EMERGENCY MEDICAL SERVICES
COMMISSION MEETING MINUTES

DATE: June 11, 2021

TIME: 10:00am

LOCATION: Brownsburg Fire Territory Headquarters
470 E. Northfield Dr.
Brownsburg, IN 46112

MEMBERS PRESENT:

G. Lee Turpen II	(Private Ambulance)
Myron Mackey	(EMTs)
John Zartman	(Training Institution)
Melanie Jane Craigin	(Hospital EMS)
Darin Hoggatt	(Paramedics)
Terri Hamilton	(Volunteer EMS)

MEMBERS PRESENT VIA TELECONFERENCE:

Sara Brown	(Trauma Physician)
Matthew McCullough	(Volunteer Fire and EMS)
John P. Ryan	(General Public)
Andrew Bowman	(RN)
Joel Thacker	(State Fire Marshal)

Ex-Officio Members: Kraig Kinney   (Indiana State EMS Director)

(non-voting)
Teleconference Dr. Michael Kaufmann (Indiana State EMS Medical Director) – present via Teleconference

MEMBERS NOT PRESENT: Charles Valentine   (Municipal Fire)

Thomas A Lardaro   (Air Medical Services)

OTHERS PRESENT OR PRESENT BY TELECOFERENCE: Don Watson, Jason Smith, Mikel Fort, Tony Pagano, Stan Frank, Candice Pope, Brittany Fortinberry, and other EMS Community members.

Complete video of this meeting can be viewed at the following link:
https://acadisportal.in.gov/acadisviewer/Registration/ListOfAvailableTraining

CALL TO ORDER AND ROLL CALL

Meeting called to order at 10:01am by Chairman Lee Turpen. Mrs. Candice Pope called roll and announced quorum. Everyone stood for the Pledge of Allegiance.

ADOPTION OF MINUTES

a. Adoption of minutes from the April 16, 2021 session.

A motion was made by Commissioner Zartman to approve the minutes as written. The motion was seconded by Commissioner Mackey. Roll call vote taken:

John Zartman Yes	**John Ryan** Yes	**Melanie Jane Craigin** Yes
Lee Turpen Yes	**Myron Mackey** Yes	**Darrin Hoggatt** Yes
Sara Brown Yes	**Andrew Bowman** Yes	**Joel Thacker** Yes
Matthew McCullough Yes	**Terri Hamilton** Yes	

The motion passed. Minutes were adopted.

SUPPORTING HERO'S

Mr. Eric Johnson gave a presentation on what Supporting Hero's is and what they do (see attachment #1).

HONORARY CERTIFICATES

a. Emeritus (staff reviewed and granted) –

Garvey, Michael

b. Certificate of Appreciation (staff reviewed and granted) –

West, Kyle

c. Stork Award

Curry, Amber and Higgins, Polly

d. State EMS Director's Award

Crain, Sherry

INDIANA DEPARTMENT OF HEALTH

No report given at this meeting.

EMS FOR CHILDREN

Ms. Margo Knefelkamp reported that the PECC work force development collaborative (PWDC) is now accepting registrations through August 1st. The program will run from September 2021 through June 2022.

INDIANA FIRE CHIEF'S ASSOCIATION

Mr. Doug Randall briefly spoke about the upcoming IERC. The Indiana Emergency Response Conference will be held on September 15 -18, 2021. Registration is now opened. Award nominations open next week.

INDIANA EMERGENCY MEDICAL SERVICES ASSOCIATION (IEMSA)

Mr. Robert Miller reported that they are planning their conference. The conference will be October 29th. Various meetings will be held the day before.

EMS EDUCATION WORKING GROUP

Mr. Jeff Quinn reported that the work group has been on hold due to COVID. A couple of months ago the group met with the National Registry. Indianapolis Fire Department will be hosting a meeting with National Registry for instructors. The meeting will be next Friday at 2pm. The group is going to attempt to meet at FDIC in August.

MOBILE INTERGRATED HEALTH COMMITTEE

Director Kraig Kinney reported the committee met on May 12th for their regular meeting. The meeting was about the applications for programs. Next meeting will be July 14th.

EDUCATION OVERSIGHT COMMITTEE

Commission Zartman stated they are working on getting members for the group to hold a meeting.

