

GOALS - 2008 (Never adopted)

NEW GOALS - In response to NHTSA TAT & other Environmental Conditions.

S-1 <i>KBEMS will retain a State EMS medical director to advise the Board and Staff.</i>						
Obj.	TASKS	Start Date	End Date	POC	Stat	Comments
SRO 1.1	The state EMS medical director will assist staff in the development of a virtual EMS medical director resource center.					
	The resource center will include training materials and processes to orient local medical directors to their duties and responsibilities, resources pertaining to support local medical directors and standardized minimum protocols for all levels of personnel.					
SRO 1.2	The state EMS medical director will oversee the development of a consensus-based process to develop a set of statewide protocols for each level of personnel Protocols shall be consistent with the formal Kansas interpretation of the National Scope of Practice and shall represent the minimum acceptable treatment of patients consistent with the level of certification of the personnel.					
	Additional protocols reflective of enrichment modules, as appropriate for each level of certification will also be developed.					
	A formal BEMS approval process for local medical director adaptation of protocols above the baseline, but still within the scope of practice, will be established, enforced and monitored.					
SRO 1.3	The state EMS medical director will work with select local medical directors, APCO, law enforcement agencies, Kansas Association of Counties, the League of Kansas Municipalities and other key stakeholders to establish suggested minimum standards for emergency medical dispatch training.					
	Establish a framework for local EMS medical directors to oversee the medical aspects of local dispatch agencies, e.g. pre-arrival dispatch instructions					
	Include dispatch personnel and data in local performance improvement activities.					
SRO 1.4	The state EMS medical director will work with select local medical directors and EMS agency managers to develop guidelines and training programs for quality/performance improvement processes at the local, regional and state level.					
SRO 1.5	In collaboration with fire fighting organizations, law enforcement, private industry and other broad categories of non-transporting first response agencies, develop regulations (to be phased in) pertaining to the oversight of non-transporting first response agencies.					

Obj.	TASKS	Start Date	End Date	POC	Stat	Comments
	All agencies providing non-transporting first response must be affiliated with a sponsoring licensed, transporting EMS agency.					
	All non-transporting first response units must meet minimum equipment and operational standards set by the BEMS consistent with the level of certification of their personnel.					
	All licensed, transporting EMS agencies that have affiliated first response agencies operating under their aegis must provide medical oversight to those agencies.					
	All non-transporting first response agencies will engage in performance improvement activities with their sponsoring agency.					
	All personnel providing patient care as part of their responsibilities with a non-transporting first response agency must be recommended for continued practice with each certification renewal.					
S-2	<i>Continue with the implementation of a statewide electronic patient care reporting system (KEMIS).</i>					
SRO 2.1	With appropriate input from regional and local EMS agencies, the Executive Committee will collect, analyze and provide aggregate reports, based on the required data elements submitted to KSBEMS.(Moved from 2005 Plan)					
SRO 2.2	The Kansas Board of Emergency Medical Services will work collaboratively with other agencies and organizations with similar missions of improving the public's health and the health care system of Kansas to integrate and link data from the Kansas EMS Incident Tracking System, this includes, but is not limited to the trauma registry, vital statistics, and hospital discharge data.(Moved from 2005 Plan)					
S-3	<i>The KSBEMS will facilitate and oversee the development of a statewide EMS plan for Kansas.</i>					
SRO 3.1	Identify a key planning group comprised of BEMS, regional, professional association and select agency representatives. <ul style="list-style-type: none"> · Establish a timeline and assign responsibilities for completing the plan. · Review NASEMSO model EMS planning document. · Review other recent EMS plans. · Draft the skeleton of a statewide plan · Widely circulate the draft plan. Convene a larger group of stakeholders to achieve additional input and consensus. Key planning group to revise plan based on stakeholder input.					
SRO	Approve and adopt statewide EMS plan as a guiding document for the evolution of the					

Obj.	TASKS	Start Date	End Date	POC	Stat	Comments
3.2	Kansas EMS system.					
S-4	<i>Review and revise existing continuing education requirements and criteria to encourage Kansas EMS providers to maintain National Registration beyond the initial certification cycle.</i>					
REVISED GOALS from 2005 Strategic Plan						
S-5	<i>Determine how the KSBEMS will ensure the public well-being by assuring adequate measures of knowledge, skill and performance competencies from EMS training programs.</i>					
SRO	Provide resources for extraordinary expenses that may be associated with the knowledge, skill and performance assurance processes (if any). (Draft Completed)					
5.1						
S-6	<i>PSAP funds for data collection education/training and equipment</i>					
SRO	Have Bob explore opportunities under the PSAP funds to determine the types of funding opportunities that might be available.					
6.1						
SRO	Prioritize allowable activities-KSBEMS, executive committee and staff.					
6.2						
SRO	Notify individual agencies and regions about available funds.					
6.3						
SRO	Support and assist local agencies and regions in the application processes.					
6.4						
S-7	<i>Monitor reasons for non-renewal and/or non-affiliation (EMS/fire/other public safety) of attendants with an eye toward developing programs and incentives to reduce the turnover of those personnel.</i>					
SRO	KSBEMS staff will develop a series of questions that will be mailed to non-renewing personnel.					
7.1						
SRO	KSBEMS staff will review questions contained on the renewal application to clarify issues of "affiliation" to further determine the activity level of certified attendants.					
7.2						
SRO	KSBEMS staff will review and modify questions on the initial student application form to help establish "why" they want to be an EMS provider.					
7.3						
SRO	Reports on the findings will be provided to the KSBEMS, EMS agencies, training programs, regions, fire-based services.					
7.4						
SRO	If there are significant findings, a manuscript will be developed for submission to a peer reviewed EMS or rural health journal. (Target 2010)					
7.5						
S-8	<i>Create a clear identity for the Kansas Board of Emergency Medical Services that is consistent and supportive of the integration of Emergency Medical Services into a public health model at local, regional and state levels.</i>					
SRO	Concurrent with the completion of the strategic plan, KSBEMS staff will develop a series of PowerPoint slide presentations on the strategic plan, targeted at a variety of					

