Approved: March 11, 2011

# MINUTES OF THE HOUSE HEALTH AND HUMAN SERVICES COMMITTEE

The meeting was called to order by Chairperson Landwehr at 1:30 p.m. on February 7, 2011 in Room 784 of the Docking State Office Building.

# All members were present except:

Representative J. Steven Alford - excused Representative Phil Hermanson - excused

# Committee staff present:

Norm Furse, Office of the Revisor of Statutes Martha Dorsey, Kansas Legislative Research Department Dorothy Noblit, Kansas Legislative Research Department Jay Hall, Kansas Legislative Research Department Debbie Bartuccio, Committee Assistant

# Conferees appearing before the Committee:

Chad Austin, Kansas Hospital Association (<u>Attachment 1</u>)
Representative Bob Bethell (<u>Attachment 3</u>)
Mack Smith, Executive Secretary, Kansas State Board of Mortuary Arts (<u>Attachment 4</u>)

### Others attending:

See attached list.

Chairperson Landwehr asked if there were any bills to be introduced.

Representative Mast made a motion to introduce a bill that would prohibit public funding of human cloning and destructive stem cell research. The motion was seconded by Representative Calloway. The motion carried.

Representative Bethell made a motion to introduce a bill dealing with franchise dentistry in the state of Kansas. The motion was seconded by Representative Mast. The motion carried.

# HB 2082 – Inspection of medical gas piping systems in hospitals.

Chairperson Landwehr opened the hearing on HB 2082.

Chad Austin, Vice President, Governmental Relations, Kansas Hospital Association, presented testimony in support of the bill. (Attachment 1) The Kansas Hospital Association had requested the introduction of the legislation to clarify that hospital maintenance personnel could continue to perform limited maintenance on *existing* medical gas piping systems in Kansas hospitals.

KHA understands the premise behind the requirement that the installation of any new medical gas piping system may only be conducted by individuals licensed under the provisions **K.S.A. 12-1508** and are certified under the appropriate professional qualifications standard or standards of ASSE Series 6000. While it is our understanding the original intent for such requirement focused on the installation of new medical gas piping systems, current statutes may be interpreted to comprise any maintenance on existing medical gas piping systems as well.

Hospitals across the state employ maintenance personnel to care for the hospital building and the equipment within it. These professionals perform routine maintenance in a variety of areas including on the hospital boiler system, HVAC systems, and the medical gas piping systems. Hospital maintenance personnel do not have any interest in installing new medical gas piping systems nor conducting extensive work on them. However, there are certain situations where hospital maintenance personnel are capable of performing routine maintenance on the existing medical gas piping system. This may be especially the case in many of our rural counties that may have limited access to outside contractors. The limited maintenance work that is conducted by hospital maintenance professionals includes repairing a cracked oring in an oxygen wall outlet or changing a filter on a medical air compressor or vacuum pump. Further, Kansas hospitals routinely require hospital maintenance personnel to complete an internal competency

# **CONTINUATION SHEET**

Minutes of the House Health and Human Services Committee at 1:30 p.m. on February 7, 2011 in Room 784 of the Docking State Office Building.

assessment prior to conducting any work on an existing medical gas piping system.

Patient safety is always the highest priority for Kansas hospitals and their employees. The changes suggested do not compromise that goal and KHA respectfully requests the passage of the bill.

Written testimony only in support of the bill was provided by Mike Connell, Plant Operations Manager, Russell Regional Hospital (Attachment 2). Mr. Connell represented both the hospital and the Kansas Healthcare Engineer's Association. The Kansas Healthcare Engineer's Association is an organization of healthcare engineers whose membership exceeds more than 150 individuals from hospitals and healthcare organizations from across the state. The association is an affiliate of the American Society for Healthcare Engineers and an allied organization with the Kansas Hospital Association. The main objectives of the KDEA include the advancement of effective healthcare maintenance procedures and providing professional, educational and personal development of its membership. As the Plant Operations Director over the past 18 years for Russell Regional Hospital and at Promise Regional Medical Center prior to that, he has been closely involved in the responsibilities necessary to operate a medical care facility. He explained that before any individual touches their medical gas piping system, the hospital requires that person to complete a competency assessment. A copy of the assessment form was provided to the committee as part of the testimony.

There were no opposition or neutral testimony submitted to the committee. The Chair gave the committee members the opportunity to ask questions and when all were answered, the hearing was closed.

