



MICHAEL R. PENCE, Governor
STATE OF INDIANA

INDIANA DEPARTMENT OF HOMELAND SECURITY
302 West Washington Street
Indianapolis, IN 46204

**EMERGENCY MEDICAL SERVICES
COMMISSION MEETING MINUTES**

DATE: October 16, 2015
TIME: 10:00am
LOCATION: Fishers City Hall
One Municipal Drive
Fishers, IN 46038

MEMBERS PRESENT:

Michael Lockard	(General Public)
G. Lee Turpen II	(Private Ambulance)
Darin Hoggatt	(Paramedics)
Stephen Champion	(Medical Doctor)
John Zartman	(Training Institution)
Myron Mackey	(EMTs)
Mike Garvey	(Indiana State EMS Director)
Melanie Jane Craigin	(Hospital EMS)
Terri Hamilton	(Volunteer EMS)
Sue Dunham	(Emergency Nurses)
Sara Brown	(Trauma Phycsian)

MEMBERBS NOT PRESENT:

Charles Valentine	(Municipal Fire)
Matthew McCullough	(Volunteer Fire and EMS)
Michael Olinger	(EMS State Medical Director)

OTHERS PRESENT: Field Staff (Don Watson and Christopher Jones), Robin Stump, Renee Graves, Tony Pagano, Candice Hilton, and members of the EMS Community.



CALL TO ORDER AND ROLL CALL

Meeting called to order at 10:04 am by Chairman Lee Turpen. Ms. Candice Hilton called roll and announced quorum.

ADOPTION OF MINUTES

- a. August 19, 2015 meeting minutes

A motion was made by Commissioner Mackey to approve the minutes as written. The motion was seconded by Commissioner Zartman. Commissioner Champion noted that his name was listed twice in the attendance in the minutes. Commissioner Mackey amended his motion to accept the minutes with the amendment. The motion was seconded by Commissioner Zartman. The motion passed.

INDIANA DEPARTMENT OF HEALTH

- a. Trauma Registry (see attachment #1)

Ms. Jessica Skiba reported for the Department of Health. Ms. Skiba briefly went through the report given to the Commission members for review. A short discussion followed regarding where the data for prior to EMS arrival comes from and how that gets reported. Ms. Skiba stated that it was obtained from the EMS reports. Chairman Turpen stated that it would be interesting to see the respiratory rates for patients prior to NARCAN administration and asked that this information be added to the report.

EMS FOR CHILDREN (EMSC)

Ms. Courtney VanJelgerhuis reported on the school nurse in emergency care course that EMSC hosted. On September 29th. The course was attended by 40 school nurses from around the state and focused on lectures and hands on skill stations. EMSC received a lot of good feedback from the nurses. The nurses stated they got a lot out of the course. The skills stations that were tested were asthma, anaphylaxis, cardiac arrest, AED use, heat/cold emergencies, choking, c spine, eye injuries, concussions, upper and lower extremities splinting, and abdominal injuries. They were also taught about communicating with their local EMS, disaster planning, and response planning with their local communities. The nurses where encouraged to reach out and establish the communications prior to having an emergency at their schools. EMSC is planning on offering the training one time a year. There is an on-line portion that is required to be completed prior to classroom portion of the training. EMSC is sponsoring a webinar for preparing an Emergency Department to provide physio social support for children during a disaster. This is based on part of the survey that was taken a couple of years ago. The webinar is for doctors, nurses, EMS personnel, and community planners. The webinar is October 29th from 3pm-4pm.

TECHNICAL ADVISORY COMMITTEE (TAC)

- a. Report – (see attachment #2 for the TAC meeting minutes) Chairman Leon Bell was not present at this meeting. Ms. Candice Hilton reported that at the last TAC meeting the PI process, and the other assignment that were given to the TAC were discussed. The TAC will be bringing recommendations to the December meeting.

Chairman Turpen took a moment to welcome Dr. Sara Brown as a new EMS Commission member.

INDIANA EMERGENCY MEDICAL SERVICES ASSOCIATION (IEMSA)

Mr. Garrett Hedeem reported for IEMSA. Mr. Heeden announced a new board member Mr. Nick Montelauro representing Region 4 and 5. Mr. Heeden also announced that IEMSA has designed a challenge coin proceeds from the coin will go toward the EMS memorial. Mr. Heeden announced that the date for the legislation breakfast has been set. The breakfast will be held on January 28th 7:30am – 9:30am. Mr. Heeden turned the podium over to Mr. George Schulp. Mr. Schulp announced that after delays and a lot of work the EMS license plate has finally been approved. The license plate will be available to purchase starting January 1, 2016. The plates will be \$40.00. \$25.00 will come to IEMSA funding will go to the EMS memorial and help fund a public awareness campaign so the public will know what EMS is and what they do.

Chairman Turpen recognized Mr. George Schulp for all of his efforts in getting the license plate for EMS.

EMS EDUCATION WORKING GROUP

Mr. Kraig Kinney reported for the education group. Mr. Kinney reported that the meeting for 2016 have been established. The group will meet on the second Wednesday of the month except for FDIC and IERC. The education group worked on and came up with a draft of the Primary Instructor process to present to the TAC at their November meeting. The education group has also been looking at the National Registry continuing education requirements and the changes that will be coming in 2017. They are also looking at Indianas continuing education requirements to see if they need to be changed to match the National Registry requirements.

Commissioner Zartman stated that the currently accredited Training Institutions need to start working on their portfolios that need to be submitted to CoEMPs if they want to test their students next year. They need to go on CoEMPs website and look at the new requirements soon and not wait. This is important.

PERSONNEL WAIVER REQUESTS

The following requested a waiver of 836 IAC 4-4-1 General certification provisions which reads (b) The applicant shall apply for certification on forms provided by the agency postmarked within one (1) year of the date that the course was concluded as shown on the course report. 836 IAC 4-4-1 General certification provisions (a) Applicants for original certification as an emergency medical technician shall meet the following requirements: (3) Pass the emergency medical technician written and practical skills examinations as set forth and approved by the commission. Scott Harris is requesting a waiver of deadlines imposed by the rules to complete testing. He is requesting permission to take the EMT-Basic examination, following completion of twenty-four hour remediation. The waiver request specifies all remediation and the additional testing attempt be completed by 12/30/2015. Staff recommends: Denial based on him signing the paperwork before the exam explaining the process of testing.

Scott Harris

A motion was made by Commissioner Zartman to deny the waiver. The motion was seconded by Commissioner Hamilton. The motion passed.

The following requested a waiver of 836 IAC 4-5-2 Certification and recertification which reads 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. Jeremy L. Hensley is requesting a waiver of testing requirements to attain Primary Instructor certification, and is requesting that his Kentucky EMS Instructor Level III be accepted as reciprocal training (certification based on reciprocity). Staff recommends: Denial, based on previous Commission action. Staff can accept the Level III Instructor certification as 'a training course equivalent to the material contained in the Indiana emergency medical services primary instructor course', as defined in the rules, however the candidate should complete the remaining requirements for testing.

Jeremy L. Hensley - Paramedic

A motion was made by Commissioner Zartman to deny the requested waiver and motify it to accepting the staff recommendation to have Mr. Hensley take the Pre-Primary Instructor (EMT) written exam, the EMT practical exam, and the Primary Instructor written exam. In addition to the staff recommendation Mr. Hensely will need to also complete the internship. Mr. Hensley's NEMSE training course will be accept as his training course. The motion was seconded by Commissioner Mackey. The motion passed.

The following requested a waiver of 836 IAC 4-4-2 Application for original certification or certification renewal which reads (d) To renew a certification, a certified emergency medical technician shall submit a report of continuing education every two (2) years that meets or exceeds the minimum requirement to take and report forty(40) hours of continuing education according to the following: (1) Participate in a minimum of thirty-four (34) hours of any combination of: (A) lectures; (B) critiques; (C) skills proficiency examinations; (D) continuing education courses; or (E) teaching sessions; that review subject matter presented in the Indiana basic emergency medical technician curriculum. (2) Participate in a minimum of six (6) hours of audit and review. (3) Participate in any update course as required by the commission. (4) Successfully complete a proficiency evaluation that tests the skills presented in the Indiana basic emergency medical technician curriculum. Debra O'Neal is requesting additional time to complete her in-service hours. Staff recommends: Approval of 6 months to complete EMT in-service hours.

Debra O'Neal - EMT

A motion was made by Commissioner Zartman to approve the extension as staff recommended. If Ms.

O'Neal is not able to complete her in-service in 6 months it is recommended that her waiver is brought back to the Commission. The motion was seconded by Commissioner Champion. The motion passed.

