



MEDICAL ADVISORY COUNCIL

KS Board of Emergency Medical Services

Date of Meeting: March 8, 2016

Meeting Notes Prepared By: Joe House

1. Purpose of Meeting

- The purpose of this meeting was to update on the privatization of CARES and FLEX EMS happenings/projects; discuss a position statement for CDC Field Triage Guidelines usage; discuss possible trauma outcome benchmark indicators; discuss Naloxone use in Kansas; and to discuss the Federal revision to the Controlled Substances Act

2. Attendance at the Meeting

<i>Members</i>	<i>Company</i>	
Dr. Ryan Jacobsen	MAC – Chair	Present
Dr. James Longabaugh	MAC – Vice Chair	Present
Dr. Dennis Allin	MAC Member	Present
Dr. Michael Machen	MAC Member	Absent
Dr. Sean Herrington	MAC Member	Present
Dr. John Gallagher	MAC Member	Present
Dr. Martin Sellberg	KBEMS Board Member	Absent
Deb Kaufman	KBEMS Board Member	
Shane Pearson	KBEMS Board Member	
Joe House	KBEMS Executive Director	
Jason White	KEMSA/MARCER	
Tracy Cleary	Kansas EMS for Children	
Terry David	Rice County EMS/KEMSA	
James Reed	KBEMS	
Eric McClure	Lenexa Fire Department	
Other Unannounced Persons		

3. Meeting Notes, Decisions, Issues

- November MAC Meeting Notes
 - No changes requested – Approved as provided



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3. Meeting Notes, Decisions, Issues

- Old Business
 - Privatization of Cares
 - Dr. Jacobsen reported that he has talked with Sedgwick, Johnson, and Wyandotte counties and they are all amenable to taking on the additional duties for entering data for the remainder of the state instead of having a single full or part-time shared employee as a state coordinator.
 - It was asked of Joe to provide a total amount of cardiac arrests, if possible, within the state minus Sedgwick, Johnson, Wyandotte, and Shawnee counties since this would represent the additional workload above and beyond those that currently have access. That report would be sent to Dr. Jacobsen.
 - FLEX EMS Update –
 - Dr. Jacobsen reported that there is an ongoing partnership with KEMSA for a Kansas Resuscitation Academy and that this seems to be progressing well.
 - It was also reported that there is a partnership meeting with Darlene Whitlock and the Kansas Medical Society in regards to the development of upcoming medical director training through the FLEX EMS grant. The kick-off meeting for this is March 23rd at KMS in Topeka.
 - CDC Field Triage Guidelines
 - As a reminder, the Trauma Benchmark Indicator Scoring Assessment performed approximately 1 year ago led to identifying that the Trauma Program believes that one of their priorities is to increase the statewide use of the CDC Field Triage Guidelines by all ambulance services and the Trauma program felt that asking the Medical Advisory Council for a statement of need and/or statement of support would be beneficial.
 - Dr. Jacobsen and Dr. Allin will be working on tweaking the already existing NAEMSP position statement in order to meet with Kansas needs and this will be available at a future meeting.
 - In discussion, it was asked about how these types of position statements work when another body, such as NAEMSP, has already taken a position and what mechanism is present to not conflict with national guidance. It was determined that it is on a case-by-case basis and that those positions are taken into consideration and typically used as a basis.
 - Clinical Practice/Benchmarking – Trauma outcomes
 - A request was made during the November meeting to pursue getting the



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prehospital trauma registry data to look at what they track and to see if it is possible to receive this data.

- Joe House reported that KDHE was currently unable to provide that data as their epidemiologist position was vacant at the time they were asked. Joe will follow-up with the program once that position has been filled.
- It was also noted that HB2608 died in committee. This bill granted the ability for the trauma program to collect confidential/identifying data: 1) to better linkages between EMS and trauma data collection systems and 2) to better track the person as a single event, rather than tracking multiple times for each facility they touch as they progress through the system. The program will regroup and may pursue future legislation.
- Naloxone use by lay providers
 - NAEMSP and ACEP are in the midst of developing a joint position statement on this topic. Dr. Gallagher shared that this is currently in review with ACEP, the lead on the position, and should be finalized shortly.
 - Discussion revolved around if lay people can provide naloxone, what is the thought about the EMR or EMT level being allowed to administer.
 - **The Medical Advisory Council recommends that Naloxone be included as an approved medication for all EMS providers in state regulation – Motion made by Jacobsen; 2nd by Gallagher; no voiced opposition.**
 - It was also stressed that there should be some type of field practitioner training by ambulance services – what to do when a patient has received a dosage of naloxone administered by a lay provider; transport options, etc.
- New Business
 - Federal Legislation – H.R. 4365 – Controlled Substances Act
 - Federal legislation has been introduced that creates an EMS carve out within the controlled substances act. The issue is that the current process of EMS administration of scheduled medications is not necessarily legal according to the controlled substances act.
 - 22 co-sponsors have signed on to the bill.
 - Discussion revolved around support of this type of legislation and that a letter of support be developed and sent to Kansas congressional members to urge their support of the bill.
 - Terry David shared that this is a point of emphasis for NAEMT during their annual EMS day on the hill.
 - **The Medical Advisory Council approved the letter of support – Motion made by Gallagher; 2nd by Jacobsen; no voiced opposition.**



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- Parking Lot
 - State Medical Director – No additional information/discussion at today's meeting
 - Legislative Update
 - Joe provided a quick update and urged the body to be aware of the following Kansas legislative items:
 - Board bills – HB2387; SB 224; and SB 225 – all moving through the process
 - HB 2456 – Physician Licensure Compact – passed the House and moving through the Senate process
 - Return to play – legislation that allows any person licensed by the Board of Healing Arts to release a potential head injury patient to return to school athletics.
- Upcoming 2016 MAC Meeting Dates
 - May 10th; July 12th; September 13th; and November 8th

4. Action Items

<i>Action</i>	<i>Assigned to</i>	<i>Due Date</i>	<i>Status</i>
Cardiac arrest data (frequency) for the state minus Johnson, Wyandotte, Sedgwick, and Shawnee counties	Joe House	May Meeting	Provided to Dr. Jacobsen on 3/8 after the teleconference concluded.
DRAFT Best practice statement on utilization of CDC Field Triage Guidelines	Dr. Jacobsen / Dr. Allin	May Meeting	
Obtaining prehospital data tracked by Trauma Registry to include outcomes	Joe House	May Meeting	
Recommendation for Naloxone inclusion at all EMS provider levels	Dr. Jacobsen	April Board Meeting	
Letter of Support for HR 4365 placed on letterhead and sent	Dr. Jacobsen / Joe House	April Board Meeting	



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5. Next Meeting

<i>Date:</i>	<i>May 10, 2016</i>	<i>Time:</i>	<i>5:30 pm</i>	<i>Location:</i>	<i>Teleconference</i>
<i>Objectives:</i>	Old Business CARES system –cardiac arrest data FLEX EMS - Medical Directors Conference Best practice statement on CDC Field Triage Guidelines Clinical Benchmarking – prehospital data collected and tracked by Trauma Registry Naloxone use by lay providers New Business Parking Lot				