



Landon State Office Building
900 SW Jackson Street, Room 1031
Topeka, KS 66612-1228

phone: 785-296-7296
fax: 785-296-6212
www.ksbems.org

Dr. Joel E Hornung, Chair
Joseph House, Executive Director

Sam Brownback, Governor

Board Meeting Minutes
June 2, 2017

Approved
08/04/2017

Board Members Present

Dr. Greg Faimon
Sen. Faust-Goudeau
Dr. Joel Hornung
Comm. Ricky James
Chief Shane Pearson
Director John Ralston
Comm. Bob Saueressig
Dr. Martin Sellberg
Director Jeri Smith
Rep. Susie Swanson

Guests

Rosa Spainhour
Darlene Whitlock
Matt Epperson
Colin Fitzgerald
Skylar Swords
Brent Rouse

Representing

Kiowa County EMS
KMS/KDHE
City of Shawnee FD
Leawood FD
Finney County EMS
Finney County EMS

Staff Present

Joe House-Exec Dir
Curt Shreckengaust-Dep Dir
James Kennedy
Suzette Smith
Emilee Turkin
James Reed
Mark Willis
Mark Grayson
Nance Young
Kim Cott
Ann Stevenson
Christine Hannon

Attorney General Staff

Sarah Fertig

Board Members Absent

Dennis Franks
Rep. Henderson
Director Deb Kaufman
Director Chad Pore

Call to Order

Chairman Hornung called the Board Meeting to order on Friday, June 2, 2017 at 9:05 a.m.
Chairman Hornung called for a motion to approve the minutes.

Dr. Faimon made a motion to approve the April 7, 2017 minutes. Director Ralston seconded the motion. No discussion. No opposition noted. The motion carried.

Planning and Operations Committee

Chairman Hornung called upon Chief Pearson to give the Planning and Operations Committee report. Chief Pearson reported to the Board:

- KEMSIS Update: No new business on KEMSIS and everything is continuing to move forward. There are 15 hospitals left that we need to get a point of contact to get up and running in the hospital hub. Kansas began reporting into NEMSIS version 3 yesterday.
- Mr. Reed reported there have been 74 service inspections completed this year. Mr. Ed Steinlage has resigned and Ms. Turkin will be taking on the responsibility of inspections. Inspections have been going well with very few issues.
- Mr. Reed also reported this is the first year using the new license management system and all the services renewed online. There were a few struggles with a few agencies, but with assistance, everyone was able to utilize the new system and renew online.
- Mr. Reed reported in late April they brought together representatives from Pottawatomie County EMS, Osage County EMS, Jackson County EMS, Life Star of Kansas, Johnson County Med Act, KCK Fire, and Overland Park Fire to attend the signing of the Governor's Proclamation for EMS Week.
- The state fair was discussed. Mr. Reed is asking for different ideas for the booth at the state fair this year. A recommendation was made to include a scenario based simulation. Mr. Terry David offered assistance to the Board for this project. Anyone with an idea was asked to bring it to Board staff or a Board member.
- Region II-Reported an upcoming test site and their upcoming region and annual meeting.
- Region III-Discussed scholarships that they are offering for Region III members to attend the KEMSA Conference. They also discussed other educational opportunities being conducted in Region III. The next Region meeting is July 14th.
- Region V- Their next meeting is in June.
- KEMSA- Nominations for recognition awards are open now for the conference held in August. Starting this year, they are modeling the awards criteria to match up with the National EMS awards
- KAMTS- They met this past week. They will be putting information out on their new website regarding aircraft utilization and landing zones.
- KDHE- They just completed regional trauma symposiums in all six regions. They did a Train the Trainer class on a program called Stop the Bleed. Anyone who attended the course is now able to teach the course. Their goal is to be compliant with public access AED's. The goal nationwide is anywhere there is a public access defibrillator there will also be a public access bleeding control kit in the same area.
- KDHE- Ms. Wendy Gronau gave a presentation on EMSC information for Ms. Tracy Cleary.
- There is an upcoming EMS for Children data collection survey on pediatric protocols going out to all Service Directors this summer.
- Director House reported 3-4 questions came up at the Strategic Highway Safety (KDOT) meeting. 1) What dispatch information would be helpful to EMS agencies to dispatch appropriate resources? Director House will finish comments on the Strategic Highway Safety meeting later in the Board Meeting.
- The regulatory revision of K.A.R 109-2-8 was discussed. The 60-day public comment period has passed. One comment was received by e-mail. This was in support of the changes and just wanted to reduce the number of fire extinguishers from two to one.