# HB 2083 – Relating to prefinanced funeral agreements.

Chairperson Landwehr opened the hearing on **HB 2083**.

Representative Bob Bethell presented testimony in support of the bill. (Attachment 3) He stated the purpose of the bill is to place guidelines into Statute that provide for common sense actions when the time comes to dissolve a mortuary's business. There have been a few mortuaries that have closed and those individuals that have prepared for the day they will need the services provided by that mortuary have not been notified that the business was closing. Notification would allow the person to select another mortuary to provide the desired services.

Mack Smith, Executive Secretary, Kansas State Board of Mortuary Arts, presented testimony in support of the bill. (Attachment 4) The bill would require the funeral director in charge of a funeral home that was closing to notify all consumers with prefinanced funeral agreements of their need to transfer their agreement to another funeral home. The bill would require that a copy of all such letters be provided to the Mortuary Arts Board.

Currently, nothing in existing law covers this situation. The bill comes after a recent situation where a funeral home closed and notice was not given to families with prefinanced funeral agreements — causing unnecessary confusion when death occurred. While you might think everyone in town would be aware when a funeral home closes, often family members live out of town or even out of state and don't become aware that the funeral home has closed until a loved one dies.

Pam Scott, Executive Director, Kansas Funeral Directors Association, presented written testimony only in support of the bill. (Attachment 5) She stated the KDFA believes that the amendments the Kansas State Board of Mortuary Arts is proposing are pro-consumer and should be adopted. A funeral establishment that closes its doors and discontinues doing business in this state should be required to contact individuals that have prearranged funeral agreements in place with them and notify the individuals that they will need to transfer such agreements to another licensed funeral establishment.

The Chair gave committee members the opportunity to ask question and when all had been answered, the

# **CONTINUATION SHEET**

Minutes of the House Health and Human Services Committee at 1:30 p.m. on February 7, 2011 in Room 784 of the Docking State Office Building.

hearing on the bill was closed.

# HB 2082 - Inspection of medical gas piping systems in hospitals.

Chairperson Landwehr proceeded to work the bill.

Representative Mast made a motion to pass out **HB 2082** and place it on the Consent Calendar. The motion was seconded by Representative Bethell. The motion carried.

# HB 2083 - Relating to prefinanced funeral agreements.

Chairperson Landwehr proceeded to work the bill.

Representative Bethell made a motion to pass out **HB 2083.** The motion was seconded by Representative Mast.

There was some discussion concerning the lack of penalty should a funeral home not follow the law. In response it was determined there was an avenue that could be taken by the Kansas State Board of Mortuary Arts such as pulling of a funeral director's license.

Representative Ward requested the bill not be placed on the Consent Calendar.

Representative Bethell made a motion to pass out **HB 2083.** The motion was seconded by Representative Mast. The motion carried.

The next meeting is scheduled for February 8, 2011.

The meeting was adjourned at 1:56 p.m.

# HOUSE HEALTH & HUMAN SERVICES COMMITTEE DATE: 2-7-11

NAME	REPRESENTING
Senife-Findley	115 Hospital Association
Michael Connell	Russell Regional Haspilal
7 Chad Austin	45 Hosp Association
Pan Swtl	Ks Fred Directors Assn
Shahin Stuffy	18 Grain Had Alen.
Mack Smith	KS St BS of Mortvery Arts
Bill Comm	
Mulele Buller	Cap. Svotegies
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Kan Presty	Frearnieg & Associates.

Please use black ink



Tom Bell President and CEO

TO:

House Committee on Health and Human Services

FROM:

Chad Austin

Vice President, Government Relations

DATE:

February 7, 2011

SUBJECT:

Testimony in Support of House Bill 2082

The Kansas Hospital Association appreciates the opportunity to appear before the committee in support of House Bill 2082. We had requested the introduction of this legislation to clarify that hospital maintenance personnel could continue to perform limited maintenance on *existing* medical gas piping systems in Kansas hospitals.

KHA understands the premise behind the requirement that the installation of any new medical gas piping system may only be conducted by individuals licensed under the provisions K.S.A. 12-1508 and are certified under the appropriate professional qualifications standard or standards of ASSE Series 6000. While it is our understanding the original intent for such requirement focused on the installation of new medical gas piping systems, current statutes may be interpreted to comprise any maintenance on existing medical gas piping systems as well.

