

STATE OF KANSAS

KBEMS Board ASSESSMENT

OF

NHTSA REVIEW

Board Retreat, September 15, 2007

General Emergency Medical Services Overview of System Components

Regulation and Policy
Resource Management
Human Resources and Training
Transportation
Facilities
Communications
Trauma Systems
Public Information and Education and Prevention
Medical Direction
Evaluation

CONTENT EXPLAINER

NHTSA TAT (National Highway Traffic Safety Administration Technical Assistance Team)

Assessment conducted on July 17-19, 2007, by the following team:

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Items in **BOLD** are those assessment recommendations of high priority made by the NHTSA TAT.

KBEMS Board. 13 member Kansas Board of Emergency Medical Services (KBEMS)

Reference Kansas Statutes Annotated (K.S.A.) 65-6102. Also, please go to www.ksbems.org and reference "About the Board"

KANSAS EMERGENCY MEDICAL SERVICES (EMS)

The TAT revisited the ten essential components of an optimal EMS system which were used in the 1994 *State of Kansas: An Assessment of Emergency Medical Services*. These components provided an evaluation or quality assurance report based on 1989 standards. While examining each component, the TAT identified key EMS issues, reviewed the State's progress since the original report, assessed its status, and used the 1997 Reassessment Standards as a basis for recommendations for EMS system improvement.

The TAT Recommendations remain in black, with priority recommendations in bold. Board assessment and comments on recommendations are in brown with the lead "KBEMS BOARD".

A. REGULATION AND POLICY

Recommendations

- **NHTSA TAT: The Governor and Legislative leadership must monitor progress towards KBEMS publicly performing their role as the lead EMS agency and directing staff in the regulation and management of the EMS system in Kansas or reorganize KBEMS to serve in an advisory capacity to the Chief Administrator.**

KBEMS BOARD: KBEMS is the lead EMS agency for Kansas.

- **NHTSA TAT: The Legislature should complete the necessary statutory and regulatory changes to establish KBEMS as the single lead agency for all components of the EMS system to include authority to categorize, organize, and deploy EMS resources.**

KBEMS BOARD: KBEMS is the lead EMS agency for Kansas.

- **NHTSA TAT: KBEMS should abolish the independent ability of a licensed physician to institute protocols which exceed the EMS personnel's authorized scope of practice.**

KBEMS BOARD: No specific statement or goal to be developed until further information is obtained or laws approved.

- **NHTSA TAT: KBEMS should develop standards for medical directors of ambulance services, non-transporting agencies, training institutions, and dispatch centers.**

KBEMS BOARD: Recommendation addressed further in document.

- **NHTSA TAT:** KBEMS must develop and implement regulations for licensing of non-transporting agencies.

KBEMS BOARD: KBEMS, in cooperation with stakeholders, must develop, coordinate, and implement regulations for non-transporting agencies.

- **NHTSA TAT:** The Legislature should establish and fund the position of a State EMS Medical Director for KBEMS.

KBEMS BOARD: Evaluate establishing the position of the State EMS Medical Director and the potential roles and responsibilities.

- **NHTSA TAT:** KBEMS in cooperation with the Kansas Air Medical Society (KanAAMS) should promulgate specific regulations for air ambulance services based upon the standards set forth by the Commission on the Accreditation of Air Medical Transport Services (CAAMTS).

KBEMS BOARD: Continue the update of air transport services regulations currently being developed.

- **NHTSA TAT:** KBEMS should consider national guidelines and reflect contemporary terminology in any new statutes and regulations.

KBEMS BOARD: Recommendation addressed further in document.

B. RESOURCE MANAGEMENT

Recommendations

- **NHTSA TAT:** KBEMS must establish the authority in statute to centrally identify, categorize and coordinate all assets within the EMS system including ambulance services, non-transporting EMS agencies, dispatch-communications centers, EMS personnel, ambulance vehicles, and hospitals.

KBEMS BOARD: Dispatch centers should be under purview of KBEMS because of EMS dispatch protocols. Initiate the identification and categorization all assets.

