

file H + Env. Committee
2.19.2024



2401 Gillham Road
Kansas City, Missouri 64108
(816) 234-3000

Tragedies such as the one last week demonstrate the importance of having resources on hand dedicated to pediatric populations. When traumatic events happen, children not only need specialized care, they need to feel safe. Preventing significant behavioral health fallout from trauma begins in the moments immediately after the incident. It is our hope more cities follow the lead of our regional team and commit specialized emergency response teams to large-scale gatherings. We are proud to work with people and organizations who recognize the need for pediatric care.

After the preparation, and after the response and emergency care in the moment, comes recovery. This incident will only worsen the youth behavioral health crisis in Kansas City. Children who were injured in the shooting, who witnessed the event and aftermath, and even those who were not there but may have a hard time processing such trauma, deserve quick and easy access to behavioral health resources. I first want to highlight a public web page Children's Mercy has built that includes a guide for parents and loved ones on how to help children experiencing anxiety, concern, or mental health crisis in the wake of the shooting: <https://www.childrensmercy.org/health-and-safety-resources/helping-kids-parade-shootings/>

But I also want to highlight the persistent need for a strong behavioral health safety net. Children's Mercy recently launched Illuminate, our five-year strategic plan to bolster the entire behavioral health continuum of care, from opening new specialty clinics, to training primary care providers on integrating behavioral health into their offices, to expanding inpatient capacity. Our work will be only a small portion of what our region and the Midwest needs to address the behavioral health crisis among kids. Since the shooting, we've already seen an increase in children seeking care as they grapple with the trauma. But as we treat those children who come in mid-crisis and hopefully find inpatient psychiatric beds for those who need them, we also need to fill in the gaps in the missing middle: bridge services for children who may not need inpatient care but who nevertheless could benefit from outpatient treatment such as therapy. Each step along the continuum of care is necessary.

Thank you again for soliciting our testimony and highlighting the stories of the emergency providers who jumped into the fray on Wednesday. We look forward to continuing to bolster our planning and preparedness for the next incident, a future we hope never arrives but for which we are nevertheless ready.

Thank you,

Connor Stangler
Manager, Government Relations
Children's Mercy Hospital-Kansas City



2401 Gillham Road
Kansas City, Missouri 64108
(816) 234-3000

To: Jackson County Health and Environment Committee
From: Connor Stangler, Government Relations, Children's Mercy
Date: February 19, 2024
Re: Pediatric Emergency Response to the 2024 Super Bowl Parade Shooting

Dear Chairman Abarca and members of the Committee,

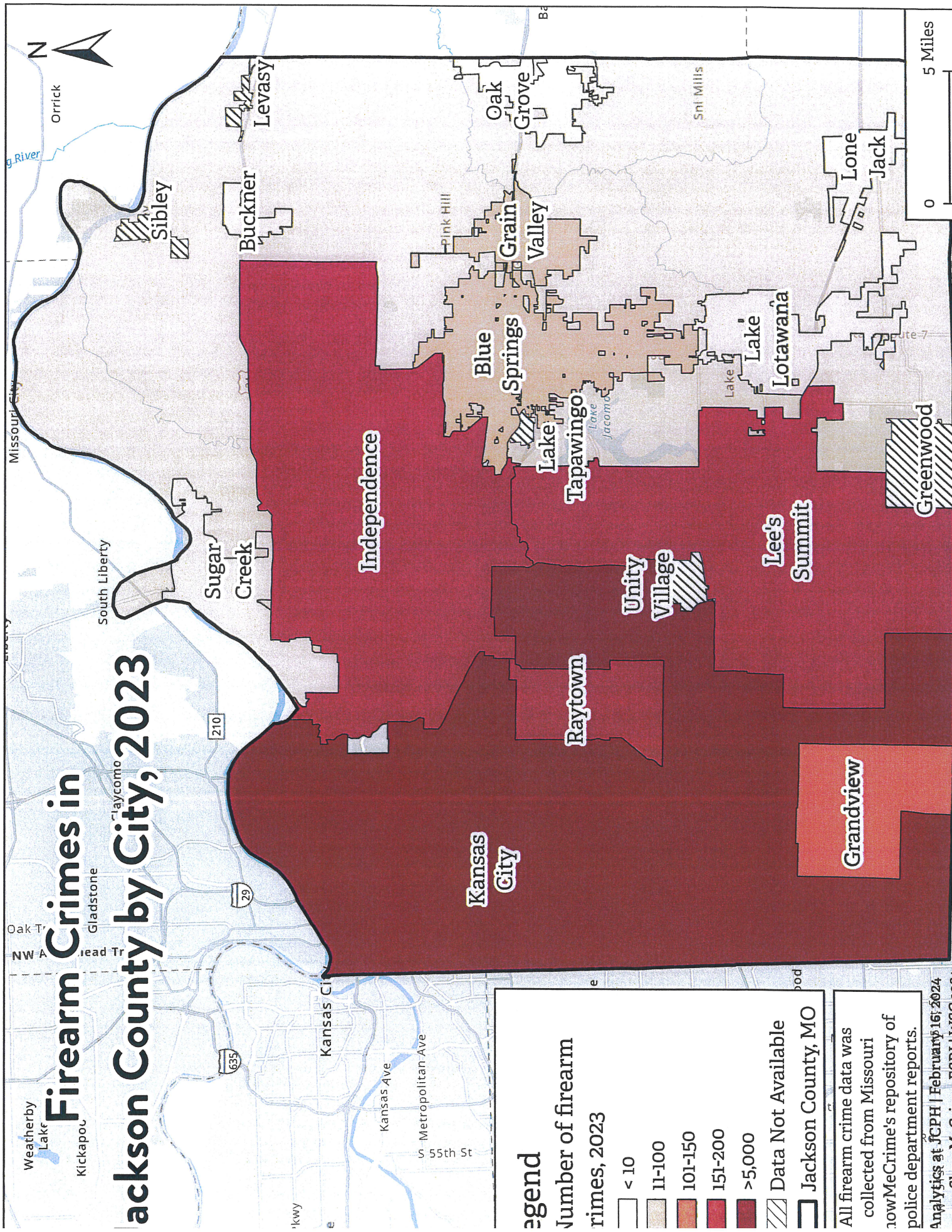
Thank you for the opportunity to discuss Children's Mercy Hospital's emergency preparedness and response to the terrible events at the 2024 Super Bowl victory parade. I want to first recognize and thank the outstanding work by all providers and teams who responded to the shooting and provided care throughout the event, including: the state emergency team, University Health, KCFD, KCPD, KU Health, St. Lukes, paramedics, Children's Mercy, and all others who provided life-saving care. All members of those teams saved lives those days. Those outcomes were not guaranteed. I also want to thank the Jackson County Legislature for its ongoing support of local emergency preparedness.

