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



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Sam Brownback, Governor

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

Board Meeting Minutes

October 7, 2016

Approved

12/02/2016

Board Members Present	Guests	Representing	Staff Present
Sen. Faust-Goudeau	Kerry McCue	Region I	Joe House-Exec Dir
Rep. Henderson	John Hultgren	Dickinson Co. EMS	Curt Shreckengaust-Dep Dir
Sen. Mitch Holmes	Frank Williams	Life Team	Chrystine Hannon
Dr. Joel Hornung	Craig Isom	Med-Trans Corp.	James Kennedy
Comm. Ricky James	Dan Hudson	Univ. of KS Hospital	Suzette Smith
Director Deb Kaufman	Frank Burrow	Miami Co.	Nance Young
Chief Shane Pearson	Brian Aeschliman	Shawnee Heights Fire	Ann Stevenson
Director Chad Pore	Rob Boyd	Region II	Emilee Turkin
Director John Ralston	Kathy Dooley	Region II	Kim Cott
Comm. Robert Saueressig	Brent Rouse	Finney County	James Reed
Dr. Martin Sellberg	Colin Fitzgerald	Leawood FD	
	John Cota	KCKFD	
Attorney General Staff	James Zeeb	KCKFD	
Sarah Fertig	Chrissy Bartel	Norwich EMS	
	Jeff Smith	KCKCC	
Board Members Absent	Mitch Dipriest	Hein Gov. Cons.	
Dennis Franks	Ashley Arnold	McPherson EMS	
Director Jeri Smith	Kevin Flory	KSFFA/Topeka Fire	
Rep. Susie Swanson	Jon Antrim	AMR	
Dr. Gregory Faimon	Matthew Orozco	AMR	

Call to Order

Chairman Hornung called the Board Meeting to order on Friday, October 7, 2016 at 9:06 a.m. The first order of business was to approve the minutes from June 3, 2016, and the minutes from August 25th and 26th of 2016.

Director Ralston made a motion to approve the June 3, 2016 minutes as provided. Director Kaufman seconded the motion. No discussion. No opposition noted. <u>The motion carried.</u>

Director Ralston made a motion to approve the August 25th and 26th, 2016 minutes as provided. Commissioner James seconded the motion. No discussion. No opposition noted. <u>The</u> motion carried.

COMMITTEE REPORTS AND POSSIBLE ACTIONS

Planning and Operations Committee

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

- An update on the state fair was provided with Mr. Reed reporting that this year was better than last year and our booth was well attended. He recognized the services that helped staff the booth and gave the CPR demonstrations. There was adequate staffing this year. The exhibit location could be better, but the permanent awning and cement slab were adequate. Mr. Reed did encourage suggestions, as he would like to continually improve the exhibit.
- Currently there are 29 service inspections left to be completed, and they should be completed late October or early November. Staff will be working on program provider audits the last couple months of the year.
- The Service Recognition Program has a finalized document, and the committee agreed to move forward. They realized it may be difficult to meet some levels. The program is voluntary, and services will benefit from the local press they receive when they attain a certificate for recognition. The bronze level requires things that are not required in the silver level, but are in the gold level. Services do not have to reach the lower level to get to the next level. Most services attain the lower to get to the next level so it is covered. They may want to change the language at a later date.

Chief Pearson made a motion to accept and approve the voluntary Service Recognition Program. Director Ralston seconded the motion. No discussion. No opposition noted. <u>The motion carried.</u>

- Three variances were approved for borrowed ambulances where lettering was not required, and one variance was granted due to emergency evacuation of a station due to significant mold in the building. The service will be moving to a new location within a couple weeks.
- Two new services have been licensed: Nine Line EMS out of Nebraska and Air Med Regional in Oklahoma.
- Region 1 They had a special meeting last Wednesday to discuss the Continuing Education Plan. All board members and chairs sent a response. There will be a board meeting in two weeks and an educator workshop on November 5th.
- Region II They are planning an educator workshop on October 15th and a Region meeting October 19th. There will be testing November 19th and also in December. There will be an examiners conference in March. They are also planning an active shooter presentation at a future date.

