



# K A N S A S

DENNIS ALLIN, M.D., CHAIR  
STEVEN SUTTON, ACTING ADMINISTRATOR

KATHLEEN SEBELIUS, GOVERNOR

BOARD OF EMERGENCY MEDICAL SERVICES

## MINUTES

### EMERGENCY MEDICAL SERVICES

#### BOARD MEETING

December 2, 2005

#### **Board Members Present**

#### **Guests**

#### **Staff**

Dr. Allin  
Jim McClain  
Michael Ryan  
J. R. Behan  
Joe Megredy  
Dale Wasson  
Rep. Margaret Long  
Comm. Duane Mathes  
Comm. Bob Boaldin

David Lake  
Robert Waller  
Frank Williams  
Kathy Dooley  
Kerry McCue  
Wendy Cronau

Chad Pore  
Rusty Walters  
David Stithem  
J. J. Deckert  
Grant Helferich

Steve Sutton  
Mary E. Mulryan  
Joe Moreland  
Dave Cromwell  
Randy Cardonell

#### **Board Members Absent**

Sen. Chris Steineger  
Rep. Kasha Kelley  
Sen. Jay Emler  
Dr. Daniel Caliendo

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#### **CALL TO ORDER**

*Dr. Allin:* Called the meeting to order at 9:00 am.

#### **APPROVAL OF MINUTES**

*Jim McClain:* I move that we approve the minutes as written. *Joe Megredy:* I second. *Dr. Allin:* Any discussion? All in favor? Any opposed? Motion passed.

### OFFICE UPDATE

**Dr. Allin:** I want to start the office update with a letter that is dated November 30. It starts: “Dear Mr. Lake: On the behalf of the great State of Kansas it is my honor to finally recognize you for nearly 30 years of dedicated leadership within the states emergency medical community. I commend you for your distinguished record of activism and service in such an important field and I specifically thank you for the work you have undertaken most recently as the Administrator of the Kansas State Board of Emergency Medical Services;”...it goes on, but I won’t, it’s signed by Kathleen Sebelius, Governor of the State of Kansas. (Applause) I would like to add our thanks. When David was hired we had very little margin for error. The first thing that he had to do was to go work the Capitol to insure that non of the dozens of bills that were being presented to abolish the Board of EMS would passed and he would still have his job. Obviously he was successful with that. I would like to mention some of the other accomplishments that David has done since he has been with us:

- ✿ We have a Strategic Plan for the Board and the Agency;
- ✿ The Rural Health Options Project has brought in \$215,000 from the Health Flex Program from 2001 to 2005;
- ✿ \$700,000 was made available to local EMS agencies and was distributed throughout the State between 2001 and 2005;
- ✿ There has been \$115,000 to the Regional Councils in BioTerrorism Funds;
- ✿ The Rural AED Program has placed 336 AEDs for a total of \$828,000 to Regions, which some of that was for supplies for CPR and AED training;
- ✿ We have worked diligently on the Advanced Initiatives for EMTs which has served the state.
- ✿ There has been \$400,000 in Education Incentive Grant Money.
- ✿ There is now the \$75,000 for the Pilot for the Data Collection which will serve this state.

David has been phenomenal in his work for the State. He has become a great friend of EMS and he will tell you that he has been proud to represent EMS. He has not considered himself just a representative of the Board, but a representative of the citizens of Kansas. He not only became a great friend to EMS, but he also became a great friend of mine. I would like to call him up and thank him for his service. (Applause) I would also like to give him this gift.

