

Approved _____ Date 4-30-87

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE

The meeting was called to order by Marvin L. Littlejohn at _____
Chairperson

1:00 a.m./p.m. on April 10, 1987 in room 423-S of the Capitol.

All members were present except:

Representative Frank Buehler, excused.

Committee staff present:

- Emalene Correll, Research
- Bill Wolff, Research
- Norman Furse, Revisor
- Sue Hill, Committee Secretary

Conferees appearing before the committee:

Lyle Eckhart, Kansas Highway Patrol, Division of Emergency Medical Services

Chairman called meeting to order when quorum was present, calling attention to hearing on SB 329, and action on SB 326, SB 329, SB 397.

Chair invited Rep. Branson to speak to membership. She handed a card and gift to Committee Secretary, along with thanks from committee. Sue Hill, Secretary was very pleased, and thanked members..... The gift was a beautiful scarf which will be worn with great pride.....

SB 326

Chairman invited Mr. Furse to explain SB 326.

Mr. Furse stated SB 326 is a bill that reconciles 2 current K.S.A. sections, both of which say essentially the same thing. Both were amended into one Session of the Legislature and did not get reconciled at that time. SB 326 would correct that oversight. There are no policy changes involved.

Rep. Whiteman moved to pass SB 326 out favorably.

Mr. Furse noted that SB 326 could be amended into SB 397 if membership wished to do so.

Rep. Whiteman withdrew her motion.

SB 397:

Chairman invited Mr. Eckhart to begin hearings on SB 397. Mr. Eckhart gave hand-out, (see Attachment No.1, No.2), for details. He gave an explanation of background of SB 397, which authorized a demonstration program to determine effectiveness of training select emergency medical technicians to defibrillate the heart of cardiac arrest victims. This study was extended until July 1, 1987. SB 397 would turn into law this act which is currently due to end July 1. Studies indicate that 8 lives have been saved due to the enactment of this program. These persons were clinically dead, but were revived by defibrillation. It is estimated there are about 1 million people in the state who are not served by this capability at this time, and if SB 397 is enacted, many more lives could be saved. He outlined findings from the demonstration program, i.e., physician support; lives saved; will not eliminate cardiac arrest deaths, but will reduce numbers; program must be voluntary and not mandated for all EMS services, since some communities do not have the number of cardiac arrests to justify implementation. He stated this recommendation is supported by Kansas Highway Patrol, EMS Council, State EMS Administrative Organization. He urged for favorable consideration. He then answered questions, i.e., training currently required is sufficient. He elaborated on how technology has been improved in regard to manual, or automatic, or semi-automatic cardiac fibrillation. He detailed levels, and how the computer plays a determining factor in whether the patient can be defibrillated or not. Thus, the difference in language in SB 397 from

Unless specifically noted, the individual remarks recorded herein have not been transcribed verbatim. Individual remarks as reported herein have not been submitted to the individuals appearing before the committee for editing or corrections.

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE,
room 423-S, Statehouse, at 1:00 a.m./p.m. on April 10, 1987.

Hearing continued on SB 397:--

language used to initiate program. He then called attention to Attachment No.2, which indicates a proposed amendment for SB 397. The Senate amendment approved on SB 397 was to include approval of striking the following language on Page 8, lines 279-281, "attendant is enrolled or will be enrolled in the eighty one hour course of instruction required of regularly certified attendant".

Rep. Weimer moved to amend SB 397 to strike said language in lines 279-281, to amend SB 326 into SB 397, and to pass SB 397 favorably out of committee favorably as amended. Motion seconded by Rep. Whiteman, vote taken, motion carried.

SB 329:-

Rep. Whiteman moved to pass SB 329 favorably out of committee, seconded by Rep. Weimer, motion carried.

Rep. Shallenburger noted he had requested an Interim Study be done on Welfare Reform Work Fare, and he would like this committee to make that recommendation. It was noted that SRS had been directed to come up with proposals for presentations at the next Session of the Legislature in this regard, so a motion to that effect would not be necessary.

Rep. Blumenthal made a motion to have this committee request an Interim Study on mental health services as indicated in HB 2262. Motion seconded by Rep. Cribbs. A short discussion ensued. Vote taken, motion carried.

Chairman asked wishes of members in regard to minutes still unapproved. Rep. Blumenthal moved minutes of March 30, 31st be approved as written, seconded by Rep. Neufeld, motion carried.

Ms. Correll notified Chair that SB 418 had been passed out of Senate Committee this date, and would be coming to our House Public Health and Welfare Committee. Chair noted that SB 418 might require hearing and action yet this Session.

Chairman Littlejohn presented each committee and staff member a nice pen as an expression of his thanks and appreciation to them for their cooperation and hard work this Session in Committee. He again expressed his sincere appreciation to the Vice Chairman, Frank Buehler for his commendable job and all his efforts in directing the committee work in the absence of the Chairman.

Meeting adjourned.

Next meeting, if any, will be on call of Chairman.