Chief Pearson made a motion to adopt K.A.R. 109-2-8 as revised. Director Ralston seconded the motion. No discussion noted.

Roll call vote as noted:

<i>Dr. Faimon</i>	<i>Aye</i>	<i>Chief Pearson</i>	<i>Aye</i>
<i>Senator Faust-Goudeau</i>	<i>(Absent)</i>	<i>Director Pore</i>	<i>(Absent)</i>
<i>Mr. Franks</i>	<i>(Absent)</i>	<i>Director Ralston</i>	<i>Aye</i>
<i>Rep. Henderson</i>	<i>(Absent)</i>	<i>Comm. Saueressig</i>	<i>Aye</i>
<i>Chairman Dr. Hornung</i>	<i>Aye</i>	<i>Dr. Sellberg</i>	<i>Aye</i>
<i>Comm. James</i>	<i>Aye</i>	<i>Director Smith</i>	<i>Aye</i>
<i>Director Kaufman</i>	<i>(Absent)</i>	<i>Rep. Swanson</i>	<i>Aye</i>

K.A.R. 109-2-8 is approved by the Board as revised on a 9-0 vote (9 Yes; 0 No; 5 absent).

- A stakeholders meeting on oversight of non-transporting entities was held. Four board members and over 50 others were in attendance. The effort is to ensure that whatever agency these entities work for, they have protocols in place. This will take time, but they will come to a conclusion to take back to the Board.

Chief Pearson concluded his committee report.

Education, Examination, Training and Certification Committee

Chairman Hornung called upon Director Ralston to give the EETC Committee Report. Director Ralston reported to the Board:

- There were no new variances for consideration.
- Chief Rob Boyd, SKEMS Chair, provided the SKEMS Vendor Report. Since the last meeting, they have had 6 test sites with 452 students having been tested. Of those tested, 153 were retested the same day, resulting in an 83% pass rate. There are 4 test sites scheduled, which include Hays, Hutchinson, Independence and Concordia. There will be no tests conducted in July.
- Dr. Charles Foat, EDTF Committee Chair, provided the committee with an update on their activities.
 - During the April meeting, the EDTF discussed what the minimum pass rates for a program should be and maybe leaning towards following CoAEMSP's minimum of a 70% average pass rate over three years. Before discussing this further, they will be compiling more data. The committee also took 5 volunteers to create ideas for a "TO Training" to replace the no longer necessary initial TO course.
 - In the May meeting, Mr. Willis presented the committee with a suggestion for revisions to K.A.R. 109-9-4, "Requirements for Acceptance into an Instructor-Coordinator Initial Course of Instruction", since the elimination of the TO certification. Also during this meeting, they discussed the need to update the testing scenarios for the EMR and EMT levels.

- Mr. Willis reported to the committee that due to the decision at the previous board meeting to eliminate the TO certification, there was a need to revise proposed regulations. There are 21 regulations for revision and 8 for revocation. Mr. Willis will be working with Assistant Attorney General Fertig to get these regulations updated for an implementation by the October meeting.
- Mr. Willis informed the committee that the Naloxone training materials previously discussed were made available on the KBEMS website. Of those that have referenced these materials for their training, positive feedback has been received.
- Mr. Willis brought to the committee's attention a need for revisions to K.A.R. 109-9-4, "Requirements for acceptance into an Instructor-Coordinator Initial Course of Instruction". Staff recommendation is to eliminate requirements specified in 109-9-4, (a) and (b), and modify sections (c) and (d) to require the I/C candidate successfully pass the state approved cognitive and skills assessments. Dr. Charles Foat, JCCC EMS Program Director, encouraged the Board to consider not restricting the cognitive examination to National Registry. Dr. Foat also suggested adapting language to require "95% positive predictive validity" of the cognitive examination. This would encompass other formats including FISDAP & EMS Platinum Testing. Dr. Foat also expressed reluctance with the skills examination requirement, due to the difficulties in providing a validated, reliable skills examination process. After discussion in the committee, Director Smith moved to revise K.A.R. 109-9-4 as presented, Commissioner James seconded and the motion passed.