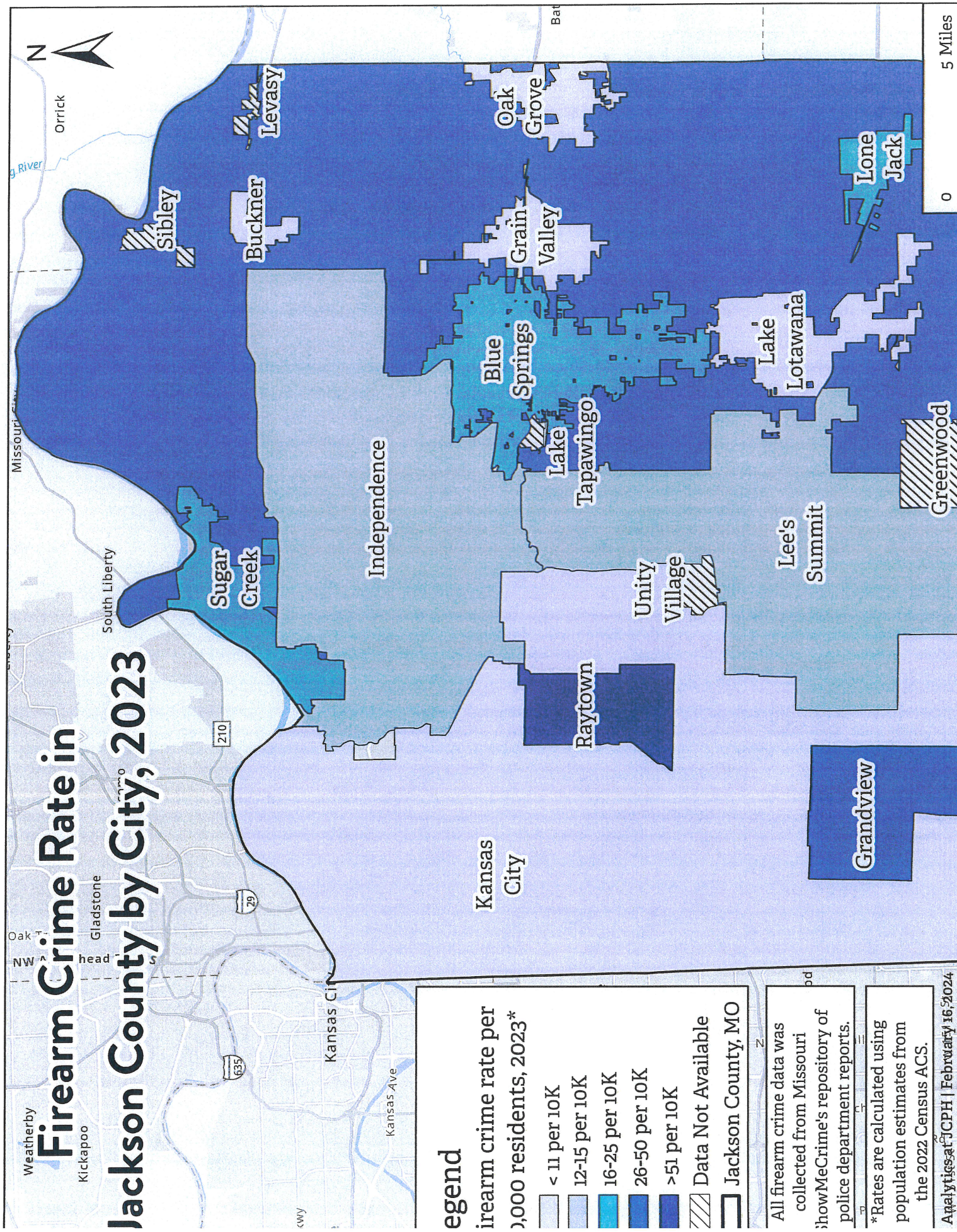
Our providers reacted swiftly and appropriately to provide care to the pediatric victims at the event. The response was not accidental, it was the result of careful and meticulous preparation.

