



LOUISIANA
**DEPARTMENT OF
HEALTH**

*Bureau of Emergency
Medical Services*

BUREAU OF EMERGENCY MEDICAL SERVICES POLICY AND PROCEDURE MANUAL

2025

The Louisiana Bureau of EMS is responsible for the overall planning, coordination, licensing and regulation of Louisiana's EMS system.

**Bureau of EMS
Functions**

EMS Commission

EMS Task Force

Education

Examination

Licensing

**Ambulance
Standards**

**Certifications
Ambulance
Operator
Telephone CPR**

***Jump Start Your
Heart Act***

**LOUISIANA
BUREAU OF
EMS**

**7273 Florida Blvd.
Baton Rouge, LA**



LOUISIANA DEPARTMENT OF HEALTH

OFFICE OF PUBLIC HEALTH

BUREAU OF EMERGENCY MEDICAL SERVICES



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BUREAU OF EMS FUNCTIONS

Mission Statement

To coordinate, develop, improve, and maintain a comprehensive and dynamic emergency medical services system for the state that will ensure prompt, effective, and unimpeded service by appropriately educated and licensed EMS clinicians to all residents and visitors of the state.

Staff

Title	Responsibilities
Director Susan F. Bailey Susan.Bailey@la.gov 225/925-4022	<ul style="list-style-type: none"> • Directs and manages the operations of the Bureau of EMS • Maintains responsibility for the productivity, efficiency, and effectiveness of Bureau of EMS personnel • Formulates and implements current and long-range plans, policies, procedures, and regulations • Monitoring of a QA/QI program of the examination process • Plans and submits annual budget requests • Proposes pertinent legislative initiatives • Represents the Bureau of EMS in matters at various local, state, and federal hearings, meetings, and conferences
Deputy Director Stacy Barbay 225/925-3840	<ul style="list-style-type: none"> • Conducts investigations that originate from affirmative criminal history reports and oversight of complaints • Prepares all documents to be reviewed by the EMS Commission during the meetings. • Facilitation of the EMS Commission • Oversight of bi-annual equipment inventory • Responsible for legislative tracking and notifying the Bureau of EMS Director of pertinent legislation that pertains to the Bureau of EMS • Monitoring of a QA/QI program for the credentialing process • Monitoring of a QA/QI program of the 911 and Ambulance Operations certification process • Monitoring of a QA/QI program of the EMS Provider inspection process
Administrative Assistant Rochelle Grayer Rochelle.Grayer@la.gov 225/925-4022	<ul style="list-style-type: none"> • Customer Service • P-Card transactions • Travel reservations, payments, etc.

Education Manager John Cavell John.Cavell@la.gov 225/925-7229	<ul style="list-style-type: none"> Management of the approval process for Louisiana EMS Education Programs Creation, implementation, and monitoring of a proactive quality management program to improve the quality of EMS education in Louisiana Provides training on topics specific to the Bureau of EMS Promotes best practices in EMS education by collaborating with EMS education programs, the Committee on Accreditation of Educational Programs, the Louisiana Department of Education, and the National Registry of EMTs
Competency Coordinator Douglas Champlin Douglas.Champlin@la.gov 225/925-7214	<ul style="list-style-type: none"> Collaboration with the National Registry of EMTs, as applicable Direct oversight of all aspects regarding the psychomotor exam and examiners Creation, implementation, and monitoring of exam centers to facilitate psychomotor exams throughout the state Coordinate functions of the CPR Training site Monitoring of a QA/QI program for all psychomotor exams Management of bi-annual equipment inventory
Licensing Coordinator Katherine Robillard Katherine.Robillard@la.gov 225/925-7216	<ul style="list-style-type: none"> Direct oversight of the credentialing process that includes licensure, re-licensure, and reciprocity for EMS Clinicians Collaboration with the National Registry of EMTs for licensure verification Function as the Bureau of EMS Safety Officer Facilitation of the EMS Task Force Bureau of EMS liaison with technology partners in the maintenance and operation of the Bureau of EMS's Information Management System.
Certification Coordinator Rachael Jordan Rachael.Jordan@la.gov 225/925-6873	<ul style="list-style-type: none"> Performing the duties promulgated by Act 578 - setting the minimum standards for course approval, instruction, and examination of the T-CPR program Issue T-CPR certifications to qualified applicants Issue Ambulance Operator Certifications to qualified applicants Monitor submitted documents of applicants with an affirmative criminal history
Compliance Coordinator Molly Terebieniec Molly.Terebieniec@la.gov 225/925-7230	<ul style="list-style-type: none"> Oversight of the Bureau of EMS functions in preparing for and during a declaration of disaster Regulatory functions of ambulance inspections and licensing Conducts investigations that originate from complaints
Jump Start Your Heart Act Coordinator Aimee Hall Aimee.Hall@la.gov 225/925-4374	<ul style="list-style-type: none"> Assists with the registration of AEDs by educational facilities Monitors the educational facilities for compliance with Act 234 Investigate complaints regarding AEDs
Financial Officer Jazmin Douglas Jazmin.Douglas@la.gov 225/925-7224	<ul style="list-style-type: none"> Processes all financial transactions Drafts EMS Commission letters Manages the budget Process contracts Responsible for maintaining the Bureau of EMS webpage and Facebook page