Obj.	TASKS	Start Date	End Date	POC	Stat	Comments
SRO 8.1	audiences, including EMS personnel, medical advisers, government officials, and the general public (EMS personnel slideshow by July 1, 2001, and one additional slideshow monthly until completed).					
SRO 8.2	Upon securing the fiscal and staff resources necessary for printing, distribution, and web-based posting, KSBEMS staff will develop a series of informational brochures for our identified "customers" that summarize and describe KSBEMS's role and programs, regional activities and local EMS (EMS personnel by September 1, 2001, and one additional brochure quarterly until completed).					
SRO 8.3	Based on a format approved by the KSBEMS, at the close of each fiscal year, the administrator and section coordinators of the KSBEMS will develop an annual report that describes activities and programs of the KSBEMS (FY 2001 report by KSBEMS December 2001 meeting and annually thereafter).					
SRO 8.4	Develop a semi-annual electronic newsletter that will be distributed to EMS agency managers and medical directors that highlights BEMS accomplishments, changes and activities.					
SRO 8.5	Using a format approved by the EMS medical directors and administrators, KSBEMS staff will develop reports that share data, information and resources with local medical directors and administrators (beginning one full year following deployment of the Kansas EMS Incident tracking data collection system and semi-annually thereafter).					
SRO 8.6	KSBEMS staff will develop and disseminate a press kit to all daily and weekly newspapers, and radio and television stations that will support the improvement of the KSBEMS "image" (concurrent with the final printing of the KSBEMS strategic plan).					
S-9	<i>Create maximum flexibility in statutes and regulations to support the variations that are necessary to provide the highest attainable and appropriate levels of emergency medical care for the citizens of Kansas regardless of where they live.</i>					
SRO 9.1	The KSBEMS Executive Committee will review all existing EMS statutes to determine how they can be made less restrictive and static so as to promote increased flexibility and the opportunity to make changes through the rules and administrative process (by October 2001).					
SRO 9.2	KSBEMS and legal counsel will introduce and support a legislative package based upon the findings and recommendations of the Executive Committee (by the 2002 filing deadline)					
SRO	The Planning and Coordination Committee will make recommendations to the Executive Committee concerning regulatory action that will be necessary to more					

Obj.	TASKS	Start Date	End Date	POC	Stat	Comments
9.3	effectively and efficiently accommodate changing scopes of practice for EMS providers (by the end of FY 2002).					
Intermediate Range Goals (3 – 5 Years)						
I-1 <i>Maintain current sources of funding to support the Kansas Board of Emergency Medical Services, specifically, and Emergency Medical Service providers, generally, in the State of Kansas.</i>						
IRO 1.1	The Planning and Coordination Committee will identify and analyze, in written form, other funding alternatives including a fee-based structure, private foundation grants, corporate donations and federal grant programs; and present findings from this effort to KSBEMS for approval (concurrent with legislative funding plan development and implementation).					
IRO 1.2	In order to provide legislators with information about EMS and the funding plan and to document the interagency and organizational support of the plan, the Planning and Coordination Committee will develop relationships with agencies and organizations to help KSBEMS and these entities coalesce for the overall improvement of health care in Kansas (beginning with the publication of the KSBEMS’ strategic plan and continuing throughout the funding plan development and request to the legislature).					
I-2 <i>Develop, promote, promulgate, deliver and evaluate quality training programs specifically for Emergency Medical Service Providers, medical directors and administrators. This includes both programs of initial instruction and continuing education and also encompasses issues such as curriculum review and revision.</i>						
IRO 2.1	Under the guidance of the Education and Examination Committee, KSBEMS staff will conduct assessments of the real and perceived training needs of EMS providers, medical directors and administrators/service directors, encompassing possible variations due to geographic location and service delivery affiliation (beginning in FY 2002 -- completed by FY 2003).					
IRO 2.2	Based on the findings of the needs assessments and under the guidance of the Education and Examination Committee, KSBEMS staff will examine and list options for meeting the identified training needs through both traditional and non-traditional delivery structures (beginning in FY 2002 -- completed by FY 2003).					
IRO 2.3	Based on the needs assessment findings, and under the guidance of the Education and Examination Committee, KSBEMS staff will review and revise, develop and/or deliver curricula to meet the identified needs for initial and ongoing training (beginning in FY 2003 -- continuously thereafter).					

Obj.	TASKS	Start Date	End Date	POC	Stat	Comments
IRO 2.4	Under the supervision of the Education and Examination Committee, KSBEMS staff will evaluate satisfaction, process and outcome data to determine the effectiveness of EMS training programs and their delivery methods to be used in the continual revision and refinement of training programs and curricula (beginning in FY 2003 -- ongoing thereafter).					
I-3	<i>Examine the need for, and provide efficient provisions for, expanded scopes of practice for Emergency Medical Services providers that are consistent with the needs of the patients and the local community.</i>					
IRO 3-1	Under the direction of the Planning and Coordination Committee, KSBEMS staff will conduct needs assessments of EMS and other health care agencies and organizations to determine what additional roles EMS providers might play -- based on a staffing enhancement not a staffing replacement model -- that will benefit all parties, including patients (beginning in 2002 -- completed by 2004).					
IRO 3.2	Under the direction of the Planning and Coordination Committee, KSBEMS staff will identify impediments to expanding the scope of practice for EMS personnel (by the end of FY 2003).					
IRO 3-3	The Planning and Coordination Committee will make recommendations to the Executive Committee concerning legislative action to more efficiently accommodate changing scopes of practice for EMS providers (by the end of FY 2004).					
IRO 3-4	The KSBEMS will develop and implement the training and recognition requirements necessary for EMS personnel to participate in expanded scopes of practice (beginning after legislative action and appropriate rule making efforts are completed -- ongoing thereafter).					
I-4	<i>Examine the composition of the Kansas Board of Emergency Medical Services in light of changing demands and directions of Emergency Medical Services in Kansas.</i>					
IRO 4.1	The various committees and subcommittees of the Kansas Board of EMS will examine their membership to identify opportunities for broader representation (beginning immediately).					
IRO 4.2	In a process involving the regions, representative EMS agencies, medical directors and other related parties, the Planning and Coordination Committee will evaluate the existing representation on the KSBEMS and make written recommendations concerning the expansion of the KSBEMS with the purpose of creating a more representative body (beginning in 2002 -- completed in time for submission to the legislative session in 2004, assuming the findings warrant statutory revision).					
I-5	<i>Support and integrate all Emergency Medical Services agencies providing care in Kansas into the statewide Emergency Medical Services system.</i>					

