INDIANA DEPARTMENT OF HOMELAND SECURITY



EMERGENCY MEDICAL SERVICES COMMISSION MEETING MINUTES

DATE:

May 16, 2019

TIME:

10:00am

LOCATION:

Zionsville Town Hall 1100 W. Oak St. Zionsville, IN 46077

MEMBERS PRESENT:

G. Lee Turpen II

(Private Ambulance)

John Zartman

(Training Institution)

Myron Mackey

(EMTs)

Mike Garvey

(Indiana State EMS Director)

Matthew McCullough

(Volunteer Fire and EMS)

Sara Brown

(Trauma Physician)

Melanie Jane Craigin

(Hospital EMS)

John P. Ryan

(General Public)

Charles Valentine

(Municipal Fire)

MEMBERS NOT PRESENT:

Andrew Bowman

(RN)

Darin Hoggatt

(Paramedics)

Terri Hamilton

(Volunteer EMS)

Stephen Champion

(Medical Doctor)

John Brown

(Air Medical Services)

Thomas A Lardaro

(Director of Preparedness and Training)

OTHERS PRESENT:

Kraig Kinney, Field Staff, Robin Stump, Tony Pagano, Candice Pope, and members of the EMS

Community.

CALL TO ORDER AND ROLL CALL

Meeting called to order at 10:02am 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 March 14, 2019 regular session.

A motion was made by Commissioner Zartman to approve the minutes as written. The motion was seconded by Commissioner Mackey. The motion passed.

Chairman Turpen called for a moment of silence for Jack Estridge from Lowell Indiana and his service as Fire Chief and service with Tri - County EMS.

INDIANA DEPARTMENT OF HEALTH

Reported that there were 1034 registered for the Medical Director's conference this year. The cme's for the conference will be out by the end of the month. The Health department is working with IDHS and other agency to get Stop the bleed kits for schools. Elkhart General Hospital is the only in process hospital at this time and their application will be reviewed on June 21st at their next Trauma Care Committee meeting.

EMS FOR CHILDREN

Ms. Margo Knefelkamp stated that there is a PECC fact pack on the back table. Ms. Knefelkamp stated that May 22nd is Emergency Medical Service for Children day. On Wednesday May 22nd at the IEMS conference center the EMS for Children breakfast will be held. There will be an EMSIC webinar contact Ms. Knefelkamp for more information.

INDIANA EMERGENCY MEDICAL SERVICES ASSOCIATION (IEMSA)

Mr. Robert Miller presented the Golden Star Award jackets to the award recipients - Chairman Lee Turpen, EMS State Director Michael Garvey, and Mr. Gary Miller. Mr. Miller announced that the IEMSA conference will be December 5th and 6th this year.

Mr. Nathaniel Metz announced that the other two Golden Star award recipients Ken Hendricks will be presented his jacket at the fire meeting and Andy King who has passed away, his jacket will be presented to his family. Mr. Metz gave a brief report on legislation that IEMSA worked to help get passed. Mr. Metz gave an updated on Southeast Trans and the work that IEMSA continues to do to improve the rule.

Chairman Turpen commented on how impressive the speaker line up was at last year's IEMSA conference and recommends attendance.

INDIANA FIRE CHIEFS ASSOCIATION

Mr. Douglas Randall the co - chair of the EMS Section reported that registration is opened for the 2019 Indiana Emergency Responders Conference (IERC). Mr. Randall stated that the amount of classes for the IERC has been cut for easier access. Mr. Randall announced that pricing has changed for the conference this year. Mr. Randall stated that the Fire Chiefs would like to help with gathering information for the Mobile Integrated Health rule writing and gathering information. On June 12 at 2:00pm the Fire Chiefs are holding a meeting to start gathering information anyone with a current Community Paramedicine program, people that want to get a program started, and the regulatory bodies are invited. The Fire Chiefs also will be holding a meeting to discuss the paramedic shortage meeting on July 10 location to be announced. Mr. Randall gave kudos to IDHS and Ms. Candice Pope for their hard work, dedication, and communication.

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EMS EDUCATION WORKING GROUP

Ms. Jana Szostek reported for Mr. Jeff Quinn. Ms. Szostek reminded everyone that the working group is hosting three workshops with Platinum Education. The workshops are on June 12, 2019 at Scott County EMS, June 13, 2019 at Indianapolis Fire Department Headquarters, and June 14, 2019 at South Bend Fire Department Station 1. Please register by email with Lisabeth Handt. Ms. Szostek presented three (3) recommendations to the Commission – 1. New. Pl's for the first one or two classes should have a mentor assigned to them. 2. New Pl's should not be a Pl of record for a Pl course for at least 1 year. 3. Internship should be taught in a BLS course not an ALS course.

A motion was made by Commissioner Zartman to table the recommendations until the actual documents can be reviewed again by the Commission members. The motion was seconded by Commissioner Valentine. The motion was passed.

PERSONNEL WAIVER REQUESTS

The following is requesting a waiver of 836 IAC 4-5-2 Certification and recertification; general Sec. 2. (a) Application for certification will be made on forms and according to procedures prescribed by the agency. In order to be certified as an emergency medical services primary instructor, the applicant shall meet one (1) of the following requirements: (1) Successfully complete a commission-approved Indiana emergency medical services primary instructor training course and complete all of the following: (A) Successfully complete the primary instructor written examination. (B) Successfully complete the primary instructor training program. (C) Be currently certified as an Indiana emergency medical technician. (D) Successfully pass the Indiana basic emergency medical services written and practical skills examinations within one (1) year prior to applying for certification as a primary instructor. (2) Successfully complete a training course equivalent to the material contained in the Indiana emergency medical service primary instructor course and complete all of the following: (A) successfully complete the primary instructor written examination. (B) Successfully complete the primary instructor training program. (C) Be currently certified as an Indiana emergency medical technician. (D) Successfully pass the Indiana basic emergency medical services written and practical skills examinations within one (1) year prior to applying for certification as a primary instructor. The candidates listed below are requesting a waiver of successfully passing the Indiana basic EMT written and practical skills examinations. Staff recommends: Approve based on previous Commission action (last meeting this was approved was January 18, 2018).

- i. Bolinger, Aaron
- ii. Broens, Rob
- iii. Brown, Tyler
- iv. Combs, Monica
- v. Fort, Jaeson
- vi. Foust, Stephanie
- vii. Hudson, Tara
- viii. Husband, Shane
 - ix. Robison, Sean
 - x. Rodriguez, Yvonne D.
- xi. Salita, Brandy
- xii. Sferruzza, Sarah
- xiii. Shilling, Drew
- xiv. Thompson, Tia N.
- xv. Tolson, Tara
- xvi. Warren, Addison J.
- xvii. Wise, Stephen

xviii. Youhas, James

A motion was made by Commissioner Zartman to approve the waivers. Commissioner Valentine abstained from the vote. The motion was seconded by Commissioner Mackey. The motion was approved.

The following is requesting a waiver of 836 IAC 4-9-6 Paramedic certification based upon reciprocity Authority: IC 16-31-2-7; IC 16-31-IC 16-31-3 Sec. 6. (a) To obtain paramedic certification based upon reciprocity, an applicant shall be affiliated with a certified paramedic provider organization and be a person who, at the time of applying for reciprocity, meets one (1) of the following requirements: Possesses a valid certificate or license as a paramedic from another state and who successfully passes the paramedic practical and written certification examinations as set forth and approved by the commission. Application for certification shall be postmarked or delivered to the agency office within six (6) months after the request for reciprocity. Has successfully completed a course of training and study equivalent to the material contained in the Indiana paramedic training course and successfully completes the written and practical skills certification examinations prescribed by the commission. Possesses a valid National Registry paramedic certification. Notwithstanding subsection (a), any nonresident of Indiana who possesses a certificate of license as a paramedic that is valid in another state, upon residing at an Indiana address, may apply to the agency for temporary certification as a paramedic. Upon receipt of a valid application and verification of valid status by the agency, the agency may issue temporary certification that shall be valid for: the duration of the applicant's current certificate or license; or a period not to exceed six (6) months from the date that the reciprocity request is approved by the director; whichever period of time is shorter. A person receiving temporary certification may apply for full certification using the procedure required in section 1 of this rule.

Ms. Reid is requesting to complete the new reciprocity process since the Training Institution he took his paramedic course from is not accredited and therefore not eligible to take the National Registry exams. Staff recommends approval based on previous Commission action.

Maryann Reid

A motion was made by Comissioner Zartman to approve staff recommendation. The motion was seconded by Commissioner Mackey. The motion passed.

The following is requesting a waiver of Rule 2: General Requirements for paramedic provider organizations 836 IAC 2-2-1 (g) (1) (g) PROVIDER WAIVER REQUESTS Each paramedic provider organization shall do the following: (1) Maintain an adequate number of trained personnel and emergency response vehicles to provide continuous, twenty-four (24) hour advanced life support services. (2) Notify the commission in writing within thirty (30) days of assigning any individual to perform the duties and responsibilities required of a paramedic. East Columbus Independent FD is requesting a waiver of the ALS 24/7 rule. The Deputy Chief of the department is a paramedic of 25 years and currently affiliated with Columbus FD and Columbus Regional Hospital. He would like to certify his department vehicle as an ALS nontransport so he could provide care when on duty with East Columbus. They would like to add additional ALS personnel as finances allow. They are currently certified as a BLS non-transport provider and their area of coverage is covered with ALS by Columbus Regional Hospital. Staff recommends: Approval for 1 year. Complete waiver tool when paramedic is unavailable

East Columbus Independent Fire Department

A motion was made by Commissioner Valentine to approve the waiver. The motion was seconded by Commissioner Zartman The motion was approved. Commissioner Champion abstained from the vote.

The following is requesting a waiver of Rule 11. Emergency Medical Services Non- transport Providers Need to figure out what rule would this fall under. Evansville FD is requesting as a BLS non-transport provider to carry and utilize pet oxygen masks. Included in this waiver is a standard operating guideline outlining their medical care for dogs and cats. Staff recommends: Abstain

Evansville Fire Department

This waiver was tabled by Chairman's direction until later in the meeting.

The following is requesting a waiver of Rule 2: General Requirements for paramedic provider organizations 836 IAC 2-2-1 (g) (1) (g) Each paramedic provider organization shall do the following: (1) Maintain an adequate number of trained personnel and emergency response vehicles to provide continuous, twenty-four (24) hour advanced life support services. (2) Notify the commission in writing within thirty (30) days of assigning any individual to perform the duties and responsibilities required of a paramedic. Franklin County EMS is requesting a waiver of the 24/7 rule. They currently have 2 paramedics and I ADV EMT in medic class now. They have been able to staff the chase truck with the exceptions of some minor issues. Staff recommends: Approval for 1 year complete waiver tool when paramedic is unavailable.

Franklin County

A motion was made by Commissioner Valentine to approve staff recommendation. The motion was seconded by Commissioner Zartman. The motion was approved.

The following is requesting a waiver of Rule 2: General Requirements for paramedic provider organizations 836 IAC 2-2-1 (h) A paramedic ambulance service provider organization must be able to provide a paramedic level response. For the purpose of this subsection, "paramedic response" consists of the following: (1) A paramedic. (2) An emergency medical technician or higher. (3) An ambulance in compliance with the requirements of section 3(e) of this rule. (4) During transport of the patient, the following are the minimum staffing requirements: (A) If paramedic level advanced life support treatment techniques have been initiated or are needed: (i) the ambulance must be staffed by at least a paramedic and an emergency medical technician; and (ii) a paramedic shall be in the patient compartment. (B) If an emergency medical technician-intermediate level advanced life support treatment techniques have been initiated or are needed: (i) the ambulance must be staffed by at least an emergency medical technician-intermediate and an emergency medical technician; and (ii) an emergency medical technician-intermediate shall be in the patient compartment. (C) If advanced life support treatment techniques have not been initiated and are not needed: (i) the ambulance must be staffed by at least an emergency medical technician; and (ii) an emergency medical technician shall be in the patient compartment. IU Health Lifeline is requesting a waiver of the staffing requirement while transporting at the paramedic level. IU Health is a specialty care transport provider offering higher level of care in different scenarios. Their staffing could be any of the following: Nurse/ nurse crew configuration for critical care patients, Nurse/ physician crew configuration for critical care patients, Nurse/ respiratory therapist crew configuration for pediatric and neonatal critical care patients, Nurse practitioner/ respiratory therapist for pediatric and neonatal critical care patients. Staff recommends: Approval based on previous Commission action.

IU Health

A motion was made by Commissioner Zartman to approve staff recommendation. The motion was seconded by Commissioner Valentine. The motion was approved.

The following is requesting a waiver of Rule 2: General Requirements for paramedic provider organizations 836 IAC 2-2-1 (h) A paramedic ambulance service provider organization must be able to provide a paramedic level response. For the purpose of this subsection, "paramedic response" consists of the following: (1) A paramedic. (2) An emergency medical technician or higher. (3) An ambulance in compliance with the requirements of section 3(e) of this rule. (4) During transport of the patient, the following are the minimum staffing requirements: (A) If paramedic level advanced life support treatment techniques have been initiated or are needed: (i) the ambulance must be staffed by at least a paramedic and an emergency medical technician; and (ii) a paramedic shall be in the patient compartment. (B) If an emergency medical technician-intermediate level advanced life support treatment techniques have been initiated or are needed: (i) the ambulance must be staffed by at least an emergency medical technician-intermediate and an emergency medical technician; and (ii) an emergency medical technician-intermediate shall be in the patient compartment. (C) If advanced life support treatment techniques have not been initiated and are not needed: (i) the ambulance must be staffed by at least an emergency medical technician; and (ii) an emergency medical technician shall be in the patient compartment. St. Vincent's Health is requesting a waiver of the staffing requirement while transporting at the paramedic level. St. Vincent's is a specialty care transport provider offering services to neonatal and critical pediatric patients. The crew consists of an EMT driver, a registered nurse and a respiratory therapist. On occasion a physician or nurse practitioner is also onboard. Staff recommends: Approval based on previous Commission action

St. Vincent

A motion was by Commissioner Zartman to approve staff recommendation. The motion was seconded by Commissioner McCullough. Commissioner Craigin abstained. The motion was approved.

The following is requesting a waiver of Rule 2: General Requirements for paramedic provider organizations 836 IAC 2-2-1 (g) (1) (g) Each paramedic provider organization shall do the following: (1) Maintain an adequate number of trained personnel and emergency response vehicles to provide continuous, twenty-four (24) hour advanced life support services. (2) Notify the commission in writing within thirty (30) days of assigning any individual to perform the duties and responsibilities required of a paramedic. Wayne Twp FD is requesting a waiver of the 24/7 rule. They have six paramedics that are providing coverage Monday thru Friday from 8:00 am to 6:00 pm in and then at times during after-hours. Staff recommends: Approval for 1 year. Complete waiver tool when paramedic is unavailable.

Wayne Township Fire Department (Hamilton County)

A motion was made by Commissioner Valentine to approve staff recommendation. The motion was seconded by Commissioner Zartman. The motion was approved.

LEGISLATION UPDATE

Mr. Kraig Kinney, IDHS Legal, provided an update on the completed 2019 legislative session. First, he noted that HEA 1269 Administrative Boards did two changes for EMS. First, the Technical Advisory Committee (TAC) was removed as an administrative board as part of the Governor's plan on "efficient government." Mr. Kinney noted that he had assisted with drafting a thank you letter for all participants in the TAC over its existence and that the letter was signed by EMS Director Garvey and EMS Commission Chairperson Lee Turpen and mailed out. A copy of the letter was in the Commission packet. The second part of HEA 1269 was authorizing IDHS to process rule waiver request initially with an acceptance or denial as part of an administrative order and thus subject to appeal under administrative review to the EMS Commission. Dr. Brown inquired if all waivers would be heard by the Department versus any coming to the Commission. Mr. Kinney noted that the policy was still being developed by the Department, but that he believed that if the staff did not feel comfortable with a waiver or needed guidance that it would be brought to the Commission by staff.

Mr. Kinney noted that SEA 498 Mobile Integrated Health has wide reaching implications for EMS and would need a thorough consideration before rules adopted. Mr. Kinney indicated that the best route might be a Commission committee with a few commission members and staff members to make the final recommendations to the full Commission. After some discussion, the consensus of the Commission and direction of the Chairperson was that Director Garvey and the Department should put together the Committee membership and present back to the Commission.

Other legislation included:

- HEA 1063 School Safety Equipment (Stop the Bleed). Would put tourniquets in schools that agree to train at least five staff members in the program. The Department must adopt a training program. EMS professionals will be needed locally to assist with the Stop the Bleed training programs. No Commission action will be needed.
- HEA 1094 Ambulance Service Program Membership. Allows ambulance service to offer subscription plans for an extended period greater than the current one year. No Commission action will be needed.
- HEA 1275 Sepsis. Creates a study commission to review sepsis and how to prevent it. There is one position that is allocated for an EMT. The Department was not consulted or they would have recommended the State EMS Director. Likely, the Department will advocate for an EMT- paramedic due to the paramedic having better tools to combat sepsis. No Commission action will be needed.
- HEA 1342 Telephone CPR Instruction. Requires public service answering points (PSAP) or dispatch centers that
 are not EMD certified to train their staff in performance of telephone CPR. IDHS is tasked with developing and
 implementing the program. No Commission action is currently needed but staff could bring items for consideration of
 approval.
- SEA 333 Body Cavity Searches. Allows body cavity searches by licensed healthcare providers. However, it is only
 if the body cavity searches are in the scope of practice and it is not part of the EMS scope of practice. No
 Commission action will be needed.
- SEA 359 Mental Health Plans. Permits mental health professionals to create a safety plan for high-risk patients that
 includes guidance on how to handle suicide threats such as what the individual has to live for. The bill would permit
 release of the plans to a licensed paramedic. Initially, it was limited to a "mental health community paramedic" but
 IDHS was able to push for the more inclusive language. No Commission action will be needed.
- SEA 480 Medicaid Non-Emergency Medical Transport. This was the success for the IEMSA organization and creates an oversight body for the state contract for non-emergency Medicaid transports. No Commission action will be needed.

Mr. Kinney used this segment to present on a federal legislative initiative regarding narcotics. He indicated that the 1970 Controlled Substances Act was written at the time EMS was forming and thus EMS was not included. Most EMS providers have arrangements to obtain controlled substances via their supervising hospital or medical director. The Protecting Patient Access to Emergency Medications Act of 2017 would require individual EMS provider organizations to obtain their own DEA license to utilize narcotics. On the Federal level, rules are still being developed and in the comment period. Before an organization can obtain a DEA license, the organization must have an Indiana Controlled Substance Registration (CSR) through the Board of Pharmacy. Currently, 856 IAC 2-3-4© makes provider organizations exempt from a CSR if they are obtaining controlled substances through a supervising hospital that has a valid CSR. Mr. Kinney noted that he, Dr. Kaufmann, Director Garvey and Robin Stump had met with the professional icensing board previously to begin discussions on the matter and, at the request of Dr. Kaufmann, Mr. Kinney addressed the Board of Pharmcy on May 13, 2019, to ask that they expedite the CSR process for EMS provider organizations as the DEA has indicated to Dr. Kaufmann that they would issue a DEA license if the organization has a state CSR.

NEW BUSINESS

a. Animal Treatment and Transport

Mr. Kinney indicated that IDHS has received a request for a waiver to provide emergency care of law enforcement animals. He indicated that he had previously researched the issue and stood by his memo of July 27, 2018, of which a copy was in the Commission packet. The current usage seems to be for law enforcement animal treatment but also for fire scenes where animals are treated with oxygen, often with masks donated to the fire departments. Mr. Kinney said that EMS was created to address prehospital care of "people" and that did not include animals. He noted that the EMS scope of practice does not include animal care and there is no training on animal care in the EMS curricula. Mr. Kinney noted that he had concerns that an EMS individual that provides animal care could be violating the Board of Veterinary Medical Examiners oversight in this area. He indicated that IC 25-37.1-3-1 does allow for licensed professionals provide assistance to licensed veterinarians so if a local veterinarian did provide oversight for animal care, it could be exempt from that law. Mr. Kinney noted that the staff still felt that animal care would be outside the scope of practice for an EMS professional and thus the Commission might not be able to issue a waiver. He noted that he had contacted the director for the Vet Board a few times but had not response. A few Commission members noted that ancillary treatment of animals happens in EMS frequently, generally seems to have a positive outcome and is good public relations. The Commission elected to table the matter to see if guidance from the Vet Board could be obtained.

b. Human Trafficking education

Ms. Jana Szostek and Dr. Gopal presented information on human trafficking education and the importance of the education. Some discussion followed the presentation. The Commission recommended that Ms Szostek work with the PI working group and other organizations to put the training together then come back to the Commission with the final product.

Request for pilot study for AEMT level
 Ms. Melissa Segal presented the proposed pilot study to the Commission members. Some discussion followed.

A motion was made by Commissioner Zartman to deny the request for the pilot study at this time. Commissioner Zartman recommended that Ms. Segal bring the request back to the Commission at the time when the Commission discusses scope of practice at a future meeting. The motion was seconded by Commissioner Mackey. The motion to deny was approved.

OLD BUSINESS

- a. Tabled Business and/or waivers
- b. Current ongoing studies
 - CPAP use at the BLS level –
 Mr. Chris McFarland reported that the pilot study is moving forward. They have BLS agencies in the study currently. The
 CPAP has been used by BLS about a dozen times. One patient was not admitted to the hospital after arrival but the rest
 of the patients were admitted to the hospital.

ASSIGNMENTS

- a. Past Assignments
 - i. All past assignments have been completed and reported.
- b. Today's Assignments
 - i. No new assignments made at this meeting

ADMINISTRATIVE PROCEEDINGS

A. Personnel Orders

- a. 1 Year probation
 - i. Order Number 0006-2019 Boothe, James Clifford No action required. None taken.
 - ii. Order Number 0007-2019 Nichols, Jeremy A. No action required. None taken
- b. 2 Year Probation
 - i. Order Number 0005-2019 Samuel, Nick D. No action required. None taken
- c. Revocation
 - i. <u>Order Number 0003-2019 Burgess, Norman Jr.</u> No action required. None taken.
- B. Training Institution Order
 - a. Proposed Sanctions

No action required. None taken.

- C. Non Final Orders
 - a. Ontiveros, J.

A motion was made by Commissioner Mackey to affirm the non –final order. The motion was seconded by Commissioner Zartman and Commissioner Valentine. The motion was approved.

Commissioner Ryan left at 11:51am

STAFF REPORTS

- A. Data Report Ms. Robin Stump announced that facility codes went out to vendors. She also reported that we have 97% of agencies reporting and 11 agencies not reporting.
- B. Operations Report Ms. Robin Stump asked for volunteers to put moulage on patients for a state level exercise. Ms. Stump also reported the Stop the Bleed day was coming up on June 23rd. Ms. Stump encouraged everyone to get involved with their districts Health Care Collisions. Ms. Stump announced that Mr. Tony Pagano's knee surgery went well.
- C. Compliance Report- Mrs. Candice Pope announced that Ms. Lauren Dresen has left the agency to take a position with a different state agency. Mrs. Pope also reported the following:
 - 1. 133 violation letters sent since the last report in November
 - 2. 2 audit letters sent since the last November
 - 3. 269 testing letters sent since the last November
 - 4. 291 failed letters for EMR remediation and EMT/EMR practical exams

Administrative Order numbers since the last report in November:

- ii. 20 probation orders
- iii. 15 revoked
- iv. 5 suspended
- v. 372 people that are under review
- vi. 91 people are pending audit

- B) Certifications report (see attachment #1)
 - a. Personnel report No report included
 - b. Provider report no action required. None taken
- C) Training Report (see attachment #2) No action required. None taken

STATE EMS DIRECTORS REPORT – Director Michael Garvey thanked all the organizations that are reporting their data. Director Garvey also thanked the hospital association for funding the purchase of stop the bleed kits for schools beginning on July 1st. Director Garvey announced that IDHS is working with the Fire Chiefs to get the Patient safety survey out and also working with them to develop training. IDHS is working on a naloxone sustainability program with FSSA. For Medicaid patients the service will be reimbursed \$40.00 per administration.

STATE MEDICAL DIRECTORS REPORT – (see attachment #3) Dr. Michael Kaufmann was not in attendance but his report was included in the packet.

<u>CHAIRMAN'S REPORT AND DIRECTION-</u> Chairman Turpen reminded everyone that the IERC conference is coming up, IEMSA's conference is coming up, the Terre Haute trauma conference is coming up these are all good places to get continuing education hours as well as good information. Chairman Turpen talked about the fatigue matrix that NASEMSO is putting out for use to assess your own provider organization and how well they are dealing with fatigue issues.

NEXT MEETING

July 18, 2019 10:00am at Zionsville Town Hall 1100 W. Oak St. Zionsville, IN 46077

ADJOURNMENT

A motion was made by Commissioner Valentine to adjourn the meeting. The motion was seconded by Commissioner Zartman. The meeting was adjourned at 12:22pm.

Approved

G Lee Turpen, Chairman

Attachment #1

Emergency Medical Services Provider Certification Report

Date: May 8, 2019

May 16, 2019

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 May 16, 2019 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 2
Rescue Squad Organization	
Basic Life Support Non-Transport	493
Ambulance Service Provider	98
EMT Basic-Advanced Organization	7
EMT Basic-Advanced Organization non-transport	1
EMT Intermediate Organization	10
EMT Intermediate Organization non-transport	0
Paramedic Organization	198
Paramedic Organization non-transport	13
Rotorcraft Air Ambulance	14
Fixed Wing Air Ambulance	3
Total Co	ount: 839

New Providers Since 14-MAR-19

ATTACHMENT #2

May 2019 EMS Statistics

NREMT pass rates are enclosed in this report. These statistics are for courses ending between May 1, 2018 and May 1, 2019. The EMT courses are broken down into four separate categories. The top category represents those training institutions whose graduates' average at least 70% after the third attempt which is the standard set by the Commission. The programs in the next category (60% -70%) are near meeting the standard set by the Commission and those in the bottom two categories are below standard. In the last two categories there were 159 graduates of EMT courses who did not get certified.

Solutions are being sought both from the Primary Instructor Working Group and EMS staff. Staff is meeting with instructors and training institution officials, our mentoring program is continuing and the Primary Instructor Working Group is sponsoring three workshops from the Platinum Educational Group on June 12, 13 and 14 in Scottsburg, Indianapolis, and South Bend.

National Registry Pass Rates, Courses Ending May 1, 2018 to May 1, 2019

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National Registry Pass Rates, Courses Ending May 1, 2016 to May 1, 2019

	Level of Certification	[nitial	3d Attempt	6th Attempt	Total Attempts
	EMT	%69	81%	81%	250,010
	EMT	26%	%89	%69 %	3109
7	Adv FMT	28%	73%	75%	15,554
•		7007	61%	64%	277
₹	Adv EM I	4.970	2	•	11 0
U.	Paramedic	73%	87%	868	31,430
Ċ Ğ.	Paramedic	65%	81%.	86%	622
-					

National Registry Pass Rates, Courses Ending January 1 to May 1, 2019

Total Attempts	147		
6 th Attempt	76%	2	(112)
3d Attempt		46%	. (112)
i i		71%	(104)
•	Level of Certification	Ļ	

Dyoursm Namo	Program Code	Attempt First Att Cumulativ First Pass %	t Att Cum	ulativ First F		Third Pass %	Total Pass %	
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Fort Wavne Fire Department	IN-5955	21	21	21	700%	100%	9	%
Ottan Crask Bre Emarpancy Education	M/N/5929	9	8	0	100%	600T		%00
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Noblesville Fire Dept	IN-6086		· 100		2000			% 00 00
Parkview Regional Wedical Center	1N-5296	9	Carlo American	o i	P. 90		1994年	₹# è
City of Fishers Fire and Rescue	IN-5953	9	2) () () () () () () () () () (S CO
Ivy Tech Community College Marlon	- 1N= 6109	2			20%	00		% O
Clav Fire Territory	IN-4756	12	11	T.	92%	626		%:
St Mary Medical Center/Hobart	**************************************	67	1.6		83%			81%
Hands on Instruction L.C.	IN-6017	27	œ	o,	80%		0)	% 0
Memorial Hospital South Bend		87	17	-16	61%			% 9
Dirke Memorial Hospital	N-4912	S	_	 	88%			% 80 80
Wicksich Haaffligeroupes	F/N-4083	4.0	Te	36				88%
Ivy Tech Community College-Kokomo	IN-4362	14	5	12	36%			%
Franciscan Indianapolis Hospital		38	26	32	%89			**
Jennings County EMS Training Institution	IN-5887	7	3	9	43%			%98 80
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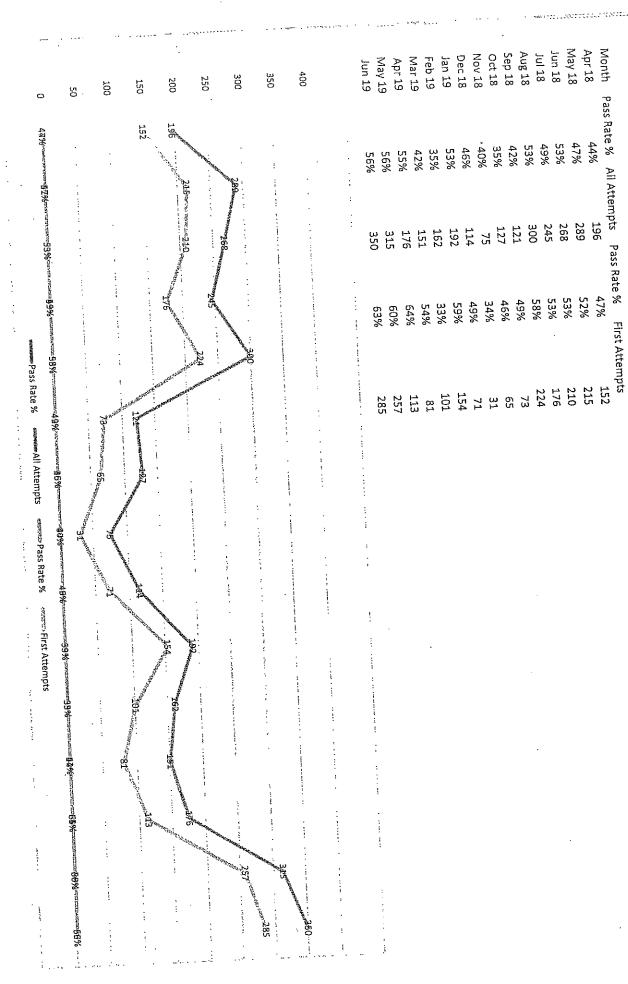
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Paramedic pass rates are for two years since most course are between 18 and 24 months. The EMT courses are broken down into NREMT pass rates are enclosed in this report. These statistics are for courses ending between July 1, 2018 and July 1, 2019. first attempt which is the standard set by the Commission. The programs in the next category (60% -70%) are near meeting the four separate categories. The top category represents those training institutions whose graduates' average at least 70% after the standard set by the Commission and those in the bottom two categories are below standard. There were **344** graduates of EMT

courses who have tested, but did not get certified and are still eligible to test Our National Registry statistics are improving. In June of 2018 there were 210 first time attempts at the basic exam with a 53% pass

rates above 60%. The attached graph show pass rates and numbers tested since April of 2018. rate. June 2019 saw 285 attempts at the exam with a 63% first time pass rate. April, May and June were the first months with pass





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