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300 SW TENTH AVENUE ■ SUITE 24-E ■ TOPEKA, KS 66612 ■ (785) 296-2321

MEMORANDUM

To: Senate Committee on Utilities
From: Office of Revisor of Statutes
Date: January 29, 2026
Subject: Senate Bill 379 – As Introduced

Senate Bill 379 would require the state 911 board to establish a statewide emergency medical dispatch (EMD) and telecommunicator cardiopulmonary resuscitation (T-CPR) program and to adopt statewide protocols for the provision of EMD and T-CPR, medical direction and quality assurance services for public safety answering points and emergency dispatchers.

SB 379 would authorize the state 911 board to employ or enter into an agreement to procure the services of a medical director to provide medical direction relating to EMD and T-CPR protocols and services. Such medical direction could include: Evaluation, recommendation, development and maintenance of EMD and T-CPR protocols; establishment and oversight of minimum training standards; and establishment of minimum guidelines for and review of quality assurance methods and services. SB 379 would also authorize the state 911 board to establish or enter into an agreement to procure a centralized quality assurance system for the evaluation and quality performance review of the EMD and T-CPR services rendered under the statewide program.

PSAPs would not be required to utilize the statewide protocols, medical direction or quality assurance services. Additionally, SB 379 specifies that the bill does not prohibit a PSAP from entering into an agreement with another PSAP or governing body of a PSAP for the provision of EMD or T-CPR services.

SB 379 would establish the emergency medical dispatch and telecommunicator cardiopulmonary resuscitation fund in the state treasury for the purposes of the program. The state

911 board would administer the fund. The bill provides for a one-time transfer of \$300,000 from the state 911 operations fund into the newly created fund. Interest earnings would be credited back to such fund.

SB 379 would require the state 911 board to prepare and submit a report regarding the implementation of the program. The purpose of such report would be to assess system performance, guide quality improvement, inform policy and funding decisions and improve health outcomes. The report would be required to include the number and geographical territory of PSAPs using EMD or T-CPR protocols and information on barriers to increasing availability and uptake. Such report would be required to be submitted to the senate committee on utilities and the house committee on energy, utilities and telecommunications before January 31 each year.

Section 2 of SB 379 would exempt from civil liability any person or entity that is contracted by the state 911 board to provide medical direction or quality assurance services under such statewide EMD or T-CPR program including for any emergency dispatchers rendering of or, failure to render, emergency medical instructions. The section would also similarly exempt any person or entity contracted under a PSAP's in-house EMD or T-CPR program for services provided under such program. Any such person or entity would still be liable in situations involving gross and wanton negligence that proximately causes the injury.

Section 3 of SB 379 would amend the Kansas tort claims act to exempt governmental employees from civil liability under the act for any claim arising from the provision, or lack thereof, of any EMD or T-CPR, medical direction or quality assurance services or for an emergency dispatcher's rendering of, or failure to render, emergency medical instructions unless such person or entity is guilty of gross and wanton negligence proximately causing such injury.

If enacted, SB 379 would take effect on July 1, 2026, upon publication in the statute book.