During the leadup to the parade and rally, we collaborated closely with Missouri's state Disaster Medical Assistance Team (DMAT), as we do with every large-scale event in the city, including victory parades, the NFL draft, and the upcoming World Cup in 2026. Missouri is one of the few states in the nation with a statewide emergency medical response team. Preparations started as soon as the Chiefs won the AFC Championship game. We met internally and externally with teams across the city to establish our preparedness plans. On the Monday before the parade, Children's Mercy participated in a roll call of providers. We, along with others, were ready. The emergency blood bank was stocked. We had backup providers on hand. The family reunification team was staffed and trained. Planning, projecting, and scenario mapping enabled our team to save lives. They did not expect a mass casualty incident, but they were ready for one.

For events like the parade, Children's Mercy and other area hospitals collaborate with DMAT to set up a field tent near the crowds to receive patients and triage in case of emergency. We augment the state team with a pediatric specialty team. Having a team of providers at the field tent that specializes in pediatric care allows us to stabilize kids in the field before they arrive at our emergency department. This relieves pressure on our emergency providers at the hospital and more efficiently streamlines care for patients at the scene. Having pediatric specialists in the field allows us to stabilize patients while sending the most critically injured to the emergency room. Children's Mercy's pediatric field team is the *only* emergency response team of its kind in the nation, and the presence of competent pediatric providers at the parade and rally made the difference for those who sustained injuries from the shooting and the fast-moving crowd.

Whereas Children's Mercy provides pediatric experts at the triage site for mass casualty incidents, other cities have not developed similar cross-specialty teams that can adequately care for both adult and pediatric populations in the field. Unfortunately, this failure illustrates a broader lack of resources for pediatric emergencies.





Manuel Abarca IV

From: Daniel Hoyt <danjhoyt@gmail.com>
Sent: Sunday, February 18, 2024 11:49 PM
To: Manuel Abarca IV
Subject: EXTERNAL Working around the State Preemption on gun laws - The Seattle Plan

You don't often get email from danjhoyt@gmail.com. [Learn why this is important](#)

WARNING: This email originated outside of Jackson County.

DO NOT CLICK links or attachments unless you recognize the sender and know the content is safe.

Manny,

It was good to speak with you again yesterday at the rally. I'm sorry these past few days have been so traumatic for you and your family, but it gives me hope to hear that you, and other public officials in the metro, are passionate about addressing gun violence.

As you mentioned, there is a state preemption on new gun laws in Missouri, and that doesn't seem like it's going to change anytime soon. Nonetheless, there are a few policies that you can implement at the local level that are not affected by the state. In 2017, Seattle wanted to come up with a way to address gun violence in the region, and one place they focused on was the requirements placed on people who had recently become prohibited from owning firearms. Usually, when this happens, a court would mandate a person relinquish their weapons and then prove to the court that they had done so, but research showed that this was rarely the case. They decided to focus on instances of domestic abuse and formed the King County's Regional Domestic Violence Firearms Enforcement Unit (RDVFEU). This was a collaborative effort between four agencies: King County Prosecuting Attorney's Office, King County Sheriff's Office, Seattle City Attorney's Office, and the Seattle Police Department.

The RDVFEU had two goals in mind, the first was in getting judges around the region to make it overtly clear that newly prohibited persons were to relinquish their firearms. Secondly, the taskforce worked with law enforcement to investigate newly-prohibited persons suspected of owning firearms and remove them. Research showed that their efforts were incredibly effective and should be adopted as a model around the nation. This collaborative approach led to hundreds of guns being removed from the hands of domestic abusers each year. While Washington did have some state laws to work with that Missouri lacks, federal law prevents people convicted of domestic abuse from owning firearms. The law was even bolstered in 2022 with the passage of the Bipartisan Safer Communities Act.

[What It Takes To Get Guns Out Of The Wrong Hands - NPR](#)

[How to get accused domestic abusers to turn over their guns - Axios](#)

[Enforcement unit boosts compliance with domestic violence weapons orders - phys.org](#)

[Firearm restrictions in domestic violenceprotection orders: Implementation, vetting,compliance, and enforcement - Criminology & Public Policy](#)

I think a regional project like this would work incredibly well, given the constraints placed upon your office. I also believe it would receive very little pushback from gun-rights groups since it would focus on enforcing current gun laws. If there is anything I can do to help you with this, then please let me know. This is the exact type of thing I focused on in

graduate school and the type of thing I wanted to work on at a national level. I would gladly work some more on this if you believe it would be useful to your office.

Let me know what you think,
Dan Hoyt