- **NHTSA TAT:** KBEMS should evaluate the MERG concept in the development of a statewide strike team approach to disaster management.

KBEMS BOARD: Organize through the development of strike teams. Evaluate the MERGE concept (why it works/doesn't), evaluate how to expand the concept, and create state authority to aide in organization, expansion, resources, and reimbursement.

- **NHTSA TAT:** KBEMS must continue with the implementation of a statewide electronic incident reporting system. This system is essential to obtaining the data which will support system evaluation.

KBEMS BOARD: KEMIS is ongoing.

- **NHTSA TAT:** KBEMS must assume leadership in system evaluation, needs assessment, and improved resource management strategies.

KBEMS BOARD: KBEMS is the lead agency of Kansas EMS

- **NHTSA TAT:** KBEMS should develop and distribute to all ambulance services a statewide communications inventory which includes the contact numbers, frequencies, and similar data for dispatch centers, hospitals, and other communications assets to facilitate communications during interfacility transfers and large scale EMS responses.

KBEMS BOARD: Continue to partner with Statewide Interoperability Committee and gather information to facilitate the creation of a KBEMS Statewide Disaster Response Plan.

- **NHTSA TAT:** KBEMS must develop a statewide EMS plan which includes details about the characteristics and capabilities of the EMS system. The current KBEMS

plan describes a vision for Board operations but does not adequately address the State's EMS system.

KBEMS BOARD: The process discussed throughout the 2007 NHTSA Assessment through KBEMS review is the initially process of creating an EMS plan.

C. HUMAN RESOURCES AND TRAINING

Recommendations

- **NHTSA TAT:** KBEMS should embrace the EMS Education Agenda for the Future as the template for improvements to the EMS education system in Kansas.

KBEMS BOARD: KBEMS should evaluate and review the EMS Education Agenda for the Future as the template for improvements to the EMS education system in Kansas.

- **NHTSA TAT:** KBEMS should establish statewide EMS treatment protocols which must align with a statewide scope of practice.

KBEMS BOARD: KBEMS should establish a statewide EMS treatment protocols outline which must align with a (Kansas) statewide scope of practice at a minimal standard of care. The protocols could be used as reference materials, but not mandated by KBEMS. KBEMS could also act as a “peer review” to assess medical protocols created at the local level.

- **NHTSA TAT:** Service managers should perform a needs assessment of personnel to staff their local system and these findings should be reported to KBEMS to assist with a statewide strategic plan for workforce development. ■

KBEMS BOARD: Service managers should perform a needs assessment of personnel to staff their local system and these findings should be reported to KBEMS to assist with a statewide strategic plan for workforce development. Refine questions on annual licensing renewal packet to include projection data to aide is the assessment of the EMS workforce and the effect the EIG program is having on recruitment and retention.

- **NHTSA TAT:** KBEMS must update its CE requirements to enable providers to maintain National Registration while preserving maximum flexibility at the local level.

KBEMS BOARD: KBEMS must update its CE requirements to enable providers to maintain certification while preserving maximum flexibility at the local level. Focus on evaluation of studies detailing the appropriate continuing education offerings submitted by Kansas EMS attendants. KBEMS would need to consider the evaluation of specific continuing education to maintain competency as opposed to the need to maintain NREMT certification.

- **NHTSA TAT:** KBEMS should develop standards which require EMS Instructor Coordinators to assure appropriate medical oversight and participation in course offerings.

KBEMS BOARD: KBEMS should institute a process to routinely monitor and evaluate the performance of EMS Educators (Instructor Coordinators and Training Officers). KBEMS would

have the ability to evaluate pass-rates, ensure medical oversight, and review other educational documents as outcomes to assess competency of educators

- **NHTSA TAT:** KBEMS should continue the Education Incentive Grant program as a workforce development initiative.

KBEMS BOARD: KBEMS will continue to develop the Education Incentive Grant program and utilize the data to assess the EMS workforce in Kansas.

- **NHTSA TAT:** KBEMS should institute a process to routinely monitor and evaluate the performance of instructor coordinators.