NEW BUISNESS

a. Mobile Integrated Health Grant Funding parameters –

Director Kinney presented the recommendation for the Funding parameters (see attachment #2)

A motion was made by Commissioner Mackey to approve the recommendations as written and asked staff to set a meeting date for a special session to approve the applications. The motion was seconded by Commissioner Craigin. Roll call vote taken:

John Zartman Yes	**John Ryan Yes**	**Melanie Jane Craigin Yes**
Lee Turpen Yes	**Myron Mackey Yes**	**Darrin Hoggatt Yes**
Sara Brown Yes	**Andrew Bowman Yes**	**Joel Thacker Yes**
Matthew McCullough Yes	**Terri Hamilton Yes**	

The motion passed.

OLD BUSINESS

No old business for this meeting.

ASSIGNMENTS

    a. Today's Assignments

ADMINISTRATIVE PROCEEDINGS – INFORMATION ONLY

    a. Waiver Orders
        i. Personnel Waivers
            1. Primary Instructor waiver – request to waiver EMT cognitive and psychomotor prerequisite (granted) – Anderson, Ron – Antonelli, Chelsi M. - Bales, Jeffrey - Bittle, Dona – Carnagua, Joe - Clary, Travis A.– Copeland, Kasey - Cuthbert, Joshua E. - Delong, Michael - Ehle, Julie – Farner, Dalton – Fedmanis, Jekab - Harris, Michael C. – Hedlund, Claude J. - Jones, Amanda – Layman, Gail Alan – Leonard, Adam C. – Martin, Tyler Allen - McCammon, Nicci S. – Minker, James - Myers, Chase – Reed, Holly – Rehme, Nicholas - Reneau, Healther M. – Richter, David - Roberts, Grant S. - Robertson, Nathaniel W. – Stevens, Travis - Study, Bre Irene - Thomas, Jeffrey Kyle – Ulerick, Travis - Waltz, Randy E. - Weed – Donielle - Weidner, Benjamin W. – Whitcomb, Jennifer C. – Work, Jason – Work, Christy L.
            2. Recertification based on Previous certification waiver – 836 IAC 4-4-2 (h) (1) and (2) – granted – Pauze, Denis
            3. Request for an extension of Temporary Paramedic license – 836 IAC 4-9-5 – granted – Campbell, James
        ii. Provider Organization Waivers
            1. 836 IAC 2-2-1 (g) - 24 hour/ 7 day requirement – granted
                a. Sullivan City FD
                b. Terre Haute FD
                c. White River Township FD (Hamilton Co.)
    b. Disciplinary Orders
        i. Personnel
            1. $200.00 civil penalty fine and 7 day suspension followed by 2 year probation and automatic audit in two years (Continuing education sanctions)
                a. Bartalone, Chad
            2. Cease and desist order with $500.00 civil penalty
                a. Melloy, Hayley
            3. 7-year Revocation
                a. Heflin, Kyle J.

STAFF REPORTS

    a. Data Registry – Ms. Robin Stump reported that we are still at about 92% reporting.
    b. Operations Report – Ms. Robin Stump reported that field staff has been helping cover the Gary Vaccinee site. There has been an inventory set up for the Mobile Mortuary at the Indianapolis Airport. In October the Mobile Mortuary will be a part of an exercise. Work continues to get rosters into Acadis. Reminded organizations to get their renewal applications sent in within the 60 day timeframe.
    c. Compliance Report – Reminded everyone to get their renewals completed. (see attachment #3)
        i. Continuing Education Report forms –
        Director Kinney requested that the Commission set a cut off date for using old forms and only use the new continuing education report forms as of January 1, 2022

A motion was made by Commissioner Hoggatt to approve cease using the old forms as of January 1st and moving forward after the January 1st deadline it is mandatory that only the new forms are used.   The motion was seconded by Commissioner Zartman.   Roll call vote taken:

John Zartman <u>Yes</u>	John Ryan <u>Yes</u>	Melanie Jane Craigin <u>Yes</u>
Lee Turpen <u>Yes</u>	Myron Mackey <u>Yes</u>	Darrin Hoggatt <u>Yes</u>
Sara Brown <u>Yes</u>	Andrew Bowman <u>Yes</u>	Joel Thacker <u>Yes</u>
Matthew McCullough <u>Yes</u>	Terri Hamilton <u>Yes</u>	

The motion passed.

