

MINUTES OF THE SENATE COMMITTEE ON LOCAL GOVERNMENT

The meeting was called to order by Sen. Don Montgomery at  
Chairperson

9:00 a.m./~~p.m.~~ on March 8, 1991 in room 531-N of the Capitol.

All members were present except:

Senators Burke and Gaines

Committee staff present:

Theresa Kiernan, Revisor of Statutes  
Mike Heim, Legislative Research  
Emelene Correll, Legislative Research  
Shirley Higgins, Committee Secretary

Conferees appearing before the committee: None

The meeting was called for the purpose of discussion and possible action on bills previously heard.

SB 271 - Concerning emergency medical services.

Ms. Kiernan passed out a balloon of the bill and explained the amendments. (Attachment 1). The Chairman stated that he feels subsection (e) on the last page of the balloon clouds the issue again. Describing "non-emergency" addressed the problem, but now subsection (e) seems to cloud it again. He asked Patsy Johnson of the State Board of Nursing if she would be willing to pull this section, and she was agreeable. Therefore, it was the consensus of the committee to delete subsection (e) of Section 8.

With regard to the deletion to section (b) on page three of the bill, Ms. Correll expressed the thought that this might change the law allowing a student to administer shots during training. Ms. Johnson said the deletion would allow students to do anything as long as supervised as in the new language. "Tuck" Duncan of Medivac stated that this language may have to be reconsidered in the House committee because the legislative intent may be questioned. Jerry Slaughter of the Kansas Medical Society commented that the Human Arts Act would cover this.

Sen. Petty made a motion to adopt the proposed amendments to SB 271, Sen. Allen seconded, and the motion carried.

Sen. Frahm made a motion to recommend SB 271 favorable for passage as amended, Sen. Petty seconded, and the motion carried.

SB 273 - Concerning health care providers, relating to peer review.

Ms. Kiernan had prepared a Substitute for SB 273. (Attachment 2). She explained each amendment. With regard to section (b) on page two, Sen. Steineger noted this is controversial because of concern that it may remove some victim's rights.

Sen. Daniels made a motion to adopt the amendments and provide for a substitute bill, Sen. Frahm seconded, and the motion carried.

Sen. Daniels made a motion to report Substitute for SB 273 favorable for passage, Sen. Allen seconded, and the motion carried.

SB 298 - Concerning Accessibility of public buildings.

The Chairman noted that lines 29 and 41 give the Attorney General the power to enforce the law. Ray Petty, Independence, Inc., of Lawrence, questioned if there would be a fiscal impact. The Chairman said it was doubtful if extra staff would be needed by the Attorney General's office if the bill were passed.

Ms. Correll questioned the need for rules and regulations in New Section 3. Mr. Petty stated that he had worked with the Attorney General's office and they had felt that these three things are needed.

CONTINUATION SHEET

MINUTES OF THE SENATE COMMITTEE ON LOCAL GOVERNMENT,  
room 531-N, Statehouse, at 9:00 a.m./~~p.m.~~ on March 8, 1991.

Sen. Frahm made a motion to amend SB 298 by striking "shall" in New Sec. 3 and inserting "may", Sen. Petty seconded, and the motion carried.

Ms. Kiernan suggested an amendment on page 1, line 33, by inserting, following "attorney general", "county or district attorney" to give them the authority to act without the approval of the Attorney General or local governing body, Sen. Petty made a motion to so amend, Sen. Allen seconded, and the motion carried.

Sen. Allen made a motion to recommend SB 298 favorable for passage as amended, Sen. Frahm seconded, and the motion carried.

SB 260 - Concerning the payment for construction goods and services.

Tom Slattery, Associated General Contractors of Kansas, who had requested the bill informed the committee that KDOT supports the amendment offered, but he needs to work with the League of Municipalities yet. The committee asks that the bill be rereferred in order that it may be worked on later.

SB 186 - Relating to county roads and bridges.

The Chairman said an Attorney General's opinion is needed as to when the county has to put out bids for anything over \$10,000.00, therefore, the bill will be held until next year.

SB 264 - Relating to the compensation of county treasurers.

The Chairman said there is a House bill that does just the opposite of this bill, and there are some real problems with the language in this bill. Therefore, he would like to recommend SB 264 for an interim study, and the committee agreed.

SB 306 - Concerning the law enforcement communications committee; relating to the membership thereof and the powers and duties thereof.

