E.M.S. would be an asset as E.M.S. deals with all level of persons.

I also support the fiscal note to help pay for E.M.S.

I understand this bill goes in front of the House Health, Education and Social Services Committee for hearing on April 7, 1993.

Post-It™ brand fax transmittal memo 7871		# of pages ▶ 1	
To Shawn Newell	From	Sylvia MONTERO	
Co. S.E.A.R.E.M.S.	Co.	HYDABURG	
Dept. COUNCIL	Phone #	1-285-3462	
Fax # 1-747-1406	Fax #	1-285-3464	

Sincerely,
 Sylvia Montero E.M.T. III, PA-C
 Julie Mai King (CHA)
 Charlotte Kristouch

3 letters - all the same address



Southeast Region Emergency Medical Services Council
207 Moller Drive, Room 113 Sitka, Alaska 99835 907-747-8005

RESOLUTION

Whereas the emergency medical services system in Alaska has evolved since its inception in the mid-nineteen seventies;

Whereas the emergency medical services system is inclusive of all prehospital care providers including mobile intensive care paramedics and emergency medical dispatchers;

Whereas emergency medical technician instructors are a critical component in assuring the maintenance of an emergency medical services system and protection from liability encourages participation in emergency medical technician training activities;

Whereas a data set describing the incidence of emergency medical response, patient treatment and patient outcome data is vital to proving the effectiveness of and ensuring the quality of emergency medical care;

Whereas standards for trauma care facilities are instrumental to ensure the quality of patient care provided in Alaska;

Therefore be it resolved that Sponsor Substitute Senate Bill 71 and the fiscal note funding EMS grants to regions and the Trauma Registry be provided full support.

Approved by unanimous vote by the Southeast Region Emergency Medical Services Council in Sitka on this 15th day of March, 1993.

Shawn L Newell
Executive Director

DATE: APRIL 7, 1993

TO: MEMBERS OF HOUSE OF REPRESENTATIVES
Health, Education, and Social Services Committee

FROM: MARSHA A. GODBEY
Volunteer EMT III, North Pole Fire Department

SUBJECT: SENATE BILL 71

I support SB 71, however I am concerned with a couple of points...

Although the bill appropriately addresses the need for increased trauma training and higher levels of monitoring trauma events, it does not provide for funding for this need. Originally the bill stipulated \$200,000 funding for this development, but the Finance Committee cut funding to zero. How is this training and monitoring supposed to be accomplished without any funding? It doesn't make sense to pass this legislation without funding to support the activities requested. I support an attachment of a minimum of a \$150,000 fiscal note for SB 71.

Also, in Section 12, geographical representation has been deleted. There are many responders in rural Alaska who should have a voice on the ACEMS Council. Without this requirement, only larger, already well represented areas, will have a voice in matters concerning all areas of our state. Please ensure that mandated geographic representation is not deleted from the Council.

I am also concerned about placing clinical representatives on the council rather than prehospital representatives. ACEMS addresses and is a voice for emergency medical services. Emergency medicine is generally practiced in the field by persons who are trained somewhat differently than clinical people (whose contact with patients is after the emergency is over). The needs for emergency medicine is different as well. Equipment needs are different, training needs are different, and administration is different. Certainly some involvement of clinical practitioners is needed, but the main component should focus on EMS providers. I support the Council remain a balance of EMS providers and maintain the current number of EMS representatives on the Council.

Thank you for your time and allowing me to express my opinions on this matter.

Marsha A. Godbey

S B

160

HOUSE COMMITTEE REPORT

(9)

Date Referred: February 16, 1994

FURTHER REFERRALS:

Finance

Date of Committee Action: 4/8/94

The HEALTH, EDUCATION AND SOCIAL SERVICES Committee considered:

SB 160

SENATE BILL NO. 160

MEMORIAL SCHOLARSHIP LOANS

"An Act relating to memorial scholarship loans."

RECOMMENDATIONS: [] the same title
 be replaced with _____ [] a new title

[] have attached amendments(s)

[x] do pass

[] do not pass

[] no recommendations

[] individual recommendations

[] additional referral to the _____ Committee

ADOPTS: _____ letter of Intent

ATTACHES NEW FISCAL NOTE(s): _____ (Dept)

APPROVES PREVIOUS: _____ (Dept/Date)

[] fiscal impact _____

[] fiscal note(s) _____ 1/2

[] zero fiscal note _____

[] zero fiscal note(s) Public Safety, ACPE

SIGNING DO PASS	DP	OTHER RECOMMENDATIONS	DNP	NR	AM
<i>Pete Galt</i>	✓				
<i>John L. Lane</i>	✓	<i>W. V. Gray</i>		X	
<i>John Brind</i>	✓				
<i>Scott L. ...</i>	✓				

[Signature]
 CHAIRMAN'S SIGNATURE

no. 3

Bill Version: SB 160

(S) Publish Date: 1-24-94

FISCAL NOTE

STATE OF ALASKA
1994 LEGISLATIVE SESSION

BILL NO. SB 160

Revision Date: _____ Dept. Affected: Alaska Commission on Postsecondary Education
 Title: An Act Relating to Memorial Scholarship Loans BRU: Alaska Student Loan Corporation
 Sponsor: Senator Taylor Component: _____
 Requestor: _____ COMPONENT SERIAL NO. 0218

Expenditures/Revenues (Thousands of Dollars)

OPERATING EXPENDITURES	FY 95	FY 96	FY 97	FY 98	FY 99	FY 00
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	-0-	-0-	-0-	-0-	-0-	-0-

CAPITAL EXPENDITURES	-0-	-0-	-0-	-0-	-0-	-0-
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CHANGE IN REVENUES ()						
------------------------	--	--	--	--	--	--

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF						
1005 GF/Program Receipts						
1006 GF/MHTIA						
Other						
TOTAL	-0-	-0-	-0-	-0-	-0-	-0-

Estimate of any current year (FY94) cost: \$ -0-

POSITIONS

FULL-TIME						
PART-TIME						
TEMPORARY						

ANALYSIS: (Attach a separate page if necessary)
 Zero (0) fiscal impact.