- d. Certifications Reports
  - i. Personnel – No report at this meeting
  - ii. Providers – (see attachment #4) report submitted for information only. No action taken. None required.
- e. Training Report – (see attachment #5 for the training report) report submitted for information only.

STATE EMS DIRECTORS REPORT – Director Kinney talked about staffing in the office. We do have a candidate for the Mobile Integrated Health Coordinator position Brittany Allison. Director Kinney gave background on Brittany. Director Kinney announced that the general waivers that were put into place for COVID will expire on June 30th. Director Kinney gave several updates to programs and things that the staff has been working on.

STATE MEDICAL DIRECTORS REPORT - Dr. Michael Kaufmann gave updates on several topics including EMT vaccine administration, data, and Homebound Hoosier program.

CHAIRMAN'S REPORT AND DIRECTION- Chairman Turpen talked briefly about the paramedic and EMT shortages felt all across the Nation. Reminded everyone to talk to their crews and check in on them to make sure they are doing ok. Chairman Turpen encouraged everyone to get involved with the CARES registry. He discussed the EAGLES conference. He also thanked Stan Frank for his work on gathering information on Fatigue issues.

NEXT MEETING

TBA

ADJOURNMENT

A motion was made by Commissioner Zartman. The motion was seconded by Commissioner Bowman. The meeting was adjourned at 12:01pm.

Approved _____

G Lee Turpen, Chairman

Attachment #1

Attachment #2

NOTICE OF FUNDING OPPORTUNITY
Mobile Integrated Healthcare Grants

Fiscal Year 2022 (FY22)

Award Information

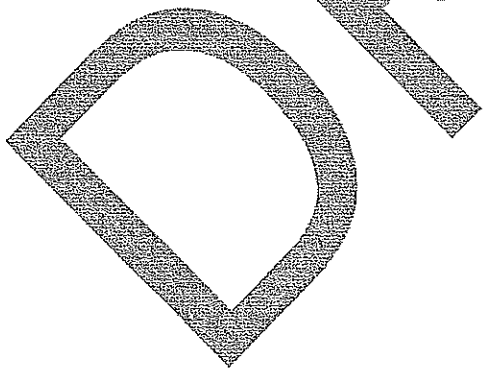|	
Competitive Projects:	$15,000 maximum award
Performance Period:	July 1, 2021 – June 30, 2022

Application Deadline

Grant applications must be received by July 9, 2021 at 4:30 p.m. EDT.

IDHS CONTACT INFORMATION

If applicants have any questions about the information contained within the Notice of Funding Opportunity (NOFO) or need technical assistance in completing a grant application, please contact Kraig Kinney at kkinney@dhs.in.gov

PROGRAM OVERVIEW

PROGRAM SYNOPSIS

The Mobile Integrated Healthcare (MIH) Grant Program provides support for communities to develop and implement a mobile integrated healthcare program consistent with IC 16-31-12-4.

A mobile integrated healthcare program is one that is a community-based health care in which paramedics and emergency medical technicians employed by an emergency medical services provider agency function outside of customary emergency response and transport to do the following:

(1) Facilitate more appropriate use of emergency care services.

(2) Enhance access to:

(A) primary care for medically underserved populations; or

(B) underutilized and appropriate health care services.

ELIGIBILITY CRITERIA

Eligible applicants are any EMS Commission certified provider organization operated by a municipality. If the grant funding will benefit more than one EMS provider organization, each entity must be identified within the application.

The basic eligibility requirements:

- Must be a currently certified EMS provider organization (BLS non-transport, BLS transport, ALS non-transport and ALS transport—including Advanced EMT).
- Must be a city, town or township operated provider (see IC 16-31-12-4(c))
- Must be an approved MIH program (may be approved concurrently with approval of the grant).

Other Eligibility requirements include (see Appendix B for more information):

- Supplier/Vendor registration with the State of Indiana
- Bidder registration with the State of Indiana

AWARD LIMITS

Applications through the MIH Grant program will be up to $100,000 issued in ALL total grants for this cycle. The EMS Commission has not established a maximum award for any single applicant/entity, but the goal is to reach a handful of provider organizations with supplemental funding so a likelihood range of up to $15,000 to $20,000 per award is reasonable to anticipate, although the Commission could adjust if there are applications that merit higher funding for ingenuity, collaboration among organizations or meeting several of the priorities of this notice of funding opportunity.