The following requested a waiver of 836 IAC 4-4-1 General certification provisions which reads Sec. 1. (a) Applicants for original certification as an emergency medical technician shall meet the following requirements: (1) Be a minimum of eighteen (18) years of age. (2) Successfully complete the Indiana basic emergency medical technician training course as approved by the commission and administered by a certified training institution. (3) Pass the emergency medical technician written and practical skills examinations as set forth and approved by the commission. Curtis R. Shidler is requesting a waiver of testing requirements to attain EMT-Basic certification. Mr. Shidler is requesting that someone be permitted to read the EMT-Basic examination to him. Staff recommends: Denial, based on previous Commission action. The Commission has ruled in the past on multiple occasions that the ability to read is an essential job function/requirement of an EMS provider. Staff recommends: Denial, based on previous Commission action. The Commission has ruled in the past on multiple occasions that the ability to read is an essential job function/requirement of an EMS provider.

Curtis R. Shidler

A motion was made by Commissioner Zartman to deny the waiver. The motion was seconded by Commissioner Hoggatt. The motion passed.

PROVIDER WAIVER REQUESTS

The following requested a waiver of SECTION 16 which reads (a) This SECTION supersedes 836 IAC 2-7.2-3 (B) Endotracheal intubation devices, including the following: (i) Laryngoscope with extra batteries and bulbs. (ii) Laryngoscope blades (adult and pediatric, curved and straight). (iii) Disposable endotracheal tubes, a minimum of two (2) each, sterile packaged, in sizes 3, 4, 5, 6, 7, 8, and 9 millimeters inside diameter. (D) Medications limited to, if approved by the medical director, the following: (i) Acetylsalicylic acid (aspirin). (ii) Adenosine. (iii) Atropine sulfate. (iv) Bronchodilator (beta 2 agonists): (AA) suggested commonly administered medications: (aa) albuterol; (bb) ipratropium; (cc) isoetharine; (dd) metaproterenol; (ee) salmeterol; (ff) terbutaline; and (gg) triamcinolone; and (BB) commonly administered adjunctive medications to bronchodilator therapy: (aa) dexamethasone; and (bb) methylprednisolone. (v) Dextrose. (vi) Diazepam. (vii) Epinephrine (1:1,000). (viii) Epinephrine (1:10,000). (ix) Vasopressin. (x) Furosemide. (xi) Lidocaine hydrochloride, two percent (2%). (xii) Amiodarone hydrochloride. (xiii) Morphine sulfate. (xiv) Naloxone. (xv) Nitroglycerin. Aurora Emergency Rescue Unit is requesting a waiver of equipment and medications in the Intermediate rules. Aurora Emergency Rescue Unit has Advanced EMTs operating at Advanced EMT (ALS) level. Rules do not have Advanced EMT level, therefore the provider is certified at Intermediate level. This application is for a RENEWAL of an existing waiver. Staff recommends: APPROVAL As well as requested a waiver of 836 IAC 2-2-1 General requirements for paramedic provider organizations which reads (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. Switzerland County EMS is requesting a waiver of the 24 hour rule. Switzerland County is a paramedic service and is asking for a waiver for infrequent periods when they might not have 24 hour coverage due to circumstances beyond their control such as a car break down, sickness, family issues, ect. They have mutual aid agreements in place for ALS coverage if needed. They have an individual in paramedic class who should be certified by early spring. Staff recommends: approval- with the stipulation of reporting to the agency the following: 6 month update, e-mail to area district manager each time this occurs.

Aurora Emergency Rescue Unit

A motion was made by Commissioner Mackey to approve the waiver for the equipment. The motion was seconded by Commissioner Hoggatt. The motion passed. A motion was made by Commissioner Zartman to approve the waiver request to waive the operating 24/7 rule with the stipulation that they submit a report every 6 months on their status of being able to operate 24/7. The motion was seconded by Commissioner Lockard.

The following requested a waiver of Rule 2: General Requirements for paramedic provider organizations 836 IAC 2-2-1 (g) (1) which reads (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. Mooresville Fire Department is requesting to waive the 24/7 ALS coverage rule. Mooresville Fire Department requests to provide secondary ALS service to their area with a part-time paramedic program. Brown Twp. Fire Dept. already provides the primary ALS coverage for the area, and Mooresville Fire Dept. is requesting to supplement the current services offered in the area. Mooresville Fire Department is staffed with six (6) personnel per shift with one of those being a paramedic. Their goal is still to provide secondary coverage 70-75% of the time during the day. They are still working to overcome budgetary limitations and have several options working at this time. This is a renewal waiver. Staff recommends: approval based on previous Commission action.

Mooresville Fire Department

A motion was made by Commissioner Hoggatt to approve the waiver with the 6 month reporting requirement. The motion was seconded by Commissioner Zartman. The motion passed.

The following requested a waiver of 836 IAC 2-2-1 General requirements for paramedic provider organizations which reads (g) Each paramedic provider organization shall do the following: (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. Pike County EMS is requesting a waiver of EMT/EMT-P staffing requirement. The waiver request is for a non-primary response vehicle; primarily staffed vehicles meet the requirement of the rule. This application is for a RENEWAL of an existing waiver. Staff recommends: approval

Pike County EMS

A motion was made by Commissioner Mackey to approve the waiver with the 6 month reporting requirement. The motion was seconded by Commissioner Zartman. The motion passed.

OLD BUSINESS

1. Tables Business and/or waivers
No currently tabled business or waivers
2. Current ongoing studies- none at this time
3. At this meeting there was no other old business to discuss

NEW BUSINESS

1. Shortage of Personnel

Chairman Turpen opened the discussion regarding the shortage of EMS personnel in Indiana. Chairman Turpen stated that this is a National level issue not just an issue in Indiana. Chairman Turpen wanted to bring attention to the issue. This is something that all providers need to pay attention to this issue. EMS State Director Michael Garvey spoke in regards to the possibility of a workforce study. Director Garvey asked who we would approach about doing a study to help address the issue for the long term and not just a short term fix. Discussion followed. Director Garvey asked Mr. Heeden if IEMSA would be interested in talking with the Commission regarding this issue. Mr. Heeden stated that some work is already being done and they would be happy to help.

ASSIGNMENTS

- a. Past Assignments
 - i. POST letter

A motion was made by Commissioner Mackey to approve the letter drafted by staff. The motion was seconded by Commissioner Zartman. The motion passed.

- b. Today's Assignments

SUB-COMMITTEES

- a. Accreditation Sub-committee (Commissioner Zartman Chairman)- Commissioner Zartman reported that the group as not met because of the new requirements that has been coming out. There has been continued contact with Director Garvey.
- b. Narcotics working group (Commissioner Zartman Chairman)- Commissioner Zartman stated the group has not officially met. The group will be meeting soon. Commissioner Zartman is hoping to put some guidelines together soon.
- c. Training Manual review work group (Tony Pagano)- Mr. Tony Pagano reported that the TAC and the Education working group has appointed their members and they will be meeting soon.
- d. Communications work group (Jason Smith Chairman)- Mr. Jason Smith was not present at this meeting.
- e. National Registry work group (testing at all levels except EMR Lee Turpen Chairman)- Chairman Turpen reported that some information exchange has taken place with the National Registry. Chairman Turpen is hoping to have something to report at the next meeting.
- f. Data Collections sub-committee (Commissioner Valentine Chairman)- Commissioner Lockard reported in regards to the data report (see attachment #3). Commissioner Lockard spoke about the reports. Commissioner Lockard also gave kudos to Ms. Angie Biggs for her work on the data collection process for EMS. Discussion followed.

Chairman Turpen called for a short break at 11:16am

Chairman Turpen reconvened the meeting at 11:29am

Commissioner Zartman stated that he would like to motify his earlier motion regarding Jeremy Hensley's waiver request. Commissioner Zartman amended his motion that Mr. Hensley's NEMSE training and exam will be accepted. Mr. Hensley will has to take the Indiana EMT practical and written exams and well as complete the Primary Instructor internship. The motion was seconded by Commissioner Mackey. The motion passed.