§101 Statement of Purpose

A. The Louisiana Bureau of Emergency Medical Services is created within the Louisiana Department of Health for the purpose of:

1. Maintaining a program for the improvement and regulation of emergency medical services in the state;
2. Developing a state plan for the prompt and efficient delivery of adequate emergency medical services to acutely sick and injured individuals;
3. Serving as the primary agency for participation in any federal program involving emergency medical services and, pursuant to legislative appropriation, disbursing available funds to implement any service program;
4. Identify all public and private agencies, institutions, and individuals that are or may be engaged in emergency medical services training and set minimum standards for course approval, instruction, examination, and telephone CPR.

B. The Bureau of EMS shall:

1. Issue a license and renew a license to any duly qualified applicant for licensure and license renewal as an Emergency Medical Services Clinician and an Emergency Medical Services Provider;
2. Prescribe application forms for licensure and license renewal;
3. Adopt requirements and standards of practice approved by the EMS Commission for Emergency Medical Services Clinicians;
4. Conduct investigations as requested by the EMS Commission;
5. Deny, withhold, revoke, restrict, probate, or suspend a license as directed by the EMS Commission;
6. Adopt continuing education requirements and standards for individuals seeking to renew a license;
7. Conduct surveys of EMS Providers during the month of their license renewal;
8. Conduct investigations of EMS Providers after receiving a complaint;
9. Process changes requests from EMS Providers
10. Within 60 days of the end of the fiscal year, prepare an annual report that will include:
 - a. Accomplishments of the Bureau of EMS to include the following summaries:
 - i. Administrative
 - ii. Education
 - iii. Licensing
 - iv. Examination/Competency
 - v. Ambulance Standards/Compliance
 - vi. Certification
 - vii. *Jump Start Your Heart Act*
 - b. The activities of the EMS Commission, including the number and nature of the hearings conducted;
 - c. The activities of the EMS Task Force