Obj.	TASKS	Start Date	End Date	POC	Stat	Comments
IRO 5.1	The Executive Committee will seek opportunities to revise the statutes to encompass all agencies that provide out-of-hospital emergency medical response into the Emergency Medical Services system (during scheduled review of current statutes).					
IRO 5.2	The Executive Committee and legal counsel will develop language to include all first response agencies in the statutory revision package (concurrent with other statutory development).					
<i>Periodically review issues related to the examination and certification of Emergency Medical Service professionals including, but not limited to: required periodic examination, national versus state or local testing, skill and performance examination and the relationship between the examination/certification process and variances in patient outcomes.</i>						
IRO 6.1	The Education and Examination Committee will conduct a formal review of the examination and certification processes at all personnel levels for appropriateness and relevance (annually or concurrent with the introduction of new curriculum or changes in scope of practice).					
IRO 6.2	The Education and Examination Committee will explore other options for assuring initial and continued competence of EMS personnel that may be more valid, reliable and cost effective (annually or as evidence of the effectiveness of alternative methods emerges).					
<i>Support the development of a more effective and efficient secondary transport system that includes the appropriate dispatch and response of rotor and fixed-wing aircraft and ground transportation.</i>						
IRO 7.1	The Planning and Coordination Committee will coordinate with the Trauma Advisory Committee to establish uniform guidelines for the access and utilization of existing aeromedical and other secondary transport resources. (Beginning in 2001 and ongoing thereafter.)					
<i>Encourage an increased presence of Emergency Medical Services agencies in disaster planning and preparation at all levels of service in Kansas.</i>						
IRO 8.1	The Planning and Coordination Committee will identify an ad hoc sub-committee to work, in conjunction with the EMS Regions, Kansas Department of Health and Environment; Fire Services, County Disaster and Emergency Services, Bioterrorism, Kansas Hospital Association and the Kansas Division of Emergency Management and other pertinent organizations to develop standards of integration of EMS providers into disaster responses and incident management, common decision-making models to					

Obj.	TASKS	Start Date	End Date	POC	Stat	Comments
	categorize incidents, and funding for pre-disaster training and preparation (Beginning in 2001 and ongoing thereafter).					
IRO 8.2	The Disaster sub-committee of the Planning and Coordination Committee will support the identification and development of training programs, resources and opportunities to more fully prepare EMS providers to respond to disaster situations of all types and magnitudes (Beginning in 2002 and ongoing thereafter).					
IRO 8.3	The EMS Regions will periodically assess the need for updating a regional disaster response plan that maximizes the effectiveness of emergency medical response to disasters of various scopes and magnitude both within and outside the region (Beginning in 2002 and bi-annually or as indicated thereafter).					
I-9 <i>Increase the role of Emergency Medical Services providers and agencies in activities of health promotion and disease and injury prevention.</i>						
IRO 9.1	The Planning and Coordination Committee will identify a subcommittee to include public health, health care, industrial, business and agricultural programs and facilities and empower the Public Health subcommittee to promote the integration of EMS into prevention activities through local, regional, private, Kansas Board of Emergency Medical Services and other activities (Beginning in 2002 and ongoing thereafter).					
IRO 9.2	Individuals and agencies responsible for the design and delivery of continuing education programs for EMS personnel will identify opportunities and resources for the involvement of health promotion and disease/injury prevention educators and advocates in continuing education programs (Beginning immediately and ongoing thereafter).					
I-10 <i>Promote persistent and effective public information and education programs to heighten awareness of and support for Emergency Medical Services activities in Kansas.</i>						
IRO 10.1	Under the guidance of the Executive Committee, all members of the Kansas Board of Emergency Medical Services, Staff, Board, Committees and Subcommittees will seek opportunities to continually distribute brochures and other materials targeted for development as a short range objective in this plan (Beginning concurrent with the completion of the first brochure and ongoing thereafter).					
IRO 10.2	Under the guidance of the Executive Committee, all members of the Kansas Board of Emergency Medical Services, Staff, Board, Committees and Subcommittees will seek opportunities to continually distribute brochures and other materials targeted for					

