

GETAC Medical Directors Position Statement on the Medical Director's Responsibility for Students Operating Within an EMS System.

Context

EMS Medical Directors are given the responsibility and authority for the clinical care provided under their license by the certified and licensed providers working in their systems through Texas Medical Board Rule 197 (TAC, Title 22, Part 9, Chapter 197). Additionally, they assume liability for the clinical care provided by anyone acting in any capacity within those systems.

Many EMS providers have affiliation agreements with training institutions to provide clinical experiences for their students. The Texas Department of State Health Services (DSHS) requires training programs to have an affiliation agreement with any EMS providers with whom their students rotate. There is, however, no requirement that the EMS system medical director sign or consent to these affiliation agreements. There is no requirement that the affiliation agreements address the relationship between the student and the EMS system medical director. This places the EMS system medical director in the position of assuming responsibility and liability for the clinical actions of students over whom they have no authority, potentially without knowledge of, or consent to, the student's presence.

EMS training programs have their own medical directors who have responsibility over the clinical content of the program and must attest to the student's achievement of the educational objectives. The training program medical director's role does not extend to the clinical care delivered. As a result, there is often confusion regarding authority and responsibility for students while engaged in clinical activities with EMS systems. It can, at times, be unclear under whose medical authority the student is working.

Position

It is the position of GETAC that

1. While functioning within an EMS system, all practicing providers and students fall under the authority of the EMS system medical director
2. The affiliation agreement between an EMS system and a training program should reflect the authority of the EMS Medical Director for all care provided.
3. DSHS should add a requirement to program approval regulations that requires the EMS system medical director's approval on any affiliation agreements between EMS systems and training programs.