**David Lake:** Thank you very much. I’m not going to repeat a whole lot of what I said last night, but one of the things that Dr. Allin did mention was that I had said what I would miss the most about leaving was the fact that I can’t any longer say that I am the representative of the profession of EMS for the State of Kansas. My good friend from Nebraska, Dean Cole, is here today. We talk about things that they do in Nebraska and we talk about things that we do in Kansas and I just beam with pride knowing that my name is on the attendant’s cards and I am able to speak for them and I try very hard to speak for them and I try to speak well for them and I try to do things that allows them to do their jobs and I know the quality of EMS in Kansas. I really can’t express how that makes me feel and how proud I am of you and how important the profession of EMS is. The opportunity I gained six years ago to go into this position and represent you will never leave my memory. Thank you all very much for what you do for EMS in Kansas, for the citizens of Kansas and as I did say last night and I will say again, make sure your folks understand how important you are to your communities, the role you play, because that role will only grow as we gain more rural areas in Kansas and gain more responsibilities. There are a lot of exciting things to come. I look forward to watching those things grow. I appreciate the staff for all the hard work that they have done. The tolerance that they have had of me in these years. In actually seeing

that those things happen. I was a catalyst for these things, but the hard work in the office is what made things happen and I hope each of you appreciate that as much as I do. I understand there is a new Administrator. I ask that you all give that person the support that you have given me and I would close by telling that person and telling you that you just don't leave EMS after 38 years. I will be around. I will be glad to participate in any role that you might ask me to, but rest assured I am not going to be sticking my nose in where it doesn't belong unless I am asked to. Once again, Dean Cole, thank you so much for coming down. KEMSA, thank you so much for that wonderful party last night, I had a great time. I laid awake until 3:00 in the morning thinking about things that I wish I would have said. It was fun. Thank you very much. Thank you all. Don't forget me because I absolutely will not forget you and I will continue to do everything I can in my power to let people know how important you are. You are Hero's. (Applause)

(David opened his gift and read the saying on it.)

**“David Lake, in recognition of your dedication and leadership as the Administrator to the Board of Emergency Medical Services and the citizens of Kansas. March 1999 through December 2005, Kansas Board of EMS.” Thank you very much.**

**Dr. Allin:** I have one last piece of business during the Office Update. We talk about being family and one of the things that family accepts is a life of change. That's what we do. In families we embrace it. You embrace change, you take change into the future and you grow with it. You learn and you grow and you become convinced that your best days are ahead of you and not behind you. In that vein, I would like to introduce somebody to you that comes to us out of Wichita, Kansas. He graduated from Wichita North. He graduated from Wichita State University. He has a master's in Public Administration. He has worked in the Legislative Research Department since 1999 and has been a trusted analyst, and whether he should have been or not, has been a trusted advisor for years to the Board of EMS. I can tell you that he brings tremendous credibility with the State, with Representatives of the State, he understands the state system. He is well versed in it. I met with him for a couple of hours yesterday and just sat and talked. With the decision making process that he has already showed to me, he will be a tremendous leader of this Board and take us into the future. Keep us going in a forward direction that we have enjoyed so much over the last six years. I would like to introduce you to Mr. Robert Waller. (Applause)

(Dr. Allin commented regarding Robert's allegiance to the Pittsburgh Steelers.)

**Robert Waller:** I would like to say “Hi”. A lot of you I know. A lot of you have seen me here previously providing information. This Board allowed me at times to cross the fence. I crossed the fence as an analyst at times with David's help, or David kind of dragging me along to make sure that I knew you all and I knew your agency. I thank you for this opportunity. I guess I will speak first directly to David. Thank you. At times we had frank and direct discussions over your job, my job, and the purpose of your agency. More than likely I probably crossed the line. I hope I never crossed the line of being an advocate of this Board when I was an analyst, but I know the conversations that we had, I enjoyed and I thank you for that. To EMS, I want to be your advocate. I want to be your friend. The same relationship that you had with David, I want you to have with me. If you need me, you call me. If I have done something you don't like, tell me. If you need to yell, yell. I have a Black Belt. We can sit down and talk about it. I am always available, whether at home, my office, my cell phone, outside of the Steelers game. If the Steelers have lost, I would allow a day before you contact me. I would need a day to allow for the emotional transition. I thank the Board for this opportunity. And to all of you, if

you have not met me, come and shake my hand. I may not remember your name right off, but I will remember your face. I am always approachable. This budget session, I will be pushing for you, what you need, what EMS needs in this state. As the Administrator, I want to do the best for you all. I know that my knowledge of EMS will change because I am going to tap each and every one of your brains so that when we are talking we are talking intelligently about EMS issues. I thank all of you for this opportunity. (Applause)