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10.2	development as a short range objective in this plan (Beginning concurrent with the completion of the first brochure and ongoing thereafter).					
IRO 10.3	Kansas Board of Emergency Medical Services staff and board members will encourage state, regional and local EMS agencies to become involved in public information activities during Emergency Medical Services Week and to create other public information and education opportunities (Beginning with the completion of the first brochure and ongoing thereafter).					
IRO 10.4	The Kansas Board of Emergency Medical Services Staff, working in conjunction with the Kansas Department of Transportation will provide opportunities to participate in the Public Information and Education Resources training program developed and sponsored by the U.S. DOT/National Highway Traffic Safety Administration (Beginning in 2001 and at least annually thereafter).					
I-11	<i>Develop, deploy and support programs and processes to increase the recruitment and retention of quality individuals into the Emergency Medical Services profession in frontier, rural, suburban and urban settings.</i>					
IRO 11.1	The Kansas Board of Emergency Medical Services' staff, board and subcommittees; EMS Region's Staff and Boards; and local Emergency Medical Services agencies will seek opportunities to continually distribute brochures and other materials developed in the short range objectives of this plan (Beginning with the completion of the first brochures and slide shows and continually thereafter).					
IRO 11.2	The Planning and Coordination Committee, working with the Executive Committee and staff will explore opportunities to engage (pro bono or paid) an advertising agency to promote the need for and benefits of participating in Emergency Medical Services in Kansas (Beginning in 2002 and ongoing thereafter)					
IRO 11.3	The Planning and Coordination Committee, working with the Executive Committee, staff and an advertising agency (if available) will identify and recruit high profile spokespersons for EMS in Kansas (Beginning in 2002 and ongoing thereafter).					
IRO 11.4	The Planning and Coordination Committee will make recommendations to the Executive Committee concerning the development and support for a legislation creating a "benefits package" for volunteer EMS providers (beginning in FY 2003 – completion not later than 2004).					
IRO 11.5	The Kansas Board of Emergency Medical Services and legal counsel will introduce and support a legislative Emergency Medical Services Benefits Package (by the 2002 filing deadline).					

Obj.	TASKS	Start Date	End Date	POC	Stat	Comments
IRO 11.6	The Kansas Board of Emergency Medical Services' staff will develop and conduct a survey for non-recertifying Emergency Medical Services personnel to determine why they did not recertify (beginning in 2003 and annually thereafter).					
IRO 11.7	The Kansas Board of Emergency Medical Services' staff will report the findings of the non-recertifying survey to the Planning and Coordination Committee (beginning in					
IRO 11.8	The Kansas Board of Emergency Medical Services' staff will develop a mentoring program that encourages and trains "experienced/veteran" Emergency Medical Services providers in recruiting and promoting the next generation of prehospital care providers (beginning in 2004 and ongoing thereafter).					
IRO 11.9	The Planning and Coordination Committee will develop a standard packet of information that can be customized with local information and data and used to educate county commissioners regarding the roles, responsibilities, cost benefits and outcomes of the local Emergency Medical Services agency (Beginning 1 year after the full deployment of the Kansas Emergency Medical Services Incident Tracking System software and continuing thereafter).					
IRO 11.10	The Kansas Board of Emergency Medical Service' staff will develop a survey for Emergency Medical Services providers that indicate that they are not involved with a response agency to determine the barriers to active participation and report these findings in written form to the Planning and Coordination Committee (beginning in 2003 and continuing thereafter).					
IRO 11.11	The Education and Examination Committee with the assistance of Kansas Board of Emergency Medical Services' staff will develop a module to be used during the initial training of Emergency Medical Service providers that identifies "stressors and rewards" of an EMS career (beginning in 2003 and continuing thereafter).					
IRO 11.12	The Education and Examination Committee with the assistance of Kansas Board of Emergency Medical Services' staff will develop an instructional package on "how to" get involved in Emergency Medical Services and stay healthy in that career to be used career fairs and other, similar, opportunities (beginning in 2004 and continuing thereafter).					
IRO 11.12	The Education and Examination Committee with the assistance of Kansas Board of Emergency Medical Services' staff will develop a leadership training program that will prepare out of hospital care providers to fill administrative, training, management					

Obj.	TASKS	Start Date	End Date	POC	Stat	Comments
11.13	and leadership positions at local, regional, state and national levels (beginning in 2005 and continuing thereafter).					
IRO 11.14	The Planning and Coordination Committee with the assistance of Kansas Board of Emergency Medical Services' staff will encourage the development of a voluntary academic track that results in a degree in Emergency Medical Services management and service administration (beginning in 2005 and continuing thereafter).					
I-12	<i>Continue to participate in the development and refinement of a statewide communications system that will allow for effective communication between Emergency Medical Service providers and their medical control authorities, and between and among public safety agencies responding to the scene of a medical emergency or injury.</i>					
IRO 12.1	The Planning and Coordination Committee with the assistance of Kansas Board of Emergency Medical Services' staff will identify and convene an ad hoc Communications subcommittee for the development of a statewide Emergency Medical Services Communications Plan that ensures the ability of all out-of-hospital and hospital agencies to communicate with each other (beginning in 2002 and continuing until task is completed)					
IRO 12.2	The Communications subcommittee will identify the fiscal resources needed to complete the EMS communications system in accordance with the findings of the plan (beginning in 2002 and continuing until task is completed).					
IRO 12.3	The Communications subcommittee, as part of their charge, will evaluate the 900 MHz system currently under construction for its appropriateness and effectiveness as the EMS communications system (beginning in 2002 and continuing until task is completed).					

Obj.	TASKS	Start Date	End Date	POC	Stat	Comments
Long Range Goal (5 – 10 YEARS)						
L-1	<i>Create a cohesive atmosphere of cooperation and collaboration among Emergency Medical Services and related agencies at all levels. This includes the Kansas Board of Emergency Medical Services and its agency counterparts in health, public safety, professional licensing, disaster services and all other appropriately related organizations. It also includes a patient-centered cohesiveness between and among Emergency Medical Service agencies and providers who deliver care in the State of Kansas.</i>					
LRO 1.1	Under the auspices of the Kansas Board of Emergency Medical Services' Planning and Coordination Committee, an ad hoc working group representing the Kansas Board of EMS, Kansas EMT Association, Kansas EMS Association, Kansas Association of Fire Fighters, Kansas Association of Fire Chiefs, and the EMS regions will convene to develop an organizational agenda for a Kansas EMS alliance (beginning in FY 2002 and continuing until the alliance becomes free-standing).					
LRO 1.2	Once the alliance agenda is determined, the ad hoc working group will invite and convene representatives from appropriate organizations and institutions -- see attached list -- to discuss the need for, purpose of, and related agenda for an EMS alliance (first meeting within 12 months of the distribution of the KSBEMS strategic plan).					
	Under the continued auspices of the KSBEMS Planning and Coordination Committee, the ad hoc working group will continue to promote and support the development of an EMS alliance until it becomes firmly established and creates its own infrastructure and agenda. The group will work to promote the recognition of the Emergency Medical					

