



FINDINGS AND ORDER OF THE INDIANA DEPARTMENT OF HOMELAND SECURITY

TO:

**Andrea Shuter
Aurora Emergency Rescue
320 3rd Street
Aurora, IN 47001**

Certification Number(s) #: 0312

ORDER NUMBER: W0005-2024

Pursuant to the authority of Indiana Code § 4-21.5-3-6 and Indiana Code § 16-31-3-5, the Indiana Department of Homeland Security (Department) enters this Findings and Order in regard to the APPLICATION FOR WAIVER OF EMS RULES (836 IAC) for the Choose an item. certification held by or being issued to Click here to enter text.(Applicant), Certification(s) #: Click here to enter text.

Rule that this waiver is being requested for: 836 IAC 2-7.2-1 (g)

Specifics of the waiver request:

Aurora Emergency Rescue is requesting a waiver to allow a driver or Emergency Medical Responder (EMR) to staff the ambulance with an Advanced Emergency Medical Technician (ADV EMT) when transporting a patient. The current requirement is to have an Emergency Medical Technician (EMT) with the ADV EMT. Aurora Emergency Rescue has had difficulty over the past few years to find adequate personnel to run with the department.

I. FINDINGS

Upon review of all of the information submitted in the APPLICATION FOR WAIVER OF EMS RULES (836 IAC), supporting documentation and any communications regarding said application, the staff of the EMS section of the Indiana Department of Homeland Security finds that:

- Applicant has failed to demonstrate compliance with the rule will impose an undue hardship on the Applicant.

- Applicant has failed to demonstrate that non-compliance with the rule or compliance with an alternative requirement approved by the department of homeland security, will not jeopardize the quality of patient care.
- Applicant has demonstrated that:
 - (1) compliance with the rule will impose an undue hardship on the Applicant; and
 - (2) either:
 - (A) noncompliance with the rule; or
 - (B) compliance with an alternative requirement approved by the department of homeland security; will not jeopardize the quality of patient care.

Notes (if any):

Aurora Emergency Rescue has had difficulty finding adequate personnel to maintain the required staffing during ambulance transports.

II. ORDER

Based upon the Findings set forth above, the Department Orders the following:

- Applicant's waiver request is DENIED.
 - Applicant's waiver request is GRANTED with the following stipulations and restrictions:
 - a. This Waiver is applicable only to Rule 836 IAC 2.7-2-1 (g)
 - b. The specific terms of the Waiver grant are:
 - i. Aurora Emergency Rescue may utilize a driver or EMR with an ADV EMT while transport and ALS patient when an EMT is not available. The ADV EMT must be in the patient compartment during transport. Aurora Emergency Rescue will continue to work towards gaining additional EMT's during this waiver period.
 - The terms are those listed above in the description with no additional terms.
 - The Applicant must submit data at least monthly as to the usage of the Waiver by the Applicant.
 - Other:
 - c. The term of this Waiver is Two (2) years from the date of this Order.
2. All submittals required by this Findings and Order, unless notified in writing otherwise, shall be sent to:

Indiana Department of Homeland Security
Emergency Medical Services Commission
c/o Secretary
302 W. Washington Street, Rm. E208



FINDINGS AND ORDER OF THE INDIANA DEPARTMENT OF HOMELAND SECURITY

TO:

**Brady Wiles
Cass County EMS
516 High Street
Logansport, IN 46947**

Certification Number(s) #: 1315

ORDER NUMBER: W0007-2024

Pursuant to the authority of Indiana Code § 4-21.5-3-6 and Indiana Code § 16-31-3-5, the Indiana Department of Homeland Security (Department) enters this Findings and Order in regard to the APPLICATION FOR WAIVER OF EMS RULES (836 IAC) for the Choose an item. certification held by or being issued to Click here to enter text.(Applicant), Certification(s) #: Click here to enter text.

Rule that this waiver is being requested for: 836 IAC 2-2-1 (h)

Specifics of the waiver request: 836 IAC 2-2-1 (h) requires a ambulance to be staffed with an EMT and paramedic during an ALS transport.

I. FINDINGS

Upon review of all of the information submitted in the APPLICATION FOR WAIVER OF EMS RULES (836 IAC), supporting documentation and any communications regarding said application, the staff of the EMS section of the Indiana Department of Homeland Security finds that:

- Applicant has failed to demonstrate compliance with the rule will impose an undue hardship on the Applicant.
- Applicant has failed to demonstrate that non-compliance with the rule or compliance with an alternative requirement approved by the department of homeland security, will not jeopardize the quality of patient care.
- Applicant has demonstrated that:
 - (1) compliance with the rule will impose an undue hardship on the Applicant; and
 - (2) either:
 - (A) noncompliance with the rule; or

(B) compliance with an alternative requirement approved by the department of homeland security; will not jeopardize the quality of patient care.

Notes (if any):

Starting in April Cass County EMS will have a 24 hour ambulance stationed at Logansport Memorial Hospital to do inter-facility transfers for the hospital. They are requesting a waiver to be utilized when the required EMT and paramedic staffing is unavailable. Cass County EMS would like to utilize a register nurse from the hospital to provide patient care alone in patient compartment during transport when a paramedic is unavailable.