ADMINSTRATIVE PROCEEDINGS

1. Administrative Orders Issued
 - a. Personnel Orders
 - i. 1 Year Probation

Order No. 0096-2015 Rachel L. Middleton

No action required, none taken

Order No. 0098-2015 Joseph M. Tepe

No action required, none taken

Order No. 0101-2015 Chad Walther

No action required, none taken

- ii. 2 Year Probation

Order No. 0113-2015 Tarren L. Keller

No action required, none taken

- iii. Emergency Orders

Order No. 0100-2015 Robert A. Grayless

No action required, none taken

Order No. 0099-2015 Paul R. Heon

No action required, none taken

Order No. 0105-2015 Derreck A. Ison

No action required, none taken

Order No. 0109-2015 Brandon Shipman

No action required, none taken

Commissioner Mackey commented regarding the one year and two year probation orders. Commissioner Mackey asked "what are the differences between the one year probation orders and the two year probation order that are in the packet for the Commission members to review?" Director Garvey stated that there are several variables that play into the decision for the orders and it could be just because of the difference in the time frames. Director Garvey stated that he couldn't tell Commissioner Mackey for sure what the difference is in the order due to not having all of the information regarding the cases in front of him at the meeting.

- b. Non-Final Orders
 - i. Prompt Ambulance Service

A motion was made by Commissioner Mackey to affirm the non-final order for Prompt Ambulance Service. The motion was seconded by Commissioner Hoggatt. The motion passed.

STAFF REPORTS

- A. Data Report – report given during the sub-committee reports. Some additional comments made regarding data collection.
- B. Operations Report -Ms. Robin Stump reported out. Ms. Stump read the POST letter into record (see attachment #4). Ms. Stump reported that Ms. Biggs, Mr. Alex Straumins as well as herself went to Utah to the NEMSIS conference. Ms. Stump reported that there has been some staff changes. Mr. Christopher Jones is now the Northwest district manager taking Mr. Steve Gressmire's vacant position. With is staff change the Sim Lab technician position is now again opened. Ms. Stump also announced that Mr. Jason Coffey has been hired as a training coordinator for the Weapons of mass destruction course as well as other courses. Ms. Stump also announced that Ms. Candice Hilton has moved to the Fire side so her position will be posted. Ms. Stump also stated that the Medical Director seminars have not been well attended by the Medical Directors. District 4s seminar will be held in November please encourage your medical directors to attend these meetings.
- C. Certifications report (see attachment #4) - no action needed, none taken.
- D. Training Report (see attachment #5) - Mr. Tony Pagano asked if any of the Commission members had any questions for him regarding the report that was included in their packets. Commissioner Zartman commented on the AEMT statistics and asked if anyone has reached out to the AEMT training institutions that have not improved their pass/fail statistics. Discussion followed. Commissioner Zartman stated that his recommendation would be any of the Training Institutions that are below the recommended national average should be looked into.

STATE EMS MEDICAL DIRECTOR'S REPORT

No report at this meeting.

STATE EMS DIRECTOR'S REPORT

Director Michael Garvey reported on the National Highway Traffic and Safety Association report. Director Garvey stated that the agency has been working with the Rural Health Innovation Collaborative in regards to the NHTSA recommendations. There will be a more detailed report given at the December Commission meeting. Director Garvey stated that he wanted to make everyone aware of the drug supply chain security act. Director Garvey stated that all providers need to follow up with their hospitals regarding the act. It will make notification regarding drug recalls be sent to hospitals faster so the recalled drugs can be pulled off the shelves faster. Director Garvey spoke about the Medicaid/Medicare audits have been conducted in Indiana. During these audits the providers are being asked to provide historical data in regards to a vehicles being certified. The agency may not be able to provide the information for you. Director Garvey encourages all providers to keep the blue vehicle certification cards and other documents that will prove the historical information that is being asked for during the audit. More discussion followed in regards to the audits. Director Garvey also stated that the run sheets have to be left at the hospitals or at least sent to the hospital within 24 hours. Providers that are repeatedly not leaving the run sheets will be contact by our agency. Director Garvey again is encouraging people to get involved and look into the EMS Compass program the website is emscompass.org.

CHAIRMAN'S REPORT AND DIRECTION

Chairman Lee Turpen just wanted to make everyone aware that there are two very good conferences coming up. Chairman Turpen highly recommends anyone that is able to attend these conferences to go. The two big evidence based conferences are coming up the registration is out there. The National Association of EMS Physicians annual meeting will be in San Diego in January encourage your medical directors and to your individual that are responsible for the quality control to attend. Than coming up in February the US Consortium of Metropolitan Medical Directors State of the Sciences conference better known as the EAGLES conference which is more affordable than the

National Association of EMS Physicians annual meeting. The EAGLES conference is in Dallas this year and you will find that most of the people that attend are paramedics.

NEXT MEETING

City of Fishers
Fishers City Hall
One Municipal Drive
Fishers, IN 46038
December 18, 2015
10am

ADJOURNMENT

A motion was made by Commissioner Lockard to adjourn the meeting. The motion was seconded by Commissioner Hamilton. The motion passed. The meeting was adjourned at 12:17pm.

Approved _____

G. Lee Turpen II, Chairman

Attachment #1

Indiana State Department of Health—Narcarn Report

Report for October 2015

Indiana State Department of Health—Division of Trauma and Injury Prevention 6,047 Incidents Statewide Data from September 1, 2013—August 31, 2015

Senate Enrolled Act No. 406 became effective on April 27, 2015. This act 'requires certain emergency personnel to report to the state department of health the number of times an overdose intervention medication is administered.'

This report has three charts:

- * Narcarn (naloxone) given by Emergency Medical Services by Month (9/1/2013—8/31/2015)
- * Number of Incidents where Narcarn was Given Prior to EMS Arrival (9/1/2014—8/31/2015)
- * Provider's Primary Impression when Narcarn was Given (9/1/2014—8/31/2-15)

The following Emergency Medical Services reported administering Narcarn between September 1, 2013 and August 31, 2015 (112 services):

Adams County EMS	City of Rushville FD
Air Methods - Kentucky	Clay Township Fire Territory (South Bend)
Alexandria FD	Cleveland Township FD
American Medical Response	Clinton County EMS (Frankfort)
Bargersville Community FD	Columbus Regional Hospital Ambulance Service
Beech Grove FD	Community Howard Regional Health
Benton County Emergency Ambulance Service	Crown Point Fire Rescue Department
Bright VFD	Culberson Ambulance Service
Brown Township Fire & Rescue	Danville FD / Center Township Trustee
Brownsburg Fire Territory	Decatur County EMS
Care Ambulance Service LLC (Indy)	Decatur Township FD
Carlisle Lions Community Ambulance Service	Delaware County / Muncie EMS
Carmel FD	Dublin VFD Inc
Carroll County EMS	Fayette County EMS
Cicero VFD	Fire Department of Liberty Township
City of Gary FD	Fishers FD
City of Lawrence FD	Fountain County Ambulance Service
City of Mishawaka EMS	Fulton County EMS
City of Nappanee EMS	Gibson County EMS



Indiana State
Department of Health

Indiana State Department of Health—Narcarn Report

Report for October 2015

Indiana State Department of Health—Division of Trauma and Injury Prevention 6,047 Incidents Statewide Data from September 1, 2013—August 31, 2015

The following Emergency Medical Services administered Narcarn between September 1, 2013 and August 31, 2015:

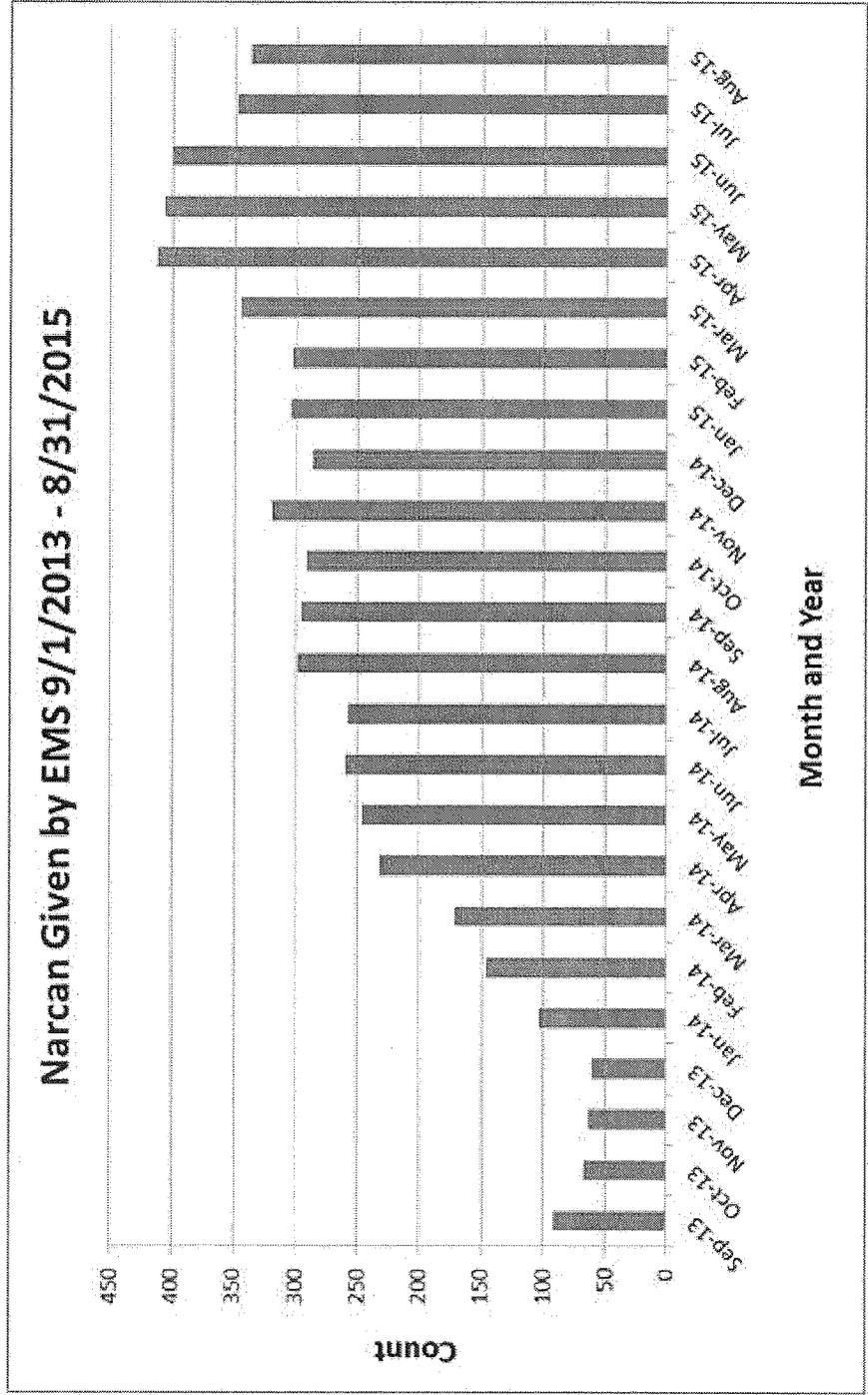
Goshen FD	Penn Township FD	Sugar Creek Township FD
Greene County Ambulance Service	Perry County Memorial Hospital	Sullivan County Ambulance Service
Greenfield FD	Pike County EMS	Sullivan FD
Henry County EMS	Pike Township FD	Switzerland County EMS, Inc
Indiana University Health Paoli Hospital EMTS	Pittsboro Middle Township FD, Inc	Terre Haute FD
IU Health Bloomington Emergency Medical Transport Service	Porter Memorial Hospital EMS	The Methodist Hospitals, Inc
Jackson Township FD (Arcadia)	Posey County EMS (Mount Vernon)	Three Rivers Ambulance Authority
Keener Township EMS	Prompt Ambulance Central, Inc	Tippecanoe Emergency Ambulance Service
King's Daughters' Health EMS	Richmond FD	Town of Plainfield / Plainfield FD
Ladoga Rescue Inc	Riley FD	Turkey Creek Fire Territory
LaPorte County EMS	Ripley County EMS	Union City FD (Indiana)
Lawrenceburg Emergency Rescue	Rocky Mountain Holdings, LLC DBA Lutheran Air	Wabash FD
Lutheran Hospital of Indiana	Rush Memorial Hospital	Warren County EMS (Williamsport)
Madison Township VFD (Camby)	Scott County EMS (Scottsburg)	Washington County Ambulance Service
Marion General Hospital Ambulance Service	Scott Township VFD Inc (Evansville)	Washington Township / Avon FD
Memorial Hospital Ambulance	Seals Ambulance Service	Wayne Township FD (Indianapolis)
Memorial Medflight	Shelbyville FD	Wayne Township VFD (Noblesville)
Middlebury Township FD	South Bend FD	Westfield FD
Multi-Township EMS	South Haven FD	White River Township FD (Greenwood)
New Castle / Henry County EMS	Southern Ripley County Emergency Life Squad	Whitley County EMS
North East Allen County Fire & EMS	Speedway FD	Zionsville VFD Inc
North Webster / Tippecanoe Township EMS	Spencer County Emergency Ambulance Service, Inc	
Osole Emergency Medical	St Clair Precision Ambulance LLC	
Parkview Huntington Hospital / EMS	St Mary's Lifeflight	
Parkview LaGrange Hospital EMS - LaGrange County EMS	St Marys Warrick EMS	
Parkview Noble Hospital	Steuben County EMS	
Parkview Regional Medical Center		