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RO 1.	<p>agenda. The group will work to promote the recognition of the Emergency Medical Services provider as a health-care professional with unique training, competencies and skills, who contributes to an individual's health in times of acute or chronic crisis, as well as to the general health and well-being of the community that they serve. (until self-sufficiency is achieved)</p>					

GOALS

Obj.	TASKS	Start Date	End Date	POC	Stat	Comments
S-1	<i>KBEMS will retain a State EMS medical director to advise the Board and Staff.</i>					
SRO 1.1	The State EMS medical director will assist staff in the development of a virtual EMS medical director resource center.		7/1/01	E&E Cmte		NREMT - Written
SRO 1.2	Evaluate the financial impact of any/all decisions concerning the practical skills and/or performance scenarios.		8/1/01	Staff		Based on Format - TBD
SRO 1.3	Provide resources for extraordinary expenses that may be associated with the knowledge, skill and performance assurance processes (if any).					Exam Contracted - Rote skills (Currently)
S-2	<i>PSAP funds for data collection education/training and equipment (NEW)</i>					
SRO 2.1	Have Bob (Boaldin) explore opportunities under the PSAP funds to determine types of funding opportunities that might be available					
SRO 2.2	Prioritize allowable activities.			Exec Cmte/		
SRO 2.3	Notify individual agencies and regions about available funds.		On-going			KRAF/EIG/HLS - KDHE
SRO 2.4	Support and assist local agencies and regions in the application processes.					On-line application process - KRAF
S-3	<i>Monitor reasons for non-renewal and/or affiliation (EMS/fire/other public safety) of attendants with an eye toward developing programs and incentives to reduce the turnover of those personnel</i>					
SRO 3.1	KBEMS staff will develop a series of questions that will be mailed to non-renewing personnel.	5/1/08				2 yr survey (2005/2006 cycle)
SRO 3.2	KBEMS staff will review questions contained on the renewal application to clarify issues of "affiliation" to further determine the activity level of certified attendants.					
SRO 3.3	KBEMS Staff will review and modify questions on the initial student application form to help establish "why" they want to be an EMS provider		4/1/12	Attnd nt		
SRO 3.4	Reports on the findings will be provided to the KSBEMS, EMS Agencies , training programs, regions, fire-based services.					
SRO 3.5	If there are significant findings, a manuscript will be developed for submission to a peer reviewed EMS or rural health journal.		3/31/10			

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S-4	<i>Promote a data-driven, quality improvement process that supports appropriate decision making at all levels of Emergency Medical Services in Kansas. This process includes the development and deployment of the Pre-hospital Data Collection System, the collection and analysis of data retrieved as a result of that system and the provision of timely, localized reports and analysis of those data.</i>					
SRO 4.1	KSEMS Staff will procure and/or develop and field-test the Kansas Incident Tracking System Software					KEMSIS
SRO 4.2	KBEMS staff will provide training at central locations and begin the statewide, voluntary deployment of the Kansas EMS Incident Tracking System to Kansas EMS agencies.					KEMSIS Initial regional and subsequent trng conducted
SRO 4.3	With appropriate input from regional and local agencies, the Executive Committee will identify data elements (regardless of data collection software or systems) that must be reported to KBEMS by Kansas EMS Agencies for aggregate surveillance, analysis and reporting.		1/1/08			KEMSIS - taskforce NEMSIS
SRO 4.4	With appropriate input from Regional and local EMS Agencies, the Executive Committee will collect, analyze and provide aggregate reports, based on the required data elements submitted to KSBEMS.		On-going			KEMSIS Individuals may write/run their own reports
SRO 4.5	KBEMS will work collaboratively with other agencies and organizations with similar missions of improving the public's health and the health care system of Kansas to integrate and link data from the Kansas EMS Incident Tracking System, this includes, but its not limited to the trauma registry, vital statistics and hospital discharge data.		On-going			KEMSIS KDHE - Trauma KDOT - Safety NEMSIS
S-5	<i>Create a clear identity for the Kansas Board of Emergency Medical Services that is consistent and supportive of the integration of Emergency Medical Services into a public health model at local, regional and state levels. (OLD S-1)</i>					
SRO 5.1	<i>BEMS will develop a series of PowerPoint presentations on the Strategic Plan, targeted at a variety of audiences including: (OLD SRO 1.1)</i>	FY 2002	FY 2004	Staff		
	EMS Personnel		7/1/01			
	Medical Advisors		8/1/01			
	Government officials		9/1/01			
	General Public		10/1/01			
	Others		11/1/01			

Obj.	TASKS	Start Date	End Date	POC	Stat	Comments
SRO 5.2	<i>Upon securing the fiscal and staff resources necessary for printing, distribution and web-based posting, KBEMS Staff will develop a series of informational brochures for identified customers that summarize and describe KSBEMS' role and programs, regional activities and local EMS : (OLD SRO 2.2)</i>			Staff		
	EMS Personnel (FR, EMT, EMT-I, EMT-D, MICT)					
	First Responder (Job Description) (EMR)				Draft	
	EMT (Job Description)					
	EMT I & D (Job Description)					
	MICT (Job Description)					
	First Responder (Exam Information)					
	EMT (Exam Information)					
	EMT-I (Exam Information)		4/4/02		Done	
	EMT-D (Exam Information)		4/4/02		Done	
	MICT (Exam Information)					
	FR/EMT Retest Information					
	EMT-I & D Retest Information					
	MICT Retest Information					
	Regional Information		10/1/01		Done	
	BEMS Roles & Responsibilities		10/1/01		Done	
	Local EMS					
	KS EMS Statistics				Draft	
	EMS				Draft	
	Star of Life				Draft	
SRO 5.3	<i>Based on a format approved by the KBEMS, at the close of each fiscal year, the administrator and section coordinators of the KSBEMS will develop an annual report that describes activities and programs of the KSBEMS (FY 2001 report by KBEMS December 2001 meeting and annually thereafter).</i>					
SRO 5.4	<i>Working with members of the "EMS Chronicle" and other existing EMS publications, a public information subcommittee of the Planning and</i>					Committee was formed, met twice w/o results