II. ORDER

Based upon the Findings set forth above, the Department Orders the following:

- Applicant's waiver request is DENIED.
 - Applicant's waiver request is GRANTED with the following stipulations and restrictions:
 - a. This Waiver is applicable only to Rule 836 IAC 2-2-1 (h)
 - b. The specific terms of the Waiver grant are: This waiver will allow Cass County to utilize registered nurses (RN) in place of the paramedic in patient compartment during inter-facility transports when a paramedic is not available. These RNs would be employees of Cass County EMS and would have a thorough orientation process and would always be staffed with a seasoned EMT that understands the ins and outs of the EMS system. RNs would not be staffing an ambulance without the correct training and understanding of Cass County policies and protocols in place. Cass County will be required to track the use of the waiver with the waiver tool. Upon renewal request of this waiver the waiver tool will need to show an increase in coverage.
 - The terms are those listed above in the description with no additional terms.
 - The Applicant must submit data at least monthly as to the usage of the Waiver by the Applicant.
 - Other:
 - c. The term of this Waiver is Two (2) years from the date of this Order.
2. All submittals required by this Findings and Order, unless notified in writing otherwise, shall be sent to:

Indiana Department of Homeland Security
Emergency Medical Services Commission
c/o Secretary
302 W. Washington Street, Rm. E208
Indianapolis, Indiana 46204
emscertifications@dhs.in.gov

3. In the event that any term of this Findings and Order is found to be invalid, the remaining terms shall remain in full force and effect and shall be construed and enforced as if the Findings and Order did not contain the invalid term.

REVIEW RIGHTS

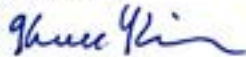
This order is effective fifteen (15) days after service and must be complied with until such time that: (1) this order is overturned on review; (2) an administrative law judge issues a stay of enforcement; or (3) the Department consents to a request for stay in writing. If you desire administrative review of this order by the Emergency Medical Services Commission, you must comply with the requirements of Indiana Code § 4-21.5-3-7 and file a written petition for review within fifteen (15) days of the earliest date this order was served. Your petition for review must state facts demonstrating that you are: (1) a person to whom the order is specifically directed; (2) aggrieved or adversely affected by the order; or (3) entitled to review under any law. You may submit your petition by the following methods:

U.S. MAIL OR PERSONAL SERVICE
Emergency Medical Services Commission
c/o Legal Counsel
302 W. Washington Street, Rm. E208
Indianapolis, IN 46204
emscertifications@dhs.in.gov

ONLINE
By completing the form at
<https://www.in.gov/dhs/4148.htm>

If you comply with the above requirements, your petition will be granted and will be assigned to an administrative law judge for review. If a petition for review is not timely filed, then this order will become final.

SO ORDERED.



By: Kraig Kinney, State EMS Director
Emergency Medical Services
Indiana Department of Homeland Security



Date

KK/rds



FINDINGS AND ORDER OF THE INDIANA DEPARTMENT OF HOMELAND SECURITY

TO:

**Tim Farris
Crawford County Ambulance Svc
713 Judicial Plaza Drive
English, IN 47118**

Certification Number(s) #: 0180

ORDER NUMBER: W0003-2024

Pursuant to the authority of Indiana Code § 4-21.5-3-6 and Indiana Code § 16-31-3-5, the Indiana Department of Homeland Security (Department) enters this Findings and Order regarding the APPLICATION FOR WAIVER OF EMS RULES (836 IAC) for the paramedic provider organization certification held by or being issued to Crawford County Amb Svc, Certification(s) #: 0180.

Rule that this waiver is being requested for: 836 IAC 2-2-1 (d)

Specifics of the waiver request: 836 IAC 2-2-1 (d) requires the paramedic provider organization's have a agreement with a supervising hospital that agrees to provider continuing education, audit and review, medical control and direction and a provision to allow affiliated paramedics to function within the appropriate hospital department in order to obtain continuing practice, remediation and continuing education in their clinical skills.

I. FINDINGS

Upon review of all of the information submitted in the APPLICATION FOR WAIVER OF EMS RULES (836 IAC), supporting documentation and any communications regarding said application, the staff of the EMS section of the Indiana Department of Homeland Security finds that:

- Applicant has failed to demonstrate compliance with the rule will impose an undue hardship on the Applicant.
- Applicant has failed to demonstrate that non-compliance with the rule or compliance with an alternative requirement approved by the department of homeland security, will not jeopardize the quality of patient care.
- Applicant has demonstrated that

- (1) compliance with the rule will impose an undue hardship on the Applicant; and
- (2) either:
 - (A) noncompliance with the rule; or
 - (B) compliance with an alternative requirement approved by the department of homeland security;will not jeopardize the quality of patient care.

Notes (if any):

Provider rules currently require an ALS provider organization at the paramedic level to have an agreement with a supervising hospital. Crawford County Amb service was notified that their current supervising hospital was dropping the hospitals EMS supervising hospital certification. The ambulance service has contacted several supervising hospitals and have been unable to locate a hospital and enter into an agreement. The ambulance service does have a working relationship with the local training institution to help provide quality assurance, audit and review and education plans geared toward needed education and remediation.