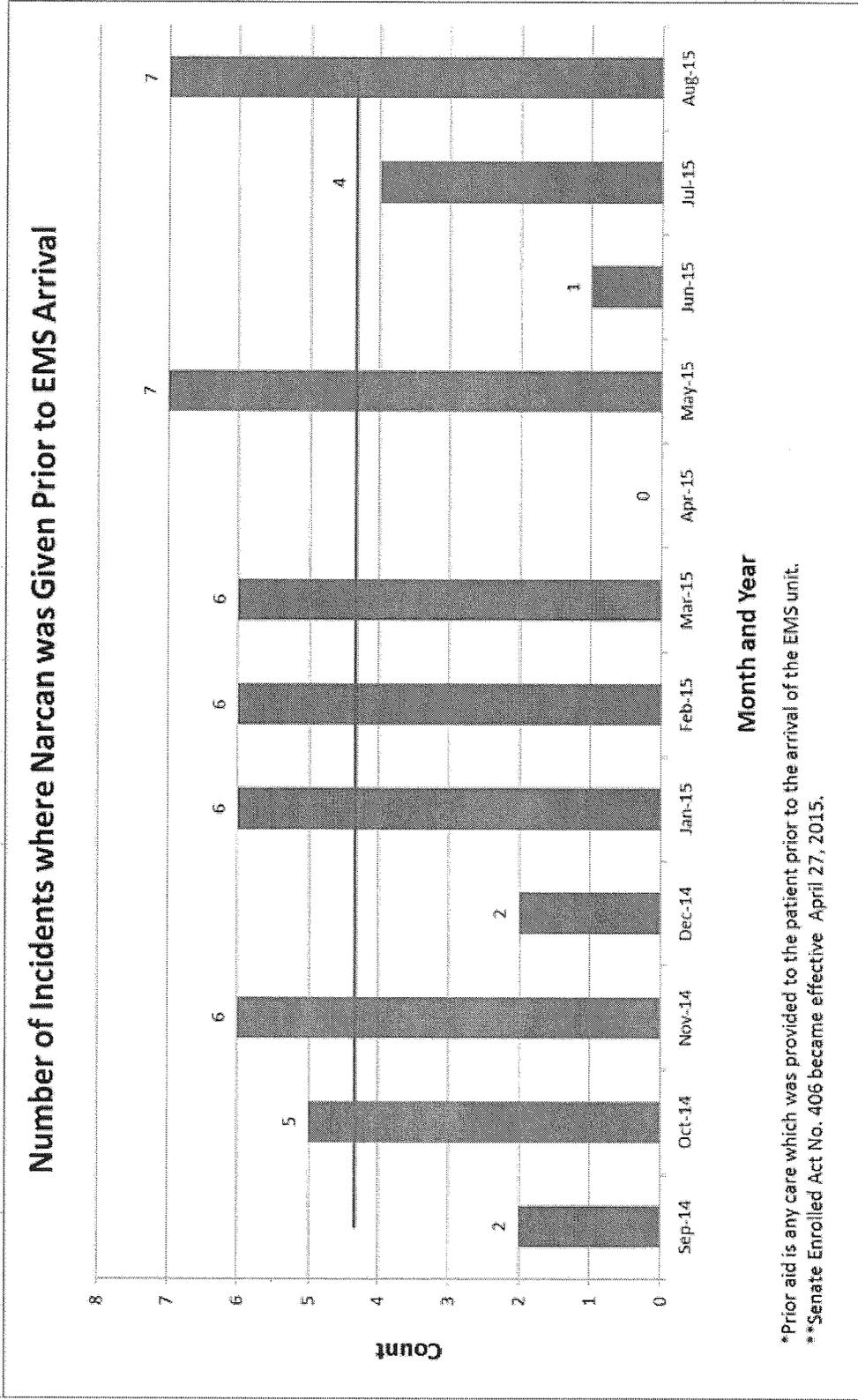
Indiana State
Department of Health

ISDH Division of Trauma and Injury Prevention
Narcan Reports

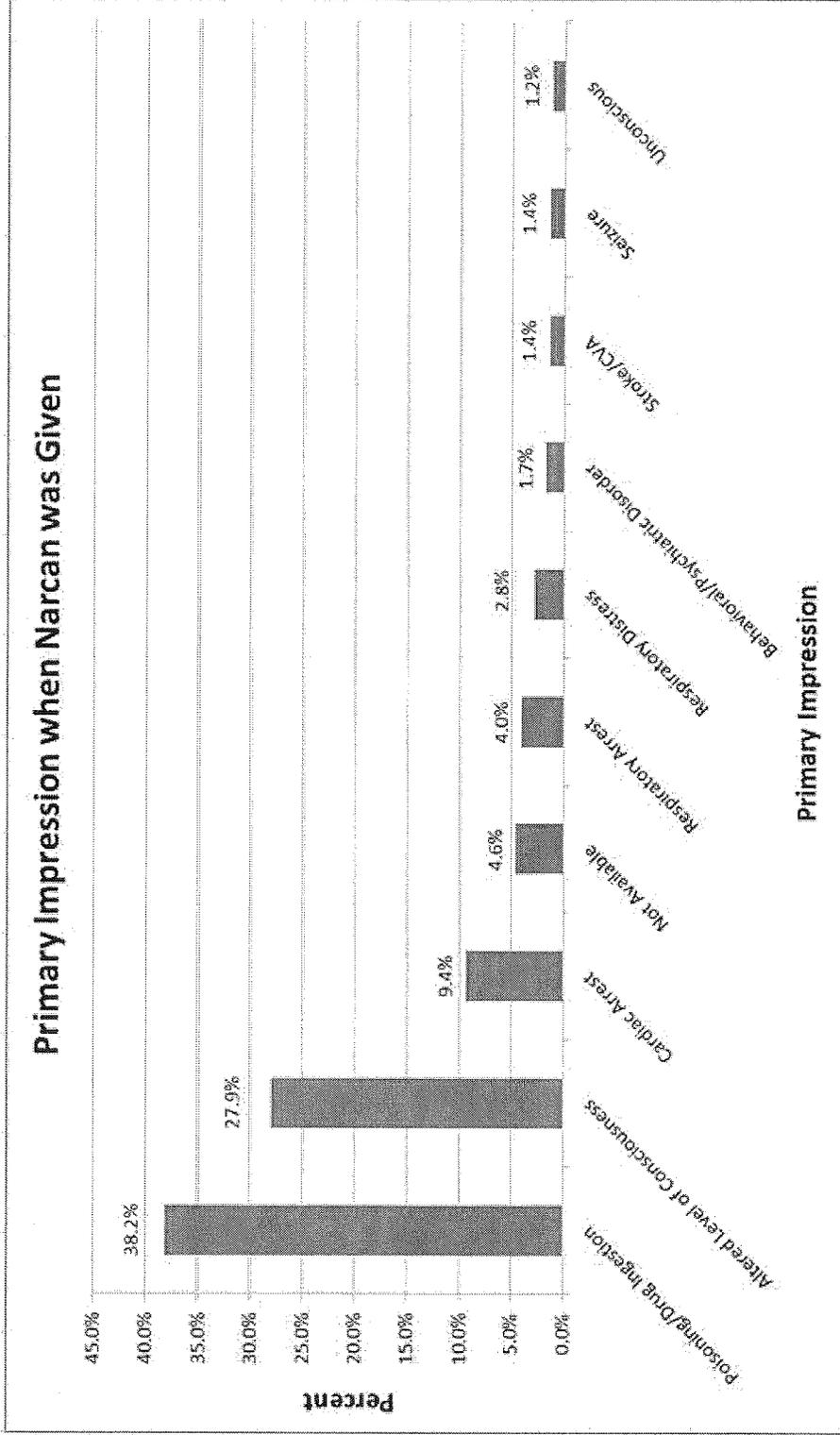
Narcan Given by EMS



Prior Aid



Provider's Primary Impression



*The following responses had <1% each: abdominal pain/problems, airway obstruction, allergic reaction, back pain (non-traumatic), cardiac rhythm disturbance, chest pain/discomfort, diabetic symptoms (hypoglycemia), diarrhea, ETOH abuse, electrocution, fever, hypotension, hypothermia, hypovolemia/shock, not applicable, not known, obvious death, other, sepsis, substance/drug abuse, syncope/fainting, traumatic injury, unknown problem, weakness.

Attachment #2



MICHAEL R. PENCE, Governor
STATE OF INDIANA

INDIANA DEPARTMENT OF HOMELAND SECURITY
302 West Washington Street
Indianapolis, IN 46204

**EMERGENCY MEDICAL SERVICES COMMISSION
TECHNICAL ADVISORY COMMITTEE MEETING SUMMARY**

DATE: September 1, 2015 10:00 a.m.

LOCATION: Noblesville Fire Department, Station 77
15251 Olio Road
Noblesville, IN 46060

PRESENT: Leon Bell, Chairman, ALS Training Institute
Elizabeth Weinstein, EMS for Children
Michael McNutt, BLS Training Program Director
Faril Ward, EMS Chief of Operating Officer
Charles Ford, EMS Chief Executive Officer
Sara Brown, EMS Medical Director
Jaren Kilian, ALS Training Program Director
Michael Gamble, Emergency Department Director

NOT PRESENT: Jessica Lawley, ALS Training Program Director
Sherry Fetters, Vice Chairman, EMS Chief Executive Officer

OTHERS PRESENT: John Zartman, EMS Commissioner, Myron Mackey, EMS Commissioner, EMS State Director Michael Garvey, other IDHS Staff, Kraig Kinney, Michael Cole, Dr. Michael Olinger, and Dr. Ed Eppler.



- A) Meeting called to order at 10:15 a.m. by Chairman Leon Bell.
- B) Quorum present
- C) Adoption of minutes:
 - a. May 12, 2015 minutes

A motion was made by Mr. Jaren Kilian to approve the minutes from the May 12, 2015 meeting as written. The motion was seconded by Mr. Faril Ward. The motion passed, minutes were approved.

- D) Public Comment: None
- E) Announcements:

- a. Commission Staff report:

EMS State Director Michael Garvey discussed the National Highway and Traffic Safety Association (NHTSA) assessment and final report. Director Garvey stated that 59 recommendations are in the final report. IDHS has completed a first round prioritization to get started. The agency will be posting the NHTSA final report on the web site soon. The goal is to have a strategic plan to present the EMS Commission by the end of the calendar year for their approval then move into the implementation stage. A few things that will be looked at is a fee structure for certifications and the trauma registry using level 4 trauma centers. Discussion regarding the need for level 4 trauma centers followed. Discussion regarding the recommendation for a special appointment to the Commission for EMS for Children also took place. Discussion for the need for rules for the interaction between the EMS Commission and the TAC took place.

- b. Upcoming TAC meetings:
 - 1. November 10, 2015

F) Old Business

- a. Review the Primary Instructor Written exam
 - i. Kraig Kinney gave Lindi Holt and Chris Schumate's names
- b. Develop tool for reporting of waivers by provider organizations
 - i. Will have information for the next meeting Vice Chairman Sherry Fetters was not present due to illness.
- c. Education sub-group to work on writing a training program for the use of Epi-pens for the EMR level
 - i. Will have information for the next meeting Mrs. Jessica Lawley was not present due to illness.

G) EMS Education Workgroup

- a. Kraig Kinney reported out for the EMS Education Workgroup
 - i. The group has reformed subcommittees
 - 1. Practical Exam group – to look at scenarios
 - 2. Continuing Education group -
 - 3. Newsletter Committee
 - ii. Chairman Bell asked Mr. Jaren Kilian and Mr. Faril Ward to work with the Education workgroup and IDHS staff for the PI manual update.

Chairman Bell stated that the TAC needs to have an Executive Session prior to the November meeting to review scenarios than there will need to be an Executive session prior to the EMS

Commission December meeting for the Commission to review the TAC information regarding the scenarios.

H) New Business

- a. Continuing education requirements – all levels
 - i. Chairman Bell reported that the National Registry is revising continuing education requirements.
 1. Chairman Bell asked that Mr. Kraig Kinney and the Education working group look at the National Registry requirements compared to the state specific requirements at all levels including EMR.
 - a. Mr. Kinney stated that the group should be able to report back at the TAC's November meeting.

Discussion changed from Continuing education requirements to accredited Training Institutions and the posting of their pass/fail rates on the state web site. Mr. Tony Pagano stated that the statistics are being posted in the EMS Commission minutes so anyone that would like to see them can by looking at the minutes. Discussion continued regarding changing requirements that are coming from CoAEMSP.