Funding availability will be subject to a grants contract and contract approval with IDHS with the entire grant funding issued yet in 2021 followed by status updates from the recipient for the total grant period.

FUNDING GUIDELINES

Existing funds for a project may not be displaced by funds awarded through the MIH Grant program and reallocated for other organizational expenses.

Funding requests may be for any costs related to a MIH program including personnel costs, equipment, or vehicle.

PRIORITY AREAS

Funds made available through the MIH Grant program may only be used for and must be consistent with the development and implementation of a MIH program. Priority will be on new programs or expansion of an existing program to include additional focus areas (example, an existing program that focuses on hospital readmission seeks to expand to do a program that addressed mental health within the community).

Priority areas include:

- New programs or expansion of existing programs.
- Programs that have a demonstrated community need.
- Programs that include cross-disciplinary cooperation to address a community need.
- Programs that propose matching funds for the program.

BUDGET

When completing the budget, please consider if the budget items requested are reasonable, necessary and allowable under the funding stream. Furthermore, please include sufficient justification to explain the necessity of each budgeted item.

APPLICATION EVALUATION

The applications will be reviewed by the Mobile Integrated Health Committee upon recommendation of IDHS staff and with a final approval by the EMS Commission.

Application submission does not guarantee funding.

AWARD NOTIFICATION

The Mobile Integrated Healthcare Coordinator will contact MIH Grant sub-recipients via email when funding determinations have been finalized. If awarded funding, MIH Grant sub-recipients will receive an award letter including the following information:

• Sub-recipient name

• Sub-recipient award amount

• Sub-recipient performance period

The award letter will provide any special conditions that must be met or resolved prior to reimbursement.

Sub-recipients must confirm acceptance of the MIH Grant award. Directions for acceptance can be found within the award letter.

All funding decisions are final. IDHS, the MIH Advisory Committee and the EMS Commission, can consider additional factors other than those listed within this NOFO.

NOTE: IDHS must run clearance checks with the Department of Workforce Development, Department of Revenue and Indiana Secretary of State. If an applicant is not in good standing or has an outstanding issue with the state of Indiana, then the applicant cannot receive an award or go through the contracting process until these issues are addressed and made current. In the event IDHS finds that your entity does not pass a clearance check, IDHS will notify you and ask that you work with these agencies to correct the issue. IDHS cannot correct this issue for you.

REPORTING

PROGRAM AND REIMBURSEMENT

A report schedule will be provided to sub-recipients following award notification. Program and fiscal reports serve an important function within the overarching grant cycle. Program reports can serve as a means of communication between sub-recipients and the Mobile Integrated Healthcare Coordinator. For example, the sub-recipients are asked to indicate if barriers exist to achieving project success. IDHS Grants Management asks this question to determine if technical assistance is needed to assist sub-recipients. The information entered into the program reports is critical to ensuring the MIH Grant program is supported in future congressional sessions.

Program reports are a requirement of the MIH Grant program and should be submitted in a timely fashion. Incomplete, incorrect or late reports could impact an applicant's ability to receive future grant funding with IDHS. Program reports will need to be submitted and approved before reimbursement can be made.

CLOSEOUT REPORTING REQUIREMENTS

The Mobile Integrated Healthcare Coordinator will close out the grant sub-award when all applicable administrative actions and all required work of the award have been completed by the sub-recipient. This section summarizes the actions that the sub-recipient must take to complete the closeout process in accordance with IDHS policy and procedure.

Within 30 days of the end of the period of performance, sub-recipients must submit a final program report detailing accomplishments throughout the period of performance and a qualitative summary outlining the impact of all the accomplishments grant funds supported. If the final program report omits activities, the report will be returned and additional information will need to be included to satisfy this requirement.

Funding obligations must be made prior to the end of the performance period listed in the grant agreement. All outstanding expenses must be paid and final requests for expenditures must be submitted within 30 days of the end of the period of performance.

