

Board Meeting Minutes

October 4, 2019

Approved
12/06/19

Board Members Present

Dr. Gregory Faimon
Dr. Joel Hornung
Comm. Ricky James
Director Deb Kaufman
Chief Shane Pearson
Mr. Chad Pore
Comm. Bob Saueressig
Mr. Dennis Shelby
Director Jeri Smith
Director John Ralston via
phone
Dr. Martin Sellberg
Rep. John Eplee

Guests

Galen Anderson
Ron Marshall
Frank Williams
Mike Johnson
Craig Isom

Pete Rogers
Jonathan Mitchell
Megan Elmore
Jodi Cregger

Representing

AMR
KHA
Butler County EMS
NWKSFMI
EagleMed/MTC/Life
Star
Phillips Co EMS/Reg I
Hoisington Amb Serv
Hoisington Amb Serv
Life Save

Staff Present

Joseph House-Exec Dir
Curt Shreckengast-Dep Dir
James Kennedy
Terry Lower
Suzette Smith
Amanda Walton
Chrystine Hannon
Kim Cott
James Reed
Emilee Ward
Ross Boeckman
Carman Allen

Board Members Absent

Rep. Broderick Henderson
Rep. Oletha Faust-
Goudeau

Attorney General Staff

AnnLouise Fitzgerald

Call to Order

Chairman Hornung called the Board Meeting to order on Friday, October 4, 2019 at 9:04 a.m.
Chairman Hornung called for a motion to approve the minutes.

Director Smith made a motion to approve the August 2, 2019 minutes. Director Kaufman seconded the motion. No 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 provided the following report:

- Regarding KEMSIS, Director House reported that 225,000 records have been submitted this year. Validity has been good with an average score of 93%. He reported that he has received phone calls from 11 services that want to get on board. At present there are 12 services who are not submitting data.
- Director House also stated that the Data Reporting regulations were presented in May but that he hadn't heard much back. There are still looking for comments on the proposed regulations, specifically the time limit, 24-96 hours, to enter data. There was a question regarding the 24 hour deadline for patient reports being submitted to the ER and Director House said that still stands. The 24-96 hour deadline deals with getting info into KEMSIS. Director House reported that not all services meet the 24 hours requirement of the regulation. Chief Pearson explained that some services do handwritten reports that are then entered days later. They are looking for ways to make it more user friendly.
- Mr. Reed reported that 160 of 166 service inspections were complete, and the remaining inspections only included four services. They have completed 24 unannounced service inspection visits, 29 initial course audits, and 137 Program Provider audits.
- Over the last few weeks issues have been brought up about emergency medical response agencies. Stakeholders will have another meeting in November to work out issues and define of first aid.
- There have been rising issues with violence to EMS providers and an increase of reports of violence. There needs to be a way to track it. Ms. Darlene Whitlock stated that the nursing profession had also tried to pass legislation and was met with questions regarding the type of patients that were assaulting nurses. The comment was made that there is not good reporting mechanism for health care in general.
- Concerns were raised about the denial of access to the state 800 MHz radio system to those services who are not based in Kansas. The consensus is that there should be inter-operable communication for air services in the state to communicate with ground services even if their corporate headquarter is outside the state. Individuals present at the meeting agreed to take the concerns to the 911 Coordinating Council and SIEC.
- Mr. Reed reported that the State Fair went well and that a different Service was in attendance each day.
- One service, Dale Aviation, forfeited their Kansas permit.
- Mount Hope EMS, out of Sedgwick County, has reorganized and will soon be obtaining their permit.
- Regions and associations reported on their next meetings. KEMSA will be having a Core Conference on November 8-10th in Independence, Kansas. MARCER representative, Jason White, suggested that everyone get on board with cost reporting.
- Ms. Darlene Whitlock reported that the EMS Medical Director workshop on August 9th was attended by 23 physicians, 1 PA, 1 hospital director and Director House.

Chief Pearson made a motion to move forward to encourage KDOT to allow any service licensed in Kansas to have access to the state 800 MHz radio system. Mr. Shelby seconded the motion. The motion carried.

