

## Board Meeting Minutes

February 4, 2022

Approved  
4/1/2022

### Board Members Present

Rep. John Eplee-virtual  
Dr. Gregory Faimon-virtual  
Sen. Faust-Goudeau-virtual  
Dr. Joel Hornung  
Comm. Ricky James  
Director Deb Kaufman-virtual  
Chief Shane Pearson  
Director John Ralston-virtual  
Dr. Martin Sellberg-virtual  
Comm. Bob Saueressig  
Director Jeri Smith

### Guests

Charles Foat  
Craig Isom  
Wendy O'Hare

### Representing

JCCC  
EagleMed  
KDHE-Trauma

### Staff Present

Joseph House, Exec. Director  
James Reed  
Carman Allen  
Ross Boeckman-virtual  
Kim Cott-virtual  
Chad Pore  
Suzette Smith  
Terry Lower  
James Kennedy

### Board Members Absent

Rep. Broderick Henderson

### Attorney

Sam Feather

## Call to Order

Chairman Hornung called the Board Meeting to order on Friday, February 4, 2022 at 9:04 a.m.

Chairman Hornung called for a motion to approve the minutes.

***Chief Pearson made a motion to approve the December 3, 2021 minutes. Commissioner James seconded the motion. No further discussion. No opposition noted. The motion carried.***

## Planning and Operations Committee

Chairman Hornung called upon Chief Pearson to provide the Planning and Operations report. Chief Pearson gave the following report.

- Mr. Pore provided a KEMSIS vendor report to the Committee. The report showed the vendors used by services, the percent of run reports by vendor, and the average validity score of run reports by vendor.

- In 2021 there were 175 different agencies in Kansas with 9 different vendors reporting.
- Mr. Pore is conducting Import/Export reviews routinely to see issues as they come up. When he finds Export failures, he notifies the agency to get it corrected.
- He discussed the linkage currently being worked on between License Management System (LMS) and Elite. This linkage will allow a roster update in LMS to automatically update the roster in Elite.
- NEMSIS updates are changing which will move us to Version 3.5 in KEMSIS. The goal is to be implemented by January 1, 2023.
- Mr. Reed reported that they had completed 14 service inspections so far this year and they are going well. They are taking a bit longer because they are looking closely at some specific items.
- Mr. Reed also reported that Osage County EMS received a variance for lettering on a loaner ambulance.
- Discussion was held to rank the list of Legislative Priorities that was created from the Legislative Planning Meeting last summer. The committee ranked them as follows:

Idea	Committee ranking
Clearly identify where an order during non-emergency/interfacility transports <u>falls</u> under authorized activities	ASAP
Regulation of behavioral health transports/secure transports	No desire
Creating protected regional peer review specific for EMS	1 to 5
Establishing a standard of care for EMS in Kansas	1 to 5
Regulation of EMRA / First Response Agencies	1 to 5
Medical Advisory Council – structure meeting the need	No desire
Term limits for KBEMS Board Members	5 to 10
Mandated ongoing education for service directors	1 to 5
Mandate initial education for service directors	1 to 5
Creation of a new classification of ambulance service – private transport	1 to 5
Creation of a new classification of ambulance service – no 24/7	1 to 5
Add point-of-care ultrasound as an authorized activity at AEMT level	No desire

***Chief Pearson moved to follow the recommendation of staff to move forward on the priorities as ranked. Commissioner Saueressig seconded the motion. Chief Pearson stated changes will not happen right away. This is just to start the process. No opposition noted. The motion carried.***

- Director House discussed the Interstate Compact and being able to leverage the Privilege to Practice for services and providers based outside of Kansas. He stated that to become a service in Kansas the service must have Kansas certified staff. Two new out of state ambulance services are getting certified next week. It was asked if an ambulance service based outside Kansas can leverage the Compact. Director House said we would need regulatory language to allow us to use the Compact for staffing. There was additional discussion on pursuing Privilege to Practice. Director Smith and Chief Pearson said we should pursue it. This would affect border communities that do interfacility transfers vs 911 calls. Chief Pearson’s opinion was that if an out of state service was routinely

- running calls in Kansas they should have to be licensed in the state. Director House will bring back some potential language to say, “as long as legally allowed to work in Kansas.”
- Chief Pearson reported that he had been speaking with Brittney Nichols from KDHE about EMSC pre-hospital care and education. They will be looking at ways to improve pediatric education across the state.
  - Mr. Reed provided an end of year report. He also asked that services look for and complete a survey that was sent out regarding authorized activities within each agency. Service Directors are asked to please locate and complete that survey.
  - There was a discussion regarding ambulances that were out of service for maintenance or repair being left out in the weather. Temperature fluctuations could affect medications, IV fluids or equipment on board. The current regulations require that the vehicles be stored inside on a concrete floor with a 50-degree temperature minimum. Chief Pearson said the medications, fluids, or equipment should be removed prior to maintenance service to protect them from the elements and from potential theft. They want to look at a regulation change for better parameters while getting service such as a maximum temperature.
  - There are two new services that have started the application process.