- Region III They are planning a meeting for October 21st in Hoisington and training on October 19th.
- Region IV They have several EMT classed scheduled throughout the region and a
 December educator workshop planned. An EMSU class for any disaster was held in
 Concordia with MERGe.
- Region V They are planning an educator workshop in Kansas City late November or early December. The meeting for next week will be postponed.
- Fire Service Fire Association and Fire Chiefs met with Director House on September 30th to discuss continuing education.
- KATMS They participated in a conference call yesterday focusing on the website with information on air med transportation. November 30th is the next meeting at Life Star at Forbes.
- KDHE EMSC's Tracy Cleary is no longer there and the new contact is Lori Haskett. Trauma has taken on collaboration with EMSC. They have a new statewide Director of Public Health Preparedness. There is a trauma meeting October 12th at Wichita Wesley where they are trying to incorporate EMS and work together across the state.
- KEMTA The KEMTA Conference will be held February 10-12 in Hutchinson with the pre-conference on February 9th.
- KEMSA The conference was in August with over 70 exhibits and over 400 participants. The next KEMSA conference is planned for Wichita at the Kansas Star Casino in 2017. A Strategic Planning meeting is scheduled for October 13 and 14 in Salina. They continue to pursue the Medicaid maximum project.

Education, Examination, Training and Certification Committee

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

• Director House presented the committee with a variance involving an attendant requesting to instruct an EMT initial course of instruction without holding a Kansas Instructor-Coordinator license. In discussion, it was made apparent that the individual has had ample opportunities to complete an I/C course, but made no attempts.

Director Kaufman made a motion to forgo the request since it was not a hardship. Director Ralston seconded. No discussion. No opposition noted. <u>The motion carried.</u>

- Director House reported that there was not a SKEMS report to announce, and more testing sites will be formed in the near future.
- The committee discussed the educator proposal. Director Kaufman thanked the many people from the public who submitted comments and is looking forward to the future.
- Director House announced that Mark Willis, recently retired as the Newton Fire/EMS Fire Chief, will be joining the office staff in November. Mr. Willis will be filling the currently vacant Education Manager position.
- The attendant renewal process has begun and renewal forms are being mailed out to those attendants expiring at the end of this year. The new online renewal process through the License Management System has shown to be successful. Roughly 100 attendants have

- completed their renewal through the new system and have received their renewal approvals within a time range of 20 minutes to a few days.
- Deputy Director Shreckengaust provided a demonstration on how the new KBEMS web licensing portal works. He hit on the key points including: claiming accounts, managing continuing education hours, adding new courses, and requesting course approval. Director Kaufman stated this is still a work in progress so give it a little time to work correctly. Director Kaufman thanked Deputy Director Schreckengaust and staff for working through this.

Executive Committee

Chairman Hornung presented the Executive Committee Report to the Board:

- Federal Legislative Update on H.R. 4365 / S. 2932 Controlled Substances Act-The House and Senate agreed on a single bill to move forward. It has a good chance to move forward. This bill would allow attendants to work within standing orders on controlled substances.
- Dr. Ryan Jacobsen gave an update on the MAC meeting in July. He stated they continue to pursue the privatization of CARES issues.
- The MAC approved the use of TPOPP allowing the use of pre-hospital orders for DNR. They requested it be published on the Board website as a MAC recommendation. Assistant Attorney General Sarah Fertig provided a written legal disclaimer.

Director Ralston made a motion to add TPOPP with the disclaimer to the Board website. Chief Pearson seconded the motion. No discussion. No opposition noted. <u>The motion carried.</u>

- Dr. Jacobsen requested the MAC be allowed to meet on Thursday in between the Planning and Executive Committee meetings. The Planning Committee meeting could start fifteen minutes earlier. Staff can start working toward this change that could start in February.
- The MAC also recommends that all levels of certification have access to Naloxone. The Board would need to add this to the scope of practice and move forward with the regulation change.
- The new regulatory revision process was formalized to get a policy in place.