The Chairman informed the committee that the Department of Corrections no longer wants to be included in the bill.

Sen. Daniels made a motion to recommend SB 306 favorable for passage, Sen. Allen seconded, and the motion carried.

The minutes of March 7 were approved with one typographical correction.

The meeting was adjourned at 9:52 a.m.



SENATE BILL No. 271

By Committee on Local Government

2-21

8 AN ACT concerning emergency medical services; amending K.S.A.  
9 1990 Supp. 65-6112, 65-6119, 65-6120, 65-6121, 65-6122, 65-6123  
10 and ~~65-6129~~ and repealing the existing sections.

[ , 65-6129 and 65-6145

11  
12 *Be it enacted by the Legislature of the State of Kansas:*

13 Section 1. K.S.A. 1990 Supp. 65-6112 is hereby amended to read  
14 as follows: 65-6112. As used in this act: (a) "Administrator" means  
15 the administrator of the emergency medical services board.

16 (b) "Ambulance" means any privately or publicly owned motor  
17 vehicle, airplane or helicopter designed, constructed, prepared and  
18 equipped for use in transporting and providing emergency care for  
19 individuals who are ill or injured.

20 (c) "Ambulance service" means any organization operated for the  
21 purpose of transporting sick or injured persons to or from a place  
22 where medical care is furnished, whether or not such persons may  
23 be in need of emergency or medical care in transit.

24 (d) "Attendant" means a ~~crash injury management technician,~~  
25 an emergency medical technician, an emergency medical technician-  
26 intermediate, an emergency medical technician-defibrillator or a mo-  
27 bile intensive care technician whose primary function is ministering  
28 to the needs of persons requiring emergency medical services.

29 (e) "Board" means the emergency medical services board estab-  
30 lished pursuant to K.S.A. ~~1989~~ 1990 Supp. 65-6102, and amend-  
31 ments thereto.

32 (f) "~~Crash injury management technician~~" means any person  
33 who has successfully completed a course of training, approved  
34 by the board, in preliminary emergency medical care and who  
35 holds a valid ~~crash injury management technician~~ certificate  
36 under this act.

37 (g) (f) "Emergency medical service" means ~~a service which pro-~~ ✓  
38 ~~vides for~~ the effective and coordinated delivery of such ~~emergency~~  
39 care as may be required by an emergency, including services pro-  
40 vided by first responders and transportation of individuals by ~~ground~~  
41 ~~or air ambulances~~ and the performance of authorized emergency care  
42 by a person licensed to practice medicine and surgery, a licensed  
43 professional nurse, a registered physician's assistant, a ~~crash injury~~

[ , care  
[ ambulance services

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Attachment 1

~~management technician, an emergency medical technician,~~  
emergency medical technician-intermediate, emergency medical  
technician-defibrillator or a mobile intensive care technician.

[ , emergency medical technician,

(h) (g) "Emergency medical technician" means any person who has successfully completed a course of training, approved by the board, in preliminary emergency medical care and who holds a valid emergency medical technician certificate under this act.

(i) (h) "Emergency medical technician-defibrillator" means any person, currently certified as an emergency medical technician or emergency medical technician-intermediate, who has successfully completed a training program in cardiac defibrillation approved by the board and who holds a valid emergency medical technician-defibrillator certificate under this act.

(j) (i) "Emergency medical technician-intermediate" means any person, currently certified as an emergency medical technician or emergency medical technician-defibrillator, who, has successfully completed a course of training approved by the board which includes training in veni-puncture for blood sampling and administration of intravenous fluids and advanced patient assessment and who holds a valid emergency medical technician-intermediate certificate under this act.

(k) (j) "First responder" means a person who has successfully completed a course of training in preliminary emergency care, who holds a valid first responder certificate under this act and who provides services to individuals in need of emergency medical care that assist in stabilization or improvement of such individual's condition until personnel with a higher level of training arrive at the scene and assume responsibility for the individual.

(l) (k) "Instructor-coordinator" means any person who has successfully completed a course of training, approved by the board, to instruct attendants and first responders, and who holds a valid instructor-coordinator certificate under this act.

(m) (l) "Local component medical society" means a county medical society or a multicounty medical society.

(n) (m) "Medical adviser" means a person licensed to practice medicine and surgery.

(o) (n) "Mobile intensive care technician" means any person who has successfully completed a course of training, approved by the board, in emergency medical care, and who holds a valid mobile intensive care technician certificate under this act.

