

RÉSUMÉ DIGEST

ACT 578 (SB 264)

2018 Regular Session

Carter

Prior law provided for training of emergency medical personnel. New law retains prior law and adds thereto the following defined terms and corresponding definitions:

- (1) "Public safety agency" means a functional division of a public or private agency which provides firefighting, police, medical, or other emergency services.
- (2) "Public safety telecommunicator" means an individual answering 911 emergency medical condition calls on behalf of a public safety agency who has authority, based on a protocol adopted by the agency, to provide telephone cardiopulmonary resuscitation instructions to a caller before arrival of professional medical assistance by first responders.

Prior law granted civil immunity to emergency medical services practitioners, parish governing authorities, police departments, sheriffs' offices, fire departments, or other public agencies engaged in rendering emergency medical services. New law retains prior law.

New law provides that no public safety telecommunicator who instructs a caller on telephone cardiopulmonary resuscitation, referred to hereafter as "T-CPR", shall be liable for any civil damages arising out of the instruction provided to the caller, except for acts or omissions intentionally designed to harm, or for grossly negligent acts or omissions that result in harm to an individual. New law provides that a caller may decline T-CPR instruction and that once declined, the public safety communicator has no obligation to provide the instruction.

New law provides that a public safety agency is not required to have public safety telecommunicators answer 911 calls.

New law requires public safety telecommunicators to be trained in T-CPR utilizing training that meets or exceeds nationally recognized emergency cardiovascular care guidelines. Provides that the training, at minimum, shall incorporate recognition protocols for out-of-hospital cardiac arrest, compression-only CPR instructions for callers, and continuing education as appropriate.

New law requires public safety agencies to ensure that 911 calls being answered by public safety telecommunicators have T-CPR training based on the following phase-in timeline and population references based on the latest federal decennial census:

- (1) January 1, 2019, for parishes with a population of more than 100,000.
- (2) January 1, 2020, for parishes with a population between 50,000 and 100,000.
- (3) January 1, 2021, for parishes with a population less than 50,000.

New law authorizes public safety agencies to enter into reciprocal agreements with other public safety agencies to provide T-CPR, on the condition that the agency accepting the call has a public safety telecommunicator who is trained in T-CPR as provided by new law.

New law requires the bureau of emergency medical services of the La. Department of Health (LDH) to identify all public and private agencies, institutions, and individuals that are or may be engaged in T-CPR training and establish minimum standards for course approval, instruction, and examination. Requires LDH to implement an efficient mechanism for the bureau to maintain the names of public safety communicators and receive certificates of completion for the training course required in new law.

New law requires LDH to adopt administrative rules as necessary to implement the provisions of new law.

New law provides that new law may be referred to as the Spencer Washington Act.

Effective August 1, 2018.

(Amends R.S. 40:1131(21) and 1131.1(D); adds R.S. 40:1131(22) and (23), 1133.13(F) and (G), and 1133.16)