IDHS requested and received a well-written proposal for fulfilling the rule requirements of the supervising hospital without actually having a supervising hospital. That proposal is accepted and incorporated into this Waiver.

II. ORDER

Based upon the Findings set forth above, the Department Orders the following:

- Applicant's waiver request is DENIED.
- Applicant's waiver request is GRANTED with the following stipulations and restrictions:
 - a. This Waiver is applicable only to:
 - b. The specific terms of the Waiver grant are: Allows Crawford County Ambulance Service to function at the ALS level without a supervising hospital. The ambulance service is required to work with their local training institution to meet the requirements of continuing education, audit and review and to use their simulation lab to train for remediation. The ambulance service will also be required to work directly with their medical director for medical control and protocols.
 - The terms are those listed above in the description with no additional terms.
 - The Applicant must submit data at least monthly as to the usage of the Waiver by the Applicant.
 - Other: Crawford County Ambulance must submit a written report to IDHS via their EMS district manager by December 31st of each year demonstrating how each element of the

supervising hospital have been met. For example, for audit and review, the report should cover the date of all offerings through the year as well as attendance requirements for each staff member or attendance reports. This report will be utilized if future similar waivers are requested by Crawford County ambulance.

a. The term of this Waiver is One (1) year from the date of this Order.

2. All submittals required by this Findings and Order, unless notified in writing otherwise, shall be sent to:

Indiana Department of Homeland Security
Emergency Medical Services Commission
c/o Secretary
302 W. Washington Street, Rm. E208
Indianapolis, Indiana 46204

3. In the event that any term of this Findings and Order is found to be invalid, the remaining terms shall remain in full force and effect and shall be construed and enforced as if the Findings and Order did not contain the invalid term.

III. EFFECTIVE DATE OF FINDINGS AND ORDER

Pursuant to Indiana Code § 4-21.5-3-6 of the Administrative Orders and Procedures Act, this Findings and Order is effective fifteen (15) calendar days from the date this Findings and Order is served, unless both a written petition for review and a petition for stay of effectiveness are filed within this fifteen (15) calendar day period. If you are served by United States mail, three (3) additional days will be added to this fifteen (15) day period – extending the period to eighteen (18) days. If both a petition for review and a petition for stay of effectiveness are filed within this time period, the portions of this Findings and Order, that are within the scope of the petition for review and the petition for stay of effectiveness, are stayed for fifteen (15) calendar days from the date of service. This stay may be extended upon consent of the Department or by order of an administrative law judge, who shall conduct a preliminary hearing as soon as practicable to determine whether this Findings and Order should be stayed in whole or in part.

IV. APPEAL RIGHTS

If you desire a formal **administrative review** of this order by the **EMS Commission**, you must comply with the requirements of Indiana Code § 4-21.5-3-7 and file a written petition for review within fifteen (15) days of the date this order was served, however, this period is extended to eighteen (18) days if service is made by mail. Your petition for review must state facts demonstrating that you are: (1) a person to

whom the order is specifically directed; (2) aggrieved or adversely affected by the order; or (3) entitled to review under any law. You may submit your petition by the following methods:

U.S. MAIL OR PERSONAL SERVICE

Indiana EMS Commission
c/o Legal Counsel
302 W. Washington Street, Rm. E208
Indianapolis, IN 46204

ONLINE


By completing the form at
<https://www.in.gov/dhs/4148.htm>

If you comply with the above requirements, your petition will be granted and will be assigned to an administrative law judge for review. If a petition for review is not timely filed, then this order will become final.

For additional information about the administrative review process, visit the following link
<https://www.in.gov/dhs/appeals.htm>.

You may also request an opportunity to informally discuss this matter. However, a request to informally discuss, or actual informal discussion, does not extend the deadline for filing your Petition for Review and, consequently, any request should be made promptly, preferably by telephone, upon receipt of the Order. If you have any questions regarding this Order, please contact the state EMS director at (317) 232-3983.

SO ORDERED.



By: Craig Kinney, State EMS Director
Emergency Medical Services
Indiana Department of Homeland Security

Jan. 26. 2024
Date

KK/rds



FINDINGS AND ORDER OF THE INDIANA DEPARTMENT OF HOMELAND SECURITY

TO:

**Katrina Held
Edinburgh Fire & Rescue
4100 W 900 W
Edinburgh, IN 46124**

Certification Number(s) #: 0086

ORDER NUMBER: W0006-2024

Pursuant to the authority of Indiana Code § 4-21.5-3-6 and Indiana Code § 16-31-3-5, the Indiana Department of Homeland Security (Department) enters this Findings and Order in regard to the APPLICATION FOR WAIVER OF EMS RULES (836 IAC) for the Choose an item. certification held by or being issued to Click here to enter text.(Applicant), Certification(s) #: Click here to enter text.

Rule that this waiver is being requested for: 836 IAC 2-2-1 (g)

Specifics of the waiver request: 836 IAC 2-2-1 (g) requires a paramedic provider organizations to provide 24 hour ALS coverage.

I. FINDINGS

Upon review of all of the information submitted in the APPLICATION FOR WAIVER OF EMS RULES (836 IAC), supporting documentation and any communications regarding said application, the staff of the EMS section of the Indiana Department of Homeland Security finds that:

- Applicant has failed to demonstrate compliance with the rule will impose an undue hardship on the Applicant.
- Applicant has failed to demonstrate that non-compliance with the rule or compliance with an alternative requirement approved by the department of homeland security, will not jeopardize the quality of patient care.
- Applicant has demonstrated that:
 - (1) compliance with the rule will impose an undue hardship on the Applicant; and
 - (2) either:
 - (A) noncompliance with the rule; or

(B) compliance with an alternative requirement approved by the department of homeland security; will not jeopardize the quality of patient care.

Notes (if any):

Edinburgh Fire & Rescue operates both an ambulance and ALS non-transport vehicle. Edinburgh Fire & Rescue has increased ALS coverage during the previous waiver to 90%. This waiver will allow them to continue to increase personnel which will continue to increase ALS coverage.

II. ORDER

Based upon the Findings set forth above, the Department Orders the following:

- Applicant's waiver request is DENIED.
- Applicant's waiver request is GRANTED with the following stipulations and restrictions:
 - a. This Waiver is applicable only to Rule 836 IAC 2-2-1 (g)
 - b. The specific terms of the Waiver grant are: Edinburgh Fire & Rescue will respond at the basic life support level if no paramedic is available and request a ALS intercept from one of the other advanced life support providers serving the county. Edinburgh Fire & Rescue is required to maintain the waiver tool required by the Commission. The provider is to track periods of time where paramedic coverage is not available. Edinburgh Fire & Rescue will continue to work towards 24-hour coverage. Upon renewal request of this waiver the waiver tool will need to show an increase in coverage
 - The terms are those listed above in the description with no additional terms.
 - The Applicant must submit data at least monthly as to the usage of the Waiver by the Applicant.
 - Other:
 - c. The term of this Waiver is Two (2) years from the date of this Order.

2. All submittals required by this Findings and Order, unless notified in writing otherwise, shall be sent to:

Indiana Department of Homeland Security
Emergency Medical Services Commission
c/o Secretary
302 W. Washington Street, Rm. E208
Indianapolis, Indiana 46204
emscertifications@dhs.in.gov

3. In the event that any term of this Findings and Order is found to be invalid, the remaining terms shall remain in full force and effect and shall be construed and enforced as if the Findings and Order did not contain the invalid term.

REVIEW RIGHTS

This order is effective fifteen (15) days after service and must be complied with until such time that: (1) this order is overturned on review; (2) an administrative law judge issues a stay of enforcement; or (3) the Department consents to a request for stay in writing. If you desire administrative review of this order by the Emergency Medical Services Commission, you must comply with the requirements of Indiana Code § 4-21.5-3-7 and file a written petition for review within fifteen (15) days of the earliest date this order was served. Your petition for review must state facts demonstrating that you are: (1) a person to whom the order is specifically directed; (2) aggrieved or adversely affected by the order; or (3) entitled to review under any law. You may submit your petition by the following methods:

U.S. MAIL OR PERSONAL SERVICE
Emergency Medical Services Commission
c/o Legal Counsel
302 W. Washington Street, Rm. E208
Indianapolis, IN 46204
emscertifications@dhs.in.gov

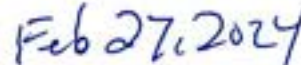
ONLINE
By completing the form at
<https://www.in.gov/dhs/4148.htm>

If you comply with the above requirements, your petition will be granted and will be assigned to an administrative law judge for review. If a petition for review is not timely filed, then this order will become final.

SO ORDERED.



By: Kraig Kinney, State EMS Director
Emergency Medical Services
Indiana Department of Homeland Security



Date

KK/rds



FINDINGS AND ORDER OF THE INDIANA DEPARTMENT OF HOMELAND SECURITY

TO:

**Mandy Fleming
Henry County EMS
127 N 12th Street
New Castle, IN 47362**

Certification Number(s) #: 0834

ORDER NUMBER: W0001-2024

Pursuant to the authority of Indiana Code § 4-21.5-3-6 and Indiana Code § 16-31-3-5, the Indiana Department of Homeland Security (Department) enters this Findings and Order regarding the APPLICATION FOR WAIVER OF EMS RULES (836 IAC) for the paramedic provider organization certification held by or being issued to Henry County EMS, Certification(s) #: 0834.

Rule that this waiver is being requested for: 836 IAC 2-2-1 (g)

Specifics of the waiver request: 836 IAC 2-2-1 (g) requires the paramedic provider organization's to be available 24/7 at the paramedic level.

I. FINDINGS

Upon review of all of the information submitted in the APPLICATION FOR WAIVER OF EMS RULES (836 IAC), supporting documentation and any communications regarding said application, the staff of the EMS section of the Indiana Department of Homeland Security finds that:

- Applicant has failed to demonstrate compliance with the rule will impose an undue hardship on the Applicant.
- Applicant has failed to demonstrate that non-compliance with the rule or compliance with an alternative requirement approved by the department of homeland security, will not jeopardize the quality of patient care.
- Applicant has demonstrated that
 - (1) compliance with the rule will impose an undue hardship on the Applicant; and
 - (2) either:

- (A) noncompliance with the rule; or
 - (B) compliance with an alternative requirement approved by the department of homeland security;
- will not jeopardize the quality of patient care.

Notes (if any):

Provider rules currently require an ALS provider organizations at the paramedic level to be available 24/7. Henry County EMS is working on upgrading from BLS transport to ALS at the paramedic level. Henry County is not the 911 provider but does provide mutual aid. They have five additional staff in ALS class to increase staffing.

II. ORDER

Based upon the Findings set forth above, the Department Orders the following:

Applicant's waiver request is DENIED.

Applicant's waiver request is GRANTED with the following stipulations and restrictions:

a. This Waiver is applicable only to:

b. The specific terms of the Waiver grant are: Allows Henry County EMS to function at the ALS level when staffing allows. Henry County EMS will be required to keep a waiver tool to track with then waiver is used. This waiver tool will be required if a renewal of this waiver is submitted to show an increase of ALS coverage.

The terms are those listed above in the description with no additional terms.

The Applicant must submit data at least monthly as to the usage of the Waiver by the Applicant.

Other:

a. The term of this Waiver is Two (2) years from the date of this Order.

2. All submittals required by this Findings and Order, unless notified in writing otherwise, shall be sent to:

Indiana Department of Homeland Security
Emergency Medical Services Commission
c/o Secretary
302 W. Washington Street, Rm. E208

Indianapolis, Indiana 46204

3. In the event that any term of this Findings and Order is found to be invalid, the remaining terms shall remain in full force and effect and shall be construed and enforced as if the Findings and Order did not contain the invalid term.

III. EFFECTIVE DATE OF FINDINGS AND ORDER

Pursuant to Indiana Code § 4-21.5-3-6 of the Administrative Orders and Procedures Act, this Findings and Order is effective fifteen (15) calendar days from the date this Findings and Order is served, unless both a written petition for review and a petition for stay of effectiveness are filed within this fifteen (15) calendar day period. If you are served by United States mail, three (3) additional days will be added to this fifteen (15) day period – extending the period to eighteen (18) days. If both a petition for review and a petition for stay of effectiveness are filed within this time period, the portions of this Findings and Order, that are within the scope of the petition for review and the petition for stay of effectiveness, are stayed for fifteen (15) calendar days from the date of service. This stay may be extended upon consent of the Department or by order of an administrative law judge, who shall conduct a preliminary hearing as soon as practicable to determine whether this Findings and Order should be stayed in whole or in part.

IV. APPEAL RIGHTS

If you desire a formal **administrative review** of this order by the **EMS Commission**, you must comply with the requirements of Indiana Code § 4-21.5-3-7 and file a written petition for review within fifteen (15) days of the date this order was served, however, this period is extended to eighteen (18) days if service is made by mail. Your petition for review must state facts demonstrating that you are: (1) a person to whom the order is specifically directed; (2) aggrieved or adversely affected by the order; or (3) entitled to review under any law. You may submit your petition by the following methods:

U.S. MAIL OR PERSONAL SERVICE

Indiana EMS Commission
c/o Legal Counsel
302 W. Washington Street, Rm. E208
Indianapolis, IN 46204

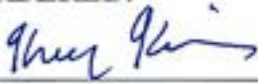
ONLINE

By completing the form at
<https://www.in.gov/dhs/4148.htm>

If you comply with the above requirements, your petition will be granted and will be assigned to an administrative law judge for review. If a petition for review is not timely filed, then this order will become final.

For additional information about the administrative review process, visit the following link
<https://www.in.gov/dhs/appeals.htm>.

SO ORDERED.



By: Kraig Kinney, State EMS Director
Emergency Medical Services
Indiana Department of Homeland Security

Jun 25, 2024

Date

KK/rds



FINDINGS AND ORDER OF THE INDIANA DEPARTMENT OF HOMELAND SECURITY

TO:

**Don Patnoude
Southwest Allen County Fire Protection
12912 Indianapolis Road
Yoder, IN 46798**

Certification Number(s) #: 0276

ORDER NUMBER: W0002-2024

Pursuant to the authority of Indiana Code § 4-21.5-3-6 and Indiana Code § 16-31-3-5, the Indiana Department of Homeland Security (Department) enters this Findings and Order regarding the APPLICATION FOR WAIVER OF EMS RULES (836 IAC) for the paramedic provider organization certification held by or being issued to Southwest Allen County Fire Protection, Certification(s) #: 0276.

Rule that this waiver is being requested for: 836 IAC 2-2-1 (h)

Specifics of the waiver request: 836 IAC 2-2-1 (h) requires a paramedic and EMT or higher to staff the ambulance when ALS techniques have been initiated.

I. FINDINGS

Upon review of all of the information submitted in the APPLICATION FOR WAIVER OF EMS RULES (836 IAC), supporting documentation and any communications regarding said application, the staff of the EMS section of the Indiana Department of Homeland Security finds that:

- Applicant has failed to demonstrate compliance with the rule will impose an undue hardship on the Applicant.
- Applicant has failed to demonstrate that non-compliance with the rule or compliance with an alternative requirement approved by the department of homeland security, will not jeopardize the quality of patient care.
- Applicant has demonstrated that
 - (1) compliance with the rule will impose an undue hardship on the Applicant; and
 - (2) either:

- (A) noncompliance with the rule; or
 - (B) compliance with an alternative requirement approved by the department of homeland security;
- will not jeopardize the quality of patient care.

Notes (if any): Southwest Allen County Fire Protection responds with two EMT's on the ambulance and a paramedic chase vehicle. Occasionally a paramedic will respond on an ambulance and due to staffing restriction may only have a firefighter available.

II. ORDER

Based upon the Findings set forth above, the Department Orders the following:

- Applicant's waiver request is DENIED.
- Applicant's waiver request is GRANTED with the following stipulations and restrictions:
 - a. This Waiver is applicable only to:
 - b. The specific terms of the Waiver grant are: Allows Southwest Allen County Fire Protection a firefighter with CPR and EVOC training to transport a patient with a paramedic. This would only be allowed when the EMT is unavailable.

- The terms are those listed above in the description with no additional terms.
- The Applicant must submit data at least monthly as to the usage of the Waiver by the Applicant.
- Other:

- a. The term of this Waiver is Two (2) years from the date of this Order.

2. All submittals required by this Findings and Order, unless notified in writing otherwise, shall be sent to:

Indiana Department of Homeland Security
Emergency Medical Services Commission
c/o Secretary
302 W. Washington Street, Rm. E208
Indianapolis, Indiana 46204

3. In the event that any term of this Findings and Order is found to be invalid, the remaining terms shall remain in full force and effect and shall be construed and enforced as if the Findings and Order did not contain the invalid term.

III. EFFECTIVE DATE OF FINDINGS AND ORDER

Pursuant to Indiana Code § 4-21.5-3-6 of the Administrative Orders and Procedures Act, this Findings and Order is effective fifteen (15) calendar days from the date this Findings and Order is served, unless both a written petition for review and a petition for stay of effectiveness are filed within this fifteen (15) calendar day period. If you are served by United States mail, three (3) additional days will be added to this fifteen (15) day period – extending the period to eighteen (18) days. If both a petition for review and a petition for stay of effectiveness are filed within this time period, the portions of this Findings and Order, that are within the scope of the petition for review and the petition for stay of effectiveness, are stayed for fifteen (15) calendar days from the date of service. This stay may be extended upon consent of the Department or by order of an administrative law judge, who shall conduct a preliminary hearing as soon as practicable to determine whether this Findings and Order should be stayed in whole or in part.

IV. APPEAL RIGHTS

If you desire a formal **administrative review** of this order by the **EMS Commission**, you must comply with the requirements of Indiana Code § 4-21.5-3-7 and file a written petition for review within fifteen (15) days of the date this order was served, however, this period is extended to eighteen (18) days if service is made by mail. Your petition for review must state facts demonstrating that you are: (1) a person to whom the order is specifically directed; (2) aggrieved or adversely affected by the order; or (3) entitled to review under any law. You may submit your petition by the following methods:

U.S. MAIL OR PERSONAL SERVICE

Indiana EMS Commission
c/o Legal Counsel
302 W. Washington Street, Rm. E208
Indianapolis, IN 46204

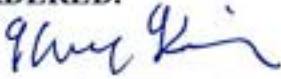
ONLINE

By completing the form at
<https://www.in.gov/dhs/4148.htm>

If you comply with the above requirements, your petition will be granted and will be assigned to an administrative law judge for review. If a petition for review is not timely filed, then this order will become final.

For additional information about the administrative review process, visit the following link
<https://www.in.gov/dhs/appeals.htm>.

SO ORDERED.



By: Kraig Kinney, State EMS Director
Emergency Medical Services
Indiana Department of Homeland Security

Jan 25, 2024

Date

KK/rds



FINDINGS AND ORDER OF THE INDIANA DEPARTMENT OF HOMELAND SECURITY

TO:

**Eric Deich
The Staff, LLC
11608 East Smith Rd
Scottsburg, IN 47170**

Certification Number(s) #: 1006

ORDER NUMBER: W0004-2024

Pursuant to the authority of Indiana Code § 4-21.5-3-6 and Indiana Code § 16-31-3-5, the Indiana Department of Homeland Security (Department) enters this Findings and Order in regard to the APPLICATION FOR WAIVER OF EMS RULES (836 IAC) for the Choose an item. certification held by or being issued to Click here to enter text.(Applicant), Certification(s) #: Click here to enter text.

Rule that this waiver is being requested for: 836 IAC 4-7-1, LSA Document #12-393(E)

Specifics of the waiver request:

The Staff would like to do an abridged AEMT class that builds off an EMT class conducted by The Staff and includes the students only from the EMT class. The students will not duplicate materials that were covered within the EMT course. The class will focus on Advanced EMT lecture notes and skills. This will result in the number of course hours to be below the state minimum number.

This course is planned to primarily be done for a single department that needs to train staff to cover this community following EMS challenges.

I. FINDINGS

Upon review of all of the information submitted in the APPLICATION FOR WAIVER OF EMS RULES (836 IAC), supporting documentation and any communications regarding said application, the staff of the EMS section of the Indiana Department of Homeland Security finds that:

- Applicant has failed to demonstrate compliance with the rule will impose an undue hardship on the Applicant.

- Applicant has failed to demonstrate that non-compliance with the rule or compliance with an alternative requirement approved by the department of homeland security, will not jeopardize the quality of patient care.
- Applicant has demonstrated that:
 - (1) compliance with the rule will impose an undue hardship on the Applicant; and
 - (2) either:
 - (A) noncompliance with the rule; or
 - (B) compliance with an alternative requirement approved by the department of homeland security; will not jeopardize the quality of patient care.

Notes (if any):

Section 33 of the advanced emergency medical technician (AEMT) emergency rule LSA Document #12-393(E) provides:

“(d) The minimum curriculum requirements for advanced emergency medical technician training shall be the Indiana advanced emergency medical technician training curriculum based upon the current national curriculum as amended and approved by the commission.”

All curricula items for the AEMT must be covered by a class and the content materials cannot be waived by law in IC 16-31-3-5. The training institution may address the time allocated to a topic particularly with this planned dual course.

Section 46 of the advanced emergency medical technician (AEMT) emergency rule LSA Document #12-393(E) provides:

“(c) Individuals who have successfully completed an Indiana basic emergency medical technician course or are accepted for basic reciprocity and have taken the Indiana basic written and practical certification examinations may hold a provisional spot in an advanced emergency medical technician course.”

The Staff has reported that due to time constraints it will be challenging for this particular class to wait until testing occurs and would like to being upon completion of the EMT class versus having a period in between to allow testing. The community needs to uptrain EMTs and AEMTs to fill a coverage gap for the community supports waiver under this particular class. It is also noted that there is no substantive break in the EMS education process between the EMT and the AEMT courses for these classes.

II. ORDER

Based upon the Findings set forth above, the Department Orders the following:

- Applicant's waiver request is DENIED.
- Applicant's waiver request is GRANTED with the following stipulations and restrictions:
 - a. This Waiver is applicable only to Rule 836 IAC 4-7-1, LSA Document #12-393(E)
 - b. The specific terms of the Waiver grant are:

- i. The Staff must submit a course application for EMT and then a course application for AEMT contemporaneously and both may be approved if consistent with the terms of this Waiver Order.
- ii. The EMT graduates may enter the associated AEMT course after successful course completion of the EMT program and eligibility to take the Indiana state psychomotor examination and the NREMT cognitive examination even if they have not completed those testing requirements and obtained their EMT certification.
- iii. No AEMT candidate may perform any ALS live patient clinicals or live patient clinical procedures within the AEMT course until they have obtained a valid Indiana EMT certification. Simply put, no performance of ALS procedures on a live patient contact until certified as an EMT at a minimum and actively performed within the approved clinical phases of the AEMT course.
- iv. Pursuant to IC 16-31-3-5 the Department of Homeland Security "may not waive a rule that sets forth educational requirements for a person regulated under this article." Therefore, the Department will not waive any of the education curriculum requirements related to the AEMT class. It is noted, however, that the Training Institution can determine the hours needed for competency in each curriculum requirement could reduce the "hours" or time spent in areas that were covered in the initial education should the students demonstrate competency in those areas.

The terms are those listed above in the description with no additional terms.

The Applicant must submit data at least monthly as to the usage of the Waiver by the Applicant.

Other: This will be a pilot program. The Staff will be required to submit data regarding the success rate of the AEMT course as well as keep course records on how competency was determined in each overlap area that has reduced hours during the AEMT portion.

c. The term of this Waiver is for one EMT/AEMT combined course.

2. All submittals required by this Findings and Order, unless notified in writing otherwise, shall be sent to:

Indiana Department of Homeland Security
Emergency Medical Services Commission
c/o Secretary
302 W. Washington Street, Rm. E208
Indianapolis, Indiana 46204
emscertifications@dhs.in.gov

3. In the event that any term of this Findings and Order is found to be invalid, the remaining terms shall remain in full force and effect and shall be construed and enforced as if the Findings and Order did not contain the invalid term.

REVIEW RIGHTS

This order is effective fifteen (15) days after service and must be complied with until such time that: (1) this order is overturned on review; (2) an administrative law judge issues a stay of enforcement; or (3) the Department consents to a request for stay in writing. If you desire administrative review of this order by the Emergency Medical Services Commission, you must comply with the requirements of Indiana Code § 4-21.5-3-7 and file a written petition for review within fifteen (15) days of the earliest date this order was served. Your petition for review must state facts demonstrating that you are: (1) a person to whom the order is specifically directed; (2) aggrieved or adversely affected by the order; or (3) entitled to review under any law. You may submit your petition by the following methods:

U.S. MAIL OR PERSONAL SERVICE
Emergency Medical Services Commission
c/o Legal Counsel
302 W. Washington Street, Rm. E208
Indianapolis, IN 46204
emscertifications@dhs.in.gov

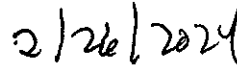
ONLINE
By completing the form at
<https://www.in.gov/dhs/4148.htm>

If you comply with the above requirements, your petition will be granted and will be assigned to an administrative law judge for review. If a petition for review is not timely filed, then this order will become final.

SO ORDERED.



By: Kraig Kinney, State EMS Director
Emergency Medical Services
Indiana Department of Homeland Security



Date



FINDINGS AND ORDER OF THE INDIANA DEPARTMENT OF HOMELAND SECURITY

TO:

Mike Moskalick
US Steel
1 North Broadway
Gary, IN 46402

Certification Number(s) #: 0023

ORDER NUMBER: W0008-2024

Pursuant to the authority of Indiana Code § 4-21.5-3-6 and Indiana Code § 16-31-3-5, the Indiana Department of Homeland Security (Department) enters this Findings and Order in regard to the APPLICATION FOR WAIVER OF EMS RULES (836 IAC) for the Choose an item. certification held by or being issued to Click here to enter text.(Applicant), Certification(s) #: Click here to enter text.

Rule that this waiver is being requested for: 836 IAC 2-7.2-3

Specifics of the waiver request: 836 IAC 2-7.2-3 does not allow for Advanced EMT's to function outside their scope of practical. U.S. Steel provides services on their property and during transport from their industrial setting.

I. FINDINGS

Upon review of all of the information submitted in the APPLICATION FOR WAIVER OF EMS RULES (836 IAC), supporting documentation and any communications regarding said application, the staff of the EMS section of the Indiana Department of Homeland Security finds that:

- Applicant has failed to demonstrate compliance with the rule will impose an undue hardship on the Applicant.
- Applicant has failed to demonstrate that non-compliance with the rule or compliance with an alternative requirement approved by the department of homeland security, will not jeopardize the quality of patient care.
- Applicant has demonstrated that:
 - (1) compliance with the rule will impose an undue hardship on the Applicant; and
 - (2) either:
 - (A) noncompliance with the rule; or

(B) compliance with an alternative requirement approved by the department of homeland security; will not jeopardize the quality of patient care.

Notes (if any): US Steel is requesting to utilize Toradol at the advanced EMT level for pain management. This is a specific waiver that has been approved since 2014 and allowed because of US Steel's unique organization functioning within a steel mill.

II. ORDER

Based upon the Findings set forth above, the Department Orders the following:

- Applicant's waiver request is DENIED.
 - Applicant's waiver request is GRANTED with the following stipulations and restrictions:
 - a. This Waiver is applicable only to Rule 836 IAC 2-7.2-3
 - b. The specific terms of the Waiver grant are: This waiver will allow US Steel ADV EMT's to administer Toradol for pain management while providing patient care within the steel mill with a written protocol from their organization medical director and education/oversight from the medical director to those that authorized to utilize the protocol.
 - The terms are those listed above in the description with no additional terms.
 - The Applicant must submit data at least monthly as to the usage of the Waiver by the Applicant.
 - Other:
 - c. The term of this Waiver is Two (2) years from the date of this Order.
2. All submittals required by this Findings and Order, unless notified in writing otherwise, shall be sent to:
- Indiana Department of Homeland Security
Emergency Medical Services Commission
c/o Secretary
302 W. Washington Street, Rm. E208
Indianapolis, Indiana 46204
emscertifications@dhs.in.gov
3. In the event that any term of this Findings and Order is found to be invalid, the remaining terms shall remain in full force and effect and shall be construed and enforced as if the Findings and Order did not contain the invalid term.

REVIEW RIGHTS

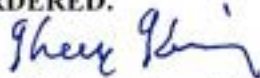
This order is effective fifteen (15) days after service and must be complied with until such time that: (1) this order is overturned on review; (2) an administrative law judge issues a stay of enforcement; or (3) the Department consents to a request for stay in writing. If you desire administrative review of this order by the Emergency Medical Services Commission, you must comply with the requirements of Indiana Code § 4-21.5-3-7 and file a written petition for review within fifteen (15) days of the earliest date this order was served. Your petition for review must state facts demonstrating that you are: (1) a person to whom the order is specifically directed; (2) aggrieved or adversely affected by the order; or (3) entitled to review under any law. You may submit your petition by the following methods:

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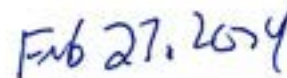
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If you comply with the above requirements, your petition will be granted and will be assigned to an administrative law judge for review. If a petition for review is not timely filed, then this order will become final.

SO ORDERED.



By: Craig Kinney, State EMS Director
Emergency Medical Services
Indiana Department of Homeland Security



Date

KK/rds