Chairman Bell had all the TAC members and staff present to break into groups

Mr. Jaren Kilian, Mr. Faril Ward, and Mr. Charles Ford from the TAC and Mr. Don Watson - Ambulance fastening systems and KKK standards.

Mr. Michael McNutt and Mr. Kraig Kinney – PI procedures/ initial certification process

The medical directors – Dr. Sara Brown, Dr. Elizabeth Weinstein, Dr. Michael Gamble, and Dr. Michael Olinger – Glucometer monitoring for the BLS level.

Break out into groups at 11:20am

Reconvened at 12:12pm

- b. P.I. Pass procedures/ Initial certification process
 - i. To take or not the EMT and practical exam
 - ii. To drop all and use NAEMS E level 1&2 instructor course
 - iii. Use of the national instructor exam

Mr. Michael McNutt reported out for the group. Mr. McNutt stated that the group went through the recommendation the TAC made in June of 2013 and the group made some modifications (see attachment #1).

A motion was made by Mr. McNutt to accept the modifications to the TAC recommendations from June 4, 2013. The motion was seconded by Mr. Kilian. The motion passed unanimously.

- c. Glucometer monitoring for BLS levels
 - i. Assigned to develop a training module for the EMR and EMT level to include consideration of the Clia certification regarding glucometer monitoring. – EMRs must be affiliated with a Indian certified provider organization and have a medical director.

Dr. Elizabeth Weinstein reported out for the group. Dr. Weinstein asked that staff contact Connecticut and ask for permission to use their power point they have posted on line. The group felt like there are two groups to be serviced. The new students coming in to EMS and the currently certified EMS personnel that will need to be trained in Glucometer monitoring. Mr. Pagano is going to contact Connecticut. The group felt like the Connecticut course and information was very well put together.

A motion was made by Dr. Weinstein to accept the program initiated by Kansas and adopted by Connecticut and to use it for the fundamental basis of primary education and to create a power point for continuing education. The Connecticut program does include skill testing. The motion was seconded by Mr. Ward. The motion passed.

- d. Ambulance fastening systems- KKK and Stryker

Mr. Jaren Kilian reported for the group. They are all for patient safety. It will be a big fiscal impact for all ambulance services to retro fit their current ambulances. The group recommends that nothing be changed now but there is a need for more research.

With no further business needing to be discussed a motion was made by Mr. Jaren Kilian to adjourn the meeting. The motion was seconded by Mr. Michael McNutt. The motion passed. The meeting was adjourned at 12:47pm.

Approved _____

Leon Bell, Chairman

Attachment #3

Attachment #4



EMS COMMISSION CERTIFICATION REPORT

Compiled: October 07, 2015



CERTIFICATIONS (10/07/2015)	Total # of Certs	Highest Lvl. Cert
EMS - PARAMEDIC	4267	4267
EMS - ADVACNED EMT	482	448
EMS - EMT	19240	14526
EMS - EMR	5112	4816
EMT - PI	507	N/A
TOTAL:	29608	24057

Q1 - 2015	Count
EMS - PARAMEDIC	78
EMS - ADVACNED EMT	37
EMS - EMT	430
EMS - EMR	124
EMT - PI	5
TOTAL:	674

Q2 - 2015	Count
EMS - PARAMEDIC	69
EMS - ADVACNED EMT	19
EMS - EMT	559
EMS - EMR	168
EMT - PI	10
TOTAL:	825

Q3 - 2015	Count
EMS - PARAMEDIC	80
EMS - ADVACNED EMT	24
EMS - EMT	412
EMS - EMR	91
EMT - PI	8
TOTAL:	615

Q4 - 2015	Count
EMS - PARAMEDIC	
EMS - ADVACNED EMT	
EMS - EMT	
EMS - EMR	
EMT - PI	
TOTAL:	0

Q1 - 2014	Count
EMS - PARAMEDIC	68
EMT - INTERMEDIATE	0
EMS - ADVACNED EMT (new)	44
EMT - BASIC ADVANCED	0
EMS - EMT	171
EMS - EMR	88
EMT - PI	7
TOTAL:	378

Q2 - 2014	Count
EMS - PARAMEDIC	127
EMT - INTERMEDIATE	0
EMS - ADVACNED EMT (new)	80
EMT - BASIC ADVANCED	0
EMS - EMT	475
EMS - EMR	197
EMT - PI	2
TOTAL:	881

Q3 - 2014	Count
EMS - PARAMEDIC	97
EMS - ADVACNED EMT	232
EMS - EMT	468
EMS - EMR	66
EMT - PI	11
TOTAL:	874

Q4 - 2014	Count
EMS - PARAMEDIC	78
EMS - ADVACNED EMT	47
EMS - EMT	225
EMS - EMR	156
EMT - PI	9
TOTAL:	515

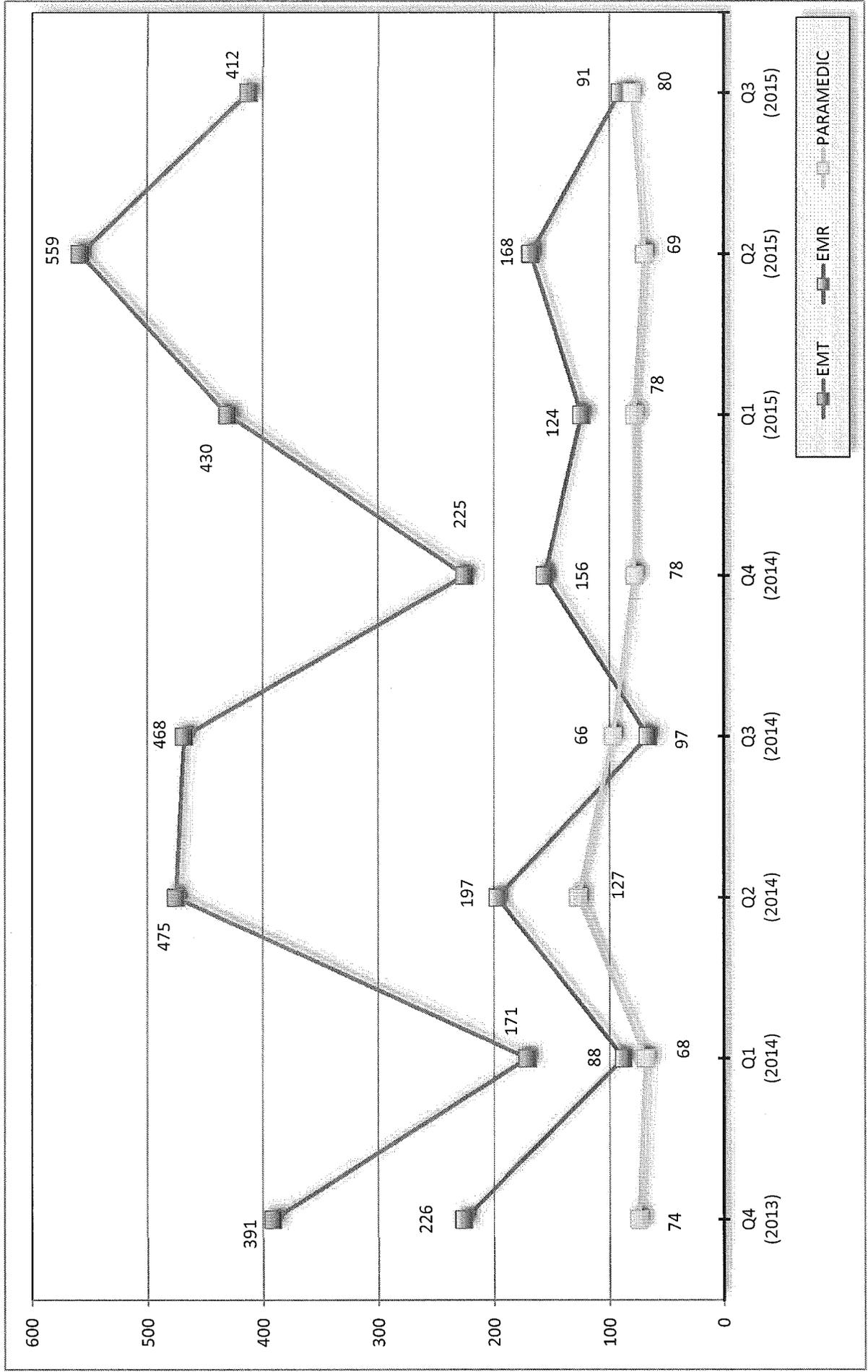
Q1 - 2013	Count
EMS - PARAMEDIC	97
EMT - INTERMEDIATE	2
EMS - ADVACNED EMT (new)	0
EMT - BASIC ADVANCED	18
EMS - EMT	372
EMS - EMR	198
EMT - PI	8
TOTAL:	695