That concluded the Planning and Operations report.

Medical Advisory Council

Chairman Hornung gave the following report.

- They discussed the medical protocol approval process. Chairman Hornung felt their discussion would be covered during the Executive Committee report so he deferred his comments to that report.

That concluded the Medical Advisory Council report.

Executive Committee

Chairman Hornung gave the Executive Committee report.

- H.R. 485 / S. 2392 - VREASA would allow veterans to be transported to the nearest facility and be treated with VA coverage.
- H.R. 1309 Workplace Violence Prevention for Health Care and Social Service Workers Act: EMS was mentioned but the bill probably won't go anywhere this year. This issue is coming up more often.
- H.R. 3350 - The VA Emergency Transportation Act would pay for transferring a patient from one facility to another.
- H.R. 2887, EMS Providers Protection Act would cover non-profit volunteers for disability claims.
- S. 1357, Nurse Staffing Standards for Hospital Patient Safety and Quality Care Act of 2019 is not specified for EMS but will affect staffing of nurses at a 1:3 ratio for acute patient care. There was discussion on how it might affect staffing across Kansas, and the difficulty for some areas.
- The Protocol Approval Process was discussed. Over the last few months and talking with various organizations about the Protocol Approval Process there is not much interest in the current path. Director House created some language that have the Protocols approved by the service Medical Director and remove the other protocol approval avenues. Chairman Hornung would not be surprised if some Medical Directors might be a little uncomfortable signing off on those. Dr. Sellberg questioned what the floor of care would be and who does the oversight if an issue arises. Dr. Longabaugh was concerned with the removal of the governing body and would feel better if there was a system in place so it wouldn't fail. Chairman Hornung asked Director House if protocols are reviewed during an inspection and they are not.

Chairman Hornung made a motion to support the medical director approval of protocols as recommended by the MAC and move down the statutory path to changes. The motion was seconded by Representative Eplee. There was discussion including that Medical Directors can use the MAC and other resources to construct protocols and that each service shall "designate" a Medical Director instead of "appoint". No opposition noted. The motion carried.

- Also discussed was to make sure protocols in Kansas are at a high level of care. It is important to continue to evaluate data to see if someone is not following a reasonable standard of care. Chairman Hornung wants to continue to work on statewide protocols that could be created, published, and updated to be used by a service.

Chairman Hornung made a motion that the Board work toward the continuation of data collection and statewide protocols. Vice-Chairman Pore seconded the motion. Extensive discussion occurred. No opposition noted. The motion carried.

- Dr. Sellberg asked what it means exactly, and what is the path. Chairman Hornung would establish a Protocol Creation Committee and data collection would be ongoing. He would designate a spot in Executive Committee to review if anything sticks out in the data. Director House stated that on the outcome side there is an assumption that statewide protocols would lead to a higher level of care. But this is a significant assumption to make. When comparing Kansas with other states we currently out perform them in some categories and not in others. At the board level Kansas has been more concerned with regulating outcomes and there are going to be multiple clinical paths to reach that outcome. He is not sure that dictating one pathway is the right way to go. If we can say, here is the clinical outcome we want to achieve and we have a method of measuring it, perhaps that is where that committee should be focused upon. There was additional discussion that Protocols based on the NASEMSO guidelines would be available to all Services. Chairman Hornung stated a goal of creating statewide protocols based on best available evidence and clinical guidelines and look at data and see if there is anything we need to do based on information in Kansas. Questions arose concerning how frequently the protocols would be updated. Using Statewide Protocols is not mandatory, just a recommendation, and that the Medical Director could make changes to the document. How often should the committee meet needs to be decided. The position statements from the MAC have been helpful to Services in driving the care across Kansas. Per previous discussion, Chief Pearson would head the committee with ad hoc members and Medical Directors. They would start at the BLS level and work up from there. Dr. Sellberg asked about a budget for costs. Chairman Hornung, Chief Pearson, and Director House will meet to organize a timeline and budget for the project.
- Vice-Chairman Pore provided a Kansas Revolving Assistance Fund (KRAF) update. The grant application process is coming up in December. The Committee has recommended removal of cots from the application process. Patient care items will be considered first, then patient handling items.