Director Ralston made a motion to bring K.A.R. 109-9-4 forward for revision to eliminate TO I and TO II requirements and to have the only requirements be to pass a skills and a written exam approved by the Board. Representative Swanson seconded the motion. No discussion. No opposition noted. The motion carried.

- Mr. Willis provided the committee with a synopsis of the office activities.
 - Ms. Turkin has moved to the position of EMS Specialist, working under Mr. Reed conducting service inspections. An applicant for the Education Specialist position has been offered the position and should be joining the office mid-June.
 - There have been numerous EMR/EMT Skills Exams processed and many more are expected to be received in the near future.
 - BEMS Staff will continue performing 100% course audits of all AEMT courses to bolster it up to see if we can affect the outcome of testing. They will begin meeting with AEMT initial course applicant primary instructional staff prior to approval of courses to review the Kansas AEMT Enhancements. Copies of state enhancements highlighted with Kansas requirements were presented. Specifically, a comprehensive review of those Kansas enhancements beyond the national standard curriculum to ensure the instructor is informed and prepared to cover this course material.

Director Ralston concluded his committee report.

Investigations Committee

Chairman Hornung called upon Director Ralston to give the Investigations Committee report. Director Ralston reported to the Board:

- The committee heard 4 consent cases and they accepted staff recommendations on felony convictions. The committee discussed and took action on the following cases:
 1. 2014-027-Local action was accepted.

2. 2015-101-This case involved a person that the Board had entered into a summary proceeding order. The respondent had a 30-day suspension, a nine-month probation and was required to write a paper. The respondent failed to complete the paper and failed to respond to numerous reminder letters. The committee advised the Attorney General's office to pursue through a SPO a \$150 dollar fine, another 30-day suspension, a nine-month probation and completion of the original summary proceeding order requirement of the paper.
3. 2016-080 & 2016-081- This case involved patient care documentation issues and different events that occurred. Patient care issues were also involved. The committee accepted local action.
4. 2017-002, 2017-013, 2017-014- involved a patient in respiratory distress being walked from a house to the ambulance. The investigation determined there were no regulatory violations and all 3 cases were dismissed.
5. 2017-019-Involved a medication error in a health care setting which was well documented. A person was working as an ER tech utilizing their EMS certification at a hospital. The committee determined a violation had occurred, a medication was given to the wrong person. Local action was accepted.
6. 2017-021-A request for legal recognition from a person with a violation in another state. The individual practiced one month with an expired license. The individual did renew their license. The committee closed the case and let the staff process the legal recognition paper work.
7. 2017-022- An ambulance service remounted 2 trucks and the licenses did not go to the new vehicles. The ambulances were not renewed. The service did catch this and submitted the paperwork. The committee accepted local action.
8. 2017-025 and 2017-026- The service had sent their primary truck out of town on a transfer. Then the service received a 2nd call and responded to the call without a second attendant. The service had a fireman drive the truck. The committee made a recommendation to send a cautionary letter to the hospital as this is a repeated offense.
- Dr. Hornung reported a fine schedule and graduated sanctions were reviewed. The Investigations Committee has been using these to establish consistency over the last few years. The graduated sanctions help the committee develop a level of severity for each violation. A grid was developed that goes along with the level of the graduated sanctions and then fines based on aggravating circumstances for second and third violations. Dr. Hornung stated the committee reviewed these yesterday and they agreed they were fair and reasonable.

