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Governor Jeff Colver, M.D.

Dr. Joel E Hornung, Chair Joseph House, Executive Director

SB 311 – Adding emergency medical services personnel to the list of mandatory reporters of abuse, neglect or exploitation of certain adults. Senate Committee on Public Health and Welfare

Proponent Testimony

Joseph House, Paramedic Executive Director Emergency Medical Services Board

Madame Chair and members of the committee, thank you for the opportunity to provide testimony in support of SB 311.

Very simply put, SB 311 mandates what <u>some</u> EMS providers already do, report suspected abuse, neglect, or exploitation of the patient in a timely manner to the proper authority to investigate the matter further. One of the many tasks expected of the EMS provider is to protect and advocate for the patient at a time when the patient may be considered more vulnerable due to illness or injury, or unable to advocate for themselves.

Currently, EMS providers are only mandatory reporters of suspected abuse for the child population. In part, this is due to that population's typical dependence upon one or more adults for everyday tasks. However, there are additional populations that are also solely dependent upon someone else for these everyday tasks. We believe that this bill appropriately addresses those additional populations.

This bill also aligns the reporting procedure for those additional populations with the existing law and provides a consistent approach and expectation of reporting from EMS providers. As you are well aware, the difference between "may" and "shall" is substantial. "May" leads to a scenario where there is gradation and inconsistency in application. This bill makes that substantial change and provides a consistent message – there is no longer gradation of whether it "rises to a level" needing to be reported, the EMS provider is mandated to report if abuse, neglect, or exploitation is suspected.

Currently, EMS providers may report suspected abuse of this additional population, however, there is no clear direction as to whom those reports are made and when – some are made to local law enforcement, some to local agencies, and some utilizing the abuse hotline. SB 311 provides that clear direction to EMS providers and that direction aligns itself with current methods of reporting suspected child abuse.

The successful passage of this bill would ensure the changing of "some" EMS providers reporting to "all" EMS providers reporting. It is a more consistent approach for our industry and ultimately better protects the patients that we serve by not allowing suspected abuse, neglect, or exploitation of a population to go unnoticed or unreported.

We urge your support of SB 311 and its favorable passage.

Thank you for your time and consideration. I am happy to stand for questions at the appropriate time.