Hospitals across the state employ maintenance personnel to care for the hospital building and the equipment within it. These professionals perform routine maintenance in a variety of areas including on the hospital boiler system, HVAC systems, and the medical gas piping systems. Hospital maintenance personnel do not have any interest in installing new medical gas piping systems nor conducting extensive work on them. However, there are certain situations where hospital maintenance personnel are capable of performing routine maintenance on the existing medical gas piping system. This may be especially the case in many of our rural counties that may have limited access to outside contractors. The limited maintenance work that is conducted by hospital maintenance professionals includes repairing a cracked o-ring in an oxygen wall outlet or changing a filter on a medical air compressor or vacuum pump. Further, Kansas hospitals routinely require hospital maintenance personnel to complete an internal competency assessment prior to conducting any work on an existing medical gas piping system.

Patient safety is always the highest priority for Kansas hospitals and their employees. The changes suggested in House Bill 2082 does not compromise that goal. KHA respectfully requests the passage of House Bill 2082.

I would be happy to stand for any questions.

# Russell Regional Hospital

TO:

House Committee on Health and Human Services

FROM:

Mike Connell

Russell Regional Hospital

DATE:

February 7, 2011

SUBJECT:

Testimony in Support of House Bill 2082

Madame Chair and the House Health and Human Services Committee, my name is Mike Connell and I am the Plant Operations Director at Russell Regional Hospital. I am here today representing my hospital and the Kansas Healthcare Engineers' Association in support of House Bill 2082.

The Kansas Healthcare Engineers' Association is an organization of healthcare engineers whose membership exceeds more than 150 individuals from hospitals and healthcare organizations from across the state. Our association is an affiliate of the American Society for the Healthcare Engineers and an allied organization with the Kansas Hospital Association. The main objectives for KHEA include the advancement of effective healthcare maintenance procedures and providing professional, educational and personal development of its membership.

As the Plant Operations Director over the past 18 years for Russell Regional Hospital and at Promise Regional Medical Center prior to that, I have been closely involved in the responsibilities necessary to operate a medical care facility. The duties required in my current role at Russell Regional Hospital include serving as the hospital's safety officer which handles the security, utilities and life safety code issues; manager of the preventative maintenance program of the physical facility and all facility equipment; project manager for all facility improvement and equipment installation; and the liaison to the state and federal agencies as it relates to plant operations.

I would now like to share some information as to how Russell Regional Hospital handles the training and maintenance on our medical gas piping system. Prior to any individual touching our system, our hospital requires that individual to complete a competency assessment. This assessment ensures that our staff has a basic understanding of the system and the knowledge to perform routine limited maintenance. I have attached to my testimony our hospital's competency assessment worksheet.

As an organization, we take great pride in our work and the importance of patient safety. House Bill 2082 would allow us to conduct the work that we are prepared to do. On behalf of the Kansas Healthcare Engineers' Association, we request your support of House Bill 2082. Thank you for your consideration.