(p) (o) "Municipality" means any city, county, township, fire district or ambulance service district.

(q) (p) "Operator" means a person or municipality who has a

[ (q)

(p) "Non-emergency transportation" means the transport of a sick or injured person under a foreseen combination of circumstances calling for continuing medical care of such person.

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permit to operate an ambulance service in the state of Kansas.

(r)

(r) ~~(s)~~ "Person" means an individual, a partnership, an association, a joint-stock company or a corporation.

(s)

~~(s)~~ "qualified instructor" means a person licensed to practice medicine and surgery, a ~~registered~~ professional nurse, an instructor-coordinator or a mobile intensive care technician.

licensed

Sec. 2. K.S.A. 1990 Supp. 65-6119 is hereby amended to read as follows: 65-6119. Notwithstanding any other provision of law, mobile intensive care technicians may perform any of the following:

In a medical care facility, a qualified instructor means a person licensed to practice medicine and surgery or a licensed professional nurse.

(a) ~~Render rescue, first-aid and resuscitation services May perform all the authorized activities of an emergency medical technician as described in K.S.A. 1990 Supp. 65-6121, and amendments thereto.~~

~~(b) During training at a medical care facility and while caring for patients in a medical care facility administer parenteral medications, under the direct supervision of a person licensed to practice medicine and surgery or a registered professional nurse qualified instructor, perform those activities authorized by this section and K.S.A. 1990 Supp. 65-6121, and amendments thereto.~~

(c) Perform cardiopulmonary resuscitation and defibrillation in a pulseless, nonbreathing patient.

licensed

(d) When voice contact or a telemetered electrocardiogram is monitored by a person licensed to practice medicine and surgery or a ~~registered~~ professional nurse where authorized by a person licensed to practice medicine and surgery, and direct communication is maintained, and upon order of such person or such nurse do any of the following:

(1) Perform veni-puncture for the purpose of blood sampling collection and initiation and maintenance of intravenous infusion of saline solutions, dextrose and water solutions or ringers lactate IV solutions.

(2) Perform gastric suction by intubation.  
(3) Perform endotracheal intubation.  
(4) Administer parenteral injections of any of the following classes of drugs:

- (A) Antiarrhythmic agents.
- (B) Vagolytic agents.
- (C) Chronotropic agents.
- (D) Analgesic agents.
- (E) Alkalinizing agents.
- (F) Vasopressor agents.

(5) Administer such other medications or procedures as may be deemed necessary by such an ordering person.

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1 (e) Perform, ~~during an emergency,~~ those activities specified in  
subsection (d) before contacting the person licensed to practice med-  
4 icine and surgery or authorized ~~registered~~ professional nurse when  
5 specifically authorized to perform such activities by written protocols  
approved by the local component medical society.

*during an emergency, inserting*  
licensed

6 Sec. 3. K.S.A. 1990 Supp. 65-6120 is hereby amended to read  
7 as follows: 65-6120. Notwithstanding any other provision of law to  
8 the contrary, an emergency medical technician-intermediate:

( f ) Perform, during "non-emergency  
transportation", those activities specified  
in this section when specifically authorized  
to perform such activities by written  
protocols approved by the local component  
medical society.

9 (a) May perform any of the activities described by K.S.A. 1988  
10 1990 Supp. 65-6121, and amendments thereto, which an emergency  
11 medical technician may perform;

12 ~~(b) during training and while under the direct supervision of a~~  
13 ~~qualified instructor, perform those activities authorized by this sec-~~  
14 ~~tion and K.S.A. 65-6121, and amendments thereto;~~

15 (b) ~~(c)~~ when approved by the local component medical society  
16 and where voice contact by radio or telephone is monitored by a  
17 person licensed to practice medicine and surgery or a ~~registered~~  
18 professional nurse, where authorized by a person licensed to practice  
19 medicine and surgery, and direct communication is maintained, upon  
20 order of such person or such nurse may perform veni-puncture for  
21 the purpose of blood sampling collection and initiation and main-  
22 tenance of intravenous infusion of saline solutions, dextrose and water  
23 solutions or ringers lactate IV solutions; or

(b)  
licensed

24 (e) when under the direct supervision of a mobile intensive  
25 care technician who is functioning under the provisions of sub-  
26 section (e) of K.S.A. 1988 Supp. 65-6119 may perform the func-  
27 tions authorized under subsection (b) of this section  
28 ~~(d)~~ perform, during an emergency, those activities specified in sub-  
29 section ~~(e)~~ before contacting the person licensed to practice medicine  
30 and surgery or authorized ~~registered~~ professional nurse when spe-  
31 cifically authorized to perform such activities by written protocols  
32 approved by the local component medical society.