KBEMS BOARD: KBEMS should institute a process to routinely monitor and evaluate the performance of EMS Educators (Instructor Coordinators and Training Officers). KBEMS would have the ability to evaluate pass-rates, ensure medical oversight, and review other educational documents as outcomes to assess competency of educators

D. TRANSPORTATION

Recommendations

- **NHTSA TAT:** KBEMS in cooperation with professional EMS associations should develop a statewide transportation plan.

KBEMS BOARD: KBEMS, in cooperation with all appropriate stakeholders, should develop a statewide transportation plan.

- **NHTSA TAT:** **KBEMS in cooperation with stakeholders must develop and implement regulations for non-transporting agencies.**

KBEMS BOARD: KBEMS, in cooperation with stakeholders, must develop, coordinate, and implement regulations for non-transporting agencies.

- **NHTSA TAT:** **KBEMS must inspect and license non-transporting services.**

KBEMS BOARD: See previous bullet.

- **NHTSA TAT:** KBEMS should develop and implement updated regulations for air transport services.

KBEMS BOARD: Continue the update of air transport services regulations currently being developed.

- **NHTSA TAT:** The service directors in cooperation with the Kansas Hospital Association (KHA) should promote recruitment activities for ambulance services.

KBEMS BOARD: **Delay.** KBEMS must review Kansas EMS manpower issues before utilizing the above as a potential solution to a problem that has not been defined.

- **NHTSA TAT:** KBEMS should mandate EVOC or equivalent training statewide for all EMS personnel operating emergency vehicles.

KBEMS BOARD: Explore and mandate EVOC or equivalent training statewide for all EMS personnel operating emergency vehicles.

E. FACILITIES

Recommendations

- **NHTSA TAT:** The KBEMS Medical Advisory Committee (MAC) - (see last recommendation on page 26) should:
 - **NHTSA TAT:** Examine and evaluate the existing regional triage and transfer protocols for appropriateness and correlation with facility care capabilities;

KBEMS BOARD: Examine and evaluate the existing regional triage and transfer protocols for appropriateness and correlation with facility care capabilities. The Board will assess how to accomplish this goal. The Board is not advocating a MAC at this time (**note:** input and stakeholder can be determined as national standards for triage and transfer protocols are developed).

- **NHTSA TAT:** Arrange a multiregional representative meeting to develop cross regional minimum standards for triage and transfer.

KBEMS BOARD: See previous bullet

- **NHTSA TAT:** KBEMS should work with the KHA to obtain information regarding emergency department capabilities of all Kansas hospitals and utilize this information in the development of triage protocols.

KBEMS BOARD: KBEMS should work with the KHA to obtain information regarding emergency department capabilities of all Kansas hospitals and utilize this information in the development of triage protocols. Evaluate current status of EM Systems (**note:** work may have already been accomplished, but KBEMS needs to aide in the coordination)

F. COMMUNICATIONS

Recommendations

- **NHTSA TAT:** KBEMS should develop and distribute to all ambulance services a statewide communications inventory which includes the contact numbers, frequencies, and similar data for dispatch centers, hospitals, and other communications assets to facilitate communications during interfacility transfers and large scale EMS responses.

KBEMS BOARD: Being coordinated through the Adjutant General's Office Interoperability Committee.

- **NHTSA TAT:** KDOT should reassess its plans for rollout of the 800 MHz trunked radio system. Where possible, adjustments should be made to address the concerns of EMS providers about radio costs, timeframes for implementation, and statewide system coverage.

KBEMS BOARD: KBEMS needs to be involved in statewide communications.

- **NHTSA TAT:** The KBEMS Chief Administrator should participate actively in the development of the statewide interoperability plan to assure representation of EMS needs and capabilities

KBEMS BOARD: Ongoing (membership on the Governor's Council on Homeland Security and Statewide Interoperability Committee).

- **NHTSA TAT:** The Statewide Interoperability Committee needs to make statewide EMS communications a priority.

KBEMS BOARD: Ongoing (membership on the Governor's Council on Homeland Security and Statewide Interoperability Committee).