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S-4	<i>Coordination Committee will promote KSBEMS activities (starting not later than September 1, 2001).</i>					
SRO 5.5	<i>Using a format approved by the EMS medical directors and administrators, KSBEMS staff will develop reports that share data, information and resources with local medical directors and administrators (beginning one full year following deployment of the Kansas EMS Incident Tracking data collection system and semi-annually thereafter).</i>					Not Done
SRO 5.6	<i>KSBEMS staff will develop and disseminate a press kit to all daily and weekly newspapers, and radio and television stations that will support the improvement of the KSBEMS "image" (concurrent with the final printing of the KSBEMS strategic plan).</i>					Not Done
S-6	<i>Create maximum flexibility in statutes and regulations to support the variations that are necessary to provide the highest attainable and appropriate levels of emergency care for the citizens of Kansas regardless of where they live. (OLD S-2)</i>					
SRO 6.1	<i>The KSBEMS Exec Cmte will review all existing EMS Statutes to determine how they can be made less restrictive and static so as to promote incresed flexibility and the opportunity to make changes through the rules and administrative process</i>	10/1/01	On-going	Exec		
SRO 6.2	<i>KBEMS and legal counsel will introduce & support a legislative package based upon the finding and recommendations of the Exec Cmte [for SRO 2.1] (OLD S-2.2)</i>	6/30/02	On-going			
SRO 6.3	<i>The P&C Cmte will make recommendations to Exec Cmte concerning regulatory action that will be necessary to more effectively and efficiently accommodate changing scopes of practice for EMS providers (OLD S-2.3)</i>	6/30/02	On-going	P&C/ Exec		

GOALS

I-1	<i>Identify and secure a stable source of funding to support the Kansas Board of Emergency Medical Services, specifically, and Emergency Medical Service providers, generally, in the State of Kansas.</i>					
Obj.	TASKS	Start Date	End Date	Cmte	Status	Comments
IRO 1.1	<i>P&C Cmte develop funding plan outlines resources required to:</i>	FY 2002	FY 2004	P&C		
	Support core functions of BEMS					
	Support the EMS Regions specified in strategic plan					
	Includes grant funds to be distributed, based on need, to local EMS agencies					KRAF, EIG, HLS-KDHE, KDOT
IRO 1.2	<i>In collaboration with legislative staff P&C Cmte will evaluate legislative options</i>	FY 2003	FY 2004	P&C		On-going
	For obtaining the fiscal support levels outlined in funding plan Present a strategy for obtaining such legislative support					
IRO 1.3	<i>Contingent upon a favorable legislative climate, the Exec Cmte will:</i>			Exec		On-going
	Be prepared to approach Legislature Make an initial request for legislative support of the funding plan		FY 2004 FY 2006			
IRO 1.4	<i>P&C Cmte will identify & analyze, in written form, other funding alternatives including</i>	concurr ent w/ IRO 1.1 thru 1.3		P&C		Partial Fee funding
	A fee-based structure					
	Private foundation grants					
	Corporate donations					
	Federal grant programs Then present findings to BEMS for approval (concurrent w/ legislative funding plan development & implementation)				HLS-KDHE, KDOT-KEMISIS	
IRO 1.5	<i>In order to provide legislators w/ information about EMS and the funding plan and to document the interagency and organizational support of the plan the P&C Cmte will evaluate legislative options</i>					
		>FY 2001		P&C		
	Develop relationships with agencies & organizations to help BEMS Coalesce with these entities for improvement of Kansas Health Care				On-going On-going	
I-2	<i>Develop, promote, promulgate, deliver and evaluate quality training programs specifically for Emergency Medical Service Providers, medical directors and administrators. This includes both programs of initial instruction and continuing education</i>					

Obj.	TASKS	Start Date	End Date	Cmte	Status	Comments
I-2	<i>Providers, medical directors and administrators. This includes both programs of initial instruction and continuing education and also encompasses issues such as curriculum review and revision.</i>					
IRO 2.1	<i>Under guidance of E&E Cmte, BEMS staff will assess real/perceived training needs of</i>	FY 2002	FY 2003	E&E		
	EMS providers					Scope of Practice, Transition
	Medical Advisors					MAC/KMS
	Administrators/Service Directors					Regions, KEMSA, KEMTA, KanAMMS
IRO 2.2	<i>BEMS Staff will examine & list options for meeting the identified training needs</i>	FY 2002	FY 2003	Staff		Transition/Scope
IRO 2.3	<i>BEMS Staff will review/revise, develop/deliver curricula to meet identified needs</i>	FY 2003	continuous	Staff		Transition/Scope
IRO 2.4	<i>BEMS Staff will evaluate satisfaction, process & outcome data to determine effectiveness of EMS training programs and their delivery methods to be used in the continual revision and refinement of training programs and curricula</i>	FY 2003	continuous	Staff		On-site CE Inspections - Transitions
I-3	<i>Examine the need for, and provide efficient provisions for expanded scopes of practice for Emergency Medical Services providers that are consistent with the needs of the patients and the local community.</i>					
IRO 4.1	<i>Under the direction of P&C Cmte, BEMS staff will conduct a needs assessment of EMS and other health care agencies and organizations to determine what additional roles EMS Providers might play (based on a staffing enhancement and not a staffing replacement model), that will benefit all parties, including patients.</i>	CY 2002	CY 2004	P&C/Staff		Scope of Practice, Transition,
						First Response Group Protocols
						Regionalization, Community Paramedicine
IRO 4.2	<i>Under the direction of P&C Cmte, BEMS staff will identify impediments to expanding the scope of practice for EMS personnel</i>	End of FY 2003		&C/Staff		KS - Scope of Practice Community Paramedicine
IRO 4.3	<i>The P&C Cmte will make recommendations to the Exec Cmte concerning legislative action to more efficiently accommodate changing scopes of practice for EMS providers</i>	End of FY 2004		&C/Exec		On-going - (MAC/KBEMS)
I-5	<i>Examine the composition of the Kansas Board of Emergency Medical Services in light of changing demands and directions of Emergency Medical Services in Kansas.</i>					
IRO	<i>BEMS committees and subcommittees will examine their membership to</i>					