(c)  
(b)  
licensed

33 Sec. 4. K.S.A. 1990 Supp. 65-6121 is hereby amended to read  
34 as follows: 65-6121. Notwithstanding any other provision of law to  
35 the contrary, an emergency medical technician may perform any of  
36 the following:

( d ) Perform, during "non-emergency  
transportation", those activities specified  
in this section when specifically authorized  
to perform such activities by written  
protocols approved by the local component  
medical society.

- 37 (a) Patient assessment and vital signs;
- 38 (b) airway maintenance to include use of:
  - 39 (1) Oropharyngeal and nasopharyngeal airways;
  - 40 (2) esophageal obturator airways with or without gastric suction  
41 device; and
  - 42 (3) oxygen demand valves.
- 43 (c) Oxygen therapy;

- (d) oropharyngeal suctioning;
- (e) cardiopulmonary resuscitation procedures;
- (f) control accessible bleeding;
- (g) application of pneumatic anti-shock garment;
- (h) management of outpatient medical emergencies;
- (i) extrication of patients and lifting and moving techniques;
- (j) management of musculoskeletal and soft tissue injuries to include dressing and bandaging wounds or the splinting of fractures, dislocations, sprains or strains;
- (k) use of backboards to immobilize the spine;
- (l) administer syrup of ipecac, activated charcoal and glucose; or
- (m) monitor peripheral intravenous line delivering intravenous fluids during interfacility transport with the following restrictions:
  - (1) The physician approves the transfer by an emergency medical technician;
  - (2) no medications or nutrients have been added to the intravenous fluids; and
  - (3) the emergency medical technician may monitor, maintain and shut off the flow of intravenous fluid; or

~~(n) during training, under the direct supervision of a qualified instructor, perform those activities authorized by this section.~~

Sec. 5. K.S.A. 1990 Supp. 65-6122 is hereby amended to read as follows: 65-6122. Notwithstanding any other provision of law to the contrary, a crash injury management technician may perform any of the following:

- (a) Initial scene management;
- (b) patient assessment and vital signs;
- (c) airway maintenance to include:
  - (1) Oropharyngeal airways;
  - (2) oropharyngeal suctioning; or
  - (3) use of bag valve mask.
- (d) Oxygen therapy;
- (e) provide cardiopulmonary resuscitation procedures;
- (f) control accessible bleeding;
- (g) application of pneumatic anti-shock trousers;
- (h) management of outpatient medical emergencies;
- (i) extrication of patients and lifting and moving techniques;
- (j) management of musculoskeletal and soft tissue injuries to include dressing and bandaging wounds and the splinting of fractures, dislocations, sprains or strains; or
- (k) use of backboards to immobilize the spine. Any person who is certified as a crash injury management technician on the effective date of this act may apply for certification as a first re-

( n ) Perform, during "non-emergency transportation", those activities specified in this section when specifically authorized to perform such activities by written protocols approved by the local component medical society.



ponder or emergency medical technician as prescribed by rules and regulations adopted by the board.

3 Sec. 6. K.S.A. 1990 Supp. 65-6123 is hereby amended to read  
4 as follows: 65-6123. Notwithstanding any other provision of law to  
5 the contrary, an emergency medical technician-defibrillator:

6 (a) May perform any of the activities described by K.S.A. 1988  
7 1990 Supp. 65-6121, and amendments thereto, which an emergency  
8 medical technician may perform;

9 (b) when approved by the local component medical society and  
10 where voice contact by radio or telephone is monitored by a person  
11 licensed to practice medicine and surgery or a registered professional  
12 nurse, where authorized by a person licensed to practice medicine  
13 and surgery, and direct communication is maintained, upon order  
14 of such person or such nurse, may perform electrocardiographic  
15 monitoring and defibrillation; or

licensed

or

16 (c) perform, during an emergency, those activities specified in  
17 subsection (b) before contacting the person licensed to practice med-  
18 icine and surgery or authorized registered professional nurse when  
19 specifically authorized to perform such activities by written protocols  
20 approved by the local component medical society; or

licensed

21 ~~(d) during training, under the direct supervision of a qualified~~  
22 ~~instructor, perform those activities authorized by this section and~~  
23 ~~K.S.A. 1990 Supp. 65-6121, and amendments thereto.~~

.