That concluded the Executive Committee report.

Investigations Committee

Chairman Hornung called upon Vice-Chairman Pore to provide the Investigation Committee report. Vice-Chairman Pore provided the following report:

- Two applications were reviewed. One was processed and one was closed incomplete.
- Multiple violations case related to patient care and narcotic diversion. Closed meeting.
- Two providers found in violation: one for falsification documents; the other for scope of practice. Consent agreement and summary proceeding orders authorized for a fine.
- Two providers with expired credentials provided advanced care. Closed; no jurisdiction with referral to the local county attorney to consider criminal action.
- Provider found in violation for failure to safeguard a patient and falsification ambulance service record. Consent agreement offered and accepted for a fine and training.
- Provider attempted to provide care while under the influence of alcohol or medication. Closed meeting.
- A service was unable to provide staffing. Violation found; accepted local action.

- Two providers transferred a patient with a medication beyond their scope. Violations found; accepted local action.
- Report of a provider possibly operating impaired. No violations found.
- The committee recommends that KBEMS adopt a regulation regarding disciplinary steps for individuals who do not comply with education audit requests.

The Investigation Committee briefly convened to discuss one case. That concluded the Investigation Committee report.

Education, Examination, Training and Certification Committee

Chairman Hornung called upon Director Kaufman to provide the EETC report. Director Kaufman provided the following report:

- The BLS Psychomotor Exam report included 34 exams and 915 examinees, between January 2019 and September 13, 2019.
- Staff is currently reviewing the examination guidebook and associated forms.
- Ross Boeckman was introduced as the Exam Coordinator.
- Seven Alaska state and regional EMS officials were present at two BLS exam sites to monitor our exam process for possible implementation in their state. Deputy Director Shreckengast has been contacted by three other states interested in our examination process.
- NREMT cognitive exam report for all levels showed quality education throughout the state.
- Dr. Foat reported the EDTF met August 22, and that they have a new website, KansasEDTF.org, that includes a blog, resource sharing and the ability to provide education via video. They have two surveys going out regarding best practices.
- Two regulations, K.A.R. 109-5-1a and K.A.R. 109-11-1a, have completed the regulatory review process and are scheduled for JCARR testimony on October 8th and open for public comment on November 14th then will be coming back to the Board in December.
- K.A.R. 109-6-1 will be revoked since we no longer provide temporary certification.
- Reviewed a new set of regulations that will address Sponsoring Organizations. These are conceptual and the committee will see them again in December. Please direct any questions to Director House, Deputy Director Shreckengast, or Ms. Allen.
- Ten educational audits have been completed with two going to investigations. The second round of ten have been mailed.
- As of Monday, 405 renewals have been issued. The new Exam Coordinator has been cross-trained to process renewals.
- Office reorganization has moved Terry Lower back into the administration section and Amanda Walton has moved to the Education Specialist position.
- The first edition of the Educator Newsletter was sent out 1-2 months ago and is scheduled to be published quarterly. The feedback has been positive.
- Staff is preparing for a very busy fall and end of year with 12 BLS exams scheduled for December.

That concluded the Education, Examination, Training and Certification Committee report.

Office Update

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

- ImageTrend has added two new roles for services: Pediatric Emergency Care Coordinator in line with an EMS for Children program performance measure and ePCR Contact who will be the primary contact for the service regarding KEMSIS patient care reporting.
- KBEMS hosted the Western Plains NASEMSO conference two weeks ago. It was well attended and had great speakers. The conference was well orchestrated by Deputy Director Shreckengaust, Ms. Wendy O'Hare, and Ms. Allen.
- The Interstate Compact will be meeting in October. They hope to work out a financial path towards sustainability. The first group of rules are in and active, but they still need to get a coordinated data base. The Compact is on track to be operational in the first quarter of 2020. It will provide a bubble of protection for those individuals who cross state lines.

That concluded the Office Update report.

Chairman Hornung thanked Region III for the refreshments.

Chairman Hornung adjourned the meeting at 10:21 a.m.