SUMMARY OF TESTIMONY
BEFORE THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE

SENATE BILL 397

PRESENTED BY THE KANSAS HIGHWAY PATROL

AND

THE STATE EMERGENCY MEDICAL SERVICES COUNCIL

APRIL 9, 1987

APPEARED IN SUPPORT

Senate Bill 397 was introduced as a result of a bill passed by the 1985 Legislature which authorized a demonstration program to determine the effectiveness of training select emergency medical technicians to defibrillate the heart of cardiac arrest victims. In 1986, due to an insufficient number of cardiac arrest events in the target area, the Legislature extended the study until July 1, 1987, at which time the authorization will end unless the study is extended or S.B. 397 is passed into law.

The bill also includes amendments to existing statutes and creates new sections to list authorized activities of all levels of EMS personnel. This has been done at the suggestion of the Office of the Attorney General which in the past has opined that an attendant could do anything that the University of Kansas School of Medicine declares to be within the certificate. These authorized activities are typical for these levels of training across the country and are consistent with the established curricula.

EMT-Defibrillation programs and studies have been conducted across the nation the past two or three years and the results of those studies have led the American Heart Association to conclude that:

"The use of defibrillation by Emergency Medical Technicians who have been trained in the recognition of ventricular fibrillation has been shown to improve survival significantly in areas without ALS paramedic service or where the response time for paramedics is relatively long. This concept has been proved and should be implemented in many areas. However, strong medical control must be maintained".

The demonstration program established by the council shares this conclusion based on the data presented in the report to the Governor and the Legislature on January 1, 1987. The council found the following:

1. There is an interest in numerous communities in Kansas to implement an EMT-D program. This interest includes support from the physician community, the elected officials, the ambulance personnel and the citizens.

2. The EMT-D program did save lives. In the target area where defibrillation was used, eight patients were successfully resuscitated and later discharged from the hospital to their homes. The monitor control group which gave identical treatment, except that they did not perform defibrillation, had no survivors who were discharged from the hospital.
3. The services utilizing defibrillation reported a long term save rate of 22% of the patients whose initial heart rhythms were either ventricular fibrillation or non-perfusing ventricular tachycardia which are the only rhythms the EMT-D technician is authorized to defibrillate. The other patients presented in asystole, electro-mechanical dissociation or other bradyrhythmias not responsive to defibrillation and who are rarely resuscitated from a pre-hospital event.
4. Attrition of Emergency Medical Technicians during the demonstration program was minimal suggesting an ongoing commitment of the technicians. Ongoing commitment of community physicians was also apparent as well as registered nurses who contributed significantly in the training process.
5. The program is not a panacea but will reduce and not eliminate cardiac arrest deaths. Communities should carefully assess their resources to assure the necessary commitment before implementing the program.
6. The program must be voluntary and not mandated for all EMS services since it is clear some communities do not have the number of cardiac arrests to justify its implementation. To accomplish voluntary compliance the council intends to establish a level of ambulance service for communities who intend to utilize technicians trained to defibrillate. The establishment of levels of service is currently authorized by K.S.A. 65-4320 by rules and regulation authority to the council.

The State Emergency Medical Service's Council and the Kansas Highway Patrol recommend the implementation of a permanent program to issue permits to ambulance services to utilize personnel who have been certified by the state to perform defibrillation. They recommend your favorable consideration of this bill to include the amendments offered with this testimony.

0269 (d) The director may issue a temporary certificate to any
0270 person who has not qualified for an attendant's certificate under
0271 subsection (a) when:

0272 (1) The operator for whom such person serves as an attendant
0273 cannot comply with the provisions of subsection (b) of K.S.A.
0274 65-4326 and amendments thereto without the issuance of a
0275 temporary certificate to such person, and there is no other person
0276 of municipality providing an ambulance service within the ter-
0277 ritory which is or will be served primarily by such operator
0278 requests a temporary certificate for that person; and

0279 (2) such ~~attendant is enrolled or will be enrolled in the~~
0280 ~~eighty-one-hour course of instruction required of regularly cer-~~
0281 ~~tified attendants~~ person meets or exceeds minimum training
0282 prescribed by the council by rules and regulations.

The amendments approved by the Senate included striking these lines as shown.

0283 A temporary certificate shall be effective for one year from the
0284 date of its issuance and or until the person has qualified as an
0285 attendant under subsection (a) of K.S.A. 65-4321, and amend-
0286 ments thereto, whichever comes first. A temporary certificate
0287 shall not be renewed and shall be valid only while functioning
0288 as an attendant for the operator requesting the temporary cer-
0289 tificate.

0290 (e) The director shall remit to the state treasurer at least
0291 monthly all fees received pursuant to the provisions of this act.
0292 Upon receipt of each such remittance, the state treasurer shall
0293 deposit the entire amount thereof in the state treasury to the
0294 credit of the state general fund.

0295 (f) If an applicant for an attendant's certificate has within two
0296 years preceding the date of the application held an attendant's
0297 certificate in the same classification as the certificate applied for,
0298 the director may grant a certificate to such applicant without
0299 such applicant completing a course of instruction specified in
0300 subsection (b) if the applicant has passed an examination pre-
0301 scribed by the director and has paid a registration fee of \$7.50.

0302 Sec. 8. K.S.A. 65-4324 is hereby amended to read as follows:
0303 65-4324. (a) An operator's permit may be revoked or suspended
0304 by the director upon proof that such operator or any agent or
0305 employee thereof:

PNxW
Attn #2
4-10-87