DATES TO KNOW

Application Deadline: July 9, 2021

Period of Performance: July 1, 2021 – June 30, 2022

Liquidation Period: July 1, 2022 – August 1, 2022

MONITORING

The Mobile Integrated Healthcare Coordinator must monitor sub-recipients as a requirement of the award to assure compliance with applicable state requirements and verify performance expectations are being achieved.

APPENDIX A: APPLICATION INFORMATION

The on-line FY22 MIH Grant program application is available through the IDHS grants management system and is to be completed through IDHS's grants management system, iGMS (click on link).

Applicants without an active account with iGMS should complete the following steps to obtain an iGMS user account:
1. Complete the New iGMS User Form (click on link).
2. Return the New iGMS User form to IDHS Grants Management at grants@dhs.in.gov.
3. Enter "FY22 MIH Grant program: New iGMS user" into the subject line of the email.

After applicants receive notification that an account has been established in iGMS, all user contact information must be entered into their iGMS account. **No applications can be submitted until user information has been entered within the "Contact Info" tab** (located at the top of the iGMS dashboard, to the left of the "Logout" tab and is in green font).

Applicants with an active iGMS user account can log into iGMS and begin working on the grant application without submitting a new user form.

APPLICATION MECHANISM
Once the applicant has all the required information listed within this NOFO and is logged into iGMS, applicants should click on the following buttons or select from the drop-down menu to begin their application:
1. Click "Create new proposal" under 'My Proposals' header on the top left side of the screen.
2. Select the FY22 MIH Grant program application from the drop-down menu under 'Proposal Template.
3. Type in the title of your application in the 'Title' field box.
4. Click the 'Create' button to get started.

Application and application process shall be developed by IDHS and include the following elements, at a minimum:

A. Applicant Information
   1. Organization information
   2. Project location
   3. Project officials
   4. Project Director: main point of contact
   5. Fiscal Agent
   6. Alternative Contact
   7. Signatory (individual that will execute the grant agreement)
B. Project Title and Funding Profile
   1. Project Title
   2. Project Summary
   3. New or Continuation Project

4. Source of Funding for matching component(s)
C. Goals, Objectives & Outcomes
D. Project Analysis
   1. Problem Statement & Analysis
   2. Project Description
   3. Funding Sustainability
   4. Challenges
   5. Project Milestones
   6. Budget

APPENDIX B: REQUIRED REGISTRATIONS

SUPPLIER/VENDOR REGISTRATION WITH THE STATE OF INDIANA

The terms supplier and vendor are interchangeable and are stated differently in different systems. Applicants must be an active supplier/vendor in good standing with the state of Indiana. To register as a supplier/vendor with the state, please visit the State of Indiana Auditor's website at: http://www.in.gov/auditor/924.htm and complete the **W-9 Form** and **Automated Direct Deposit Authorization Agreement SF# 47551**. Applicants must use the IRS legal name of the entity on these forms.

Please send the completed forms to the IDHS Grants Management Section inbox grants@dhs.in.gov with the subject **"Supplier/Vendor Number Application for [insert organization's name here]."**

Once received, the forms will then be given to a project manager to ensure a timely registration. Please plan accordingly and allow for a minimum of 10 business days for this registration process to be completed once forms have been submitted. IDHS must relay this information to the Auditor's office for processing and does not have control over the speed at which they are processed. High volume of requests to the Auditor's office will sometimes delay this process more than two weeks.

Once the completed forms have been processed and a number has been generated, IDHS Grants Management staff will contact the applicant with the assigned supplier/vendor number.

Applicants who are unsure if their agency has already been registered should submit a Grants Support Ticket (click on link) for verification. **An agency can only have one supplier/vendor number because it is linked to the agency's federal tax ID number (FEIN).** To verify the supplier/vendor information on file with the state, IDHS will need to have the correct FEIN.

BIDDER REGISTRATION WITH THE STATE OF INDIANA

The state of Indiana requires all entities that receive funds from the state to be registered as a bidder. **An applicant can begin the bidder registration process while a supplier/vendor number is being processed.** There is no cost to become a registered bidder and the process takes approximately twenty minutes to complete.