# **COMPETENCY ASSESSMENT**

DEPARTMENT: Maintenance Department – Russell Regional Hospital

Standard Specific skills and knowledge required to perform the job based on established criteria.	Level of Proficiency 1. Little or no experience 2. Some experience 3. Competent N/A Not applicable						B. Pr	options eview poractice w ther (specone requ	ith com	d video. petent p	Assessment Method A. Demonstration B. Post-Test C. Interview			
Standard All Maintenance Employees except secretary position.	Initial Assessment (Level of Proficiency)				Validated By (Initial)	Date	Selected Learning Option	Follow	-Up As	sessmericiency)	nt N/A	Assessment Method	Validated By	Comments
Doctor Strong Procedure	-				(**************************************			<u>'</u>	2	٩	IVA		(Initial)	
Lock Out / Tag Out	-	-				<del> </del>					ļ <u>.</u>	ļ		<del></del>
* Code Grey (Severe Weather)	+	<del> </del>				<del> </del>		-						
* Code Orange (Bomb Threat)	_	<del>                                     </del>						<del> </del>		<del></del>	<del> </del>	ļ		
* Code Pink (Infant Abduction)		1	$\vdash$	• • • • • • • • • • • • • • • • • • • •										
* Code Red Procedure (Fire)	1			<del></del>		<del> </del>		-				-		
* Proper use of a Fire Extinguisher	<b>—</b>	-	1 1			<del> </del>		<del>                                     </del>	<del>  </del>	<del></del>				
* Resetting Fire Alarm Devices and Panel		<del> </del>				-		1			ļ		****	
Testing Fire Alarm Devices & Panel	1					<del> </del>		<del> </del>						
* Location of Sprinkler Shutoff Valves								<del> </del>	-					
Weekly testing of Fire Pump								<del> </del>						
* Fire Pump Operation						<u> </u>				··· ····		<del> </del>		
* Sprinkler System Booster Pump								<del> </del>		<del></del>				
Switching on-line Boilers														
Switching Boiler from gas to oil								-						
* High & Low Water Boiler Safety Controls														
Boiler Testing for Chemicals				· · · · · · · · · · · · · · · · · · ·						****				······································
Softener Operation and Testing												<del> </del>	· · · · ·	
* Medical Vacuum Pump Operation				-								-		
Air Compressor Operation						<u> </u>		<del> </del>						
* Control Air Compressor Operation					· · · · · · · · · · · · · · · · · · ·					<del></del>				
Location of Medical Gas Shutoff Valves					· · · · · · · · · · · · · · · · · · ·									
* Bulk Oxygen System Operation				•						······································				
Nitrous Oxide System Operation/Change Bottles								<del> </del>						
* Medical Alarm Panel Operation								<del> </del>			<u> </u>			

# COMPETENCY ASSESSMENT - (Cont.)

DEPARTMENT: Maintenance Department – Russell Regional Hospital

Employee Name:				I	injoin j		r togioi	10111	Jopic	Job 7	itle:				
Standard Specific skills and knowledge required to perform the job based on established criteria.		1. 2. 3. N/A	Little Som Com Not a	e experie petent applicable			B. Pr	view po	ith con cify)	d video.	<del></del>	Assessment Method A. Demonstration B. Post-Test C. Interview			
Standard All Maintenance Employees except secretary position.	Initial Assessment (Level of Proficiency)  1 2 3 N/A			sment	Validated By (Initial)	Date	Selected Learning Option	Follow	/-Up As	ssessmer ficiency)	nt N/A	Assessment Method	Validated By (Initial)	Comments	
* Medical Gas Outlet Repair	1				<u> </u>		<u></u>								
* Location of Domestic Water Shutoff			1					<del> </del>							
* Booster Pump Operation	<del> </del>					<del> </del>		<b>-</b>				· .			
* Location of Natural Gas Shutoff Valves						<del> </del>				<b></b>		ļ			
Fire Wall Penetration Repair	_				1										
* Start / Stop HVAC Chillers			-			<del> </del>								•	
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Trane System Computer			<del> </del>					·							
* Start / Stop Semco Rooftop Unit							·····							· · · · · · · · · · · · · · · · · · ·	
* Start / Stop Surgery Rooftop Unit														·	
* Start / Stop ER Unit												-			
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Basic Line Drawings (Elect. Distribution)						<u> </u>		<del>                                     </del>	ļ						
* Emergency Generator Operation		1	<b></b>			<u> </u>				· · · · · · · · · · · · · · · · · · ·	<del></del>		** · · · · · · · · · · · · · · · · · ·		
Electrical Transfer Panel Operation	1					<del> </del>			<u> </u>						
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* PA System Operation								ļ							
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DEPARTMENT: Maintenance Department - Russell Regional Hospital **Employee Name:** Job Title: Standard Level of Proficiency Learning Options Assessment Method Specific skills and knowledge required 1. Little or no experience A. Review policy and video. A. Demonstration to perform the job based on established 2. Some experience B. Practice with competent person. B. Post-Test criteria. 3. Competent C. Other (specify) C. Interview N/A Not applicable D. None required Standard Initial Assessment Selected Follow-Up Assessment All Maintenance Employees (Level of Validated (Level of Proficiency) Learning Assessment Validated except secretary position. Proficiency) By Date Method Option Ву Comments 1 2 3 N/A (Initial) 2 3 N/A (Initial) Operating Motorized Grounds Equipment Operate Hand/Walk Behind Grounds Equipment \* Operate Snow Removal Equipment \* Use of Electrical Test Equipment Use of Power Tools Use of Hand Tools \* Requires proficiency of 2 or Better to Take Validators Signature Date Employee Signature Date