**Steve Sutton:** The first thing that I would like to do, on behalf of the Board and Board Staff, is sincerely thank KEMSA for the gathering that we had last night for the recognition of David and the stories that we could remember him by. There has been a lot said about David and on the way home last night the thing that came to my mind is how lucky and blest that David is to be recognized by his peers at a time when he can be able to absorb it. Several speakers last night made reference to Don White and Bob Orth. The thing I thought about was that at their funerals, with the outpouring of support, that they never had the opportunity to appreciate it. David, be thankful that you had an opportunity to realize that.

Thank you to Region IV for the refreshments.

- ✿ We had our last Educator Conference in Lawrence on November 5. This year, about 250 attended. This was the first year where we started a voluntary cycle in a sense that we our allowing one meeting every two years so it was interesting to see how many showed up and there is still some confusion about that. Next year Regions II, IV, and VI will be doing the conferences and what we have done at this point is we are still compiling the data, both critiques from the topics as well as the presenters, as well as the comments as far as what topics they would like to have presented and will probably be meeting either late in January or early February to start our plans for this years' meeting.
- ✿ Attendant renewal: as of November 30 we have had a total of 1604 renewed. The interesting thing is based on the statistics from the two prior years, on-line renewal really hasn't had that much of an impact in allowing more people to certify by this point. As of November 29 we have had 1208 renew on paper and about 396 renew on line. This is an average number of renewals for this point in time in the process.
- ✿ Service Inspections will be completed by December 31. Both Dave and Randy have told me that in their process of inspection they seem to be finding less and less errors and regulatory infractions and those that they do find are minor.
- ✿ Joe Moreland has done some Technical Assistance for Allen County since our last meeting. The results of that Technical Assistance and the summary of that data were sent to the Allen County Commission on October 17. The report was based on NITSAs 15 components of an effective ambulance service including Human Resources, Policies, System Finance, Education System, Clinical Care and Transportation, Facilities, Public Access, Communications Systems, Medical Oversight, Quality Improvement, Information Systems, Public Information, Education and Relations, Prevention, Integration of Health Services and EMS Research. The Report itself not only included findings but also included recommendations and what was clear in the report is that this recommendation would be a decision that needs to be made by the community. That they were not Board mandates and that we would continue to offer them assistance as they move forward to make whatever changes that they thought were appropriate.
- ✿ Concordia also had a community assessment. Several surveys have been completed and were mailed to CIT a few weeks ago. The data was entered into the CIT Statistic Software and the results were sent to Katrina Newbanks, the service director of the staff.

There are meetings that may occur in mid December or January depending upon schedules and Joe Moreland has offered his services to continue to support that effort.

- ☒ On October 11 the first meeting of Industrial and Organizations Solutions was held and at that point we looked at the curricula and the job analysis for the First Responder, EMT and EMT-I. We looked at the topics of the curricula and graded those as far as what the subject matter experts felt were priorities and then with each of those modules looked at specific lesson plan to again re-prioritize those to determine where our focus would be when we finally develop exam items for those particular areas. We did not address MICT at that point. The next meeting of this group is December 12-16 in Salina. We have, at a minimum daily, 10 people participating, with a potential of up to 18 participating, depending upon their schedules. At this meeting we will actually develop the items for First Responder, EMT and EMT-I and toward the end of the week we will work on looking at the job analysis for the MICT in the event that the Board decides to go with IO for that written exam as well. One of the things that this particular process is going to require is a re-evaluation or revision of a lot of processes within the examination and the data collection and documentation within the office. After the first of the year, I already have both the exam and education staff looking at current reports on our system and whether they work and if they don't, how they need to in order to ensure that data that we currently collect can generate the reports that we told folks that we would have for them. The intent is to try by April to make sure that internally we can generate the reports that we said we would and we have been asked for so by the time IO comes up with their trial test sometime in May, that data dump will test that system to turn around and provide that external and internal data so that we can start using it for evaluation purposes. The other thing that I plan on doing is that sometime in January, possibly early February is meeting with the Program Managers of the state to determine what specific information they expect or would like out of this. We will tell them what Board Staff and Board wants as far as looking at statistical information, but I want to make sure that their needs are met as well. They may actually give us some ideas to some stuff that we might want to track. That is where we are at with the written exam.

