

# NASEMSO AVL Meeting Minutes

March 28, 2013

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## Call to Order

12:04 pm

## Roll Call

- Brian Litza
- Dennis Blair
- Forest Weyen
- Frederick Hornby
- Gibson McCullagh
- Jay Bradshaw
- Joe Ferrell
- Michael Berg
- Steve McCoy (FL)
- Wayne Denny
- Dia Gainor
- Rachael Alter

## Agenda - any additions?

None

## Approve minutes from 03/04/2013

Not enough people on the call who were in attendance at the Mid-Year Meeting. Will defer to next meeting.

## Model Rules for Ambulance Vehicle Design Project

1. **Tentative Interim Amendment (TIA) Status**
  - i. Nothing has changed; encouraging people to go forward and make comments on the draft.
2. **NFPA Workgroup Status**
  - i. Switch in committee members, but looking at meeting in May. Will go through the exception items and get clarification. Will look at need to seek more TIAs or make additional comments/suggestion for changing the 1917 Standard

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## 3. ASTM International – Discussion

- i. ASTM gave a good presentation at the Mid-Year. They have reached out and would like to work with us to come out with a companion or alternate standard and refresh their standard. We have worked with them in the past, and can rekindle that relationship. As we go forward, need to determine what we will do with our Model Rule. The Model Rule is saying that we will give generic language to say “must meet a national standard”; through that language, state can take what standard they choose.
- ii. Question to group: Do we want to continue to deal with the 1917, and follow that through to fruition (this is a task for this group), but then do we want to work with ASTM and help support an alternate standard? How comfortable are state official’s with multiple standards and how desirable would it be to have a Model Rule that (1) references one or (2) more than one or (3) none, and instead lists specific items that are the core essential requirements.

Discussion: concern if you have multiple standards to choose from, becomes problematic for a regulatory agency that is trying to defer to one standard. Defies the definition of standard to have more than one. Customers looking to us for having one specific set of guidelines/rules for the build of ambulances, and not have so many options. Concern with 1917 is a customer can relinquish one of the requirements, get signed off, and then how does the state permit that vehicle and say it meets the ‘standard’. Standard should be ONE not multiple.

Consensus at Mid-Year was to come up with a standard language piece that says “a ground ambulance must be commercially constructed to comply with a nationally recognized, published standard for ambulance manufacturing.” Gives the states the power to switch the standard if that is what they wanted. 1917 will be the only nationally recognized standard once KKK goes away. Arkansas created a basic straw man that could be used to keep it simple, with the list and specifics outside the rule, or a state could take and fill in the gaps. Next decision of the group should be which direction to take – do we recommend to the membership that we (NASEMSO) should adopt one standard and here’s the language?

Discussion: State’s may not know what route they will go, some holding off to find out what way 1917 goes as currently don't refer to KKK. Either option would work, because is what they do now (won't refer to NFPA)

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Discussion: Stakeholders are used to have a standard/criteria that they meet. Concerned it will create confusion if they have a choice between two standards, and what is the difference between them?

There are 2 challenges with NFPA 1917 (1) it has the word fire in its name, states saying not going to promulgate – NASEMSO can't solve this. (2) The [comparison table](#) (KKK, NFPA 1917 & ASTM) shows the differences between the standards. Some things are cosmetic (not evidenced-based) e.g. chevron color specifics, others deal with the quality of items (may have been downgraded), and third difference may be just the fact that the difference is 'that's how it is on fire trucks'. This should factor into the conversation with the May Workgroup. Should be able to justify the changes, if that can't be done, the likelihood of the state incorporating 1917 by reference goes down. Should this be a minimum standard? If so, shouldn't have anything that is cosmetic or doesn't have some foundation in evidence/science or directly related to the performance/utility of the vehicle.

Do we have to wait to hear what comes out of the Workgroup to determine what we can and can't do? The Workgroup is being formed by NFPA as a formal method to provide recommendations to the technical committee that is responsible for revising 1917. The revision will come out in early 2015. For those states that can and are willing to swap out KKK for 1917, can they understand and defend each of the differences between KKK & 1917, especially if it will increase the cost of the ambulance, or if it has some sort of forced design or cosmetic element that will create backlash from agencies who don't want it. If there are acceptable alternatives, and if so, it shouldn't be in the minimum standard.

The Group's major task is to come up with Model Language. Have spent the last year getting everyone up to speed, see what the problems were and concerns from states and manufacturers. Have 33 states that have the KKK standard in Administrative Rule, so first task was to try and delay the retirement so the rules wouldn't be obsolete. Had no guidance for states like Arkansas who went and promulgated their strawman Rule. The resolution of 1917 won't have an effect on our Model Rules as we don't have the expertise to give specifics of details. We can continue our

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mission and finalize the Model Language, so when the process is done (May), we'll have something ready to go to help states with the change.

Manufacturers would also like to have one standard (like with KKK). Once NFPA 1917 issues resolved, most likely will be the standard manufactures use. Want to get tools to states as quickly as possible to give them help with stakeholders when discussing what they are going to do when KKK retires. Option A: Accept Model Language; Option B: Here's the strawman. Need to move forward - was well worth learning the landscape and understanding the processes, but now need to create something to share with membership to resolve the issue.

ACTION: Before April meeting, need to review two documents: (1) Working [Draft](#) created at the Mid-Year (took language from other Rules and put it in one document) – no formality, just ideas of what should be part of what gets developed. (2) Arkansas [document](#) (strawman) – is this a comfortable place to start? Feel free to put together an outline of components of either one, send to Brian or Dia.

Discussion: Agreement with proposal. Having model language is of interest to all. Group is interested in what happens in the next few months with the Workgroup.

## Let's write the model

1. SEE ATTACHED DOCUMENT
  - i. Hold until next meeting

## Next AVL Committee Meetings

Thursday April 25, 2013

## New Business/ Other

Dia mentioned an item that has just come to NASEMSO's attention: a cross cutting issue between AVL and Air Medical. ASTM is about to ballot a final standard for Air Medical Services. The Association of Air Medical Services (AAMS) is concerned about the content. Asking NASEMSO to take a look at it and develop a collaborative game plan with AAMS. More to come regarding a teleconference for next steps.

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**Adjourn**

12:45 pm