

regarding the committed person's treatment and prognosis, medication, behavior problems, and other records relevant to the issue of whether treatment less restrictive than inpatient treatment is in the best interest of the committed person or others. Information shall be disclosed only after giving notice to the committed person and the person's counsel.

(10) To appropriate law enforcement agencies and to a person, when the identity of the person is known to the public or private agency, whose health and safety has been threatened, or who is known to have been repeatedly harassed, by the patient. The person may designate a representative to receive the disclosure. The disclosure shall be made by the professional person in charge of the public or private agency or his or her designee and shall include the dates of admission, discharge, authorized or unauthorized absence from the agency's facility, and only such other information that is pertinent to the threat or harassment. The decision to disclose or not shall not result in civil liability for the agency or its employees so long as the decision was reached in good faith and without gross negligence.

The fact of admission, as well as all records, files, evidence, findings, or orders made, prepared, collected, or maintained pursuant to this chapter shall not be admissible as evidence in any legal proceeding outside this chapter without the written consent of the person who was the subject of the proceeding. The records and files maintained in any court proceeding pursuant to this chapter shall be confidential and available subsequent to such proceedings only to the person who was the subject of the proceeding or his attorney. In addition, the court may order the subsequent release or use of such records or files only upon good cause shown if the court finds that appropriate safeguards for strict confidentiality are and will be maintained.

Passed the House February 14, 1986.

Passed the Senate March 3, 1986.

Approved by the Governor March 12, 1986.

Filed in Office of Secretary of State March 12, 1986.

CHAPTER 68

[House Bill No. 1776]

EMERGENCY MEDICAL PROGRAM DIRECTORS

AN ACT Relating to emergency medical program directors; amending RCW 18.71.205, 18.71.210, and 18.71.215; adding new sections to chapter 18.71 RCW; and declaring an emergency.

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

Sec. 1. Section 3, chapter 55, Laws of 1977 as amended by section 2, chapter 112, Laws of 1983 and RCW 18.71.205 are each amended to read as follows:

(1) The secretary of the department of social and health services, in conjunction with the advice and assistance of the emergency medical services committee as prescribed in RCW 18.73.050, and the board of medical examiners, shall prescribe:

(a) Minimum standards and performance requirements for the certification and recertification of physician's trained intravenous therapy technicians, airway management technicians, and mobile intensive care paramedics; and

(b) Procedures for certification, recertification, and decertification of physician's trained intravenous therapy technicians, airway management technicians, and mobile intensive care paramedics.

(2) Initial certification shall be for a period of two years.

(3) Recertification shall be granted upon proof of continuing satisfactory performance and education, and shall be for a period of two years.

(4) As used in chapters 18.71 and 18.73 RCW, "approved medical program director" means a person who:

(a) Is licensed to practice medicine and surgery pursuant to chapter 18.71 RCW or osteopathy and surgery pursuant to chapter 18.57 RCW; and

(b) Is qualified and knowledgeable in the administration and management of emergency care and services; and

(c) Is so certified by the department of social and health services for a county or group of counties in coordination with the recommendations of the local medical community and local emergency medical services council.

NEW SECTION. Sec. 2. A new section is added to chapter 18.71 RCW to read as follows:

The secretary of the department of social and health services, in conjunction with the state emergency medical services committee, shall evaluate, certify and terminate certification of medical program directors, and prescribe minimum standards defining duties and responsibilities and performance of duties and responsibilities.

NEW SECTION. Sec. 3. A new section is added to chapter 18.71 RCW to read as follows:

If a medical program director terminates certification, that medical program director's authority may be delegated by the department to any other licensed physician for a period of thirty days, or until a new medical program director is certified, whichever comes first.