That concluded the Planning and Operations Committee report.

### Investigations Committee

Chairman Hornung called upon Director Smith to provide the Investigation Committee report. Director Smith reported the following.

- The consent agenda was approved with one case involving a threat that was unfounded, two applications were approved and one was through a consent agreement.
- There were seven discussion items, two of them were tabled, one to allow for further investigation and the other to await legal counsel to finalize a consent agreement.
- The first case involved an inspection after an operator was unable to provide documentation regarding the Medical Director review of patient reports. After several months the documentation was produced. The Committee imposed a \$350 Civil penalty for the providers failure to maintain and provide the documentation required.
- There was a case involving significant narcotic diversion by an individual. Despite numerous attempts to contact the individual, he refused to cooperate with staff and therefore credentials were revoked.
- A scope of practice violation was found to have occurred when an individual gave a medication beyond those authorized. The committee accepted local action that was taken which was additional education for the individual.
- A case involved a Sponsoring Organization (SO) and an Instructor/Coordinator (I/C). After the I/C failed to provide their roster within 15 days the committee decided only the I/C bore responsibility. The committee accepted local action that was taken including changes in policy to prevent reoccurrence.
- The third occurrence of an operator transporting a patient without the required staff resulted in written discipline against the individuals involved, and a \$1,375 civil penalty was issued against the operator.

- There were about 400 continuing education audits completed in 2021 with 126 failed for a 25.9% failure rate.

That concluded the Investigation Committee report.

### Old Business

Chairman Hornung called upon Director House to cover Old Business. Director House gave the following report.

- No decisions were made that require affirmation regarding COVID-19.
- He provided information on Executive Order 22-01 / HB 2477 which was enacted into law a few weeks ago. He provided the information for awareness only, as it does not directly impact/apply to EMS. EMS providers that work in hospitals can continue to do so.
- Center for Medicare and Medicaid Services (CMS) vaccine mandate deadline is February 14<sup>th</sup>, 2022. EMS providers are not directly mandated by CMS. If an EMS service has entered into a contract with a hospital to provide transportation, only those doing transfers will need vaccinated. We are asking EMS personnel to follow any rules in hospitals, such as wearing masks, handwashing, and social distancing. If EMS personnel fail to follow any of the rules it could be considered unprofessional conduct.
- The practice of diversion was discussed. Director House stated that if a hospital was open then the emergency department must accept patients or it is an EMTALA violation. Board staff will work to educate hospitals on the precise meaning of diversion as it relates to EMS.
- No feedback was received by Chairman Hornung regarding proposed changes in the Board structure at the last meeting.

***Chief Pearson made a motion the Board move forward with By-Law changes necessary to change the board meeting structure. Director Smith seconded. No further discussion. No opposition noted. The motion carried.***

### Office Update

Chairman Hornung called upon Director House to provide the Office Update. Director House provided the following information.

- Staff are looking to replace the current sound system. The equipment is out of compliance with FCC regulations. Staff plan to get a quote quickly.
- He attended the budget subcommittee hearing and Appropriations Committee hearing on our budget. It was approved without amendment. He was asked for ideas for SPARK funding. He proposed four projects to be completed by the spending deadline in 2024. Three items came with strong support to proceed: one million additional dollars for our Educational Incentive Grant, one million additional dollars for the KRAF grant; and up to

three million dollars to purchase two mobile high fidelity simulation laboratory trucks. Examples of these trucks can be found at SIMMT.org. These trucks would have a simulated emergency room in the front and a simulated home environment room in the back, with a control center in between. It is designed to bring teams together for training. The Legislative Committee was very excited about these items and asked that we partner with other organizations who are willing to help sustain the costs, such as a non-profits. Dr. Hornung asked how the SIMMT would be manned. Director House stated that it would be operated by a non-profit that would be staffed with simulation technicians and a driver. Dr. Eplee asked to receive information on the effectiveness of the SIMMT. Director House stated that he would share that information. The fourth item is for up to two million dollars to modernize our BLS exam in a virtual environment. There was discussion on the measuring the effectiveness of those tested in a virtual environment.