Prepared by: Douglas S. Hanon, Finance Officer Phone: (907) 465-6757
 Division: Alaska Commission on Postsecondary Education Date: 01-18-94
 Approved by Commissioner: _____ Date: _____
 Agency: _____

FISCAL NOTE

STATE OF ALASKA
1994 LEGISLATIVE SESSION

E No. 4
Bill Version: SB 160

(S) Publish Date: 1-24-94

Revision Date: _____ Dept. Affected: Public Safety
 Title: "An Act relating to memorial scholarship loans" BRU: Alaska State Troopers
 Sponsor: Senator Taylor Component: Director's Office
 Requestor: S. FINANCE COMPONENT SERIAL NO. 508

EXPENDITURES/REVENUES: (Thousands of Dollars) (inflation not included)

OPERATING	FY 95	FY 96	FY 97	FY 98	FY 99	FY 00
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	-0-	-0-	-0-	-0-	-0-	-0-
CAPITAL	-0-	-0-	-0-	-0-	-0-	-0-
CHANGE IN REVENUES ()	-0-	-0-	-0-	-0-	-0-	-0-

FUNDING: (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF						
1005 GF/Program Receipts						
1006 GF/MHTIA						
Other						
TOTAL	-0-	-0-	-0-	-0-	-0-	-0-

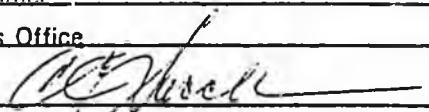
Estimate of current year (FY 94) impact: \$ _____

POSITIONS:

FULL-TIME	0	0	0	0	0	0
PART-TIME	0	0	0	0	0	0
TEMPORARY	0	0	0	0	0	0

ANALYSIS: (Attach a separate page if necessary.)

No fiscal impact upon the Alaska State Troopers is anticipated.

Prepared By: C.E. Swackhammer Phone: 465-4322
 Division: Commissioner's Office Date: 1/20/94
 Approved by Commissioner:  Date: 1/20/94
 Agency: Richard L. Burton, Dept. of Public Safety

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Alaska State Legislature
 House of Representatives
 COMMITTEE ON HEALTH, EDUCATION
 AND SOCIAL SERVICES

DATE: 4/6/94

PLACE: Capitol Room 106

SUBJECT OF MEETING:
 SB 160: MEMORIAL SCHOLARSHIP LOANS
 SB 266: DIRECT-ENTRY MIDWIVES BOARD; REACTIVE
BILLS HELD OVER
 HB 521: JUDICIAL REVIEW: TEACHER TENURE DECISIONS

NAME	REPRESENTING	BUSINESS/PERSONAL MAILING ADDRESS	ZIP	(H) PHONE	(W) PHONE	DO YOU WANT TO TESTIFY?	WHAT SUBJECT/ WHICH BILL?
Tracy Kanne	Certified Direct-Entry	740 5th St Apt 3 Juneau, AK	99801	463-3797		<input checked="" type="radio"/> Y <input type="radio"/> N	SB 266
Terry Annes Taylor	San Taylor	State Capital		6550 →		<input checked="" type="radio"/> Y <input type="radio"/> N	SB 160
Diane Barras	Postsecondary	3030 Vintage		6743		<input type="radio"/> Y <input type="radio"/> N	SB 160 Anti-Militarism
						<input type="radio"/> Y <input type="radio"/> N	
						<input type="radio"/> Y <input type="radio"/> N	
						<input type="radio"/> Y <input type="radio"/> N	
						<input type="radio"/> Y <input type="radio"/> N	
						<input type="radio"/> Y <input type="radio"/> N	
						<input type="radio"/> Y <input type="radio"/> N	
						<input type="radio"/> Y <input type="radio"/> N	

Alaska State Legislature

Senate Majority Leader
Chair, Judiciary Committee
Vice Chair, Community &
Regional Affairs

Member, State Affairs Committee
Committee on Committees
Western States Legislative Forestry Task Force
Legislative Council



State Capitol
Juneau, Alaska 99801-1182
(907) 465-3873
Fax: (907) 465-3922

352 Front Street
Ketchikan, Alaska 99901
(907) 225-8088
Fax: (907) 225-0713

Senator Robin L. Taylor

SPONSOR STATEMENT

SENATE BILL 160

Senate Bill 160 was introduced at the suggestion of Kathleen Niles, Admissions Clerk at the University of Alaska Southeast-Sitka. The bill would modify the eligibility requirements for the Alaska State Troopers Michael Murphy Scholarship to include certificate programs.

The wording of AS14.43.300 currently limits the awarding of scholarship loans to students who pursue a degree program in law enforcement, law, probation and parole, or penology or closely related fields. This language prevents students in certificate programs, such as the Law Enforcement Certificate Program offered at the Sitka campus, UAS, from eligibility.

The scholarship revolving loan fund established by the Legislature includes a provision allowing the forgiveness of one-fifth of the loan indebtedness for each on year period of full time employment in law enforcement in Alaska. Department of Labor statistics show that 63 percent of Sitka program graduates are currently employed in the state as law enforcement personnel.

The bill carries zero fiscal notes and received unanimous support in the Senate.

SB 160 would potentially benefit Alaska students attending an Alaska school with an eye toward employment in Alaska. I ask your support of SB 160.

District A:

SPONSOR STATEMENT • Elyder • Ketchikan • Kupreanof • Meyers Chuck • Petersburg • Saxman • Sitka • Wrangell



MAR 9 RECD

March 5, 1993

The Honorable Robin Taylor
State Capitol
Juneau, AK 99801-1182

Dear Senator Taylor:

I am the Admissions Clerk at the University of Alaska Southeast in Sitka and am in charge of the recruitment process for the Law Enforcement Certificate Program. The University of Alaska Foundation's *Alaska State Troopers: Michael Murphy Scholarship* was recently brought to my attention as potentially being available for students applying for this program.

I spoke with the contact person for the scholarship, Lieutenant Robin Lown of Juneau. He felt that it would be a good idea if this scholarship was made available to Certificate students, but advised me to contact the Postsecondary Commission for restrictions. I spoke with Linda Avery from the Commission; she felt that the scholarship was probably for four-year degree program students, but that an application from a certificate student had never been submitted as a test case.

I would like to promote the eligibility of the Law Enforcement Certificate Program for the *Alaska State Troopers: Michael Murphy Scholarship*. The limitations as currently stated in Sec 14.43.300 are "...a Michael Murphy memorial scholarship loan may be used only to pursue a degree program in an accredited college or university in law enforcement, law, probation and parole, or penology, or closely related fields."