To become a registered bidder, applicants must go to this link: https://fs.gmis.in.gov/psc/guest/SUPPLIER/ERP/c/NUI_FRAMEWORK.PT_LANDINGPAGE.GBL?& . After clicking on the link, click on the "Register Bidder" tile to start the registration process.

Support and new bidder profile training videos can be found here: https://www.in.gov/idoa/procurement/supplier-resource-center/requirements-to-do-business-with-the-state/bidder-profile-registration/ .

The state of Indiana will run a nightly batch process that will link your supplier/vendor number to your bidder registration number, but this process will not occur if your bidder registration is not fully completed. **You will not be able to receive any funding if these two numbers are not synced.** If these processes have already been completed, the requirement has been met. **Applicants should not duplicate the processes.** Please keep in mind that until these processes are complete, a grant application will not be accepted

Attachment #3

Attachment #4

Emergency Medical Services
Provider Certification Report

Date : June 4, 2021   **June   11, 2021**

In compliance with the Rules and Regulations for the operation and administration of Emergency Medical Services, this report is respectfully submit to the Commission at the **June   11, 2021** Commission meeting, the following report of agencies who have meet the requirements for certification as Emergency Medical Service Providers and their vehicles.

Provider Level	Counts
Rescue Squad Organization	1
Basic Life Support Non-Transport	488
Ambulance Service Provider	98
EMT Basic-Advanced Organization	4
EMT Basic-Advanced Organization non-transport	1
EMT Intermediate Organization	9
EMT Intermediate Organization non-transport	0
Paramedic Organization	203
Paramedic Organization non-transport	15
Rotorcraft Air Ambulance	14
Fixed Wing Air Ambulance	3
Total Count:	836

New Providers Since 01-FEB-21

AROUND THE CLOCK TRANSPORTATION	**Paramedic Certification:** 01/15/2023

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WHITE RIVER TWP FIRE DEPARTMENT	**Basic Certification:** **03/01/2021**
WHITE RIVER TWP FIRE DEPARTMENT	**Paramedic Certification:** **04/26/2021**

Attachment #5

June 2021 EMS Training Report

NREMT pass rates are enclosed in this report. These statistics are for courses ending between June 1, 2020 and June 1,2021. Please take note that for the first time we are above the National average in EMR, Advanced EMT and Paramedic. We still have a way to go on the EMT program to get up to the National average. The EMT courses are broken down into three separate categories. The top category represents those training institutions whose graduates' average at least 70% after the first attempt which is the standard set by the Commission: 21 programs. This is a decrease in 3 programs since the last reporting period which ended in March. The programs in the next category (60% -70%) are near meeting the standard set by the Commission: 10 programs. Those in the bottom category are below standard: 44 programs. Unfortunately, we have more programs under 50% than over.

We have implemented site visits to assist struggling programs. We are concentrating on visiting those programs who have between a 60 - 69% pass rate over the past 3 years. In the last 6 months we have visited 11 training institutions giving them support and advice as well as checking to see how they are implementing the skills portfolios into their training programs.

National Registry Pass Rates, June 1, 2020 to June 1, 2021

National or State	Level of Certification	Initial	3d Attempt	6th Attempt	Total Attempts
National	EMT	69%	78%	78%	68,'205
State	EMT	58%	67%	68%	1010
National	Adv EMT	59%	71%	72%	4957
State	Adv EMT	63%	64%	64%	76
National	Paramedic	70%	83%	84%	11,007
State	Paramedic	72%	85%	86%	189

National Registry Pass Rates, June 1, 2018 to June 1, 2021

National or State	Level of Certification	Initial	3d Attempt	6th Attempt	Total Attempts
National	EMT	69%	80%	80%	224,237
State	EMT	57%	69%	71%	3933
National	Adv EMT	60%	74%	76%	15,830
State	Adv EMT	60%	73%	74%	234
National	Paramedic	71%	85%	88%	34,675
State	Paramedic	66%	82%	85%	623