Chief Pearson made a motion to adopt the Regulatory Revision Policy. Director Ralston seconded the motion. No discussion. No opposition noted. <u>The motion carried.</u>

Dr. Hornung discussed the requirement to add KEMSIS submission to be eligible for the KRAF grant. There are already 119 services reporting annually.

Director Ralston made a motion to revise KRAF grant eligibility requirements to include KEMSIS reporting. Chief Pearson seconded the motion. No discussion. No opposition noted. The motion carried.

- The committee had discussion that some communities in urban areas might not qualify for EIG funding. Director House made the following recommendations for writing EIG grant eligibility:
 - 1) Any city, with a population less than 5,000 and operating an ambulance service, that is located within a densely settled rural, semi-urban, or urban county be eligible for EIG funding. This would add: Hesston, Marquette, Moundridge, Canton, Lindsborg, Caldwell, Conway Springs, and Clearwater.
 - 2) Changing the 3rd month cycle to city populations less than 2,000 and cities less than 5,000 located in densely settled rural counties; and the 4th month cycle include the remainder with a population from 2,000-4,999.

Impact for #2 – Mount Hope, Sedgwick, Buhler, Haven, and Pretty Prairie would move from 4th month to 3rd month. Cherryvale would move from 3rd month to 4th month.

Director Ralston made a motion to revise Education Incentive Grant eligibility requirements to include cities as defined above. Chief Pearson seconded the motion. No discussion. No opposition noted. The motion carried.

- Dr. Hornung reported they had excellent comments on the Continuing Education concept and many different views were presented. He stated the assessment approach is an excellent way to proceed. The committee wants to proceed with a group plan to work on the concept. They will work out the details and how the assessment will be created. Director Ralston liked the plan, and said a task force will need to make sure that education across the board would be equal. We have confused individuals in the meantime and we need people going in the same direction. Chief Pearson stated the comments were clear. The Regions and professional organizations encourage moving forward with the reduction of hours per the motion made last June. The concept plan is long term and for now they should move forward with the tabled motion. Director Pore supports the concept plan and wants to put patients first. Director Pore said this has not been done yet, and that hours do not ensure competency. We make hard choices and we cannot make everyone happy, but we should make the best decision to improve patient care. Dr. Sellberg thanked everyone for their comments and he liked the engagement by so many individuals. He said they need to work toward getting more buy in.
- Director Kaufman made a motion to adopt the amendment to K.A.R. 109-5-1a. Director Ralston seconded the motion. After some discussion, the motion carried.

Roll call vote as noted:

Senator Faust-Goudeau	Aye	Chief Pearson	Aye
Dr. Faimon	(Absent)	Director Pore	Nay
Mr. Franks	(Absent)	Director Ralston	Aye
Rep. Henderson	Aye	Comm. Saueressig	Aye
Senator Holmes	Nay	Dr. Sellberg	Aye
Chairman Dr. Hornung	Aye	Director Jeri Smith	(Absent)
Comm. Ricky James	Nay	Rep. Susie Swanson	(Absent)
Director Kaufman	Aye		

K.A.R. 109-5-1a is amended by the Board on an 8-7 vote (8 Yes; 3 No; 4 Absent).

• Director Ralston made a motion to adopt the amendment to K.A.R. 109-5-1b. Director Kaufman seconded the motion. After some discussion, the motion carried.

Roll call vote as noted:

Senator Faust-Goudeau,	Aye	Chief Pearson	Aye
Dr. Faimon	(Absent)	Director Pore	Nay
Mr. Franks	(Absent)	Director Ralston	Aye
Rep. Henderson	Aye	Comm. Saueressig	Aye
Senator Holmes	Nay	Dr. Sellberg	Aye
Chairman Dr. Hornung	Aye	Director Jeri Smith	(Absent)
Comm. Ricky James	Nay	Rep. Susie Swanson	(Absent)
Director Kaufman	Aye		

K.A.R. 109-5-1b is amended by the Board on an 8-7 vote (8 Yes; 3No; 4 Absent).