Senator Taylor
Page 2

This scholarship is a revolving loan fund, the recipient receiving forgiveness of one-fifth of loan indebtedness for each one-year period of full-time employment in Alaska in law-enforcement or related field. The enclosed brochure states that recent Alaska Labor Department statistics show that 63 percent of the Law Enforcement Certificate Program graduates are currently employed in Alaska as law enforcement personnel and this percentage does not include those working for the federal government or outside of Alaska.

This is an expensive program. The cost for the 17 week program for Fall 1992 was over \$5000; for the 11 week program, a student could expect to spend close to \$3750. As an employee who hears the moans and groans from those who want to enter the Law Enforcement field and are trying to finance this program, the possibility of scholarship help would be very encouraging. I would appreciate your consideration of this matter and thank you for your time.

Sincerely,



Kathleen Niles
Admissions

enclosures

BILL NO: SB 160

DATE: March 31, 1993

TITLE: "An Act relating to
memorial scholarship loans"

CONTACT: C.E. Swackhammer
Deputy Commissioner
465-4322

POSITION PAPER - Department of Public Safety

The Michael Murphy scholarship loan program was established by the Alaska Legislature in 1968 in memory of Michael Murphy, an immigrant from Ireland. Because he felt he owed his adopted country, he took a leave of absence from the Alaska State Troopers and went to Viet Nam as a civilian police advisor. On May 22, 1968 he was killed in action.

The Michael Murphy Scholarship Fund is supported entirely by State Employees donating a day or more of annual leave per year to the fund.

Currently a loan granted under the Michael Murphy Scholarship Loan program can only be used to pursue a degree program in an accredited college or university in Law Enforcement, Law, Probation and Parole, or Penology, or closely related fields.

SB 160 enlarges the use of a Michael Murphy memorial scholarship loan to include a certificate program as well as a degree program. This would allow the awarding of scholarship loans to students who wish to enroll in a program such as the Alaska Law Enforcement Training program (ALET) conducted by the Department of Public Safety Training Academy in Sitka under the accreditation of the University of Alaska Southeast.

ALET is the basic requirement for employment as a police officer as required by the Alaska Police Standards Council. Prospective police officers must successfully complete ALET or a similar program approved by APSC to be employed as a law enforcement officer.

By enlarging the usage of the Michael Murphy scholarship loan program to include certificate programs a larger number of prospective police officers can be aided in achieving a career in law enforcement. This is a desirable change that would help those in need of assistance in meeting the basic requirements for entry into the law enforcement field.


Richard L. Eurtion
Commissioner



Detective Dawn Augustus, Class of 1985

□ ADMISSIONS

Enrollment is limited to thirty persons; applications are processed on a first-come, first-served basis. Applicants to the 17 week University Certificate Program must submit a high school transcript showing graduation or passing GED scores. All participants are required to meet admission requirements of the Alaska Public Safety Academy which include a thorough background check, a valid driver's license, and minimum physical requirements. There is no minimum age requirement but applicants are advised of the age 21 minimum hiring standard of law enforcement agencies.

All application materials, including requests for housing and financial aids, are handled through the University of Alaska Southeast, Sitka Campus. For an application packet or additional information write or call:

ADMISSIONS AND RECORDS
UNIVERSITY OF ALASKA SOUTHEAST,
SITKA CAMPUS
1332 SEWARD AVENUE
SITKA, AK 99835
907-747-6653

Notice of Nondiscrimination

The University of Alaska Southeast does not discriminate in employment, admissions, or access to or participation in its programs, activities or services on the basis of race, color, age, sex, national origin, handicap or otherwise as prescribed by applicable state and federal laws and regulations including Title IX of the Education Amendments of 1982 (sex) and Section 504 of the Rehabilitation Act of 1973 (handicap). Inquiries regarding the application of these laws and regulations may be directed to Pauline Fredrickson, Title IX Coordinator, University of Alaska Southeast, Telephone (907) 747-6653, or to the Office for Civil Rights, U.S. Department of Education, Seattle, Washington.

There is no minimum age requirement but applicants are advised of the age 21 minimum

University of Alaska Southeast
Sitka Campus
332 Seward Avenue
Sitka, Alaska 99835-9498



Officer Jeff Johnson, Class of 1988



Law
Enforcement
Training
Program

University of Alaska Southeast
and Alaska Public Safety Academy

Course Descriptions

Week 1-6 (Optional)

Written Communication for Law Enforcement

Completes the requirements of college-level composition, with basic writing exercise and classroom discussion based on the particular demands of the law enforcement profession.

Oral Communication for Law Enforcement

The unique communication situations faced by law enforcement officers are covered, including interpersonal, small group, and public communication skills.

Week 7-17 (Required)

Criminal Investigation

Course covers physical evidence and crime scene investigation, drug identification and case procedures, arson, sex crimes, fingerprinting, and investigation practices.

Criminal Justice

Specific instruction is provided in the organization, jurisdiction, and role of the Alaska Criminal Justice System, the District Attorney's office and the Public Defender's office. The special role of juveniles is included.

Physical Training

Course covers physical conditioning, physical methods of arrest, baton, and cold water survival.