Emergency Medical Technician

Program Name	Program Code	Attempts	First Att total pass	ELIG	First Pass %	Total Pass %
Noblesville Fire Department	IN-6086	10	10	10	0	100%	100%
Hancock Regional Hospital	IN-4577	1	1	1	0	100%	100%
IU Lifeline	IN-6509	7	7	7	0	100%	100%
Memorial Hospital Jasper	IN-5271	1	1	1	0	100%	100%
Witham Hospital	IN-4140	2	2	2	0	100%	100%
Gas City Rescue Squad	IN-6386	1	1	1	0	100%	100%
City of Lawrence Fire Dept	IN-6625	3	3	3	0	100%	100%
Superior Ambulance	IN-4082	3	3	3	0	100%	100%
White County EMS Education	IN-5834	7	7	7	0	100%	100%
St Mary Medical Center/Hobart	IN-4943	8	7	8	0	88%	100%
Indianapolis Emergency Medical Services	IN-4083	20	17	17	3	85%	85%
Hendricks Regional Health	IN-4380	11	9	10	1	82%	91%
Wells Co Ambulance Service	IN-4913	15	12	12	3	80%	80%
IU Arnett Hospital EMS Program	IN-5936	13	10	10	3	77%	77%
Deaconess Hospital	IN-4516	21	16	18	3	76%	86%
Franciscan St Elizabeth Health	IN-4068	12	9	11	1	75%	92%
Indianapolis Fire Dept	IN-5751	39	29	29	10	74%	74%
Ivy Tech Community College South Bend	IN-4070	27	20	21	6	74%	78%
Elkhart General Hospital	IN-4067	7	5	7	0	71%	100%
Ivy Tech Community College Madison	IN-4542	7	5	5	2	71%	71%
Carmel Fire Department	IN-5989	10	7	10	0	70%	100%
					32		

Emergency Medical Technician

Community Howard Regional Health	IN-5804	8	5	6	2	67%	75%
Franciscan Saint Anthony Health Crown Point	IN-4079	25	16	20	5	64%	80%
Otter Creek Fire Department	IN-5929	13	8	10	3	62%	77%
Clay Fire Territory	IN-4756	5	3	4	1	60%	80%
STAR Ambulance	IN-6003	10	6	8	2	60%	80%
Ivy Tech Community College - Valparaiso	IN-5747	20	12	12	8	60%	71%
Goshen Hospital	IN-4162	15	9	10	5	60%	67%
Central Nine Career Center	IN-5026	5	3	3	2	60%	60%
J. Everett Light Career Center	IN-6480	5	3	3	2	60%	60%
Richmond Fire Department	IN-5707	15	9	9	6	60%	60%
Emergency Services Education Center	IN-4960	32	19	23	9	59%	72%
Franciscan St. Margaret Health EMS Acade	IN-5267	19	11	13	6	58%	68%
Pelham Training	IN-4668	141	81	99	52	57%	70%
Columbus Regional Hospital	IN-4355	32	18	23	9	56%	72%
Ivy Tech Community College Bloomington	IN-4071	20	11	14	6	55%	70%
Ivy Tech Community College-Evansville	IN-4141	30	16	19	11	53%	63%
Indiana University	IN-4495	17	9	9	8	53%	53%
Ivy Tech Community College Terre Haute	IN-4612	15	8	9	6	53%	60%
Hands Helping Hearts	IN-6558	29	15	18	11	52%	62%
Vincennes University Jasper Center	IN-4478	2	1	2	0	50%	100%
Scott County EMS	IN-4078	4	2	3	1	50%	75%
Franciscan Health Indianapolis	IN-4080	14	7	9	4	50%	64%
Harrison county Hospital EMS	IN-4336	16	8	10	6	50%	63%
Clinton Co EMS	IN-5863	8	4	5	3	50%	63%
Greenfield Fire Territory	IN-5732	10	5	6	4	50%	60%
Elkhart Area Career Center	IN-5816	4	2	2	1	50%	50%
Winchester Fire Dept	IN-6460	4	2	2	2	50%	50%
Washington County Ambulance Service	IN-6508	4	2	2	2	50%	50%
St Mary of the Woods College	IN-6538	2	1	1	1	50%	50%
DeKalb Memorial Hospital	IN-4446	10	5	5	5	50%	50%
LaPorte Co Career and Tech Ed	IN-5994	4	2	2	2	50%	50%
Area 30 Career Center	IN-5147	2	1	1	1	50%	50%
					51		