Obj.	TASKS	Start Date	End Date	Cmte	Status	Comments
IRO 5.1	<i>BEMS Committees and subcommittees will examine their membership to identify opportunities for broader representation</i>	begin stat				Review - Strategic Plan Rvw - 2012
IRO 5.2	<i>In a process involving the regions, representative EMS Agencies, medical directors and other related parties, the P&C Cmte will evaluate the existing representation on the BEMS and make written recommendations concerning the expansion of BEMS with the purpose of creating a more representative body</i>	CY 2002	leg ssn 2004	P&C		Review - Strategic Plan Rvw - 2012
I-6	Support and integrate all Emergency Medical Services agencies providing care in Kansas into the statewide Emergency Medical Services system.					
IRO 6.1	<i>The Exec Cmte will seek opportunities to revise the statutes to encompass all agencies that provide out-of-hospital emergency medical response into the Emergency Medical Services system</i>	during scheduled review		Exec		Scope of Practice First Response Groups
IRO 6.2	<i>The Exec Cmte and legal counsel will develop language to include all first response agencies in the statutory revisions package.</i>	concurrent w/ other statutory development				
I-7	Periodically review issues related to the examination and certification of Emergency Medical Services professional including, but not limited: required periodic examination, national versus state or local testing, skill and performance examination and the relationship between the examination/certification process and variances in patient outcomes.					
IRO 7.1	<i>The E&E Cmte will conduct a formal review of the examination and certification processes at all personnel levels for appropriateness and relevance</i>	annually or concurrent w/		Exec		Practical Exam Process Review
IRO 7.2	<i>The E&E Cmte will explore other options for assuring initial and continuing competence of EMS personnel that may be more valid, reliable and cost effective.</i>	annually or prn		E&E		Credentialing ??
I-8	Support the development of a more effective and efficient secondary transport system that includes the appropriate dispatch and response of rotor and fixed-wing aircraft and ground transportation.					
IRO 8.1	<i>The P&C Cmte will coordinate with the Trauma Advisory Cmte to establish guidelines for the access and utilization of existing aeromedical and other secondary transport services</i>	CY 2001	ongoing	P&C		

Obj.	TASKS	Start Date	End Date	Cmte	Status	Comments
	<i>and other secondary transport services</i>					
I-9	<i>Encourage an increased presence of Emergency Medical Services agencies in disaster planning and preparation at all levels of service in Kansas.</i>					
IRO 9.1	<i>The P&C Cmte will identify an ad hoc sub-cmte to work, in conjunction with the EMS Regions, KS Dept of Hlth & Environ; Fire Svcs, County Disaster & Emer Svcs, Bioterrorism, KS Hosp Assoc and the KS Div of Emer Mngmnt and other pertinent organizations to develop standards of integration of EMS providers into disaster responses and incident management, common decision-making models to responses and incident management, common decision-making models to categorize incidents, and funding for pre-disaster training and preparation.</i>	CY 2001	ongoing	P&C		
IRO 9.2	<i>The Disaster sub-cmte of the P&C Cmte will support the identification and development of training programs, resources & opportunities to more fully prepare EMS providers to respond to disaster situations of all types and magnitudes.</i>	CY 2002	ongoing	P&C		
IRO 9.3	<i>The EMS Regions will periodically assess the needs for updating a regional disaster response plan that maximizes the effectiveness of emergency medical response plan that maximizes the effectiveness of emergency medical response to disasters of various scopes and magnitude both within and outside the region.</i>	CY 2002	ongoing biannual ly prn	Regions		
I-10	<i>Increase the role of Emergency Medical Services providers and agencies in activities of health promotion and disease and injury prevention.</i>					
IRO 10.1	<i>The P&C Cmte will identify a subcmte to include public health, health care, industrial, business & agricultural programs & facilities & empower the Public Health subcmte to promote the integration of EMS into prevention activities thru local, regional, private, BEMS and other activities.</i>	CY 2002	ongoing	P&C		

Obj.	TASKS	Start Date	End Date	Cmte	Status	Comments
	<i>activities.</i>					
IRO 10.2	<i>Individuals and agencies responsible for the design and delivery of continuing education programs for EMS personnel will identify opportunities and resources for involvement of health promotion and disease/injury prevention educators and advocates in continuing education programs.</i>	stat	ongoing			
I-11	<i>Promote persistent and effective public information and education programs to heighten awareness of and support from Emergency Medical Services activities in Kansas.</i>					
IRO 11.1	<i>All members of the Kansas Board of EMS, Staff, Board, Committees & subcommittees will seek opportunities to continually distribute brochures and other materials targeted for the development as a short range objective in this plan.</i>			All		
IRO 11.2	<i>KBEMS staff & Board members will encourage state, regional and local EMS agencies to become involved in public information activities during Emergency Medical Services Week and to create other public information and education opportunities.</i>			oard/Sta		
IRO 11.3	<i>KBEMS Staff, working in conjunction with KDOT will provide opportunities to participate in the Public Information & Education Resources training program developed and sponsored by the USDOT/NHTSA.</i>	CY 2001	annually	Staff		
I-12	<i>Develop, deploy, and support programs and processes to increase recruitment and retention of quality individuals into the Emergency Medial Services profession in frontier, rural, suburban and urban settings.</i>					
IRO 12.1	<i>KBEMS' staff, board & Sub-cmte; EMS Region's Staff & Board; and local EMS agencies will seek opportunities to continually distribute brochures and other materials developed in the short range objectives of this plan.</i>					
IRO	<i>The P&C Cmte, working w/ the Exec Cmte and staff, will explore opportunities to engage (one hour or paid) an advertising agency to</i>	CY 2002	ongoing	&O Exe		