Police Procedures

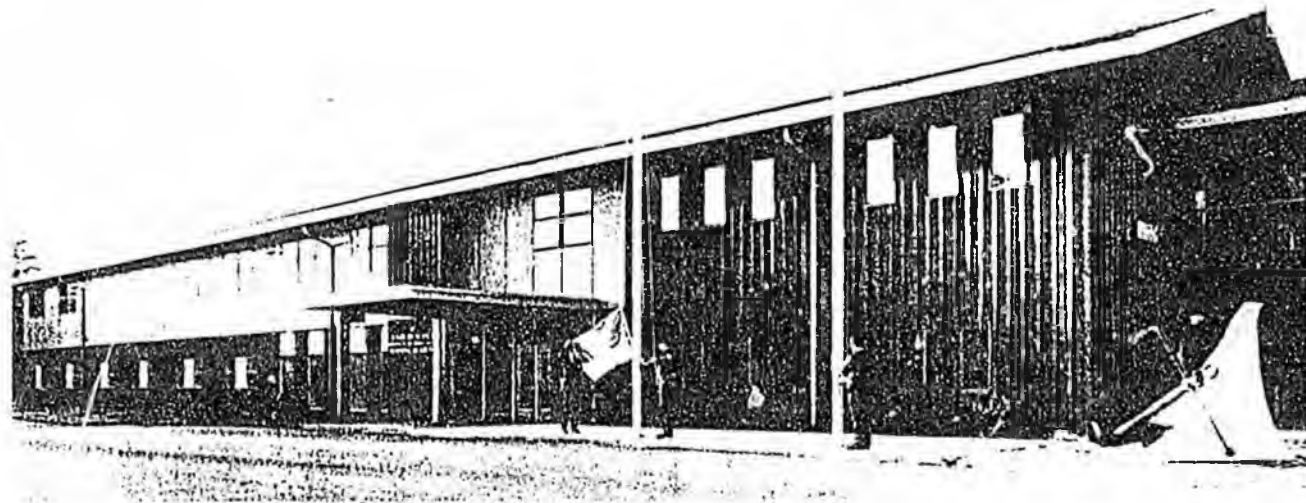
Course covers a variety of disciplines including report writing, interviews and interrogation techniques, rules of evidence, substantive law, shooting, security checks, domestic disputes, and related topics.

Procedural Law

A statutory law course covers individual rights, constitutional safeguards, evidence. Constitutional issues such as search and seizure, 5th amendment and 14th amendment are studied.

Traffic Law Enforcement

Course covers preparation of D.W.I. Enforcement, drinking drivers and driving, the D.W.I. Statute, issues and defenses, pharmacology and toxicology, theory and operation of the intoximeter, courtroom testimony, and case preparation. Accident investigation techniques and field exercises are included.



Alaska Public Safety Academy, Sitka, Alaska

THE PROGRAM...The Law Enforcement Program is a seventeen-week program offered cooperatively by the University of Alaska and the Alaska Public Safety Academy. The training is accredited by the University and meets training requirements of the Alaska Police Standards Council and the National Park Service for seasonal rangers.

EMPLOYABILITY...When you have successfully completed the Law Enforcement Program, you will be qualified to seek employment in a wide variety of law enforcement settings—municipal and village police departments, the National Park Service, and various other public and private agencies both in Alaska and elsewhere. Although employment is not guaranteed by the program, 63 percent of our graduates are currently working in Alaska as law enforcement personnel. Additional numbers have found professional employment outside Alaska and with Federal agencies.

TRAINING OPTIONS...The seventeen-week program is divided into a six week and an eleven week segment. During the first six weeks you will complete training in written & oral communications for law enforcement officers. During the final eleven weeks you will complete criminal justice classes and physical training.

You may choose to attend either the full 17-week program or to attend only the final 11-week segment. Successful completion of either program meets requirements of the National Park Service and Alaska Police Standards Council. The University of Alaska Southeast Law Enforcement Certificate is awarded only to those who complete the 17-week program with passing grades in all classes and a minimum overall grade point average of 2.0. The full 17-week program is essential to the overall success of many students who need preparation in communications, computer, and study skills, as well as a 'head start' on physical conditioning.

HOUSING...Comfortable housing and a meal plan are provided at the Alaska Public Safety Academy in Sitka. Residency at the Academy is optional during the first six weeks but mandatory for all participants during the final eleven weeks.

*Students who have satisfactorily completed college English and speech may request transfer of credit rather than attending the six-week segment.

MICHAEL MURPHY MEMORIAL SCHOLARSHIP LOAN FUND

The Alaska State Legislature has established the Michael Murphy Scholarship Loan Fund for eligible Alaska residents. This scholarship loan is funded by private donations and by voluntary contributions from state employees who may contribute one or more days of annual leave to the fund. The Department of Administration credits the memorial with funds equal to the value of the donated leave and furnishes the employee with a statement reflecting the value of the donation. The statement may be used for income tax purposes.

Funds of up to \$1,000 per year are available for undergraduates and graduates who are full-time students pursuing a degree program at an accredited college or university in law enforcement, law, probation and parole, penology, or closely related fields. The loans are non-interest-bearing and, upon degree completion, the scholarship loan recipient shall receive forgiveness of 20 percent of total loan indebtedness for each one year period he or she is employed full-time in Alaska law enforcement or related fields.

Applications must be submitted by April 1 for fall enrollment. For further information and applications interested students should contact:

Lieutenant Robin Lown
Alaska State Troopers
ATTN: Michael Murphy Scholarship Fund
2760 Sherwood Lane
Juneau, AK 99801
(907) 789-2161

	Jrn-Date	Jrn-Page		Action
1	03/12/93	769	(S)	READ THE FIRST TIME - REFERRAL(S)
2	03/12/93	769	(S)	HES, FINANCE
3	04/01/93	1025	(S)	HES RPT 7DP
4	04/01/93	1025	(S)	ZERO FISCAL NOTES (DOE, DPS)
5	01/24/94	2581	(S)	FIN RPT 5DP
6	01/24/94	2581	(S)	UPDATED ZERO FNS PUBLISHED (DOE, DPS)
7	02/15/94	2860	(S)	RULES TO CALENDAR 2/15
8	02/15/94	2860	(S)	READ THE SECOND TIME
9	02/15/94	2860	(S)	ADVANCED TO THIRD READING UNAN CONSENT
10	02/15/94	2860	(S)	READ THE THIRD TIME SB 160
11	02/15/94	2861	(S)	PASSED Y19 N- A1
12	02/15/94	2864	(S)	TRANSMITTED TO (H)
13	02/16/94	2412	(H)	READ THE FIRST TIME - REFERRAL(S)
14	02/16/94	2412	(H)	HES, FINANCE

Selection=>

PF1	PF2	PF3	PF4	PF5	PF6	PF7	PF8	PF9	PF10	PF11	PF12
HELP	SUBJ	EXIT	MENU	TEXT	PRINT	BWD	FWD	CMT/JRNL	FIRST	LAST	QUIT

S B

2 2 1

HOUSE COMMITTEE REPORT

(9)

Date Referred: February 14, 1994

FURTHER REFERRALS:

Judiciary

Date of Committee Action: 3/28/94

The HEALTH, EDUCATION AND SOCIAL SERVICES Committee considered:

SB 221

SENATE BILL NO. 221

ARREST OF MINORS FOR CONSUMING ALCOHOL

"An Act relating to arrest of a person for illegal possession, consumption, or control of alcohol; and providing for an effective date."

