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Senator Lamar Alexander
Chairman
US Senate Health, Education, Labor and
Pensions Committee
455 Dirksen Senate Office Building
Washington, DC 20510

Senator Patty Murray
Ranking Member
US Senate Health, Education, Labor and
Pensions Committee
154 Russell Senate Office Building
Washington, DC 20510

Dear Chairman Alexander and Ranking Member Murray,

On behalf of the more than 43,000 members of the Emergency Nurses Association (ENA) and the more than 180,000 emergency nurses across the country, we thank you for the opportunity to provide our comments and recommendations to the discussion draft of legislation to reauthorize the Pandemic and All-Hazards Preparedness and Advancing Innovation Act (PAHPA).

Emergency nurses are a critical component of the nation's efforts to respond to hazards and emergencies through the programs authorized by PAHPA. They are specifically trained in rapid patient assessment, triage, and stabilization of large numbers of unknown and acutely ill or injured patients. These are precisely the types of skills in high demand during any disaster or public health emergency. In addition to providing our general support for the reauthorization of PAHPA, we recommend the Committee consider the following proposals to improve this important legislation.

Military Injury and Surgical Systems Integrated Operationally Nationwide to Achieve ZERO Preventable Deaths Act (MISSION ZERO Act)

The National Academies of Science, Engineering and Medicine (NASEM) in June 2016 published a number of recommendations to redesign, restructure and refocus the nation's fragmented trauma system. The recommendations were contained inside a report titled, "A National Trauma System: Integrating Military and Civilian Trauma Systems to Achieve Zero Preventable Deaths After Injury." NASEM cited that since the start of conflicts in Afghanistan and Iraq, the military survival rate for casualties reaching a field hospital is 98 percent. This level of success has not yet been seen in the civilian sector, where NASEM estimates that as many as 30,000 deaths from traumatic injury could be prevented annually.

The rise in the number of mass casualty events in the United States serves to highlight the critical need to rapidly improve trauma care. Given the military's success in treating traumatic injuries on the battlefield, their expertise could serve as an invaluable resource for civilian trauma centers. The MISSION ZERO Act (S. 1022/H.R. 880), introduced by Senator Johnny Isakson and Representative Michael Burgess, draws directly from the recommendations of the NASEM report. It would establish new grant programs to enable military trauma teams and providers to provide trauma care and other acute care at civilian trauma centers. This would have the dual effect of providing opportunities for the transfer of knowledge and techniques from military to civilian as well as fostering the continued readiness of military care providers through real-world training in civilian trauma centers. The MISSION ZERO Act was passed by the House of Representatives by voice vote on February 26, 2018.

Good Samaritan Health Professionals Act

Disasters such as hurricanes, earthquakes and tornadoes can strike with little to no warning, and often include mass casualties that can stress local health care systems and affect their ability to provide effective, lifesaving care. Emergency nurses and other health care professionals have specialized education and training that provides them with skills which are invaluable to relieving the strain and burden placed on a system during a disaster.

We applaud language in the discussion draft to encourage states to better communicate existing mechanisms and processes for waiving the licensure requirements to volunteer during a public health emergency. However, while this can provide assistance with licensing concerns, it does not include additional protections from civil liability for emergency nurses and other health care professionals. Exposure to legal liability serves as a powerful disincentive to health care professionals from volunteering at the very time their expertise and skills are needed most.

The Volunteer Protection Act, enacted in 1997, already provides limited liability protections in both state and federal courts for most volunteers if those volunteers are acting on behalf of a qualified nonprofit or governmental organization. However, this protection does not apply to health care professionals who would like to volunteer during a disaster outside a formal relationship with a nonprofit or government agency.

The Good Samaritan Health Professionals Act (S. 781/H.R. 880) takes important steps to ensure that any licensed health care professional, including emergency nurses, can volunteer their services during a federally-declared disaster or public health emergency, without fear of legal liability for doing their job in good faith and without the need to be affiliated with a nonprofit or governmental agency. The bill is limited in scope, as it only applies to licensed health care professionals and only provides protection against ordinary negligence. S. 781 would not protect a professional against claims of willful or criminal misconduct, gross negligence, or being under the influence of drugs or alcohol. We believe this legislation will close existing gaps in liability protection that discourage volunteerism.

The Good Samaritan Health Professionals Act was introduced by Senator Bill Cassidy and Representative Marsha Blackburn. It was approved by the House Energy and Commerce Committee by voice vote on February 14, 2018.

In addition to the general reauthorization of the PAHPA programs, we call upon you to include our recommendations as you continue to develop this legislation. ENA remains committed to working with the Congress to ensure that our nation's critical health care systems are operational and effective, regardless of the circumstances. We would like to thank you for considering our requests and for your leadership on this critical issue. If you have any questions, please contact ENA's Chief Government Relations Officer, Richard Mereu, at 202-741-9373.

Sincerely,



Jeff Solheim, MSN, RN, CEN, TCRN, CFRN, FAEN, FAAN
2018 ENA President