• Director Ralston made a motion to adopt the amendment to K.A.R. 109-5-1c. Director Kaufman seconded the motion. After some discussion, the motion carried.

Roll call vote as noted:

Senator Faust-Goudeau,	Aye	Chief Pearson	Aye
Dr. Faimon	(Absent)	Director Pore	Nay
Mr. Franks	(Absent)	Director Ralston	Aye
Rep. Henderson	Aye	Comm. Saueressig	Aye
Senator Holmes	Nay	Dr. Sellberg	Aye
Chairman Dr. Hornung	Aye	Director Jeri Smith	(Absent)
Comm. Ricky James	Nay	Rep. Susie Swanson	(Absent)
Director Kaufman	Aye		

K.A.R. 109-5-1c is amended by the Board on an 8-7 vote (8 Yes; 3 No; 4 Absent).

Investigations Committee

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

- Seven cases were on the consent agenda and the applications were denied due to answering yes to the legal questions. They are cases 2016-004, 027, 030, 041, 042, 043, and 044. Staff will get information out to instructors to make sure students understand the legal questions are not for driver's license revocation.
- The committee reviewed case 2015-087 against a service indicating that on multiple occasions care was given below the standard of care, and on one occasion falsified an attendant care report. An attendant also made an accusation that documents were altered. The committee recommended the case be dismissed due to lack of evidence. Case 2015-88 on this same matter was against the attendant. The attendant received a three month suspension for falsification of records.
- 2015-090- A sponsoring organization let students take the NREMT exam before completing their course. The committee determined this was a technical violation and a letter was sent to the sponsoring organization.
- A student complaint was received after an initial course of instruction. The committee decided the primary instructor failed to maintain documentation of completion of the course. The committee voted to increase course visits and a cautionary letter will be sent to the instructor and sponsoring organization.
- An attendant was convicted of a felony. The investigator tried to reach the individual, but no response. The committee suspended certification thru December 31st, and will flag the attendant to appear before the board should they attempt to renew or attempt recertification.
- An instructor added classes to the schedule without notifying the Board. The committee instructed staff to increase audits and the course is to be monitored.
- An attendant self- reported to the Board that they did not complete the retroactive approval of CE form and claimed unapproved hours on their renewal form. The individual will be issued a warning letter.

- A service director reported a light had been replaced in the back of a truck and all violations had been corrected. The service director had asked someone to fix the light, but the light was not replaced. The committee determined there was no ill intent, and the case was dismissed.
- An ambulance broke down during a patient transport. The service borrowed a unit but did not report it to the Board. The committee accepted local action.
- The Kansas Board of EMS received an application for certification where the applicant indicated they were required to register as a sex offender since the age of 16. The committee allowed the application to be processed.

Office Update

Chairman Hornung called on Director House to give the office update. Director House reported to the Board:

- The Board office continues to work on the License Management System and it is a major process change.
 - The office is getting ready to receive renewals.
 - Deputy Director Shreckengaust has done a tremendous job on the video clips for the new system.
 - Director House encouraged the services to contact the Board office with any issues that pop up.
- Mark Willis will start the first part of November as the Education Manager.
- All regional trainings for migration to ImageTrend Elite have been completed. Two last chance trainings will be in November.
- There were some issues with EKG reporting, but they have been resolved.
- There has been an upgrade to the hospital hub, which will allow the ability to use the old or new ImageTrend. Sixty-four hospitals are set up, which is over half of the hospitals. The program will capture outcome data so the hospitals can enter and track outcomes.
- Director House attended the NASEMSO Conference in September in New Mexico and presented to the Board some of the highlights of the conference.
 - Director House recommended looking at the website <u>safeambulances.org</u>. This site is currently under construction and has three standards: regulators, public and service providers. The goal of this website is to compile information about ground ambulance standards.
 - There are two videos on the NASEMSO website. One of these videos discusses the Antler monitoring system in the back of the truck. The system costs \$6,500 to \$7,000 and cannot withstand a 30 mph crash.
 - Director House discussed the EMS Compass, which develops performance measures for EMS. This 2 year project is nearly complete. Director Pore is entering this information into the Elite system. Services will be able to see what performance measures look like at their service.
 - Director House discussed First Net, a first responder network for rural areas which would provide 100% coverage of the state. An RFP will be out in November. The governor will be asked to opt in or out of the proposal. If the state were to opt out, we would have to present an equitable plan for 100% rural

- coverage. First Net would provide public safety agencies broadband width the same as Verizon, Sprint and AT&T. There would only be 400 nationwide users. This would also provide livestream for telemedicine with no buffers or delays.
- There is a 3 year project to model state rules for air ambulance to get similar rules for neighboring states. This will not be mandatory to use, but comments will be requested.
- Air medical in the state EMS plan was discussed. The question was asked if there should be a requirement that chest compressions can be performed in the air.
- The Medical Director Council at NASEMSO made the following three recommendations:
 - An EMR should never be a sole provider in the back of an ambulance due to minimal didactic skills.
 - The Council has worked on revising the evidence based guidelines for prehospital care.
 - An urban areas issue is the creation of free standing emergency rooms. Transports are double in these communities. The KHA project may align with this, but they will keep EMS involved.
- Time sensitive emergencies should be looked at as a system approach.
- Data analytics is going to be a huge push. NEMSIS has all sorts of data that is not being utilized. Analytics will be made available for people to easily capture the data and compare other states and services of similar size.
- There was a moving presentation on the Blue Campaign involving human trafficking. The establishing of patterns is what they are looking for. Health information exchanges can help to track patterns. Some items that were mentioned were repeated visits to emergency rooms and the person would not be allowed to be alone with anyone else in the room. Human trafficking has become the 2nd most frequent form of trafficking. Human trafficking used to be the 3rd most frequent form of trafficking. The reason for this increase is because there is really next to nothing penalty-wise for the trafficker. There is a low risk with a high reward. A trafficker that was recently caught in Georgia was making close to 1.3 million dollars a year. Even after they found the trafficker, the only thing they could do to him was put him away for some time. His victim ended up with close to 90 thousand dollars in tax evasion charges and a few other things. This is a Kansas issue. Human trafficking involves both sex and labor. Director House stated if we continue on the path we are going, we are looking at doubling the numbers in Kansas from 2015 to 2016. From the pre-hospital side, there are a lot of resources out there available to recognize signs of human trafficking.
- EMS for Children performance measures come out March or April of next year. We entered comments on the performance measures when they first rolled out. The performance measures entered into a second comment period without any alteration from their first version. They are now approved without any variation from the first time it went through. The two main concerns with the performance measures are the requirement to establish a pediatric emergency care coordinator at every ambulance service, and performing a metric of how well and how often pediatric equipment is utilized. Every provider would have to have contact with a pediatric patient at least once every two years in order to qualify.

• Director Kaufman stated there are a number of individuals in her community that carry EpiPens. Due to the huge increase in cost some people are carrying syringes now rather than a pen. What do we do if we have an EMT that encounters one of these situations and they are not allowed to help the patient with their syringe? Dr. Hornung said unless it is a branded EpiPen, you have no idea what is in that syringe. Dr. Hornung suggested to leaving it to the patient or use your own stock. Director House said there were only two documented cases since 2007 of EpiPen administration when an AEMT or higher is not on scene. There were a total of 119 administrations of the EpiPen since 2007. These statistics were compiled from the KEMSIS data base.

Dr. Hornung adjourned the meeting at 10:45am.