- ☒ Regarding the practical exam, we do have a script for that, but that has been put on hold because of the required emphasis on the written with the timeline that we have to meet in order to have something in place before the transition to the National Registry exam in January. Since that group has not met for awhile, obviously we have had some deaths and also some changes in the hierarchy of the Regions, so we will have to pull that team together and solicit probably new membership to do a little bit of catch up and to move forward on that.

That ends my office update unless you have some questions as this time.

**Dr. Allin:** Any questions? My only comment would be, I don't know if anybody has said this to you, or maybe it was private and I would like to say it publicly. I personally and I think the Board would join me, in our appreciation of how you have stepped up during our transition times and the job that you have done to help the functions of the Board and the Board staff to continue. I really appreciate it and I recognize your effort. (Applause)

### **COMMITTEE REPORTS AND POSSIBLE ACTION**

**Executive Committee—Mr. Jim McClain**

- ✱ Thank you doctor. We have two meetings to report upon. The first was held on November 15 by means of a Teleconference. At that meeting we reviewed 19 sets of documents. These were the applications and resumes and supporting documents of the candidates. We selected five for interviews in that process which was completed with the appointment of Robert. We had a brief discussion on the Budget. The initial response to our enhancement was non-approval, or rejection, of both the enhancements. This was not totally unexpected. A verbal appeal was made, now it is in the Governor's hands and we will become aware of her proposals when the Governor makes her presentation to the Legislature.
- ✱ At yesterday's meeting what appeared to be a short agenda took the full time allotted. We discussed some Data Collection. I will come back to that. We received a letter from the Winfield area about a car following an ambulance that was running lights and siren and the bottom line was that this person was sighted, stopped by traffic control, but due to a narrow interpretation of a law which read, "Fire Apparatus following" is against the law. The reaction being that maybe we ought to correct that. A recommendation from the audience made a lot of sense. Maybe we ought to study the entire area, research those traffic statutes, and develop a more comprehensive approach.
- ✱ We also had a lengthy discussion on independent first response units and the need for them to have protocols and QA, and medical supervision. The thought was expressed that perhaps the best way would be to start dialog at the local level or at least between the professional organizations of emergency responders, firefighters, EMS, and so forth and develop common ground there rather than develop an independent proposal.
- ✱ The 2007 budget was discussed and that will be covered later.
- ✱ There was a request received via e-mail on the administration of glucagon, then it was withdrawn, and I presume eventually that will cycle through investigations. It appears to be a more widespread need, or more widespread interest at least than this one isolated case. There will be more on that later.
- ✱ We received a report from Mark Shriner, KDHE, on the data collection that they are developing the report that was given. Since the data was submitted in several different formats, it essentially is meaningless in this report. It doesn't mean a great deal. In our packets this morning, David put together samples of reports from Image Trends that they can generate as part of the pilot project in Region IV. They are very illuminating, I think, and much more useful.
- ✱ No action taken, but healthy discussions.

(Dr. Allen comments on Data Collection)

### [Planning and Coordination Committee—Joe Megredy](#)

Thanks to Mike for chairing the beginning of the meeting. I had a little difficulty getting there.

- ✱ We started the meeting out getting an update on the MERGe project from Terry David. In that update he reported that there has been approval for next year's funding.
- ✱ We discussed our strategic plan. Earlier this year we had taken two items and made priorities, to develop a public awareness program and the other was to develop an EMS Administration Degree program. Duane reported his activities with the Public Awareness Program and will continue to work on that with Kerry McCue and Jerry Jo Deckert. I think funding of that is going to be an issue and soon we are going to have to find a source for funding if we are going to keep that as an item in our plan. Then as far as the

EMS Administration Degree Program, Barton County sounds like they have stepped up and have started to develop a program. KEMSA continues to work on a certificate program as well and hopefully we can get some other colleges to jump on board either at the associate's level or even at a Bachelor level.