On behalf of the committee, Director Ralston moves to approve the fine schedule as presented. Director Smith seconded the motion. After a brief discussion and no opposition noted, the motion carried.

Director Ralston concluded his committee report.

Office Update

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

Director House reported that questions came up at the Strategic Highway Safety (KDOT) meeting including what dispatch information would be helpful to EMS agencies to dispatch appropriately, and ways to track the seriousness of injuries. There has been an increase in

pedestrian accidents on interstate highways. They are looking for a way to track if the people are struck while walking on a highway because of a stalled car.

On the enforcement side, they are testing different methods of impairment. Presumptive testing could be used to better determine if more confirmatory testing would be needed. The question is would EMS be doing the testing and is there a process to allow services to research or Beta test this.

Their next meeting will be in August.

Representative Swanson asked if the quality of roads is something they can track. Director House responded that KDOT is able to track the quality of the roads and has prioritized their funding to high accident areas.

Director House provided the following Legislative update:

- The FDA Controlled Substances Act bill was introduced within the Senate committee and has been ordered out to be reported favorably to the full Senate.
- The VA bill- Currently the VA does not necessarily reimburse transport to the closest and most appropriate medical facility unless that facility is a VA facility. This bill applies the prudent layperson test and allows for reimbursement of transportation to the closest, most appropriate facility for the patient's condition and directs that the transportation and care be reimbursed as if it were to a VA facility.
- The Rural Emergency Acute Care Hospital Act was introduced just a few weeks ago. This creates a Rural Emergency Hospital designation. At the federal level, this would allow hospitals not to have any type of inpatient beds. This is designed for critical access hospitals primarily that have less than a 1 or 2 bed average daily census to allow them to go without an inpatient side and the incentive is that the reimbursement will remain at 110% of reasonable costs from the federal side. This does have an ambulance service piece to it and does allow for ambulance transportation from these rural emergency hospitals to wherever they end up going to also to be able to receive reimbursement at 110% of reasonable costs. It does require the rural emergency hospital to be designated at the state level as a level IV trauma center and to have agreements in place with level I and level II trauma centers for transportation to them when appropriate.
- There is a bill on the federal side about the EMS memorial that authorizes the foundation to establish a memorial on federal land in D.C. This will be the third year that this has been introduced.
- The last bill deals with the President's budget proposal and the EMS for Children program. The President's proposal eliminates the funding for the EMS for Children program. It is a \$20 million cut being proposed in the budget. There are a lot of other items that the President's proposal cuts that are much larger issues on the pediatric side and the biggest ones were cuts on Medicaid and the Children's Health Insurance Program. Medicaid funding is proposed to be cut by \$680 Billion and the Children's Health Insurance Program is to be cut by \$5.8 billion. There is a real likelihood that the funding for the EMS for Children program will not continue beyond October. They might be looking to reallocate funding for the EMS for Children program back under the Maternal & Child Health Block Grant which is where it was a long time ago.
- REPLICA – It was mentioned at the last meeting that the 10th state was anticipated to be on. Georgia became our 10th state. The 11th state, Alabama, joined yesterday. The Interstate Commission will stand up and the first meeting is October 7-8 in Oklahoma City. We are

excited to get started with the rule making side of things. Unfortunately, REPLICA did not pass in Missouri this year. Colorado is our only adjoining state that has enacted the legislation and there is a possibility that Oklahoma could get things through later this year. Nebraska will not be putting anything through until next year. Missouri has a little bit of an issue going on mainly because the state of Illinois is not allowed to currently participate because they do not meet the requirements.