- **NHTSA TAT:** **KBEMS must establish training and certification requirements for EMS dispatchers and the medical oversight of pre-arrival instructions.**

KBEMS BOARD: Evaluate service and training of current EMS Dispatchers to determine pre-arrival medical instructions capability (**note:** Initiation of a study to determine the level of EMD training)

G. PUBLIC INFORMATION, EDUCATION AND PREVENTION

Recommendations

- **NHTSA TAT:** KBEMS should work more closely with KDHE and other stakeholders to identify initiatives and develop a statewide plan for public information, education and injury prevention.

KBEMS BOARD: EMS is a partner in the trauma system, yet has not been involved in safety and prevention activities, or specifically involved in statewide safety initiatives through KDHE and other stakeholders (**note:** encourage through joint efforts)

- **NHTSA TAT:** KBEMS should support information dissemination to EMS agencies, providers and the public about EMS in Kansas and how to properly access and utilize the system.

KBEMS BOARD: KBEMS has \$20,000 requested in its FY 2009 Budget submission to address public awareness and information.

- **NHTSA TAT:** KBEMS should continue to disseminate information to EMS agencies about EMS Week and other initiatives.

KBEMS BOARD: See previous two bullets

- **NHTSA TAT:** KBEMS should collaborate with the Governor's Council on Homeland Security and encourage ambulance service directors to become involved in the developing Public Information Officer network.

KBEMS BOARD: Continued representation by the Chief Administrator

- **NHTSA TAT:** KBEMS should facilitate ongoing offerings of the NHTSA PIER training program.

KBEMS BOARD: Continue to pursue placing the program within the State Plan. However, the level of priority is premised on larger issues to be resolved by the Board.

H. MEDICAL DIRECTION

Recommendations

- **NHTSA TAT:** **KBEMS must institute the recommendation of the 1994 TAT which was, “Redefine the medical Consultant position as the State EMS Medical Director for the KBEMS. Roles and responsibilities for the medical director should be developed, including medical input into protocols and all issues related to the care of EMS patients. The medical director should serve as a medical resource and provide leadership to local EMS medical directors.”**

KBEMS BOARD: Evaluate establishing the position of the State EMS Medical Director and the potential roles and responsibilities.

- **NHTSA TAT:** **KBEMS must define roles, responsibilities, and qualifications of MAs which include oversight of QI programs, 9-1-1 medical functions, and all medical aspects of EMS operations.**

KBEMS BOARD: Develop the definition of roles, responsibilities, and qualifications of MA’s (see previous bullet).

- **NHTSA TAT:** KBEMS should reinstitute a formal training program for new and established MAs based on national guidelines.

KBEMS BOARD: Reinstitute a formal training program for new and established MA’s.

- **NHTSA TAT:** **KBEMS must require all patient care to be supervised by an MA. All EMS agencies, regardless of transporting status, must have a qualified MA.**

KBEMS BOARD: KBEMS will develop rules and require all pre-hospital patient care to be supervised by an MA.

- **NHTSA TAT:** **KBEMS must abolish the provision of local medical societies or hospital staffs having approval authority over EMS protocols.**

KBEMS BOARD: No specific statement or goal to be developed until further information is obtained or laws approved.

- **NHTSA TAT:** KBEMS must establish statewide EMS protocols which reflect minimum patient care standards.

KBEMS BOARD: No specific statement or goal to be developed until further information is obtained or laws approved.

- **NHTSA TAT:** KBEMS should adopt statewide scopes of practice for all levels of personnel based on the National Scope of Practice Model. There should be no local variations in the scopes of practice without specific approval from KBEMS

KBEMS BOARD: Evaluate the National Scope of Practice model and its application to current Kansas practices, education, and certification.

- **NHTSA TAT:** KBEMS should work with stake holders to encourage better planning for the on and off-line medical control of interfacility transports.

KBEMS BOARD: KBEMS as a resource to aide in facilitating issues with inter-facility transports with Kansas EMS services and all appropriate stakeholders.