Sec. 4. Section 3, chapter 305, Laws of 1971 ex. sess. as last amended by section 3, chapter 112, Laws of 1983 and RCW 18.71.210 are each amended to read as follows:

No act or omission of any physician's trained mobile intensive care paramedic, intravenous therapy technician, or airway management technician, as defined in RCW 18.71.200 as now or hereafter amended, or of any

emergency medical technician as defined in RCW 18.73.030, done or omitted in good faith while rendering emergency medical service under the responsible supervision and control of a licensed physician or an approved medical program director or delegate(s) to a person who (~~is in imminent danger of loss of life or~~) has suffered (~~(grievous)~~) illness or bodily injury shall impose any liability upon:

- (1) The trained mobile intensive care paramedic, intravenous therapy technician, or airway management technician;
- (2) The medical program director;
- (3) The supervising physician(s);
- (4) Any hospital, the officers, members of the staff, nurses, or other employees of a hospital;
- (5) Any training agency or training physician(s);
- (6) Any licensed ambulance service; or
- (7) ((~~A~~)) Any federal, state, county, city or other local governmental unit or employees of such a governmental unit.

This section shall apply to an act or omission committed or omitted in the performance of the actual emergency medical procedures and not in the commission or omission of an act which is not within the field of medical expertise of the physician's trained mobile intensive care paramedic, intravenous therapy technician, or airway management technician, as the case may be.

This section shall not relieve a physician or a hospital of any duty otherwise imposed by law upon such physician or hospital for the designation or training of a physician's trained mobile intensive care paramedic, intravenous therapy technician, or airway management technician, nor shall this section relieve any individual or other entity listed in this section of any duty otherwise imposed by law for the provision or maintenance of equipment to be used by the physician's trained mobile intensive care paramedics, intravenous therapy technicians, or airway management technicians.

This section shall not apply to any act or omission which constitutes either gross negligence or wilful or wanton conduct.

Sec. 5. Section 4, chapter 112, Laws of 1983 and RCW 18.71.215 are each amended to read as follows:

The department of social and health services shall defend and hold harmless approved medical program directors, delegates, or agents for any act or omission committed or omitted in good faith in the performance of (~~(administrative nonmedical procedures for certification, recertification, and decertification of physician's trained mobile intravenous therapy technicians, airway management technicians, and mobile intensive care paramedics)~~) his or her duties.

NEW SECTION. Sec. 6. This act is necessary for the immediate preservation of the public peace, health, and safety, the support of the state

government and its existing public institutions, and shall take effect immediately.

Passed the House February 14, 1986.

Passed the Senate March 1, 1986.

Approved by the Governor March 12, 1986.

Filed in Office of Secretary of State March 12, 1986.

CHAPTER 69

[Substitute House Bill No. 2011]

INSURANCE AGENTS, SOLICITORS, BROKERS—FUNDS REPRESENTING PREMIUMS OR RETURN PREMIUMS—SEPARATE FUNDS

AN ACT Relating to funds of insurance brokers, agents, and solicitors; adding a new section to chapter 48.17 RCW; prescribing penalties; and providing an effective date.

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

NEW SECTION. Sec. 1. A new section is added to chapter 48.17 RCW to read as follows:

(1) All funds representing premiums or return premiums received by an agent, solicitor or broker in his or her fiduciary capacity shall be accounted for and maintained in a separate account from all other business and personal funds.

(2) An agent, solicitor or broker shall not commingle or otherwise combine premiums with any other moneys, except as provided in subsection (3) of this section.

(3) An agent, solicitor or broker may commingle with premium funds any additional funds as he or she may deem prudent for the purpose of advancing premiums, establishing reserves for the paying of return premiums, or for any contingencies as may arise in his or her business of receiving and transmitting premium or return premium funds.

(4) Each wilful violation of this section shall constitute a misdemeanor.

NEW SECTION. Sec. 2. This act shall take effect on January 1, 1987.

Passed the House February 17, 1986.

Passed the Senate March 3, 1986.

Approved by the Governor March 12, 1986.

Filed in Office of Secretary of State March 12, 1986.

CHAPTER 70

[Engrossed Substitute House Bill No. 1892]

TELECOMMUNICATION SERVICES—TAXATION BY CITIES

AN ACT Relating to the taxation of telecommunications services by cities; amending RCW 35.21.714 and 35A.82.060; adding new sections to chapter 35.21 RCW; adding new sections to chapter 35A.82 RCW; and providing an effective date.