Q2 - 2013	Count
EMS - PARAMEDIC	24
EMT - INTERMEDIATE	2
EMS - ADVACNED EMT (new)	2
EMT - BASIC ADVANCED	14
EMS - EMT	525
EMS - EMR	209
EMT - PI	3
TOTAL:	779

Q3 - 2013	Count
EMS - PARAMEDIC	76
EMT - INTERMEDIATE	1
EMS - ADVACNED EMT (new)	11
EMT - BASIC ADVANCED	1
EMS - EMT	464
EMS - EMR	93
EMT - PI	15
TOTAL:	661

Q4 - 2013	Count
EMS - PARAMEDIC	74
EMT - INTERMEDIATE	0
EMS - ADVACNED EMT (new)	15
EMT - BASIC ADVANCED	0
EMS - EMT	391
EMS - EMR	226
EMT - PI	6
TOTAL:	712

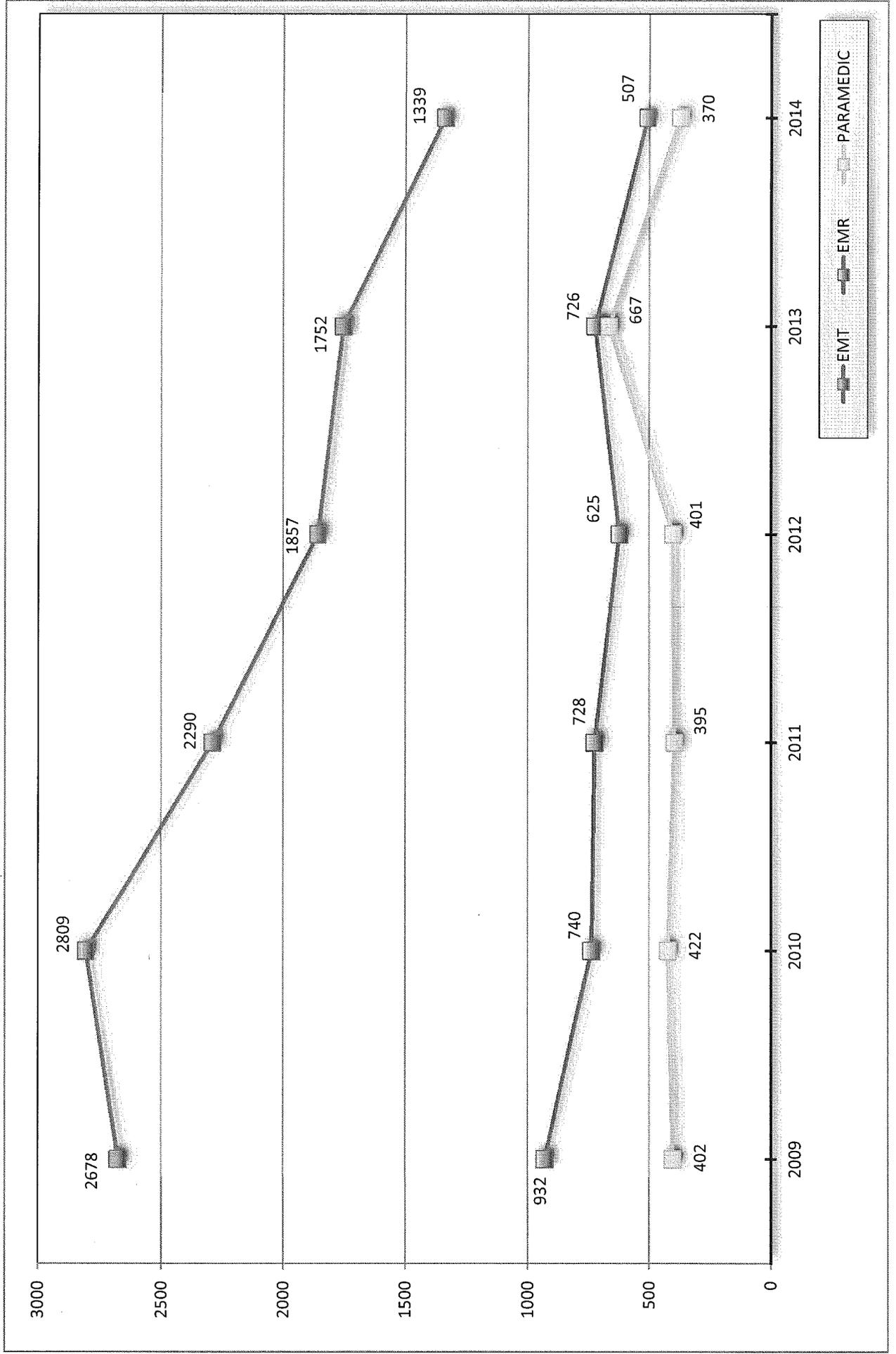
QUARTERLY	Q4 (2013)	Q1 (2014)	Q2 (2014)	Q3 (2014)	Q4 (2014)	Q1 (2015)	Q2 (2015)	Q3 (2015)
EMT	391	171	475	468	225	430	559	412
EMR	226	88	197	66	156	124	168	91
PARAMEDIC	74	68	127	97	78	78	69	80



Q4 (2015)	Q1 (2016)	Q2 (2016)	Q3 (2016)	Q4 (2016)	Q1 (2017)	Q2 (2017)
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-

YEARLY	2009	2010	2011	2012	2013	2014	2015
EMT	2678	2809	2290	1857	1752	1339	
EMR	932	740	728	625	726	507	
PARAMEDIC	402	422	395	401	667	370	

YEARLY CHANGE	'09-'10	'10-'11	'11-'12	'12-'13	'13-'14	'14-'15
EMT	131	(519)	(433)	(105)	(413)	
EMR	(192)	(12)	(103)	101	(219)	
PARAMEDIC	20	(27)	6	266	(297)	



Military Reciprocity since the last Commission meeting (information gathered 10/07/2015)

14 new individuals since the last Commission meeting for EMT for a total of 45 individuals for 2015

9 of the 14 have a two year EMT certification issued to them

3 of the 14 just needs to complete POST to receive his/her full two year certification

1 of the 14 needs to turn in additional paperwork along with completing the POST

5 individuals that have previously applied still need to complete POST in order to finish their certification.

Total we have issued 36 full two year certification for military personnel since the beginning of 2015.

**Emergency Medical Services
Provider Certification Report**

Date : October 7, 2015

October 16, 2015

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 **October 16, 2015** 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	446
Ambulance Service Provider	96
EMT Basic-Advanced Organization	15
EMT Basic-Advanced Organization non-transport	12
EMT Intermediate Organization	18
EMT Intermediate Organization non-transport	0
Paramedic Organization	191
Paramedic Organization non-transport	12
Rotorcraft Air Ambulance	13
Fixed Wing Air Ambulance	3

Total Count: 809

New Providers Since 19-AUG-15

Northwest Regional Medical	Basic Certification: 09/10/2015
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**Emergency Medical Services
Provider Certification Report**

Date : October 7, 2015

October 16, 2015

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Red Line Emergency Medical Services

**Basic Certification:
09/18/2015**

Attachment #5

Hilton, Candice

From: Pagano, Tony
Sent: Friday, September 25, 2015 4:05 PM
To: Hilton, Candice
Subject: Remainer of Training Report for Commission

Candice, the only other thing I have to send to the Commission is that as a result of the driver instructor updates we updated 69 current driver instructors and trained 43 new ones.

Tony Pagano
EMS Training Coordinator
Office of the State Fire Marshall
Indiana Department of Homeland Security
tpagano@dhs.in.gov
317-232-3985

Pass/Fail Report

Report Date: 9/25/2015 7:18:59 AM
Report Type: National Report
Registration Level: EMT-Basic / EMT
Course Completion Date: 3rd Quarter 2014 to 3rd Quarter 2015
Training Program: All

Attempted The Exam	First Attempt Pass	Cumulative Pass Within 3 Attempts	Cumulative Pass Within 6 Attempts	Failed All 6 Attempts	Eligible For Retest	Did Not Complete Within 2 Years
75901	68% (51645 / 75901)	78% (58852 / 75901)	78% (59025 / 75901)	0% (9 / 75901)	22% (16867 / 75901)	0% (0 / 75901)

Attempted the exam: Number of graduates that make at least one attempt at the exam.
First attempt pass: Number and percent of those who attempt the exam that pass on the first attempt.
Cumulative pass within 3 attempts: Number and percent of those who attempt the exam who pass on the first, second, or third attempt.
Cumulative pass within 6 attempts: Number and percent of those who attempt the exam who pass on the first, second, third, fourth, fifth, or sixth attempt.
Failed all 6 attempts: Number and percent of those who fail the exam six times.
Eligible for retest: Number and percent of those who failed their last attempt, but remain eligible for retest (less than six attempts, less than two years from course completion.)
Did not complete within 2 years: Number and percent of those who fail their last attempt and are no longer eligible for retest (more than two years from course completion.)