Emergency Medical Technician

Methodist Hospitals	IN-4072	25	12	15	10	48%	60%
Ascension Health Indianapolis	IN-4081	29	14	15	14	48%	52%
Heartland Ambulance	IN-6320	9	4	6	3	44%	67%
Ivy Tech Community College Northeast	IN-4169	36	16	23	13	44%	64%
Scott Township Fire and EMS	IN-6442	16	7	8	8	44%	50%
Ivy Tech Community College Indianapolis	IN-6506	24	11	12	12	43%	50%
Lutheran EMS Training Center	IN-6351	7	3	3	4	43%	43%
Ivy Tech Community College-Kokomo	IN-4362	15	6	9	6	40%	60%
Jennings Co EMS	IN-5887	5	2	2	3	40%	40%
IU Ball Memorial Hospital	IN-4369	16	6	9	7	38%	57%
Ivy Tech Community College Sellersburg	IN-4864	11	4	6	5	36%	55%
Redline EMS	IN-6495	6	2	3	3	33%	50%
Benton Co EMS	IN-6548	9	3	3	6	33%	33%
New Castle Career Center	IN-5718	6	2	2	4	33%	33%
Crawfordsville Fire Department	IN-5990	3	1	1	2	33%	33%
Hoosier Hills Career Center	IN-6346	11	3	4	8	27%	36%
St. Vincent Anderson	IN-4588	11	3	3	8	27%	27%
Vincennes University	IN-4153	4	1	2	2	25%	50%
Union Hosp Health Group	IN-4431	4	1	1	3	25%	25%
Hands on Instruction LLC	IN-6017	4	1	1	3	25%	25%
Franciscan Alliance Crawfordsville	IN-6002	7	1	4	3	14%	57%
					133		
					216		

Advanced EMT

Program Name	Program Co	Attempts	First Att	Cumula	Cumula	Eligible Fo	First Pass %	Third Pass %	Total Pass %
Columbus Regional Hospital	IN-4355	6	6	6	6	0	100%	100%	100%
Fort Wayne Fire Dept	IN-5955	14	14	14	14	0	100%	100%	100%
IU Ball Hospital	IN-4369	7	5	5	5	2	71%	71%	71%
Memorial Hospital South Bend	IN-4157	10	6	7	7	3	60%	70%	70%
Warwaw Wayne Fire Territory	IN-6653	19	10	10	10	9	53%	53%	53%
Highpoint Health	IN-4065	2	1	1	1	1	50%	50%	50%
New Castle Career Center	IN-5718	16	6	6	6	8	38%	38%	38%

Paramedic

Program Name	Program Co	Attempt	First Att	Cumula	Cumula	Cumula	Eligible Fo	First Pass %	Third Pass %	Total Pass %
Ivy Tech Community College Madison	IN-4542	9	8	8	8	1		89%	89%	89%
Ivy Tech Community college Evansville	IN-4141	8	7	7	7	1		88%	88%	88%
Indianapolis EMS	IN-4083	39	33	37	37	2		85%	95%	95%
Ivy Tech Community College Kokomo	IN-4362	9	7	8	9	3		78%	89%	100%
Scott Co EMS	IN-4078	11	8	10	10	1		73%	91%	91%
St Vincent Hospital	IN-4081	12	9	12	12	0		75%	100%	100%
Pelham Training	IN-6266	26	19	21	22	3		73%	81%	85%
Goshen Health	IN-4162	15	11	11	11	4		73%	73%	73%
Ivy Tech Community Northeast	IN-4169	14	10	11	11	3		71%	79%	79%
Franciscan Health Indianapolis	IN-4080	23	16	23	23	2		70%	100%	100%
Hendricks Regional Health	IN-4380	10	7	10	10	0		70%	100%	100%
Ivy Tech Community College Terre Haute	IN-4612	9	6	7	7	2		60%	78%	78%
Methodist Hospitals	IN-4072	10	6	7	7	3		55%	70%	59%
St Mary Medical Center Hobart	IN-4943	2	1	1	1	1		50%	50%	50%
Ivy Tech Community College South Bend	IN-4070	9	4	6	6	5		44%	67%	67%
Ivy Tech Community College Valparaiso	IN-5747	3	1	1	1	2		33%	33%	33%
Franciscan Health Crown Point	IN-4079	6	2	2	2	4		33%	33%	33%

Q) State EMS Director's Report – Kraig Kinney