( d ) Perform, during "non-emergency transportation", those activities specified in this section when specifically authorized to perform such activities by written protocols approved by the local component medical society.

24 Sec. 7. K.S.A. 1990 Supp. 65-6129 is hereby amended to read  
25 as follows: 65-6129. (a) Application for an attendant's or instructor  
26 coordinator's certificate shall be made to the emergency medical  
27 services board upon forms provided by the administrator. The board  
28 may grant an attendant's or instructor coordinator's certificate to an  
29 applicant who: (1) Has made application within one year after suc-  
30 cessfully completing the appropriate course of instruction for the  
31 classification of attendant's or instructor coordinator's certificate for  
32 which application has been made; (2) has passed an examination  
33 prescribed by the board; and (3) has paid a fee for the classification  
34 of attendant's or instructor coordinator's certificate for which ap-  
35 plication has been made as prescribed by rule and regulation of the  
36 board.

37 (b) An attendant applying for a crash injury management tech-  
38 nician's or instructor coordinator's certificate shall have successfully  
39 completed a course of training, approved by the board, in prelim-  
40 inary emergency medical care instructing and coordinating at-  
41 tendant training programs. An attendant applying for an emergency  
42 medical technician's certificate shall have successfully completed a  
43 course of training, approved by the board, in preliminary emergency

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1 medical care. An attendant applying for a mobile intensive care  
2 technician's certificate shall have successfully completed a course of  
3 training, approved by the board, which shall include, but not be  
4 limited to, didactic and clinical experience in a cardiac care unit and  
5 in an emergency vehicle unit. An attendant applying for an emer-  
6 gency medical technician-intermediate certificate shall have been  
7 certified as an emergency medical technician and, after certification  
8 as an emergency medical technician, shall have successfully com-  
9 pleted a course of training, approved by the board, which shall  
10 include training in veni-puncture for blood sampling and adminis-  
11 tration of intravenous fluids and advanced patient assessment. An  
12 attendant applying for an emergency medical technician-defibrillator  
13 certificate shall have been certified as an emergency medical tech-  
14 nician and, after certification as an emergency medical technician,  
15 shall have completed a training program approved by the emergency  
16 medical services board. Any program of instruction or training offered  
17 by the armed forces of the United States or in a jurisdiction other  
18 than Kansas, which program is at least equivalent to the program  
19 approved by the board for the class of attendant's certificate applied  
20 for, shall be granted reciprocity by the board for purposes of sat-  
21 isfying the requirements of subsection (a)(1) of this section.

22 (c) An attendant's or instructor coordinator's certificate shall be  
23 valid through December 31 of the year following the date of its  
24 initial issuance and may be renewed thereafter for a period of one  
25 year for each renewal for a fee as prescribed by rule and regulation  
26 of the board upon presentation of satisfactory proof that the attendant  
27 has successfully completed continuing education in emergency med-  
28 ical care as provided in this subsection. Attendants shall complete  
29 not less than eight hours of continuing education as prescribed and  
30 approved by the emergency medical services board for each full  
31 calendar year that has elapsed since the certification or the last  
32 renewal thereof. If a certificate is not renewed within 30 days after  
33 its expiration such certificate shall be void.

34 (d) The emergency medical services board may issue a temporary  
35 certificate to any person who has not qualified for an attendant's  
36 certificate under subsection (a) when:

37 (1) The operator for whom such person serves as an attendant  
38 requests a temporary certificate for that person; and

39 (2) such person meets or exceeds minimum training prescribed  
40 by the board by rules and regulations.

41 A temporary certificate shall be effective for one year from the  
42 date of its issuance or until the person has qualified as an attendant  
43 under subsection (a), whichever comes first. A temporary certificate

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shall not be renewed and shall be valid only while an attendant works for the operator requesting the temporary certificate.

(e) At least once each month all fees received pursuant to the provisions of this section shall be remitted to the state treasurer. Upon receipt of each such remittance, the state treasurer shall deposit the entire amount thereof in the state treasury to the credit of the state general fund.

