

MINUTES OF THE HOUSE HEALTH AND HUMAN SERVICES COMMITTEE.

The meeting was called to order by Chairperson Jim Morrison at 1:33 p.m. on March 17, 2003, in Room 143-N of the Capitol.

All members were present except Representative Landwehr, who was excused.

Committee staff present:

Bill Wolff, Kansas Legislative Research Department  
Renae Jefferies, Kansas Revisor of Statutes' Office  
Gary Deeter, Committee Secretary

Conferees appearing before the committee:

Kevin Walker, Kansas Heart Association  
Scott Price, Soldier Township Fire Department  
Ray Gonzales, Capitol Police  
Sherry Thederahn, Capitol Police

Others attending: See Attached Guest List

The minutes for the 3-13-03 meeting were unanimously approved.

Staff Bill Wolff provided an overview of **SB 106**, which, he said, started as a resolution and was turned into a legislative bill in order to reflect in Kansas the federal program Healthy People 2010, a continuation of a previous decade's emphasis on addressing health needs. The bill encourages the Kansas Department of Health and Environment to continue the work of the previous decade, Healthy Kansans 2000, by assessing major health-care issues and needs, formulating objectives, setting health-care priorities, and reporting their findings to the Kansas legislature in 2007.

Answering questions, Dr. Wolff said the bill has elements of **HB 2116**, which proposed creation of a Kansas Health Commission. Members commented that such initiatives seem limited in effectiveness and an inadvisable use of resources. Dr. Wolff noted that the focus of the initiative is to examine local needs for and delivery of health care, especially in underserved areas.

Kevin Walker, Kansas Heart Association, introduced Scott Price, Soldier Township Fire Department, who demonstrated an automated external defibrillator (AED), saying the device is simple to use and nearly idiot-proof.

Ray Gonzales, Capitol Police, said there are AEDs located in the Capitol, Landon and Docking buildings; he introduced Sherry Thederahn, who provides AED training for Capitol Police and does maintenance on AEDs semi-annually. She noted that battery life for a device is 18 months. Members were told that the Kansas Highway Patrol owns all the AEDs in Docking, Landon and the Capitol, but not in the Curtis building. Mr. Gonzales noted that the Capitol Police are presently responsible for AEDs in the Capitol, Docking and Landon buildings, whereas the bill designates the Secretary of the Department of

CONTINUATION SHEET

MINUTES OF THE HOUSE HEALTH AND HUMAN SERVICES COMMITTEE at on March 17, 2003, in Room 143-N of the Capitol.

Administration to be responsible for AED placement and, by implication, for oversight.

A motion was made, seconded and passed to open discussion on **SB 132**.

Since the bill mentions the Secretary of the Department of Administration as being responsible for placement of AEDs, and since presently the Kansas Highway Patrol owns and services AEDs in three of the buildings in the Capitol Complex, a motion was made and seconded to amend **SB 132** to include the Kansas Highway Patrol as well as the Department of Administration for AED oversight duties. The motion passed. (Attachment 1)

A motion was made, seconded and passed to amend **SB 132** by moving the definition of a qualified person from the end of the bill (page 2, section (e) to the beginning of the bill (before line 17 on page 1). The motion passed.

Citing testimony by the Kansas Medical Society, who wanted to clarify the immunity of physicians, members moved, seconded and passed an amendment substituting KMS wording for page one, lines 32-43. (Attachment 2)

A motion was made and seconded to adopt **SB 132** as amended favorable for passage. The motion passed.

The meeting was adjourned at 2:22 p.m. The next meeting is scheduled for Tuesday, March 18, 2003.



Suggested amendment to Senate Bill 132, section 1

(d) The secretary of administration, in conjunction with the Kansas Highway Patrol, shall develop guidelines for the placement of automated external defibrillators in ~~state owned~~ state owned or occupied facilities. The guidelines shall include, but not be limited to:

(1) Which . . .

