


STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

OEMS COMMUNICATION #13-02

TO: All EMS Care Providers

FROM: Raphael M. Barishansky, Director 
Office of Emergency Medical Services

DATE: January 28, 2013

SUBJECT: Standbys for Emergency Medical Services

In response to questions from emergency medical service (EMS) organizations, the following is provided to assist in understanding requirements regarding the provision of standby emergency medical services.

Individual EMS providers may only function within the EMS system¹ and may only provide standby emergency medical services when acting as part of a certified or licensed EMS organization or the emergency department of a licensed acute care facility. Individual EMS providers may not independently contract to perform standby EMS services.

It has been established that EMS organizations may not contract for the provision of emergency services outside of their primary service area (PSA)². In cases where an EMS organization is requested to provide standby emergency services in a location where they are not the assigned primary service area responder (PSAR) for the requested level of service to be provided, they must comply with the following:

- Obtain prior approval from the PSAR holder, in either written or electronic form, to provide the requested standby emergency service in place of the PSAR on a mutual aid basis. This approval should specify any restrictions or limitations regarding the location, time frame or provision of service during the standby period.

- Possess on-site, two-way radio communication with the local 911 dispatch center.³

EMS organizations that are requested to provide standby emergency medical services within their PSA are only entitled to provide the level of service for which they are both authorized and assigned as PSAR. For example, the assigned basic ambulance service PSAR is only entitled to provide a BLS standby ambulance within their PSA, not an individual EMS provider. If this same EMS organization is the assigned first response PSAR or has been authorized by the assigned first responder PSAR, they may then deliver first responder standby services via a single EMS provider from their organization. With prior written arrangement between the assigned PSARs and local 911 dispatch center, dispatch protocols may be adjusted to modify which resources are dispatched to medical calls where a standby EMS unit is already present. Any modification should ensure the patient is provided the appropriate level of EMS care in a timely and consistent manner.

¹ Regulations of Connecticut State Agencies §19a-179-9

² Connecticut DPH Declaratory Ruling Concerning the Provision of EMS, February 14, 2003, p34

³ Regulations of Connecticut State Agencies § 19a-179-11(d)

Prior to providing dedicated standby EMS services within either their or another PSA, services are reminded that they must continue to be able to provide EMS response within their assigned PSA pursuant to §19a-179-11 "Availability of response services."