- **NHTSA TAT:** The KBEMS State EMS Medical Director should chair a medical advisory committee with regional participation to oversee statewide EMS medical policy.

KBEMS BOARD: (note: re-named KBEMS Medical Advisory to State EMS Medical Director under this goal). Once goals from previous sections are vetted, then the function and responsibility of the created State EMS Medical Director and Advisory Committee would be evaluated.

I. TRAUMA SYSTEMS

Recommendations

- **NHTSA TAT:** The Advisory Committee on Trauma should seek additional dedicated funding to:
 - Fund the development of trauma programs in the Level III facilities
 - Fund completion of the designation process of the Level III facilities
 - Fund consultation visits and designation of the Level IV facilities
 - Fund ongoing improvements to the statewide system infrastructure
 - Continue funding of Regional Trauma Advisory Councils

KBEMS BOARD: Not under KBEMS purview.

- **NHTSA TAT:** KDHE should develop a process to include out of state receiving hospitals in the Kansas trauma system.

KBEMS BOARD: Not under KBEMS purview

- **NHTSA TAT:** The ACT should work with the KBEMS to develop standards for dispatch centers to include EMD training and medical advisor oversight.

KBEMS BOARD: (note: ACT has sponsored training for EMD training). Continue to evaluate and develop EMD training standards.

- **NHTSA TAT:** The ACT should complete Level III designation within one year, as planned.

KBEMS BOARD: Not under KBEMS purview

- **NHTSA TAT:** The ACT must begin designation of qualified Level IV facilities as soon as possible.

KBEMS BOARD: Not under KBEMS purview

- **NHTSA TAT:** The ACT should seek statutes or regulations to require mandatory autopsy of all trauma deaths.

KBEMS BOARD: Not under KBEMS purview

J. EVALUATION

Recommendations

- **NHTSA TAT: KBEMS must continue the QI training sessions for both service administrative personnel and for medical advisors.**

KBEMS BOARD: (note: same as Service Director workshop). KBEMS will re-establish, develop, direct, and control a formal Service Director workshop to be provided to Kansas EMS services.

Additionally, re-review Educator workshop provisions and mandate that a specific amount of time be provided during the Educator workshop for a KBEMS update.

- **NHTSA TAT: KBEMS should work with the KHA to provide an encouraging structural framework to share outcomes data with out-of-hospital agencies.**

KBEMS BOARD: Continue with the development of KEMIS.

- **NHTSA TAT:** EMS agencies should support data collection efforts to facilitate EMS research, needs assessments, and further refinement of the EMS system.

KBEMS BOARD: Continue with the development of KEMIS.

- **NHTSA TAT:** Data collection efforts should support the ability of the individual service to benchmark itself against “like” services within the State.

KBEMS BOARD: Continue with the development of KEMIS.

- **NHTSA TAT:** The ACT should work in conjunction with KBEMS to develop a common identification system for all interfacility transfer patients.

KBEMS BOARD: KBEMS as a resource to aide in facilitating issues with inter-facility transports with Kansas EMS services and all appropriate stakeholders.

K. DOMESTIC PREPAREDNESS

Recommendations

- **NHTSA TAT:** KBEMS should use their local inspection data to categorize and organize a complete inventory of all State EMS assets.

KBEMS BOARD: Contracting with Disaster Response Planner to develop a KBEMS Statewide EMS Disaster Response Plan.

- **NHTSA TAT:** KBEMS should evaluate the MERGe concept in the development of a statewide strike team approach to disaster management.

KBEMS BOARD: Contracting with Disaster Response Planner to develop a KBEMS Statewide EMS Disaster Response Plan.

- **NHTSA TAT:** KBEMS and KDEM should develop a rapid deployment strategy of assets to intra and inter state disasters.

KBEMS BOARD: Contracting with Disaster Response Planner to develop a KBEMS Statewide EMS Disaster Response Plan.

- **NHTSA TAT:** KBEMS should be recognized as the single lead agency for the deployment of EMS assets in times of disaster.

KBEMS BOARD: Contracting with Disaster Response Planner to develop a KBEMS Statewide Disaster Response Plan.