council on health promotion

The Emergency Medical Services Committee: A historical perspective

he Emergency Medical Services Committee (EMSC) has played an important role for Doctors of BC over the past 50 years. Functioning under the umbrella of the Council of Health Promotion, the committee was established to be the formal medical liaison with the Office of the Superintendent of Motor Vehicles (OSMV) in BC. Its purpose was to address medical issues affecting safe driving in British Columbia and to look for solutions.

The relationship between the EMSC and government has provided a consistent example of doctors and government representatives working constructively together for the public good. The committee's work with the Superintendent of Motor Vehicles and his staff has never been adversely affected by political or other difficulties between Doctors of BC and governments over the years.

Early in this relationship, Doctors of BC and the OSMV jointly developed the first British Columbia Driver Fitness Handbook for Medical Professionals, the first editor being committee member Dr Tony Larson. This publication, upgraded and revised every few years, has become a useful handbook for physicians assessing their patients' driving capabilities. The Canadian Medical Association later developed a similar guide for other provinces, using the BC guide as a template.

The BC guide remains a changing document as courts move away from accepting doctors' opinions regarding driving restrictions and demand more

This article is the opinion of the Council on Health Promotion and has not been peer reviewed by the BCMJ Editorial Board.

scientific evidence. As well, there have been court battles over whether driving a motor vehicle constitutes a right or a privilege. Adding to physicians' difficulties have been governments' expectations for physicians to report unsafe drivers as part of their medical practice obligations. Human rights groups, seniors' organizations, and others have also consistently lobbied for application of fewer driving restrictions. Such issues continue to be points of frequent discussion and planning by this committee.

In the 1960s, no formally trained emergency physicians worked in the province. Rotating interns provided emergency medical service for BC hospitals. By the mid-1970s, physicians with an emergency focus started taking over duties in emergency departments and by 1983 a new emergency medicine specialty was established under the supervision of the Royal College of Physicians and Surgeons of Canada.

Emergency doctors had been advocating for laws to improve motor vehicle safety for some time. The EMSC, on behalf of Doctors of BC and under the direction of emergency physician Dr Herb Parkin, initiated a successful public campaign in the late 1970s to establish laws requiring compulsory adult seatbelt usage in all motor vehicles. In 1982 a second public campaign was initiated by Doctors of BC to safeguard children in motor vehicles by requiring the use of infant car seats and booster seats. Children had been omitted from earlier legislation due to a lack of infant car-seat standards. I was the spokesperson for that campaign, conducted by the EMSC and the association's Child Care Committee. The

subsequent response by government proved much slower, as infant carseat laws didn't come into effect until March 1985.

Around the time that new emergency courses for medical and trauma care were developed, emergency medicine became a significant committee focus under Chair Dr Norm Hamilton, a trauma surgeon. The Canadian Council of Family Practice developed an emergency medicine training program and emergency pediatricians also appeared on the scene in the 1980s. Newborn and pediatric resuscitation courses were added to emergency training procedures.

The BC Ambulance Service was another area of committee interest. Dr Peter Ransford of Victoria, one of the early BC driver guide editors, was the first medical director for the BC Ambulance Service and played a major role in its development. Dr Ransford also focused on disaster planning, reminding the committee about portable mobile hospitals that the federal government had organized and funded in the 1950s for the province, and requesting information on where they were being stored.

Among other issues, the EMSC, under Chair Dr Roy Purssell, continues its interest in disaster planning based on a perceived lack of awareness regarding expectations and a potential lack of involvement of BC's physicians in the event of such an occurrence.

> -David F. Smith, MD, FRCPC Member, Emergency Medical **Services Committee**