- ✿ Each of the Regions reported their activities. Testing the MERGe project seemed to be the focus. Capitol Day is scheduled for February 1.
- ✿ Firefighters reported on their regional fire schools.
- ✿ Terry David discussed with us the emergency management processes of Regional Allocation of Grant funding
- ✿ Joe Moreland gave us an update on the Public Safety Committees and what is happening with the communication system. The system is up in the Southeast part of the State. They will begin on-site testing in mid-December and the next phase of that project will start up in the Northeast part of the state.

That's the end of my report.

[Dr. Allin:](#) Any questions for Joe?

### [Investigations—Dr. Allin](#)

We will move to investigations. I had to leave the meeting after 1 ½ hours so I will report on that. I will say that there were 12 cases and in the 1 ½ hours that I was there we did three of them and then after I left they finished the rest.

- ✿ We started with hearing testimony from a respondent. Basically we had a consent agreement that he was declining. It involves working outside the scope of practice. After hearing his testimony, it was determined that we would take another look at just some specific details of the case. It's clear from the testimony from yesterday what our options at that time will be, and I think we could have it by the next meeting. He clearly is not interested in a consent agreement and our options would be to refer the case for hearing or say that we are done.
- ✿ A consent agreement amendment from an I/C issue and that was accepted by the committee.
- ✿ A referral to the AGs office for certificate revocation that involved unprofessional behavior. It also involved the possibility of activity that may in fact be a felony which certainly is something that is a determination that we are not going to make.

If any other members of the committee would like to comment on any of the other cases feel free. If you don't feel prepared to do that, we can move on.

[Joe Megredy:](#)

- ✿ I can't remember all of the cases we did. We heard two felony cases. One dealt with a drug possession at a fairly early age, the other one dealt with theft and really had kind of a sad story to go along. It started at a very young age. Basically he was abandoned by his parents and the kid kind of lived on the streets without any parental guidance. We approved their requests for an attempt at certification.
- ✿ We did table a larger case basically because we ran out of time.

- ✿ We put out a consent order of agreement and we received a counter proposal on that and we denied that counter proposal. It will go back to them to see how they want to proceed with that.

### Education and Examination—J. R. Behan

Steve has already given a couple of reports on his Educator Taskforce and the meeting with IO Solutions in the middle of this month.

- ✿ We did hear from Coffeyville Community College. You remember that last time we granted them a variance to do some distance learning programs that they want to do with their program provider and some of the committee felt that they would like to see a demonstration of that and Greta demonstrated that to us yesterday. I don't think there was any problems with that. I think it is a good program and they do have some space if people still want to enroll.
- ✿ We did hear from Chy Miller, David Lynch and Dr. Denton on the Hutchinson Community College and their program. In their move toward accreditation, I think things are going well there. My thought to the committee yesterday, and if nobody here has a problem with it, is that we will have one more report from them in February and then I would like to either move them to quarterly or once every six month. I can't imagine that we still need to hear from them every two months. Things are well on track there with Chy.
- ✿ Our regulations. We have 12 of our 13 Education Regulations back and we are moving forward. I think there has been a little bit of a hold up because of somebody in the Department of Administration revising all the language. It has been a little bit longer process than what we thought it would be.
- ✿ We are going to do a survey of services and attendants as far as EMT-D activities. Last time we had just proposed to eliminate that level of certification, or not approve any additional courses after the first of the year, but we are going to hold off on that and do a survey and find out exactly who is still using that.
- ✿ In our new business we did hear from Johnson County Community College, Kim Krupps, specifically, and this will be an on-going item. Their question was who exactly can supervise a paramedic student in a hospital and Mary Feighny has responded to them in an e-mail, but I think maybe we just need to get together with all the players and find out what the parameters are and clarify roles and see exactly who can be responsible for them. This isn't the first time that this has come about. Dr. Allin wrote a letter a couple of years ago in support of that very thing. It is a continuation of that.
- ✿ We heard three variances, so we will need action on all three of them.
  - ✿ The first one was from an I/C from Iowa who has moved to Kansas, he is state certified now, and he is seeking an I/C certification through reciprocity. He has met most of the requirements. There are a couple of things that he does not meet and that will be part of our recommendation. Probably our biggest concern was that his mentor for his first class was going to be an I/C who just finished his mentoring process, so has actually never taught a course by himself. I think that is where the biggest hold up came up. Chy Miller was in the audience and is mentoring another I/C in the next community and has volunteered to help them out. So our variance will be for Cory Kleindienst. We will go ahead and allow him to continue in his quest for I/C reciprocity with two additional letters of