RECOMMENDATIONS: |] the same title
 be replaced with _____ |] a new title

[] have attached amendments(s)

[] do pass

[] do not pass

[] no recommendations

[X] individual recommendations

[] additional referral to the _____ Committee

ADOPTS: _____ letter of Intent

ATTACHES NEW FISCAL NOTE(S): (Dept) _____

APPROVES PREVIOUS: (Dept/Date) _____

[] fiscal impact _____

[] fiscal note(s) _____

[] zero fiscal note _____

(6) [X] zero fiscal note(s) Public Safety, Law Court, H+SS, Admin (2) 2/9/94

SIGNING DO PASS	DP	OTHER RECOMMENDATIONS	DNP	NR	AM
<i>Car Brando</i>	✓	<i>[Signature]</i>			✓
<i>[Signature]</i>	✓	<i>[Signature]</i>			✓
<i>Auley Allberg</i>	✓	<i>[Signature]</i>		✓	
		<i>Bette Davis</i>			✓
		<i>[Signature]</i>		✓	
		<i>Tom Brice</i>		✓	

Car Brando
 CHAIRMAN'S SIGNATURE

FISCAL NOTE

6
 Version: SB 221
 Publish Date: 2-9-94

STATE OF ALASKA
 1994 LEGISLATIVE SESSION

BILL

Revision Date: _____ Dept. Affected: Alaska Court System
 Title: An Act relating to arrest of a person for BRU: Trial Courts
illegal possession, consumption or control of alcohol Components: _____
 Sponsor: Sen. Taylor
 Requestor: Judiciary COMPONENT SERIAL NO. 768

EXPENDITURES/REVENUES (Thousands of Dollars)

OPERATING EXPENDITURES	FY 95	FY 96	FY 97	FY 98	FY 99	FY 00
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS & CLAIMS						
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURES						
----------------------	--	--	--	--	--	--

CHANGE IN REVENUES ()						
------------------------	--	--	--	--	--	--

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF	0.0	0.0	0.0	0.0	0.0	0.0
1005 GF/Program Receipts						
1006 GF/MHTIA						
Other						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

POSITIONS

FULL-TIME						
PART-TIME						
TEMPORARY						

Estimate of current year (FY 94) cost: \$ None

ANALYSIS: (Attach a separate page if necessary)
 No fiscal impact

Prepared by: C. S. Christensen III, Staff Counsel *CS* Phone: 264-8228
 Agency: Alaska Court System Date: 01/28/94

Approved by: Arthur H. Snowden, II, Administrative Director *AS*
 Agency: Alaska Court System Date: 01/28/94

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FISCAL NOTE

STATE OF ALASKA
1994 LEGISLATIVE SESSION

Bill Version: SB 221

(S) Publish Date: 2-9-94

Revision Date: _____ Dept. Affected: Health and Social Services
 Title: An act relating to arrest of a person BRU: Alcohol & Drug Abuse
for illegal possession, consumption or control of alcohol Component: Administration
 Sponsor: Senator Taylor
 Requestor: Senate Judiciary COMPONENT SERIAL NO. 302

Expenditures/Revenues: (Thousands of Dollars)

OPERATING	FY95	FY96	FY97	FY98	FY99	FY00
PERSONAL SERVICES	0.0	0.0	0.0	0.0	0.0	0.0
TRAVEL	0.0	0.0	0.0	0.0	0.0	0.0
CONTRACTUAL	0.0	0.0	0.0	0.0	0.0	0.0
SUPPLIES	0.0	0.0	0.0	0.0	0.0	0.0
EQUIPMENT	0.0	0.0	0.0	0.0	0.0	0.0
LAND & STRUCTURES	0.0	0.0	0.0	0.0	0.0	0.0
GRANTS, CLAIMS	0.0	0.0	0.0	0.0	0.0	0.0
MISCELLANEOUS	0.0	0.0	0.0	0.0	0.0	0.0
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0
CAPITAL EXPENDITURES	0.0	0.0	0.0	0.0	0.0	0.0
CHANGES IN REVENUES	0	0	0	0	0	0

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts	0.0	0.0	0.0	0.0	0.0	0.0
1003 GF Match	0.0	0.0	0.0	0.0	0.0	0.0
1004 GF	0.0	0.0	0.0	0.0	0.0	0.0
1005 GF/Program Receipts	0.0	0.0	0.0	0.0	0.0	0.0
1006 GF/MHTIA	0.0	0.0	0.0	0.0	0.0	0.0
Other	0.0	0.0	0.0	0.0	0.0	0.0
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

POSITIONS:

FULL-TIME	0	0	0	0	0	0
PART-TIME	0	0	0	0	0	0
TEMPORARY	0	0	0	0	0	0

Estimate of current year (FY94) cost \$ _____

ANALYSIS: (Attach a separate page if necessary)
 An Act relating to arrest of a person for illegal possession, consumption or control of alcohol; and providing for an effective date. This bill amends the list of crimes for which a person can be arrested without a warrant to specifically include minor consuming. SB 221 is necessary because of a Juneau court ruling that a minor could not be arrested for consuming alcohol unless the police officer actually witnessed the consumption. The ruling prohibited the juvenile from being arrested even though the juvenile might be quite intoxicated and in danger. This left the police officer with the ability to write a citation and then leave the minor. While this bill provides for arrest, in the case of minors who are consuming alcohol or other drugs, arrest may be a life saving action. Although this bill has no direct effect on the operations or responsibilities of the Dept. of Health & Social Services or the Div. of Alcoholism and Drug Abuse, it is consistent with the philosophy of the Div. regarding the promotion of no use alcohol and other drugs by minors.