STATE OF KANSAS

BOB BETHELL STATE REPRESENTATIVE, 113TH DISTRICT 104 E. THIRD, P.O. BOX 186 ALDEN, KS 67512 (620) 534-3085 CELL (620) 727-5962 bethell@ink.org



COMMITTEE ASSIGNMEN' S
CHAIR: AGING AND LONG TERM CARE
MEMBER: COMMERCE AND LABOR

CORRECTIONS AND JUVENILE
JUSTICE
ELECTIONS

STATE CAPITOL—ROOM 55-S TOPEKA, KS 66612 (785) 296-7616

TOPEKA

# Testimony on HB 2083

Good afternoon Chairman Landwehr and members of the House Health and Human Services Committee. I am Representative Bob Bethell, and I appear before you today in support of HB 2083.

HB 2083 has as its purpose to place guidelines into Statute that provide for common sense actions when the time comes to dissolve a mortuaries business.

I believe that, through no desire to hurt anyone, some things have been overlooked in a stressful time for some of the businesses in Kansas. There have been a few mortuaries that have closed and those individuals that have prepared for the day they will need the services provided by that mortuary have not been notified that the business was closing. Notification would allow the person to select another mortuary to provide the desired services.

Madame Chair I would urge passage of HB 2083 and I will stand for questions.

#### abers of the Board:

Bill Young, President Charles Smith, Vice President Barry Bedene Fred Holroyd Diane Minear



700 SW Jackson Street, Suite 904 Topeka, Kansas 66603-3733 Telephone: (785) 296-3980 Facsimile: (785) 296-0891 Email: boma1@ksbma.ks.gov

Web Site: http://www.kansas.gov/ksbma/

Mack Smith, Executive Secretary

The Kansas State Board of Mortuary Arts Created August 1, 1907 Sam Brownback, Governor

Monday, February 7, 2011

Representative Brenda Landwehr, Chair House Health and Human Services Committee Room 784, Docking State Office Building (DSOB) Topeka, Kansas

Chair Landwehr and Members of the Committee:

My name is Mack Smith, and I'm the executive secretary to the Kansas State Board of Mortuary Arts (KSBMA.) I appreciate the opportunity to stand before you this afternoon and ask for your support of HB 2083. HB 2083 would require the funeral director in charge of a funeral home that was closing to notify all consumers with prefinanced funeral agreements of their need to transfer their agreement to another funeral home. The bill would require that a copy of all such letters be provided to the Mortuary Arts Board.

Currently nothing in existing law covers this situation. This bill comes after a recent situation where a funeral home closed and notice was not given to families with prefinanced funeral agreements—causing unnecessary confusion when death occurred. While you might think that everyone in town would be aware when a funeral home closes, often family members live out of town or even out of state and don't become aware that the funeral home has closed until a loved one dies.

I thank you in advance for your consideration and will attempt to answer any questions you have.

Sincerely,

Mack Smith, Executive Secretary

Kansas State Board of Mortuary Arts

HEALTH AND HUMAN SERVICES DATE: 2-7-i/ ATTACHMENT: //

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#### KANSAS FUNERAL DIRECTORS ASSOCIATION

1200 S. Kansas Avenue Topeka, KS 66612 Fax 785-232-7791 785-232-7789 www.ksfda.org

**OFFICERS** 

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> Vice President **ERIC LONDEEN** Manhattan

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> JUSTIN SMITH Derby

**BILL NICHOLSON** Hoisington

Policy Board Representative W. ASHLEY COZINE Wichita

#### **EXECUTIVE DIRECTOR**

PAM SCOTT Topeka

February 7, 2011

To:

House Health and Human Services Committee

From: Pam Scott, Executive Director

Re:

House Bill No. 2083

Madam Chair and members of the Committee, on behalf of the Kansas Funeral Directors Association I would like to thank you for the opportunity to present written testimony in support of House Bill No. 2083.

The KFDA believes that the amendments to K.S. A. 65-1713a that the Kansas State Board of Mortuary Arts is proposing are pro-consumer and should be adopted. A funeral establishment that closes its doors and discontinues doing business in this state should be required to contact individuals that have prearranged funeral agreements in place with them and notify the individuals that they will need to transfer such agreements to another licensed funeral establishment. We would hope a funeral establishment would provide the notice with or without the statutory requirement.

We urge you to support House Bill No. 2083.

HEALTH AND HUMAN SERVICES DATE: 2-7-11 ATTACHMENT: