



**EMERGENCY MEDICAL SERVICES
COMMISSION MEETING MINUTES**

DATE: January 17, 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)
Darin Hoggatt	(Paramedics)
Thomas A Lardaro	(Air Medical Services)
John P. Ryan	(General Public)
Andrew Bowman	(RN)
Charles Valentine	(Municipal Fire)
John Brown	(Director of Preparedness and Training)
Terri Hamilton	(Volunteer EMS)
Melanie Jane Craigin	(Hospital EMS)
Stephen Champion	(Medical Doctor)

OTHERS PRESENT: Kraig Kinney, Dr. Michael Kaufmann (State EMS Medical Director), Field Staff, Robin Stump, Tony Pagano, Candice Pope, and members of the EMS Community.

AM Session

CALL TO ORDER AND ROLL CALL

Meeting called to order at 10:00am by Chairman Lee Turpen. Mrs. Candice Pope called roll and announced quorum. Everyone stood for the Pledge of Allegiance. Commissioner Valentine joined the meeting at 10:25am.

ADOPTION OF MINUTES

a. Adoption of minutes from the November 15, 2018 session.

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

INDIANA DEPARTMENT OF HEALTH

Mr. Murray Lowery reported that the date has been set for the 2019 Medical Directors Conference for April 16, 2019. The Stroke Center listings are now on the Health Departments website.

EMS FOR CHILDREN

Ms. Margo Knefelkamp reported that IEMSC has officially launched their Indiana Pediatric Emergency Recognition program in November. Year one 5 Emergency Departments will be recognized as pediatric ready or advanced pediatric. The PECC learning collaborative has been launched. More information will be shared as it is available. The Pediatric award nominations are being accepted.

INDIANA EMERGENCY MEDICAL SERVICES ASSOCIATION (IEMSA)

Mr. Nathaniel Metz reported out regarding the December conference. 132 certifications were given after the conference. The association has garnered the help of a legislation lobbyist. Meetings will be held on the 4th Friday of every even month.

INDIANA FIRE CHIEFS ASSOCIATION

Mr. Douglas Randall the co – chair of the EMS Section reported that Mr. Kraig Kinney updated the association on the rule updates. Dr. Kaufmann presented upcoming initiatives and events to the association. Their next meeting is on February 14th.

EMS EDUCATION WORKING GROUP

Mr. Jeff Quinn reported the Mr. Kraig Kinney presented the rule updates to the working group. Their meetings for 2019 are as follows

February 20 – Ivy Tech

April 11 – FDIC

June 19 – Ivy Tech

September – IERC before the EMS Commission meeting

November 20 – Ivy Tech

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. Clift, Donald J. Jr.
- ii. Esslinger, Patricia A.
- iii. Graham, Michael D.
- iv. ONeal, Christopher
- v. Sargent, Timothy B.
- vi. Shultz, Jerry T III
- vii. Thiele, Megan
- viii. Wesley, Kevin M.
- ix. Woods, Tyler

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

The following requested 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. Standard policy for testing for EMT and EMR has been 3 testing attempts total. The same is true for Primary Instructor candidates. The student would take the first two attempts than complete remediation and take third and final attempt. If not successful after the third attempt the student is required to retake an entire course before he/she could test again. The primary instructor test bank is a limited one. Mr. Cooper has had 3 attempts on the written examination without success. The normal and recommended procedure would be to repeat a Primary Instructor course before being able to attempt the examination again. Brandon Cooper has taken the exam three times: 8/22/2018 – 65%; 10/05/2018 – 73%; and 10/12/2018 – 77% He is requesting a 4th attempt at the exam. Staff recommends: Denial.

Brandon L. Cooper

A motion was made by Commissioner Zartman to deny the waiver. The motion was seconded by Commissioner Champion. The motion was approved; the waiver was denied.

PROVIDER WAIVER REQUESTS

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. Eaton EMTs are requesting a renewal for their waiver of the 24/7 rule. They have one paramedic and a few more interested. They run BLS when there is no paramedic available and call Delaware County EMS for ALS. Staff recommends: This waiver was originally granted at the March 2018 meeting for 6 months. Granted again on July 19, 2018 for 6 months

Eaton EMTs

A motion was made by Commissioner Mackey to approve the waiver for 6 months. The motion was seconded by Commissioner S. Brown. The motion was approved.

The following is requesting a waiver of 836 IAC 2-2-1 General requirements for paramedic provider organizations (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. Batesville Fire and EMS are requesting a waiver of the 24/7 rule to maintain an adequate number of trained personnel at the paramedic level. The department currently has 12 paramedics, 2 AEMTs. They have implemented raises and schedule changes to aid in the coverage of ALS. Staff recommends: Approval due to being a renewal and showing effort to fix the issue.

Batesville Fire/EMS

A motion was made by Commissioner Mackey to approve the waiver for 2 years. The motion died with no second. After some discussion. A motion was made by Commissioner Champion to approve for 1 year. The motion was seconded by Commissioner Hoggatt. The motion was approved.

The following is requesting a waiver of 836 IAC 2-14-3 Advanced life support non-transport vehicle specifications (3) Each advanced life support non-transport vehicle shall have an audible backup warning device that is activated when the advanced life support non-transport vehicle is shifted into reverse. (1) Warning lights of red or red and white, at the discretion of the owner, and shall conform with Indiana law. All lights on vehicle shall be in working condition. Jasper County SWAT is requesting a waiver of their ALS non-transport vehicle to not require the back-up alarm. This vehicle is used during SWAT calls and needs to be discrete while on scene. They are also requesting a waiver to allow blue lights on the vehicle as it is a police vehicle. Staff recommends: Approval based on previous Commission action.

Jasper County SWAT

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

The following is requesting a waiver of 836 IAC 2-7.2-1 General requirements for emergency medical technician-intermediate provider organizations 836 IAC 2-7.2-1 (f) (2) (f) The emergency medical technician-intermediate provider organization shall do the following: (1) Maintain a communications system that shall be available twenty-four (24) hours a day between the emergency medical technician-intermediate provider organization and the emergency department, or equivalent, of the supervising hospital using UHF (ultrahigh frequency) and cellular voice communications. The communications system shall be licensed by the Federal Communications Commission. (2) Maintain an adequate number of trained personnel and emergency response vehicles to provide continuous, twenty-four (24) hour advanced life support services. Southern Ripley County is requesting a renewal of waiver for 24/7 coverage at the ADV EMT level. Granted March 2018 for 2 years.

Southern Ripley County Emergency (Rescue 69) cert #0823

A motion was made by Commissioner Zartman to approve the waiver for one (1) year. The motion was seconded by Commissioner Lardaro. The motion was approved.

PROVIDER WAIVER REPORT

A waiver report was submitted by the following:

- a. Batesville Fire/EMS
- b. Eaton EMTs
- c. Pike County EMS
- d. Spencer Co. EMS

No action required none taken.

2018 NATIONAL SCOPE OF PRACTICE MODEL

Dr. Michael Kaufmann presented the 2018 National EMS Scope of Practice Model to the Commission. After lengthy discussion regarding what is included in some levels of the Scope of Practice and what is excluded followed Dr. Kaufmann's presentation.

A motion was made by Commissioner Mackey to approve the 2018 Scope of practice with the staff recommended additions/extensions. The motion was seconded by Commissioner Valentine. The vote was taken 9 in favor 4 against the motion was approved. Chairman Turpen requested that the Scope of Practice be added to the March meeting agenda for further discussion. More discussion followed. [Note: This vote was reconsidered at a later point during this meeting and the decision to adopt the Scope of Practice was tabled until the March meeting.]

LEGISLATION UPDATE

Mr. Kraig Kinney gave an update on current legislation:

HB1063. School Safety <http://iga.in.gov/legislative/2019/bills/house/1063#digest-heading>

Adds definition of a "bleeding control kit". Provides that, subject to an appropriation by the general assembly, each school corporation and charter school shall develop and implement a Stop the Bleed program (program). Provides that the department of education in collaboration with the department of homeland security shall develop and provide training for the use of bleeding control kits. Provides that, in all matters relating to the program, school corporation or charter school personnel are immune from civil liability for any act done or omitted in the use of a bleeding control kit unless the action constitutes gross negligence or willful or wanton misconduct. Requires a school's safety plan to include the location of bleeding control kits.

Status: *Passed Committee.*

HB 1069 Yellow dot emergency medical information program

<http://iga.in.gov/legislative/2019/bills/house/1069>

Establishes the yellow dot emergency medical information program (program). Specifies that the purpose of the program is to provide certain medical information to emergency medical services providers (providers). Provides that participation in the program is voluntary, and allows program participants to end participation in the program at any time. Requires motorists participating in the program to affix a yellow dot decal to the lower right interior corner of a participating automobile's driver side window. Requires a: (1) yellow dot program envelope (envelope); and (2) yellow dot information card (card); to be stored in the glove compartment of a participating automobile. Requires a provider to search the glove compartment of an automobile displaying a yellow dot decal. Provides that a provider may not: (1) search for contraband; or (2) search any location other than the glove compartment of a participating automobile; when searching for an envelope or card. Provides that contraband found during a provider's authorized search of a participating automobile's glove compartment may be: (1) reported to a law enforcement officer; or (2) confiscated by a law enforcement officer; if the provider was not acting under the direction of the law enforcement officer at the time of the search, or a law enforcement officer was not conducting a criminal investigation at the time of the search. Specifies that information contained on a card may be used to do any of the following: (1) Positively identify program participants. (2) Evaluate program participants for medical conditions that may impede or prevent communication with a provider. (3) Attempt contact with a program participant's emergency contact persons. (4) Evaluate a program participant's current medication, preexisting medical conditions, and recent surgeries when administering emergency medical treatment. (5) Share the information displayed on a card with another provider for the purpose of ensuring proper medical treatment. Provides that: (1) the bureau of motor vehicles; and (2) providers; are not liable for damages, including punitive damages, caused by any act, error, or omission related to the information displayed on a card or related to the storage of a card. Provides that a provider is not liable for any damages, including punitive damages, related to a provider's inability to establish contact with a program participant's emergency contact persons.

Status: Third Reading Passed.

HB 1269 Boards. <http://iga.in.gov/legislative/2019/bills/house/1269#digest-heading>

Many provisions but EMS affected would be that the bill substitutes the Indiana Department of Homeland Security in place of the EMS Commission as the unit that grants waivers to the EMS rules. Adds a provision that "the Commission is the ultimate authority for orders issued under this section" so there would be an appeal right to waiver reviews by the department.

Status: Referred to House Select Committee on Government Oversight

SB 24 OWI and Public Safety Officials. <http://iga.in.gov/legislative/2019/bills/senate/24>

Makes operating while intoxicated a Level 6 felony if the operator causes bodily injury to a public safety official or property damage to an authorized emergency vehicle.

Status: Referred to Corrections and Criminal Law Committee

SB 202 POST. <http://iga.in.gov/legislative/2019/bills/senate/202>

Requires that a health provider assess an individual's mental health before the individual may execute a physician order for scope of treatment (POST) form. Removes artificially administered nutrition from inclusion in the POST form. Requires that there is space at the top of the POST form to indicate whether an individual has designated a health care representative.

Status: Referred to Committee on Health and Provider Services

SB 498 Mobile Integrated Healthcare <http://iga.in.gov/legislative/2019/bills/senate/498>

Requires the office of the secretary of family and social services to reimburse certain emergency medical services provider agencies for covered services provided to a Medicaid recipient as part of a mobile integration healthcare program. Amends the definition of "emergency medical services" to include transportation services, acute care, chronic condition services, or disease management services as part of a mobile integration healthcare program. Requires the emergency medical services commission (commission), in consultation with the state department of health, to develop a mobile integration healthcare program and approve mobile integration healthcare program applications. Sets forth requirements of the commission concerning the mobile integration healthcare program. Requires the commission to establish and administer a mobile integration healthcare grant and establishes the mobile integration healthcare grant fund. Continuously appropriates money in the fund.

Status: Referred to Committee on Appropriations

SB510 EMS Personnel Licensure Interstate Compact

<http://iga.in.gov/legislative/2019/bills/senate/510>

Implements the emergency medical services personnel licensure interstate compact.

Status: Referred to Committee on Health and Provider Services

SB 531 EMT seizure of drugs and paraphernalia <http://iga.in.gov/legislative/2019/bills/senate/531>

Requires the Indiana emergency medical services commission, after consultation with the state police department, to adopt a protocol concerning the seizure, transportation, and temporary storage of illegal controlled substances and drug paraphernalia. Authorizes an emergency medical services provider who has administered an overdose intervention drug to a patient to seize illegal controlled substances and drug paraphernalia that the provider observes in plain view. Provides immunity to the provider for acts or omissions occurring in connection with the seizure, transportation, and storage of illegal controlled substances and drug paraphernalia.

Status: Referred to Committee on Health and Provider Services

The Commission asked Mr. Kinney to provide them the legislation update in writing for them to review later.

OLD BUSINESS

a. NEMSIS update

Mr. Kinney reported to the Commission that there was no public comment during the public hearing. A brief discussion regarding the update followed.

A motion was made by Commissioner Valentine to approve the NEMSIS update as written. The motion was seconded by Commissioner Mackey. The motion was approved.

b. Tabled Business and/or waivers

1. The waiver from Michael Leonard was reviewed and additional information was given by Ms. Candice Pope. The following is requesting a waiver of 836 IAC 4-9-4 Application for certification; renewal Authority: IC 16-31-2-7; IC 16-31-3-14; IC 16-31-3-14.5; IC 16-31-3-20 Affected: IC 16-31-3 Sec. 4. (a) Application for certification as a paramedic shall be made on forms provided by the agency. An applicant shall: (1) complete the required forms; and (2) submit the forms to the agency. (b) All applicants for original certification shall provide evidence of compliance with the requirements for certification. (c) Certification as a paramedic shall be valid for two (2) years. (d) Individuals who have failed to comply with the continuing education requirements shall not exercise any of the rights and privileges nor administer advanced life support services to emergency patients. (e) If a properly completed renewal application is submitted within one hundred twenty (120) calendar days after the expiration of the certification, together with the required documentation to show that the applicant has completed all required continuing education within the two (2) years prior to the expiration of the certification, and a fifty dollar (\$50) reapplication fee, the certification will be reinstated on the date that the commission staff determines that the required application, documentation, and reapplication fee have been properly submitted. The expiration date will be two (2) years from the expiration of the previous, expired certification. (f) An individual wanting to reacquire a certification shall complete a paramedic recertification training course and successful completion of state written and practical skills examinations as set forth and approved by the commission. If the individual fails the certification examinations, the person shall retake an entire paramedic training course. Mr Leonard only has about 6 hours of audit and review and 8-10 hours of general continuing education. He is going to be completing PALS, ACLS, PALS, and PHTLS while he is still off work.

Michael Leonard

A motion was made by Commissioner Zartman to deny the waiver. The motion was seconded by Commissioner Bowman. The motion to deny was approved.

1. The waiver from Thomas Stachowiak was reviewed and additional information was given by Ms. Candice Pope. The following is requesting a waiver of 836 IAC 4-9-4 Application for certification; renewal Authority: IC 16-31-2-7; IC 16-31-3-14; IC 16-31-3-14.5; IC 16-31-3-20 Affected: IC 16-31-3 Sec. 4. (a) Application for certification as a paramedic shall be made on forms provided by the agency. An applicant shall: (1) complete the required forms; and (2) submit the forms to the agency. (b) All applicants for original certification shall provide evidence of compliance with the requirements for certification. (c) Certification as a paramedic shall be valid for two (2) years. (d) Individuals who have failed to comply with the continuing education requirements shall not exercise any of the rights and privileges nor administer advanced life support services to emergency patients. (e) If a properly completed renewal application is submitted within one hundred twenty (120) calendar days after the expiration of the certification, together with the required documentation to show that the applicant has completed all required continuing education within the two (2) years prior to the expiration of the certification, and a fifty dollar (\$50) reapplication fee, the certification will be reinstated on the date that the commission staff determines that the required application, documentation, and reapplication fee have been properly submitted. The expiration date will be two (2) years from the expiration of the previous, expired certification. (f) An individual wanting to reacquire a certification shall complete a paramedic recertification training course and successful completion of state written and practical skills examinations as set forth and approved by the commission. If the individual fails the certification examinations, the person shall retake an entire paramedic training course. Mr. Stachowiak is requesting a one year extension to complete his continuing education.

Thomas S. Stachowiak

The waiver was withdrawn due to Mr. Stachowiak retesting.

- c. Current ongoing studies
 1. CPAP use at the BLS level –

Mr. Chris McFarland reported that they have trained 200 people and that CPAP has been used 12 times in the field by EMTs. Discussion followed.

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. Agreement of Parties – 2 Year Probation
 - i. Worley, Cole Joseph (Bennett)
No action required. None taken.
 - b. 2 Year Probation
 - i. Order Number 0040-2018 Hendershot, Daryn E.
No action required. None taken

STAFF REPORTS

- A. Data Report –Mrs. Stump reported that we are currently at 94% reporting in ImageTrend. There are currently 17 providers not reporting. The agency has received 712,750 run reports. Mrs. Stump reported that NEMSIS is updated and on the current version.
- B. Operations Report – Ms. Robin Stump reported that a space for the PECC is now on the provider organization application. Ms. Stump requested that if people are going to hand write the information in the blanks on the application to please write legibly. Ms. Stump spoke briefly about Mr. Mikel Fort's trip to Oregon to attend suicide prevention training. The state will be offering the trainings soon. Ms. Stump reminded everyone to make sure they are leaving a run report at the hospital. Ms. Stump also announced that the agency is working on getting personnel rosters into Acadis.
- C. Compliance Report- Mrs. Candice Pope briefly discussed what information needs to be submitted for an audit.
- D. Certifications report – (see attachment #1)
 - a. Personnel report – no action required. None taken
 - b. Provider report – no action required. None taken
- E. Training Report – (see attachment #2) – Mr. Tony Pagano went over the report and talked about poor performing Training Institutions. Discussion followed. No action required. None taken.

STATE EMS DIRECTORS REPORT – Director Michael Garvey did not give a report at this meeting.

STATE MEDICAL DIRECTORS REPORT - Dr. Michael Kaufmann did not give a report at this meeting.

CHAIRMAN'S REPORT AND DIRECTION- Chairman Turpen gave a brief summary of the Physicians conference (NAESP) he attended recently. Chairman Turpen noted that the 2018 National Scope of Practice was discussed at the conference. Chairman Turpen encouraged those that are able to attend the EAGLES conference coming up on March 1st and 2nd.

NEXT MEETING

March 14, 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 11:42am.

Lunch Break 11:42am – 1:00pm

PM Session

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)
	Darin Hoggatt	(Paramedics)
	Thomas A Lardaro	(Air Medical Services)
	John P. Ryan	(General Public)
	Andrew Bowman	(RN)
	Charles Valentine	(Municipal Fire)
	John Brown	(Director of Preparedness and Training)
	Terri Hamilton	(Volunteer EMS)
	Melanie Jane Craigin	(Hospital EMS)
	Stephen Champion	(Medical Doctor)

OTHERS PRESENT: Kraig Kinney, Dr. Michael Kaufmann (State EMS Medical Director), 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 1:03pm by Chairman Lee Turpen. Mrs. Candice Pope called roll and announced quorum.

Discussion started regarding the Scope of Practice. Dr. Kaufmann addressed the Commission regarding the Scope of Practice.

A motion was made by Commissioner Mackey to look at delaying the implementation of the scope of practice until the next meeting. The motion was seconded by Commissioner Lardaro. After further discussion Commissioner Mackey withdrew his motion and Commissioner Lardaro withdrew his second.

A motion was made by Commissioner Mackey to reconsider the earlier vote on accepting the National Scope of Practice. The motion was seconded by Commissioner Lardaro. The motion was approved.

More discussion followed.

A motion was made by Commissioner Mackey to table the Scope of practice consideration and approval until the March EMS Commission meeting. The motion was seconded by Commissioner Zartman. The motion passed to table the scope of practice until the March meeting.

APPROVAL OF DRAFT RULE LANGUAGE

Mr. Craig Kinney clarified the process of the rule update for the Commission members. Mr. Kinney began the presentation of the proposed rule rewrite.

Mr. Kinney started going through 836 article one: Discussion was held throughout the presentation.

Rule One Definitions: the following was passed:

(18) (B) was discussed regarding the use of operator's license.

A motion was made by Commissioner Hoggatt to strike out the word "operator's" and just read "motor vehicle license". The motion was seconded by Commissioner S. Brown. The motion was approved.

Commissioner Craigin left the meeting at 2:23pm. Majority still present. Still maintained quorum.

A motion was made by Commissioner Lardaro to remove and consider 1-1-8 (m) (1) and (2) at this time and consider at a later date. The motion was seconded by Commissioner Hoggatt. The motion was approved.

Rule 2 Certification of Ambulance Service Providers: the following was passed:

Mr. Kinney went through rule 2. Discussion was held throughout the presentation.

1-1-6 (11)

A motion was made by Commissioner Valentine to add to 1-1-6 (11) and take off the 3 months at the end of (11). The motion was seconded by Commissioner Lardaro. The motion was approved.

1-2-3 (5) was discussed

A motion was made by Commissioner Mackey to remove "not a timed infusion device" from 1-2-3 (5). The motion was seconded by Commissioner S. Brown. The motion was approved.

Chairman Turpen called for a break at 3:15pm

Chairman Turpen called the meeting back to order at 3:33pm

Rule 2.3 General Transportation Requirements. Discussion was held throughout the presentation.

1-2.3-2 (a)

A motion was made by Commissioner Lardaro to add "in good faith and with reason and in consideration of" (b). The motion was seconded by Commissioner Zartman. The motion was approved.

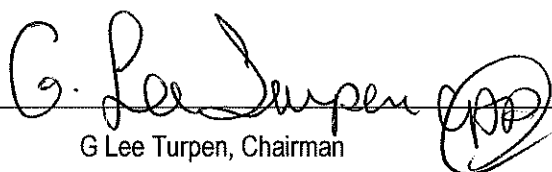
A motion was made by Commissioner Zartman to stop the meeting and continue the rule rewrite review in a special session in February. The motion was seconded by Commissioner Bowman. The motion was approved.

This meeting stopped after discussion of 836 1-2.3-3 Patient transfer to a receiving facility.

The February special meeting to discuss the draft rules only was set for the 12th with a start time of 9:30am.

ADJOURNMENT

A motion was made by Commissioner Hamilton to adjourn the meeting. The motion was seconded by Commissioner Bowman. The meeting was adjourned at 3:55pm.

Approved 
G Lee Turpen, Chairman

Attachment #1

Emergency Medical Services Provider Certification Report

Date : January 7, 2019

January 17, 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 **January 17, 2019** Commission meeting, the following report of agencies who have meet the requirements for certification as Emergency Medical Service Providers and their vehicles.

<u>Provider Level</u>	<u>Counts</u>
Rescue Squad Organization	3
Basic Life Support Non-Transport	482
Ambulance Service Provider	99
EMT Basic-Advanced Organization	7
EMT Basic-Advanced Organization non-transport	2
EMT Intermediate Organization	9
EMT Intermediate Organization non-transport	0
Paramedic Organization	198
Paramedic Organization non-transport	12
Rotorcraft Air Ambulance	14
Fixed Wing Air Ambulance	3

Total Count: 829

New Providers Since 15-NOV-18

CRAWFORD COUNTY AMBULANCE SERVICE

**Paramedic Certification:
01/03/2019**

**Emergency Medical Services
Provider Certification Report**

Date : January 7, 2019

January 17, 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 **January 17, 2019** Commission meeting, the following report of agencies who have meet the requirements for certification as Emergency Medical Service Providers and their vehicles.

Reid Hospital and Health Care Services, Inc.	Basic Certification: 12/28/2018
Reid Hospital and Health Care Services, Inc.	Paramedic Certification: 12/28/2018
SUGAR CREEK TWP FIRE DEPARTMENT	Advanced Certification: 11/19/2018

ATTACHMENT

#2

January-2019 EMS Statistics

Statistics for 2018 are enclosed in this report. These statistics are for courses starting on January 1, 2018 or after and ending by December 31, 2018. The EMT courses are broken down into three separate categories with the number of fails written at the bottom of each page. These fails represent people whom the training institutions have passed, but did not pass the cognitive certification examination. There are a total of 376 individuals who did not pass the examination. Most of the individuals still have some eligibility remaining as they have two years from course completion to become certified.

National Registry Pass Rates, January 1, 2018 to January 1, 2019

National or State	Level of Certification	Initial	3d Attempt	6th Attempt	Total Attempts
National	EMT	72%	80%	80%	62,943
State	EMT	55%	67%	68%	1192
National	Adv EMT	62%	72%	73%	4194
State	Adv EMT	47%	62%	62%	45
National	Paramedic	76%	86%	87%	9743
State	Paramedic	67%	77%	79%	167

National Registry Pass Rates, January 1, 2016 to January 1, 2019

National or State	Level of Certification	Initial	3d Attempt	6th Attempt	Total Attempts
National	EMT	69%	81%	81%	216,963
State	EMT	56%	68%	69%	2727
National	Adv EMT	58%	72%	75%	14,930
State	Adv EMT	48%	60%	62%	262
National	Paramedic	73%	86%	88%	30,122
State	Paramedic	66%	80%	85%	567

National Registry Pass Rates, July 1, 2018 to January 1, 2019

Level of Certification	Initial	3d Attempt	6 th Attempt	Total Attempts
EMT	63% (161)	74% (189)	74% (189)	254

EMT

46
FAILS

Program Name	Program Code	Attempts	First Att	Cumulativ First Pass %	Third Pass %	Total Pass %
Memorial Hospital Jasper	IN-5271	3	3	100%	100%	100%
Porter Health System	IN-4075	3	3	100%	100%	100%
Fort Wayne Fire Department	IN-5955	13	13	100%	100%	100%
Otter Creek Fire Emergency Education	IN-5929	6	6	100%	100%	100%
Richmond Fire Department	IN-5707	1	1	100%	100%	100%
Crawfordsville Fire Department	IN-5990	1	1	100%	100%	100%
St Mary's Medical Center Evansville	IN-4096	4	4	100%	100%	100%
Vincennes University Jasper Center	IN-4478	2	2	100%	98%	98%
Indianapolis Fire Department	IN-5751	56	46	82%	92%	92%
Franciscan St. Margaret Health EMS Acade	IN-5267	12	10	83%	87%	87%
Community Health Network EMS	IN-4063	15	13	87%	85%	85%
Pelham Training	IN-4668	87	61	70%	70%	88%
Parkview Regional Medical Center	IN-5296	8	6	75%	71%	86%
Elkhart General Hospital	IN-4067	7	5	71%	62%	86%
Memorial Hospital South Bend	IN-4157	21	13	62%	71%	82%
Wishard Health Services	IN-4083	45	32	71%	63%	83%
Jennings County EMS Training Institution	IN-5887	5	3	60%	79%	80%
St Francis Hospital	IN-4080	30	22	73%	63%	81%
Clay Fire Territory	IN-4756	16	10	63%	53%	80%
Hendricks Regional Health	IN-4380	15	8	53%	60%	100%
Ivy Tech Community College Marion	IN-6109	1	0	0%	45%	82%
Ivy Tech Community College Kokomo	IN-4362	11	5	45%	60%	80%
Hanus Instruction LLC	IN-6017	5	3	60%		

DeKalb Memorial Hospital	IN-4446	14	8	11	57%	79%	79%
IU Arnett Hospital EMS Program	IN-5936	4	3	3	75%	75%	75%
Indiana University	IN-4495	40	25	31	63%	78%	78%
St Vincent Hospital	IN-4081	47	29	36	62%	77%	77%
White County EMS Education	IN-5834	22	13	17	59%	77%	77%
St Mary Medical Center/Hobart	IN-4943	20	14	15	70%	75%	75%
Ivy Tech Community College - Bloomington	IN-4071	16	8	12	50%	75%	75%
Ivy Tech Community College Northeast	IN-4169	32	19	24	59%	75%	75%
Dukes Memorial Hospital	IN-4942	16	9	12	56%	75%	75%
Deaconess Hospital	IN-4516	22	13	16	59%	73%	73%
Parkview Whitley Hospital	IN-5023	11	7	8	64%	73%	73%
Saint Joseph Regional Med Ctr-Mishawaka	IN-5529	10	4	7	40%	70%	70%
Ripley County EMS Training Institution	IN-6145	10	5	7	50%	70%	70%
Columbus Regional Hospital	IN-4355	22	15	15	68%	68%	68%
Morgan Co EMS	IN-6193	3	2	2	67%	67%	67%
Franciscan St. Elizabeth Health	IN-4068	21	14	14	67%	67%	67%
Adams Memorial Hospital	IN-4201	6	3	4	50%	67%	67%
Parkview Huntington Hospital EMS	IN-5269	9	5	6	56%	67%	67%
RiverView Hospital	IN-4077	6	4	4	67%	67%	67%
Ivy Tech Community College-Evansville	IN-4141	29	17	19	59%	64%	64%
DePauw University	IN-4580	11	7	7	64%	64%	64%
Brownburg Fire Territory	IN-4061	22	10	14	45%	63%	63%
New Castle Career Center	IN-5718	41	20	26	49%	62%	62%
Bail Memorial Hospital	IN-4369	29	17	18	59%	62%	62%
Ivy Tech Community College-Columbus	IN-4073	5	3	4	60%	60%	60%
Central Nine Career Center	IN-5026	20	10	12	50%	60%	60%
Emergency Services Education Center	IN-4960	25	12	15	48%	60%	60%
Ivy Tech Community College Terre Haute	IN-4612	10	4	6	40%	60%	60%
St-Joseph's Regional Medical Center-Plymouth	IN-5001	5	2	3	40%	60%	60%

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FALVS

St. Vincent Anderson	IN-4588	34	15	20	44%	59%
Adams Memorial Hospital	IN-4201	7	3	4	43%	57%
Howard Regional Health System	IN-5804	9	5	5	56%	56%
Franciscan Saint Anthony Health-Crown Point	IN-4079	18	22	27	46%	56%
Hancock Regional Hospital	IN-4577	4	2	2	50%	50%
Ivy Tech Community College-Sellersburg	IN-4864	2	1	1	50%	50%
Community Howard Regional Health	IN-5804	8	4	4	50%	50%
Scott County EMS	IN-4078	17	7	9	41%	53%
Ivy Tech South Bend	IN-4070	12	5	6	45%	50%
Union Hosp Health Group	IN-4431	8	3	4	38%	50%
Goshen Hospital	IN-4162	14	5	7	36%	50%
Perry County Memorial Hospital	IN-4931	4	1	2	25%	50%
Parkview Health LaGrange EMS	IN-6048	23	9	11	39%	48%
Methodist Hospitals	IN-4072	19	4	6	21%	47%
Edgar County Special Serv Area Ambulance	IN-5637	9	3	4	33%	44%
Carmel Memorial Hospital	IN-4584	5	2	2	40%	40%
Blue River Career Programs	IN-5603	5	2	2	40%	40%
Elkhart Area Career Center	IN-5816	8	3	3	38%	38%
Area 30 Career Center	IN-5147	14	4	4	29%	29%
Clinton Co EMS	IN-5863	7	1	2	14%	29%
Terre Haute Regional Hospital	IN-4152	9	1	2	11%	22%
Laporte Co Career and Tech Ed	IN-5994	2	0	1	0%	50%
Riley Fire Department	IN-5965	6	0	2	0%	33%
Vincennes University	IN-4155	5	0	1	0%	20%
Greenfield Fire Territory	IN-5732	10	0	2	0%	20%
Ivy Tech Community College - Valparaiso	IN-5747	8	0	1	0%	13%
Kosciusko Community Hospital	IN-4517	4	0	0	0%	0%
South Bend Community School Corporation	IN-5974	10	0	0	0%	0%

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FAILS

ADVANCED EMT

Program Name	Program Co	Attempt	First Att	Cumuli	Cumula	Eligible	For First	Pass %	Third Pass %	Total Pass %
Fort Wayne Fire Department	IN-5955	9	7	7	7	2	2	56%	78%	78%
Memorial Hospital South Bend	IN-4157	22	11	15	15	7	7	50%	68%	68%
New Castle Career Center	IN-5718	9	3	3	3	6	6	33%	33%	33%
St. Vincent Anderson	IN-4588	6	2	3	3	3	3	33%	50%	50%

PARAMEDICS

Program Name	Program Co	Attempt	First Att	Cumul	Cumula	Eligible	For	First Pass %	Third Pass %	Total Pass %
St Vincent Hospital	N-4083	8	8	8	8	8	0	100%	100%	100%
Community Health Network EMS	N-4063	4	4	4	4	4	0	100%	100%	100%
Franciscan Health Crown Point	N-4079	1	1	1	1	1	0	100%	100%	100%
Methodist Hospitals	N-4072	4	3	4	4	4	0	75%	106%	100%
Franciscan Health Indianapolis	N-4080	13	11	11	11	11	2	85%	85%	85%
Ivy Tech Community Northeast	N-4169	40	28	33	33	7	7	70%	83%	83%
Ivy Tech Bloomington	N-4071	5	3	4	4	1	1	60%	80%	80%
Indianapolis EMS	N-4083	37	27	28	28	9	9	73%	76%	76%
Ivy Tech Community College Terre Haute	N-4612	3	2	2	2	1	1	67%	67%	67%
Hendricks Regional Health	N-4380	3	2	2	2	1	1	67%	67%	67%
Scott Co EMS	N-4078	9	6	6	6	3	3	67%	67%	67%
Goshen Health	N-4162	16	18	10	10	6	6	50%	63%	63%
Ivy Tech Community College Kokomo	N-4362	5	1	3	3	2	2	20%	60%	60%
Ivy Tech Community College Evansville	N-4141	6	0	4	4	2	2	0%	67%	67%
Ivy Tech Community College Valparaiso	N-5747	2	1	1	1	1	1	50%	50%	50%