Director House reported that the Legislative Meeting was held on May 9th in Salina at the Kansas Highway Patrol Training Academy. There were forty-one in attendance which included thirty-seven individuals, 2 of which were Board members, and 4 from Board staff were present. The notes are in the Board packet. Director House described the process: started with idea gathering and no items presented which the Board is currently considering as we wanted to hear the public's input as to what items are important to them. In years past, we combine the public's ideas with the Board's ideas to determine what if any type of legislative packet we are going to present in the upcoming sessions. The following ideas were offered during the meeting:

- 1- Mandatory reporting of abuse- there was a bill this year which died
- 2- The question of licensure versus certification for EMS providers
- 3- Usage of the title "attendant".
- 4- There was an idea to require CPR in high schools before graduation
- 5- Making sure the Board composition remains representative of the industry
- 6- Term limits for Board members
- 7- Peer review protection
- 8- Inactive status
- 9- Issues with the AEMT
- 10- A complete thought process on the scope of practice
- 11- Community paramedicine
- 12- Medicaid expansion

After the ideas were captured, they were prioritized and grouped. We were asked if there were items that Board staff had recognized and looked at. One thing we know with REPLICA, as mentioned earlier, is that we are going to have to institute criminal background checks that are finger print based within 5 years of the Interstate Commission standing up. This was known prior to the legislation and explained. Since the commission is going to stand up, the anticipated start date for background checks is no later than October 7th of 2022. We will need to have that capacity, or we will no longer be able to participate in REPLICA. This item will require legislation at some point.

The medical protocol approval process that we have probably needs revamped or we need to reinstitute some life into the medical societies. We are going to work with the Kansas Medical Society to determine a process that works very well for the medical community as well as EMS.

Cleanup of older scope references-We have the EMT-I, EMT-I/D, EMT-D and the Training Officer to remove from statute.

The high priority items were AEMT issues and the scope of practice discussion. We would like to see more of the discussion about setting a floor on the scope and allowing individual services or Medical Directors to build upon that floor, but have a formalized process for that to occur.

The non-transporting agency was discussed. We discussed protocol approval method.

The current BLS examination contract was discussed. We have just exercised the last option on the current contract so we know that we will need to make a decision on whether to pursue writing a new contract. There is a lot of angst out there with the validity of our psychomotor

skills examinations. We need to look at it to see if there is a need to revamp the exam into something which is more reliable and valid.

Requirements for entry into an IC initial course of instruction were discussed.

Defining or redefining unprofessional conduct was also discussed.

Director House asked the Board members to consider over the next couple of months the thought of reducing the frequency of Board meetings. There are currently 6 per year. Since we have caught up with what we have needed to do on the larger projects, it seems our meeting content has decreased significantly. When larger projects come up, meeting more frequently may be more beneficial. Director House suggested changing our minimum to 4 times per year.

Director House asked the Board today or sometime within the next two months to really put some serious thought into what we would want to move forward with as legislative items.

Dr. Hornung agreed that the Board does not need to meet quite as often. Dr. Hornung also asked the Board to review the legislative list that Director House has put out and come up with your ideas on what they ought to be pursuing. Dr. Hornung said he will be interested in working on the protocol approval and Medical Director approval. Dr. Hornung asked the Board to let Director House know what they think is important. This process will be started again in the next few months.

Director House discussed the upcoming schedule. He will be attending statewide regional meetings and a couple of facility recognition meetings. The facility recognition meeting helps emergency rooms recognize their ability or their preparation level of handling pediatric patients. There is a meeting in Salina next week. The Image Trend user conference will be mid-July. There are 2 regional Medical Director workshops, one in the month of June and one in the month of July.

Director House reported that there have been 2 staff changes. Mr. Steinlage's last day was May 31st. Ms. Turkin did move into the inspector's position. We have interviewed for her vacated position and have a conditional offer out there.

Director House announced that Ms. Ann Stevenson will retire effective June 16th after twenty-one years of working for the Board. She was presented a plaque by Dr. Hornung. Ms. Cott will start in this position Monday morning. There will be a two-week period to assist in her training before Ms. Stevenson retires. The opened Examination Specialist position has been reclassified as a Senior Administrative Assistant position. Director House anticipates the position will be filled by mid-July.

Director House concluded his Office Update.

Having no items of old business and no items of new business, the meeting was adjourned.

Dr. Hornung adjourned the meeting at 10:07am.