(f) If, within two years of the date of expiration of an attendant's or instructor coordinator's certificate, such person applies for renewal of the certificate, the board may grant a certificate to such applicant without such applicant completing a course of instruction specified in subsection (b) if the applicant has passed an examination prescribed by the board completed continuing education requirements and has paid a fee prescribed by rule and regulation of the board.

Sec. 8. K.S.A. 1990 Supp. 65-6112, 65-6119, 65-6120, 65-6121, 65-6122, 65-6123 and ~~65-6129~~ are hereby repealed.

Sec. 9. This act shall take effect and be in force from and after its publication in the statute book.

See attached for Sec. 8. K.S.A. 65-6145  
, 65-6129 and 65-6145

8  
1

Sec. 8. K.S.A. 1990 Supp. 65-6145 is hereby amended to read as follows: 65-6145. Nothing in this act shall be construed: (a) To preclude any municipality from licensing or otherwise regulating first responders operating within its jurisdiction, but any licensing requirements or regulations imposed by a municipality shall be in addition to and not in lieu of the provisions of this act and the rules and regulations adopted pursuant to this act;

(b) to preclude any person certified as an attendant from providing emergency medical services to persons requiring such services; or

(c) to preclude any individual who is not a certified first responder from providing assistance during an emergency so long as such individual does not represent oneself to be a certified first responder;

(d) to preclude the provision of authorized activities by students enrolled in an initial course of training or continuing education approved by the board when supervised by a qualified instructor; or

(e) to authorize the practice of nursing, as defined in K.S.A. 65-1113, and amendments thereto, unless licensed to do so.

3/7/90

1 RS 1297

Substitute for SENATE BILL NO. 273

By Committee on Local Government

AN ACT concerning first responders and attendants; relating to peer review.

Be it enacted by the Legislature of the State of Kansas:

Section 1. (a) When used in this act:

(1) "First responder" shall have the same meaning ascribed thereto by K.S.A. 1990 Supp. 65-6112, and amendments thereto;

(2) "attendant" shall have the same meaning ascribed thereto by K.S.A. 1990 Supp. 65-6112, and amendments thereto;

(3) "peer review" means any of the following functions:

(A) Evaluate and improve the quality of services rendered by first responders or attendants;

(B) determine that services rendered were provided pursuant to law or written protocols approved by the local component medical society and were performed in compliance with the applicable standard of care;

(C) evaluate the qualifications, competence and performance of first responders or attendants or to act upon matters relating to the discipline of any individual first responder or attendant;

(D) reduce morbidity or mortality;

(E) review the professional qualifications or activities of first responders or attendants;

(F) evaluate, review or improve methods, procedures or treatments being utilized by first responders or attendants.

(4) "peer review officer or committee" means an individual employed, designated or appointed by, or a committee of or employed, designated or appointed by the operator of an ambulance service as defined by K.S.A. 65-6112, and amendments thereto, or a state or local association of ambulance services, attendants or first responders and authorized to perform peer review.

Senate L.G.  
3-8-91  
Attachment 2

(b) Except as provided by K.S.A. 60-437, and amendments thereto, and by subsections (c) and (d), the reports, statements, memoranda, proceedings, findings and other records of peer review committees or officers shall be privileged and shall not be subject to discovery, subpoena or other means of legal compulsion for their release to any person or entity or be admissible in evidence in any civil, criminal or any administrative proceeding. Information contained in such records shall not be discoverable or admissible at trial in the form of testimony by an individual who participated in the peer review process. This privilege may be claimed by the legal entity creating the peer review committee or officer.

(c) Subsection (b) shall not apply to proceedings in which a first responder or attendant contests the revocation, limitation, modification or suspension of certification thereof.

(d) A peer review committee or officer shall report to the emergency medical services board any disciplinary action or recommendation of such committee or officer and shall transfer to the board the records of such committee's or officer's proceedings. Reports and records so furnished shall not be subject to discovery, subpoena or other means of legal compulsion for their release to any person or entity and shall not be admissible in evidence in any civil, criminal or any administrative proceeding other than a disciplinary proceeding by the emergency medical services board.

(e) A peer review committee or officer may report to and discuss its activities, information and findings to other peer review committees or officers or operator of an ambulance service without waiver of the privilege provided by subsection (b) and the records of all such committees or officers relating to such report shall be privileged as provided by subsection (b).

Sec. 2. This act shall take effect and be in force from and after its publication in the statute book.