recommendation. We will need a letter from Chy Miller indicating his support of his mentorship to include counseling sessions of the students, written exams, and all other things that we require. And a submission of the course they are planning to do in February. Steve will write him a letter outlining all those items that we want addressed and upon completion of all of that, Chy's letter back to us indicating that he has met all of those competencies and we get the two letters and the submission of the course and once it is approved, then he can proceed with his application for I/C. So that was the recommendation on the first one. *Joe Megredy: I move that we accept the committee's recommendation to grant this variance. Comm. Boaldin: I second. J. R. Behan: It was a unanimous vote, but one committee member did abstain. Conflict of Interest. Dr. Allin: Any other discussion? All in favor say aye. Any opposed? Motion passed.*

✿ Johnson County Community College is requesting a variance in their TO I and TO II program to eliminate any pretesting. They want to eliminate that portion of the course that relates to practical skills. They want a sign off of the service director and the medical director verifying the competencies of those people attending and their skills. If someone does not work for an ambulance service that has a service director and a medical director, then they are going to offer by appointment practical testing. One time only, pass or fail. We voted to approve that. *Comm. Boaldin: I so move. Joe Megredy: I second. (Dr. Allin: Usually when we give a variance, there is an unique exception to the rule or it's just something that in the timing, some of the rules that we have made, we've messed up and left people hanging, does this variance, if we approve it, sort of lend itself to looking at our regs or looking at how we do these things in the first place for everybody in the future. Discussion of this followed between J. R. Behan and Dr. Allin.) Dr. Allin: Any other questions or comments? All in favor of the motion say aye? Any opposed? Motion passed.*

✿ This one is along the same lines as the last one. Barton County Community College is teaching a paramedic program. They are going to be the main sight in Great Bend, but they broadcast over the interactive television to Junction City. The two instructors there do not meet the interactive television endorsement of I/Cs, so they are seeking a variance to be allowed to proceed with their course. The school has in place technology people who will show the I/Cs how to run it and I think they will be available a lot of the time. We voted to approve that. *Comm. Boaldin: I so move. Joe Megredy: I second. Dr. Allin: Any discussion? (A little discussion between Dr. Allin and Steve regarding this variance and distance learning. Discussion extended to giving staff the authority to approve certain variances.) Dr. Allin: Let's go ahead and take action on this motion and then talk a little bit about what you want in the form of a motion. Dr. Allin: Any other discussion on approving this variance? All those in favor, say aye. Any opposed. Motion passed.*

(J.R. Behan recommended different reoccurring variances that the Board Staff could have the ability to grant without bringing it to the Committee. Mostly things that the Committee has approved, time and time again that are nearly identical. He proposes that Board Staff and Committee Members could have something ready by February.)

*J. R. Behan:* That's the end of my report.

**Dr. Allin:** Before we go on, I have a note here that Coffeyville Community College is on a field trip to the Board of EMS today. Would the students please stand and be recognized. (Applause) Thank you all for coming. I think part of being a professional in your business is understanding how your business is governed and being active in it. I appreciate you all taking the time to come up and join us.

