

February 16, 2023

Senator McGinn, Chair Senate Committee on Local Government Neutral, SB212

I am providing remarks on behalf of the American Heart Association (The Association) with some points for consideration regarding SB212. The Association exists to be a relentless force for a world of longer healthier, lives and appreciates the opportunity to speak about lowering the minimum standards for ambulance staffing in rural counties.

The Association believes that supporting local democracy and decision-making in Kansas is important to health. Here in Kansas, we have taken many positive steps to improve the health of people across the state. We want to make sure cities, towns, and counties continue to have the option to build on this progress and pass laws to help their communities and local businesses thrive. However, reducing the minimum ambulance standards for our rural communities without first looking at existing training gaps in the overall emergency response system could put lives at risk.

Every year, more than 350,000 Americans fall victim to out-of-hospital cardiac arrest (OHCA). Unfortunately, only about 1 in 10 victims survive this dramatic event. I stand here today as one of those ten. Early access to 9-1-1 and CPR are the first two links in the Chain of Survival. The first two links in the chain, early access to EMS and lay rescuer CPR, provide the foundation for subsequent treatment and are critical for successful resuscitation. Early lay rescuer CPR approximately doubles the chances of survival.

SB212 states: "In counties with a population of less than 10,000, a vehicle providing emergency care may operate with: one individual who meets the certification requirements of paragraph (1) or who holds a valid certificate for the successful completion of a course in first aid or cardiopulmonary resuscitation (CPR) offered or approved by the American red cross, American heart association, (etc)."

The Association recommends that this same requirement be in place for all 911 telecommunicators that provide dispatch for emergency medical conditions (T-CPR). The instruction could come at low to no cost and should incorporate recognition protocols for OHCA, compression-only CPR instructions for callers, and continuous education. A 911 operator helped save my life. People in rural areas are entitled to that same quality of care and deserve the same shot at survival."

Sincerely,

Nancy Holland Kansas Advocacy Committee, Chair American Heart Association