Prepared by: Suzanne Perry
 Division: Alcohol & Drug Abuse
 Approved by Commissioner: Margaret R. Lowe, M. Ed., Ed.S.
 Agency: Department of Health & Social Services

Phone: 465-2071
 Date: 01/24/94
 Date: 1-26-94

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FISCAL NOTE

No. 74
 Bill Version: SB 221
 (S) Publish Date: 1-26-94

STATE OF ALASKA
 1994 LEGISLATIVE SESSION

Revision Date: _____ Dept. Affected: Administration
 Title: "An Act relating to arrest of a person for illegal possession, consumption, or control of alcohol; and providing..." BRU: Office of Public Advocacy
 Component: Office of Public Advocacy
 Sponsor: Senator Taylor
 Requestor: (S) HES COMPONENT SERIAL NO. 43

Expenditures/Revenues (Thousands of Dollars)

OPERATING EXPENDITURES	FY95	FY96	FY97	FY98	FY99	FY00
PERSONAL SERVICES	0.0	0.0	0.0	0.0	0.0	0.0
TRAVEL	0.0	0.0	0.0	0.0	0.0	0.0
CONTRACTUAL	0.0	0.0	0.0	0.0	0.0	0.0
SUPPLIES	0.0	0.0	0.0	0.0	0.0	0.0
EQUIPMENT	0.0	0.0	0.0	0.0	0.0	0.0
LAND & STRUCTURES	0.0	0.0	0.0	0.0	0.0	0.0
GRANTS, CLAIMS	0.0	0.0	0.0	0.0	0.0	0.0
MISCELLANEOUS	0.0	0.0	0.0	0.0	0.0	0.0
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0
CAPITAL EXPENDITURES	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE IN REVENUES ()	0.0	0.0	0.0	0.0	0.0	0.0

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts	0.0	0.0	0.0	0.0	0.0	0.0
1003 GF Match	0.0	0.0	0.0	0.0	0.0	0.0
1004 GF	0.0	0.0	0.0	0.0	0.0	0.0
1005 GF/Program Receipts	0.0	0.0	0.0	0.0	0.0	0.0
1006 GF/MHTIA	0.0	0.0	0.0	0.0	0.0	0.0
Other	0.0	0.0	0.0	0.0	0.0	0.0
Total	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of current year (FY94) cost: None

POSITIONS:

FULL-TIME	0.0	0.0	0.0	0.0	0.0	0.0
PART-TIME	0.0	0.0	0.0	0.0	0.0	0.0
TEMPORARY	0.0	0.0	0.0	0.0	0.0	0.0

ANALYSIS: (Attach a separate page in necessary)

Prepared by: Brant McGee Phone: 274-1684
 Division: Office of Public Advocacy Date: _____
 Approved by Commissioner: Nancy Bear Usual Date: 1/26/94
 Agency: Administration

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FISCAL NOTE

No. 3
 Bill Version: SB 221
 (S) Publish Date: 1-26-94

STATE OF ALASKA
 1994 LEGISLATIVE SESSION

Revision Date: _____ Dept. Affected: Administration
 Title: *An Act relating to arrest of a person for illegal possession, consumption, or control of alcohol...* BRU: Public Defender Agency
 Component: Public Defender Agency
 Sponsor: Senator Taylor
 Requestor: (S) HES COMPONENT SERIAL NO. 1631

Expenditures/Revenues (Thousands of Dollars)

OPERATING EXPENDITURES	FY95	FY96	FY97	FY98	FY99	FY00
PERSONAL SERVICES	0.0	0.0	0.0	0.0	0.0	0.0
TRAVEL	0.0	0.0	0.0	0.0	0.0	0.0
CONTRACTUAL	0.0	0.0	0.0	0.0	0.0	0.0
SUPPLIES	0.0	0.0	0.0	0.0	0.0	0.0
EQUIPMENT	0.0	0.0	0.0	0.0	0.0	0.0
LAND & STRUCTURES	0.0	0.0	0.0	0.0	0.0	0.0
GRANTS, CLAIMS	0.0	0.0	0.0	0.0	0.0	0.0
MISCELLANEOUS	0.0	0.0	0.0	0.0	0.0	0.0
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0
CAPITAL EXPENDITURES	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE IN REVENUES ()	0.0	0.0	0.0	0.0	0.0	0.0

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts	0.0	0.0	0.0	0.0	0.0	0.0
1003 GF Match	0.0	0.0	0.0	0.0	0.0	0.0
1004 GF	0.0	0.0	0.0	0.0	0.0	0.0
1005 GF/Program Receipts	0.0	0.0	0.0	0.0	0.0	0.0
1006 GF/MHTIA	0.0	0.0	0.0	0.0	0.0	0.0
Other	0.0	0.0	0.0	0.0	0.0	0.0
Total	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of current year (FY94) cost: none

POSITIONS:

FULL-TIME	0	0	0	0	0	0
PART-TIME	0	0	0	0	0	0
TEMPORARY	0	0	0	0	0	0

ANALYSIS: (Attach a separate page if necessary)

Prepared by: John Salemi, Director Phone: 264-4400
 Division: Public Defender Agency Date: _____

Approved by Commissioner: Nancy Bear Usua Date: 1/24/94
 Agency: Administration

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FISCAL NOTE

STATE OF ALASKA
1994 LEGISLATIVE SESSION

Bill Version: SB 221
(S) Publish Date: 1-26-94

Revision Date: _____ Dept. Affected: Public Safety
 Title: "An Act relating to the arrest of a person
for illegal possession of alcohol" BRU: Alaska State Troopers
 Sponsor: Senator Taylor Component: Detachments
 Requestor: S. HES COMPONENT SERIAL NO. 799

EXPENDITURES/REVENUES: (Thousands of Dollars) (inflation not included)

OPERATING	FY 95	FY 96	FY 97	FY 98	FY 99	FY 00
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	-0-	-0-	-0-	-0-	-0-	-0-
CAPITAL	-0-	-0-	-0-	-0-	-0-	-0-
CHANGE IN REVENUES ()	-0-	-0-	-0-	-0-	-0-	-0-

FUNDING: (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF						
1005 GF/Program Receipts						
1006 GF/MHTIA						
Other						
TOTAL	-0-	-0-	-0-	-0-	-0-	-0-

Estimate of current year (FY 94) impact: \$ _____

POSITIONS:

FULL-TIME	0	0	0	0	0	0
PART-TIME	0	0	0	0	0	0
TEMPORARY	0	0	0	0	0	0

ANALYSIS: (Attach a separate page if necessary.)

No fiscal impact upon the Alaska State Troopers is anticipated.

Prepared By: Francis C. Allan Phone: 269-5591
 Division: Alaska State Troopers Date: 01/17/94
 Approved by Commissioner: *[Signature]* Date: 01/17/94
 Agency: Richard J. Burton, Dept. of Public Safety

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FISCAL NOTE

STATE OF ALASKA
1994 LEGISLATIVE SESSION

No. 1 *11*
Bill Version: SB 221
(S) Publish Date: 1-26-94

Revision Date: January 18, 1994
Title: "...relating to arrest of a person for illegal possession, consumption or control of alcohol..."
Sponsor: Senator Taylor
Requestor: Senator Taylor

Department Affected: Department of Law
BRU: Prosecution, Legal Services
Component: Prosecution - All
Legal Services - Operations
COMPONENT SERIAL NO. 0085 through 0090, 0093

EXPENDITURES/REVENUES:

OPERATING	FY 95	FY 96	FY 97	FY 98	FY 99	FY 00
PERSONAL						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND &						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	-0-	-0-	-0-	-0-	-0-	-0-

CAPITAL						
---------	--	--	--	--	--	--

REVENUE						
---------	--	--	--	--	--	--

FUNDING:

1002 Federal						
1003 GF Match						
1004 GF						
1005 GF/Program						
1006 GF/MHTIA						
OTHER						
TOTAL	-0-	-0-	-0-	-0-	-0-	-0-

POSITIONS:

FULL-TIME	-0-	-0-	-0-	-0-	-0-	-0-
PART-TIME						
TEMPORARY						

Estimate of current year (FY94) impact: -0-

ANALYSIS: (Attach a separate page if necessary.)
Please see the attached analysis.

Prepared by: Richard I. Pegues, Director Phone: 465-3672
Division: Administrative Services Division Date: January 18, 1994
Approved by Commissioner: Bruce M. Botelho, Attorney General Date: January 18, 1994
Agency: Department of Law

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FISCAL NOTE

STATE OF ALASKA
1994 LEGISLATIVE SESSION

BILL NO. SB 221

ANALYSIS CONTINUATION:

SB 221 amends AS 12.25.030(b) to provide that a peace officer may arrest a person under the age of 21 without a warrant when the peace officer has reasonable cause to believe that the person unlawfully possessed, consumed, or controlled alcohol. This bill has the effect of overruling a recent superior court decision that held the person must be caught in the act unlawfully consuming alcohol before an arrest could be made. The bill will not have a fiscal impact because it returns the law to its former interpretation prior to the superior court's decision.



Alaska State Legislature
 House of Representatives
 COMMITTEE ON HEALTH, EDUCATION
 AND SOCIAL SERVICES

DATE: 5/25/94

PLACE: Capitol Room 106

SUBJECT OF MEETING:
 #HB 431: AFIX FOR CERTAIN TEENAGED PARENTS
 HB 378: REVISE OLDER ALASKANS COMMISSION
 SB 221: ARREST OF MINORS FOR CONSUMING ALCOHOL
 # INDICATES FIRST PUBLIC HEARING

NAME	REPRESENTING	BUSINESS/PERSONAL MAILING ADDRESS	ZIP	(H) PHONE	(W) PHONE	DO YOU WANT TO TESTIFY?		WHAT SUBJECT/ WHICH BILL?
						IF NEEDED	IF NEEDED	
JOE Ambrose	SEN TAYLOR					Y	N	SB 221
JAN HANSEN	DASS				X 2680	Y	N	HB 431
JEFF BUCH	AKCLU	175 S. Franklin St. Ste. 318 Juneau	99801		465-4150	Y	N	SB 221
						Y	N	
						Y	N	
						Y	N	
						Y	N	
						Y	N	
						Y	N	
						Y	N	

ALASKA**CIVIL LIBERTIES UNION***An Affiliate of the American Civil Liberties Union*

P. O. Box 201944 - 419 Barrow Street - Anchorage, AK 99520-1844

Phone: 907-258-0044 Fax: 907-258-0288

March 28, 1994

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Executive Director

The Honorable Cynthia Toohey and Con Bunde
Co-Chairs,
Health, Education and Social Services Committee
Alaska House of Representatives
State Capitol - Room 108
Juneau, AK 99801-1182

Dear Representatives Toohey and Bunde:

I am writing to you both on behalf of the Alaska Civil Liberties Union (AKCLU), an affiliate of the American Civil Liberties Union. The AKCLU is very concerned over proposed SB 221. We urge the House HESS Committee to not adopt this legislation in its present form.

As you know, the proposed legislation responds to controversial decisions by a Juneau magistrate and Superior Court Judge that made it unconstitutional to arrest or pickup a minor for minor consuming when a police officer had no actual evidence that a minor is consuming alcohol. We have read those opinions and believe that they accurately reflect the law in this country and this state regarding warrantless arrests and unlawful searches and seizures.

While the AKCLU appreciates the concerns of the Legislature for the health and safety of this state's adolescent children, we cannot condone a trampling of basic constitutional rights in order to settle on what amounts to a band-aid solution for the significantly complex underlying social problems surrounding teenage drinking in communities across Alaska.

While living in Juneau, for example, I was both a member and chair of the City and Borough of Juneau's Social Services Advisory Board (SSAB). I am certainly aware of the problems confronting Juneau, Anchorage, and other communities as they struggle to find the causes of - and solutions to - teen alcoholism and teen drinking and drug abuse. But every citizen should be similarly concerned when, in response to public cries for action, the government attempts to overcome sacred constitutional protections in order to award itself more police powers.

The AKCLU suggests that this law speaks volumes for the lack of understanding of the fundamentals of our constitution. How can you ask or expect an adolescent minor - an emerging adult - to respect a government that would treat so cavalierly his or her constitutional right to be free from the spectre of illegal searches and seizures and warrantless arrests? That teenagers attempt to hide illegal behavior from policeman should come as no surprise to adults. What should come as a surprise to adults everywhere is the willingness of its elected officials to so blithely curtail the civil liberties

Page Two - Co-Chairs, House HESS Committee - March 28, 1994

of a significant portion of its citizenry in the name of responding to the problem of teen drinking.

No matter the seriousness or complexity of our social problems, as a society we cannot decide to place another restriction on the Fourth Amendment's freedom from unlawful searches and seizures, a freedom for which our foreparents died, in order to attempt to resolve those social dilemmas.

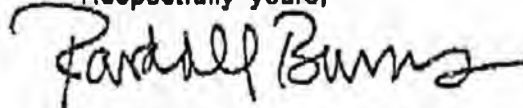
This legislation gives police the authority to detain a minor who the officer *has not seen* consume any alcohol, or who *is not carrying* an alcoholic beverage container, on the *presumption* because the minor, by his actions, has given the peace officer "reasonable cause" to believe the minor has consumed alcohol illegally. If nothing else, an argument can be made that this law creates a subjective standard that is impossible to defend against. A good civil protest against this law would be for groups of perfectly sober teens to regularly parade the streets of our communities staggering, speaking in slurred words, and stinking to high hell of the newest alcohol-based perfume, mouthwash, or cologne.

One issue of prime importance here, as has always been the case, is the clear lack of sufficient law enforcement officers to properly patrol and enforce the laws of our communities. While the AkCLU cannot be said to be the friend of overweening police authorities, we certainly support a well-funded, fully-staffed, well-trained and educated police force as one way to avoid the understandable escalation of community concern and fear that grows out of a reaction to rising crime rates and juvenile excess, and which often results in the enactment of laws that attack individual civil liberties.

The other health, safety, and social service concerns that we Alaskans must address in the face of teen drug and alcohol abuse must be addressed by all facets of our communities. Again, we cannot ask government to solve social dilemmas with increased police powers that erode our constitutionally-based individual civil liberties. We must surely know by now, coming up on the end of the 20th Century, that the easy way is almost never the best way.

The AkCLU is clearly concerned with the approach presented by SB 221 and we ask you and the other members of your committee not to adopt a law that runs so counter to basic liberty.

Respectfully yours,



Randall P. Burns
Executive Director

cc: All members, AkCLU Board of Directors

P. S. Whenever this issue comes up, a related question is always asked of the AkCLU: what is the AkCLU's position on driving while intoxicated (DWI).

Our discussion above focused primarily on the problem of minor consuming in the context of a minor walking on public streets or in parks and neighborhoods and our concern that under SB 221 a child under age eighteen (18) would be subject to detainment simply because the police officer felt he or she had reasonable cause to detain the juvenile. The idea of detaining and then administering a breathalyzer to any minor simply because a police officer believed the

Page Three - Co-Chairs, House HESS Committee - March 28, 1994

minor was exhibiting some effect of alcohol flies in the face of that minor's constitutional guarantee to be free from unreasonable search and seizures and warrantless arrests.

The American Civil Liberties Union's (ACLU's) policy on alcoholism and public drunkenness, as well as its policy on chemical tests of drivers, are well known. Basically, the ACLU holds that public drunkenness is not itself a sufficient justification for the deprivation of personal liberty. This policy, however, does not preclude the punishment of behavior by intoxicated persons which is also prohibited for sober persons (for example, assaultive behavior). In addition, the ACLU believes - in some types of situations - that *narrowly drawn* laws may be enacted which single out the acts of drunken persons. One such example would be driving, an activity which is unusually dangerous when performed by a person under the influence of alcohol.

The ACLU's policy on the administration of breathalyzer tests makes it clear that such tests should be conducted only when the police have *probable cause* to believe a *particular* driver is driving while under the influence of an intoxicant. The requirement of a prior, judicially approved warrant is excused because the evanescent nature of blood alcohol presents an emergency circumstance which makes it, for all practical purposes, impossible to procure a warrant prior to the body's natural destruction of the evidence.

Therefore, if a police officer has probable cause to believe that a minor is driving while intoxicated, the officer may stop the minor without a warrant.

We do not generally address this issue because it was not our understanding that the police have ever felt its hands were tied with respect to stopping minors where the police had probable cause to believe that a minor was driving under the influence. The Juneau magistrate's decision that has been greeted with such opprobrium makes it clear that the minor charged with minor consuming in that case was approached by a police officer "on the sidewalk along S. Franklin Street."

Bottom line: the issue is one of probable cause. The magistrate held, because a minor walking down Franklin Street did not "consume, possess, or control alcoholic beverages" in the "presence" of the arresting officer [see AS 04.16.050 and AS 12.25.030(a)(1)], that the arrest was improper. On the other hand, an automobile, motorcycle, or truck that is swerving, speeding, or otherwise being driven erratically presents sufficient probable cause to justify stopping the car, given both the dangerous nature of the activity and the difficulty in retaining evidence without an immediate breathalyzer.

The ACLU appreciates the desire of the Alaska Legislature to take some action to assist in the battle against teen drinking. But we again caution that the proposed legislation tramples on individual civil liberties without really accomplishing its goal. Because the "reasonable cause" standard is so vague and easily abused, it should only be used in the most narrow of circumstances; stopping a minor without visible proof the minor is consuming is not sufficient grounds for arrest or detainment without a warrant.

Alaska State Legislature

Senate Minority Leader
Chair, Judiciary Committee
Vice Chair, Community &
Regional Affairs

Member, State Affairs Committee
Committee on Committees
Western States Legislative Forestry Task Force
Legislative Council



State Capitol
Juneau, Alaska 99801-1152
(907) 465-3873
Fax: (907) 465-3922

352 Front Street
Ketchikan, Alaska 99901
(907) 225-8088
Fax: (907) 225-0713

Senator Robin L. Taylor

SPONSOR STATEMENT

SENATE BILL 221

I introduced Senate Bill 221 at the request of concerned parents, law enforcement agencies in the First Judicial District and Alaskans for Drug-Free Youth.

In May of last year, State Troopers and municipal police departments were directed not to arrest minors under the minor consuming statute unless the arresting officer actually sees the minor consume alcohol. The directive was issued after two judicial officers ruled that merely being under the influence in the officer's presence is not reason enough to make an arrest.

The District Attorney's directive stated that "officers who encounter minors under the influence should issue citations, rather than make arrests".

The court ruling left law enforcement officers in the position of either leaving such a minor on the street or taking the minor into protective custody. Past practise had been to arrest the minor and turn the youth over to parents or legal guardians.

SB 211 would add minor consuming to the list of crimes that allow for warrantless arrest. While the court ruling currently impacts only the First Judicial District, it could be extended to other jurisdictions.

My goal in sponsoring this bill is not to increase the number of minor consuming arrests or convictions. I don't believe the Legislature ever intended for a police officer to simply write a ticket and walk away from a minor who is under the influence. This bill is more about protecting our young people than prosecuting them.

SPONSOR STATEMENT

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