Pass/Fail Report

Report Date: 9/25/2015 7:07:31 AM
Report Type: State Report (IN)
Registration Level: EMT-Basic / EMT
Course Completion Date: 3rd Quarter 2014 to 3rd Quarter 2015
Training Program: All

Attempted The Exam	First Attempt Pass	Cumulative Pass Within 3 Attempts	Cumulative Pass Within 6 Attempts	Failed All 6 Attempts	Eligible For Retest	Did Not Complete Within 2 Years
321	68% (217 / 321)	74% (239 / 321)	74% (239 / 321)	0% (0 / 321)	26% (82 / 321)	0% (0 / 321)

Attempted the exam: Number of graduates that make at least one attempt at the exam.

First attempt pass: Number and percent of those who attempt the exam that pass on the first attempt.

Cumulative pass within 3 attempts: Number and percent of those who attempt the exam who pass on the first, second, or third attempt.

Cumulative pass within 6 attempts: Number and percent of those who attempt the exam who pass on the first, second, third, fourth, fifth, or sixth attempt.

Failed all 6 attempts: Number and percent of those who fail the exam six times.

Eligible for retest: Number and percent of those who failed their last attempt, but remain eligible for retest (less than six attempts, less than two years from course completion.)

Did not complete within 2 years: Number and percent of those who fail their last attempt and are no longer eligible for retest (more than two years from course completion.)

Pass/Fail Report

Report Date: 9/25/2015 7:02:40 AM
Report Type: Program Report (IN)
Registration Level: EMT-Basic / EMT
Course Completion Date: 3rd Quarter 2014 to 3rd Quarter 2015
Training Program: All

Program Name	Program Code	Attempted The Exam	First Attempt Pass	Cumulative Pass Within 3 Attempts	Cumulative Pass Within 6 Attempts	Failed All 6 Attempts	Eligible For Retest	Did Not Complete Within 2 Years
Ball Memorial Hospital	IN-4369	1	100% (1 / 1)	100% (1 / 1)	100% (1 / 1)	0% (0 / 1)	0% (0 / 1)	0% (0 / 1)
Cameron Memorial Hospital	IN-4534	1	100% (1 / 1)	100% (1 / 1)	100% (1 / 1)	0% (0 / 1)	0% (0 / 1)	0% (0 / 1)
Central Nine Career Center	IN-5026	2	0% (0 / 2)	0% (0 / 2)	0% (0 / 2)	0% (0 / 2)	100% (2 / 2)	0% (0 / 2)
Community Health Network EMS	IN-4063	3	67% (2 / 3)	67% (2 / 3)	67% (2 / 3)	0% (0 / 3)	33% (1 / 3)	0% (0 / 3)
Deaconess Hospital	IN-4516	11	64% (7 / 11)	73% (8 / 11)	73% (8 / 11)	0% (0 / 11)	27% (3 / 11)	0% (0 / 11)
DePauw University	IN-4580	3	0% (0 / 3)	0% (0 / 3)	0% (0 / 3)	0% (0 / 3)	100% (3 / 3)	0% (0 / 3)
Elkhart General Hospital	IN-4067	10	60% (6 / 10)	60% (6 / 10)	60% (6 / 10)	0% (0 / 10)	40% (4 / 10)	0% (0 / 10)
Franciscan Saint Anthony Health Crown Point	IN-4079	2	100% (2 / 2)	100% (2 / 2)	100% (2 / 2)	0% (0 / 2)	0% (0 / 2)	0% (0 / 2)
Franciscan St Elizabeth Health	IN-4068	2	100% (2 / 2)	100% (2 / 2)	100% (2 / 2)	0% (0 / 2)	0% (0 / 2)	0% (0 / 2)
Franciscan St. Margaret Health EMS Acade	IN-5267	1	100% (1 / 1)	100% (1 / 1)	100% (1 / 1)	0% (0 / 1)	0% (0 / 1)	0% (0 / 1)
Indiana University	IN-4495	4	50% (2 / 4)	50% (2 / 4)	50% (2 / 4)	0% (0 / 4)	50% (2 / 4)	0% (0 / 4)
Indiana University Health Goshen Hospital	IN-4162	3	100% (3 / 3)	100% (3 / 3)	100% (3 / 3)	0% (0 / 3)	0% (0 / 3)	0% (0 / 3)
Ivy Tech Bloomington	IN-4071	1	0% (0 / 1)	0% (0 / 1)	0% (0 / 1)	0% (0 / 1)	100% (1 / 1)	0% (0 / 1)
Ivy Tech			33%	67%	67%	0%	33%	0%

Community College	IN-4864	3	(1 / 3)	(2 / 3)	(2 / 3)	(0 / 3)	(1 / 3)	(0 / 3)
Ivy Tech Community College Columbus	IN-4073	1	0% (0 / 1)	0% (0 / 1)	0% (0 / 1)	0% (0 / 1)	100% (1 / 1)	0% (0 / 1)
Ivy Tech Community College	IN-4169	8	88% (7 / 8)	88% (7 / 8)	88% (7 / 8)	0% (0 / 8)	13% (1 / 8)	0% (0 / 8)
Northeast								
Ivy Tech Community College Richmond	IN-4501	2	100% (2 / 2)	100% (2 / 2)	100% (2 / 2)	0% (0 / 2)	0% (0 / 2)	0% (0 / 2)
Ivy Tech Community College-Evansville	IN-4141	19	63% (12 / 19)	68% (13 / 19)	68% (13 / 19)	0% (0 / 19)	32% (6 / 19)	0% (0 / 19)
Ivy Tech Community College-Kokomo	IN-4362	3	33% (1 / 3)	100% (3 / 3)	100% (3 / 3)	0% (0 / 3)	0% (0 / 3)	0% (0 / 3)
Ivy Tech South Bend	IN-4070	4	25% (1 / 4)	25% (1 / 4)	25% (1 / 4)	0% (0 / 4)	75% (3 / 4)	0% (0 / 4)
Memorial Hospital/Jasper	IN-5271	2	50% (1 / 2)	50% (1 / 2)	50% (1 / 2)	0% (0 / 2)	50% (1 / 2)	0% (0 / 2)
Paramedic Science	IN-5082	1	100% (1 / 1)	100% (1 / 1)	100% (1 / 1)	0% (0 / 1)	0% (0 / 1)	0% (0 / 1)
Parkview Huntington Hospital EMS	IN-5269	1	0% (0 / 1)	0% (0 / 1)	0% (0 / 1)	0% (0 / 1)	100% (1 / 1)	0% (0 / 1)
Parkview Regional Medical Center	IN-5296	1	100% (1 / 1)	100% (1 / 1)	100% (1 / 1)	0% (0 / 1)	0% (0 / 1)	0% (0 / 1)
Pelham Training	IN-4668	96	72% (69 / 96)	83% (80 / 96)	83% (80 / 96)	0% (0 / 96)	17% (16 / 96)	0% (0 / 96)
Porter Health System	IN-4075	1	100% (1 / 1)	100% (1 / 1)	100% (1 / 1)	0% (0 / 1)	0% (0 / 1)	0% (0 / 1)
Prompt Ambulance Central	IN-5138	1	100% (1 / 1)	100% (1 / 1)	100% (1 / 1)	0% (0 / 1)	0% (0 / 1)	0% (0 / 1)
Riverview Hospital	IN-4077	2	50% (1 / 2)	100% (2 / 2)	100% (2 / 2)	0% (0 / 2)	0% (0 / 2)	0% (0 / 2)
St Francis Hospital	IN-4080	3	67% (2 / 3)	67% (2 / 3)	67% (2 / 3)	0% (0 / 3)	33% (1 / 3)	0% (0 / 3)
St Mary Medical Center/Hobart	IN-4943	1	100% (1 / 1)	100% (1 / 1)	100% (1 / 1)	0% (0 / 1)	0% (0 / 1)	0% (0 / 1)