Attachment 1  
HHS 3-17-03

SENATE BILL No. 132

By Committee on Public Health and Welfare

2-4

AN ACT concerning automated external defibrillators; amending K.S.A. 65-6149a and repealing the existing section.

Be it enacted by the Legislature of the State of Kansas:

Section 1. K.S.A. 65-6149a is hereby amended to read as follows: 65-6149a. (a) An automated external defibrillator may be used by any qualified person.

(b) (1) Any qualified person who gratuitously and in good faith renders emergency care or treatment by the use of or provision of an automated external defibrillator shall not be held liable for any civil damages as a result of such care or treatment or as a result of any act or failure to act in providing or arranging further medical treatment where the person acts as an ordinary reasonably prudent person would have acted under the same or similar circumstances.

(2) No person or entity which owns, leases, possesses or otherwise controls an automated external defibrillator and provides such automated external defibrillator to others for use shall be held liable for any civil damages as a result of such use where the person or entity which owns, leases, possesses or otherwise controls the automated external defibrillator has developed, implemented and follows guidelines to ensure proper maintenance and operation of the device and reasonably expects the automated external defibrillator to be used by a qualified person.

(3) No person licensed to practice medicine and surgery who authorizes the use of an automated external defibrillator in connection with the conduct of a public defibrillation education program shall be held liable for civil damages as the result of the use of an automated external defibrillator as part of such program if the person licensed to practice medicine and surgery in conjunction with any entity which owns, leases, possesses or otherwise controls the automated external defibrillator used as part of the program has developed, implemented and follows guidelines to ensure proper maintenance and operation of the device, proper training in the use of the device and integration of the training with the local emergency medical services system.

(4) No person or entity which teaches or provides a training program

pursuant to a prescription order authorizes the acquisition of an automated external defibrillator or participates in the development of usual and customary protocols for an automated external defibrillator by a person or entity which owns, leases, possesses or otherwise controls such automated external defibrillator and provides such automated external defibrillator to others for use shall be held liable for any civil damages as a result of such use.

Attachment 2  
HHS 3-17-03

1 for cardiopulmonary resuscitation that includes training in the use of  
2 automated external defibrillators shall be held liable for any civil damages  
3 as a result of such training or use if such person or entity has provided  
4 such training in a manner consistent with the usual and customary stan-  
5 dards for the providing of such training.

6 (c) Pursuant to the provisions of this subsection, persons or entities  
7 which purchase or otherwise acquire an automated external defibrillator  
8 shall notify the emergency medical service which operates in the geo-  
9 graphic area of the location of the automated external defibrillator. Per-  
10 sons or entities acquiring an automatic electronic defibrillator shall notify  
11 the emergency medical service providing local service on forms developed  
12 and provided by the emergency medical services board.

13 (d) The secretary of administration shall develop guidelines for the  
14 placement of automated external defibrillators in ~~state-owned~~ state  
15 owned or occupied facilities. The guidelines shall include, but not be  
16 limited to:

17 (1) Which ~~state-owned~~ state owned or occupied facilities should  
18 have automated external defibrillators readily available for use;

19 (2) recommendations for appropriate training courses in cardiopul-  
20 monary resuscitation and automated external defibrillators use;

21 (3) integration with existing emergency response plans;

22 (4) proper maintenance and testing of the devices;

23 (5) coordination with appropriate professionals in the oversight of  
24 training; and

25 (6) coordination with local emergency medical services regarding  
26 placement and conditions of use.

27 Nothing in this subsection shall be construed to require the state to  
28 purchase automated external defibrillators.

29 (e) As used in this section, "qualified person" means a person who:

30 (1) has completed a course in cardiopulmonary resuscitation or a basic

31 first aid course that includes cardiopulmonary resuscitation training and

32 (2) has completed a course of training in the use of automated external

33 defibrillators and (3) has demonstrated proficiency in the use of an au-

34 tomated external defibrillator.

35 Sec. 2. K.S.A. 65-6149a is hereby repealed.

36 Sec. 3. This act shall take effect and be in force from and after its  
37 publication in the statute book.

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