### Legislative Agenda

**Mary Feighny:** I think at the last meeting you all discussed the concept of going forward with Legislation to authorize the Board to establish and create a Data Collection Program. What you have in front of you is proposed legislation that will authorize the Board to conduct a Data Collection Program. I will answer any questions that you might have. This is something that you discussed conceptually, but this is the actual language. If you want to pursue this legislation then it would take a motion to do so. (Rep. Long asked questions regarding funding. Mary explained that there will be an attempt to get funding (our enhancement) for Data Collection this session. Some discussion regarding the Medical Consultant and that position on the Board. Dr. Allin and Mary Feighny had a discussion on how to proceed if voted on this legislation.) *Jim McClain:* I would move for the adoption of these recommendations to propose legislation. *Comm. Boaldin:* I second. *Dr. Allin:* Any discussion? All in favor of the motion say aye. Any opposed. Motion passed.

### FY 2006 Budget Update

**Mary E. Mulryan:** You all have your report that I usually give to you and you can see that we were down a little bit on our expenditures in October and up a little bit in November. That is because in October we had a major cash flow problem and we didn't pay the Department of Administration for a few months. This week we received a pretty good deposit of fire insurance premiums so I went ahead and paid our bills. We are current now with our bills, but we are behind on Education Incentive Grant money which will continue until we get a major influx of fire money in December and January. As far as the 07 budget, we did appeal because the Division of the Budget did say, no, we could not have our enhancements. The mechanism that we are going to try to use to fund those enhancements is we asked them if they would reconsider the second transfer of money to the State General Fund (SGF) in 06. Whether or not that will fly, I don't know. But that is where we are right now. The Governor is making decisions this week and then it will go to the Legislature and they will decide our fate. I would answer any questions that you may have.

### Advisory Committee on Trauma

**Dr. Allin:** We are on hospital verification issues. And again, as in everything, if you are advancing you have to look at your statutory authority to do it. KDHE is looking at the Trauma Statutes and potential needed legislation to give the Advisory Committee on Trauma the authority. This would be verifications of trauma hospitals and we also need to be sure that we are providing peer review protection as we now look at the data we have in Trauma Registry and how to use it and who to give it to and in what form to give it. On that note we were presented at the last meeting with a couple of issues of reporting out of the Trauma Registry. One is a benchmark report that would go quarterly to the hospitals. This is stuff that hospital administration could clearly sink their teeth into and it is not single patient specific. It is trends. It's how you practice trauma at your hospital by about twelve or thirteen different indicators of the trauma care in your hospital. This will be a report that will be a good start to give hospitals something that they can see how they do, how they benchmark with the state, what are

National benchmarks, or percentages of things such as with patients that are transferred to another facility. What is the elapse time. What is the elapse time from people going with certain injuries from the emergency department to the operating room. Things that you can surely use as benchmarks to improve trauma care at the hospital level.

A little more problematic are the reports to the regions and the only reason I say they are a little more problematic is because they will certainly want to see more pre-hospital data. And our pre-hospital data certainly has not been the strength of the Trauma Registry thus far. I think Trauma Registry and the Advisory Committee on Trauma is anxiously looking forward to our program on the Board of EMS of EMS data collection to see if there can be a melding of that data so that you are not relying on hospital trauma registries getting the EMS data by registering it off of run forms a lot of which they don't get. That has been very problematic. Having said that I will tell you that the Trauma Registry is going out for bid. The bid for the Trauma Registry is up on the 3<sup>rd</sup> of June. They are putting pre-hospital data collection into the bid to see what the bid would be. The issue will be what would the cost be and to get an idea of what the cost and management would be like of potentially doing these data collections with the same system, Trauma and EMS. Those are our biggest issues that we are doing right now. We are trying to do marketing. You know that to be known you have to have some kind of a symbol and some kind of catchy saying or slogan and they are actually putting this out to market to see what we can come up with for people to look at and it represents the Trauma System of Kansas. It looks like starting January 1 there will be a piloting of web based Trauma Registries, so we are trying to move forward with the ability of the Trauma Registry to collect data and interact between Trauma and EMS data collections. Questions?

*Dr. Allin:* Any other new business? I would take a movement for adjournment.

*Jim McClain:* I would so move. *J. R. Behan:* I second.

*Dr. Allin:* We are adjourned.