- Mr. Pore provided a KEMSIS 2021 Data Review. It includes incident numbers, top 10 overall primary impressions, hypoglycemia, and a basic review. The Basic Review covered acuity and disposition, the top ten medications administered, and cause of injury. Because falls were reported at such a high incidence, we would like to focus on a fall prevention program in conjunction with the Adult Commission on Trauma (ACT). Dr. Eplee asked about ketamine usage and performing an analysis on that data. Mr. Pore said they were hoping to look at data on ketamine and other benzo medications. He also plans to look into seizure medications and what the Epilepsy Society recommends for dosage. The Board will receive a full annual report in April.
- Mr. Pore also discussed the Coverdell Performance Measures on stroke. These are similar to the NEMSQA measure discussed at the last meeting. On scene time is recommended at 15 minutes for stroke. Patients who are eligible for TPA could receive it much quicker at local hospitals rather than being taken to a stroke center. A stroke screen should be documented for any patient where a stroke is suspected. A blood glucose check should be given 100% of the time but Kansas is only at 82%. The last time the patient is known to be well should be included. Time of discovery should also be recorded. Currently there is not data that could tell us if the EMS impression of a stroke matches the hospital diagnosis. We would like to try to fix that process by linking with three health information exchanges in Kansas.
- Director House discussed that the KDHE Trauma Program is currently working to address falls. He wants to be a part of their Older Adult Fall Prevention Coalition. Commissioner James stated that he served on Area Agency on Aging and Silver Haired Legislature and wondered if the Board could be a part of the Older Adult Fall Prevention Coalition. Wendy O'Hare, KDHE Trauma Director, said this is a fairly new coalition and would welcome EMS having a seat at the table. A meeting is scheduled on February 17, 2022 and they will reach out to Director House for input.

***Chairman Hornung made a motion that the Board should take an active role in the Older Adult Fall Prevention Coalition. Commissioner James seconded. No further discussion. No opposition noted. The motion carried.***

- Ms. Carman Allen gave the annual Education Report. The data focuses on 2019-2021. Initials courses are back to where they were before the pandemic. Provider Initial certification is down some from 2019. BLS exams conducted have significantly increased, with over 50 conducted in 2021. The number of students testing has significantly increased. Renewals are up slightly from the last few years. IC renewals dropped, possibly because they have heard you won't have to be an IC to teach. Reinstatements are also down. Retroactive approvals increased in 2021, possibly because air ambulance services were offering bonuses to their EMS personnel if they got certified in other states. She anticipates this year's number should be even better. There were spreadsheets provided that showed that the most classes are being offered in community colleges and that Regions III and V were offering the greatest number of classes. Also included were the Initial Course Enrollee outcomes that shows the percentage who passed the courses, which was down in all categories, i.e, EMR, EMT, AEMT, and paramedic. Dr. Hornung asked about the pass/fail rate for Paramedics. She has not had a chance to analyze the data on why this is so.
- Director House stated that we had some process changes that occurred after the regulations were approved and went into effect on January 1, 2022. The Criminal History Records Check (CHRC) is now required for anyone's first time certified in Kansas. Individuals must fill out the waiver and get fingerprints. When asked about any barring offenses, Director House said there are no absolute bars. This check is just to verify the information they provided is accurate. If there is a finding that causes concerns, they will be handled through a normal investigation. He reiterated that the results of the CHRC are not shared.
- Another process change is for Initial certification applications. They are now to be completed after a student has completed a course, passed both tests, and submitted their CHRC waiver. The application will be denied if they have not completed the steps listed above.
- Each Sponsoring Organization (SO) is required to maintain a 70% pass rate for all the classes offered in the previous year. There is a list of SO's that did not meet that requirement and we will contact them to get a plan. We will use the Texas plan as a template for the March 1<sup>st</sup> deadline. This is new to everyone so we will be testing it out.
- There is an interpretation issue on K.A.R. 109-11-8. Legal counsel has looked at simulated experience and it is currently allowed. Contrived experience is not as narrow as staff thought. It can be substituted for field internship. This changes our recommendation. The course completion requirement is appropriate. It was requested to have the EETC review this topic and bring it back at the June meeting.

***Director Kaufman moved that the educational requirements be sent to EETC for review. Director Smith seconded. No further discussion. No opposition noted. The motion carried.***

- Director House reported the Legislative Session has been slow so far for EMS. We continue to promote our support of the Medicaid reimbursement for our ambulance services, hoping to get the amount up to at least a 65% Medicaid reimbursement rate.
- We submitted the Civil Fines report and the KRAF report to the Legislature.

That concluded the Office Update.

### New Business

- Director House stated that it was time to reaffirm the Delegation of Concurrent Authority for him to handle Legislative matters, COVID-19 issues, Emergency Orders and Summary Proceeding Orders.

*Chief Pearson recommended the Board reaffirm Delegation of Concurrent Authority to Director House and to be reminded of the Delegation annually. Director Smith seconded the motion. No other discussion. No opposition noted. The motion carried.*

- Chairman Hornung said the Board needs to elect a Chairman and Vice-Chairman and opened the floor for nominations.

*Director Smith nominated Dr. Hornung for the position of Chairman. Chief Pearson seconded the motion. No other nominations were made. The motion carried.*

*Commissioner Saueressig nominated Chief Pearson for the position of Vice-Chairman. Director Smith seconded the motion. No other nominations were made. The motion carried.*

With no public comment and no further business before the Board, Chairman Hornung adjourned the meeting at 10:42 a.m.