Obj.	TASKS	Start Date	End Date	Cmte	Status	Comments
12.2	<i>opportunities to engage (pro bono or paid) an advertising agency to promote the need for and benefits of participating in EMS in Kansas.</i>	CY 2002	Ongoing	&O, LAC		
IRO 12.3	<i>The P&C Cmte, working w/ the Exec Cmte, staff and an advertising agency (if available) will identify and recruit high profile spokespersons for EMS in Kansas.</i>	CY 2002	ongoing	&O, Exc		
IRO 12.4	<i>The P&C Cmte will make recommendations to the Exec Cmte concerning the development and support for a legislation creating a "benefits package" for volunteer EMS providers.</i>	FY 2003	LT FY '03	&O, Exc		
IRO 12.5	<i>BEMS & legal counsel will introduce & support a legislative EMS Benefits Package.</i>	by '02 filing				
IRO 12.6	<i>BEMS Staff will develop and conduct a survey for non-recertifying EMS personnel to determine why they did not recertify</i>	CY 2003	annually	Staff		
IRO 12.7	<i>BEMS's Staff will report the findings of the non-recertifying survey to the P&C Coord Cmte</i>	CY 2003	annually	Staff		
IRO 12.8	<i>BEMS's Staff will develop a mentoring program that encourages & trains "experienced/veteran" EMS providers in recruiting & promoting the next generation of prehospital care providers.</i>	CY 2004	ongoing	Staff		
IRO 12.9	<i>The P&C Cmte will develop a standard packet of information that can be customized with local information & data and used to educate county commissioners regarding the roles, responsibilities, cost benefits & outcomes of the local EMS agency.</i>	1 yr post software system impleme		P&C		Don't Guess, Call EMS
IRO 12.10	<i>The E & E Cmte, w/ assistance of BEMS' Staff, will develop a module to be used during the initial training of EMS providers that identifies "stressors and rewards" of an EMS career.</i>	CY 2003	ongoing	&E, sta		
IRO 12.11	<i>The E & E Cmte, w/ assistance of BEMS Staff, will develop an instructional package on "how to" get involved in EMS & stay healthy in that career to be used at career fairs & other similar opportunities.</i>	CY 2004	ongoing	&E, sta		
IRO 12.12	<i>The P&C Cmte, w/ assistance of BEMS Staff will develop a leadership training program that will prepare out-of-hospital care providers to fill administrative, training, management & leadership positions at local, regional, state and national levels.</i>	CY 2005	ongoing	&O, sta		
IRO 12.13	<i>The P&C Cmte, w/ assistance of BEMS Staff will encourage the development of a voluntary academic track that results in an degree in EMS management & service administration.</i>	CY 2005	ongoing	&O, sta		
	<i>Continue to participate in the development and refinement of a statewide communications system that will allow for effective</i>					

Obj.	TASKS	Start Date	End Date	Cmte	Status	Comments	
I-13	<i>Continue to participate in the development and refinement of a statewide communications system that will allow for effective communication between Emergency Medical Service providers and their medical control authorities, and between and among public safety agencies responding to the scene of a medical emergency or injury.</i>						
IRO 13.1	<i>The P&C Cmte w/ assistance of BEMS Staff will identify & convene an ad hoc Communications subcmte for the development of a statewide EMS Communications Plan that ensures the ability of all out-of-hospital and hospital agencies to communicate</i>	CY 2002	until completed	&O, sta			
IRO 13.2	<i>The Communications subcmte will identify the fiscal resources needed to complete the EMS Communications system in accordance with the findings of the plan.</i>	CY 2002	until completed	P&C		State-wide System - Emer Mngmnt	
IRO 13.3	<i>The Communications subcmte, as part of their charge, will evaluate the 700, 800 MHz system currently under construction or other technology for its appropriateness & effectiveness as the EMS communications system.</i>	CY 2002	until completed	P&C		State-wide System - Emer Mngmnt	

GOALS

L-1	<i>Create a cohesive atmosphere of cooperation and collaboration among Emergency Medical Services and its agencies at all levels. This includes the Kansas Board of EMS and its agency counterparts in health, public safety, professional licensing, disaster services and all other appropriately related organizations. It also includes a patient-centered cohesiveness between and among Emergency Medical Service agencies and providers who deliver care in the State of Kansas.</i>				
Obj	TASKS	Start Date	End Date	Cmte	Stat
LRO 1.1	Under the auspices of KBEMS' P&O Cmte, an ad hoc working group representing KBEMS, KS EMT Association, KS EMS Association, KS Fire Fighters, KS Association of Fire Chiefs, and the EMS Regions will convene to develop an organizational agenda for a Kansas EMS Alliance.	FY 2002	until alliance is freestan	P&C	
LRO 2.1	Once the alliance agenda is determined, the ad hoc working group will invite & convene representatives from appropriate organizations & institutions to discuss the need for, purpose of, and related agenda for an EMS alliance.	w/i 12 mos of Strat pln distribut		P&C	----- ----- -----
LRO 3.1	Under the continued auspices of KBEMS P&O Cmte, the ad hoc working group will continue to promote & support the development of an EMS alliance until it becomes firmly established & creates its own infrastructure & agenda. The group will work to promote the recognition of the EMS provider as a health-care professional with unique training, competencies and skills, who contributes to an individual's health in times of acute or chronic crisis, as well as to the general health and well-being of the community that they serve.		until self-sufficien t	P&C	----- ----- ----- ----- ----- -----