§103 Definition of Terms

- A. *Accountability* – being answerable for one's actions or inactions. The licensed EMS professional answers to themselves, patient, agency, medical director, profession, and society for the effectiveness and quality of EMS care rendered. It is the personal responsibility of each individual to maintain competency in practice. If the assigned EMS professional does not possess the specialized EMS knowledge, skills, and abilities required to provide the needed care, said professional shall notify the appropriate supervisory EMS personnel.
- B. *Additional Acts* – activities beyond those taught in state-approved EMS education programs. The Commission authorizes additional acts through rules and regulations or declaratory statements interpreting the legal definition of EMS. Licensed EMS clinicians are accountable for attaining and maintaining competency when performing approved additional acts.
- C. *Adjunct Instructor/Subject Matter Expert (SME)* – an individual who is responsible for assisting with the instruction of cognitive, psychomotor, and affective subject matter in which the individual has appropriate or exceptional expertise that will be beneficial to the students.
- D. *Advanced Life Support (ALS)* – the provision of medical supplies and services by EMS clinicians who are licensed at least to the level of advanced emergency technician or equivalent.
- E. *Affective Domain* – deals with attitudes, beliefs, behaviors, emotions, and how much value an individual places on something.
- F. *Aiding and Abetting* – to intentionally assist anyone by condoning, or to apply positive or negative force to assist anyone in violating Parts I-III of Chapter 5-C of Title 40 of the Revised Statutes or the rules and regulations of the Commission or Bureau.
- G. *Ambulance* – means any authorized emergency vehicle, equipped with warning devices, designed and operated as a part of a regular course of conduct or business to transport a sick or injured individual, or which is advertised or otherwise held out to the public as such; it shall not mean a hearse or other funeral home vehicle utilized for the transportation of the dead.
- H. *Ambulance service, ambulance provider or ambulance agency* – means any person, firm, association, or government entity owning, controlling, or operating any business or service that furnishes, operates, conducts, maintains, advertises, engages in, proposes to engage in, or professes to engage in the business or service of transporting, in ambulances, individuals who may need medical attention during transport.
- I. *Assessment* – identifying human responses, which indicate existing or potential abnormal conditions through the patient history, physical examination, and observation, in accordance with the standards of EMS practice.
- J. *Assignment* – designating EMS activities to be performed by an individual consistent with his/her scope of practice.
- K. *Audit* – an analysis of a program's environment, culture, records, and performance. See also Desk Audit and Scholastic Audit
- L. *Basic Life Support (BLS)* – the provision of medically necessary supplies and services by EMS clinicians who are licensed at least to the level of emergency medical technician.
- M. *Bureau of EMS* – the Louisiana Department of Health, Bureau of Emergency Medical Services.
- N. *Cardiopulmonary resuscitation or CPR* – a combination of rescue breathing and manual and mechanical chest compressions delivered to an individual believed to be in cardiac arrest.

O. *Carrying out the medical orders of a physician licensed in Louisiana*
1. licensed EMS Clinicians may, based on their individual judgment of each situation and without exceeding their scope of practice, accept verbal orders initiated by a licensed physician, provided the order is related to the said Clinicians' scope of practice;
2. licensed EMS Clinician may execute standing orders of a licensed physician.

P. *Certified Ambulance Operator* – an individual who is certified by the Bureau of EMS as a certified ambulance operator. This does not include any individual employed by a fire department of any municipality, parish, or fire protection district, or any volunteer firefighter of the state of Louisiana.

Q. *Clinical Coordinator* – an individual who is part of the instructor team who primarily focuses on monitoring and scheduling students for hospital and/or ambulance clinical time.

R. *Cohort* – a group of students who are attending a class together (sometimes used synonymously with class).

S. *Cognitive Domain* – deals with didactic information; knowledge and facts.

T. *Collaborating* – a process involving two or more healthcare providers working together, though not necessarily in each other's presence, each contributing one's respective area of expertise to provide more comprehensive care than one alone can offer.

U. *Committee on Accreditation of Education Programs for the Emergency Medical Services Professions (CoAEMSP)* – the national organization that reviews and recommends the national accreditation of the EMS Education Program to the Commission on Accreditation of Allied Health Education Programs (CAAHEP).

V. *Community volunteer responder* – individuals who serve their community voluntarily and who receive no compensation of any kind for such services. A community volunteer responder is not an individual who provides EMS services as a component of their employment or paid profession.

W. *Controlled Dangerous Substance (CDS)* – a drug, substance, or immediate precursor in Schedule 1 through V of R.S. 40:964.

X. *Course Enrollment Date* – the date by which students are to be added to the course roster in the IMS.
1. The date is calculated by adding the appropriate number of days following the course start date.
2. For initial courses:
a. EMR – 7 days
b. EMT – 14 days
c. AEMT – 21 days
d. Paramedic – 28 days
3. For continuing education units: 5 days following the course.

Y. *Delegating EMS Interventions* – committing or entrusting the performance of selected EMS tasks by the licensed EMS Clinician to other competent EMS Clinicians in selected situations. The licensed EMS Clinician retains accountability for the total EMS care of the individual.

Z. *Deny* – activities designed to resolve, diminish, or prevent the needs that are inferred from the individual's problem; includes planning, implementation, and evaluation of said activities in accordance with the Standards of EMS practice.

AA. *Department* – the Louisiana Department of Health (LDH).

AB. *Desk Audit* – serves as a review of documentation submitted by the agency for compliance with state policies.

AC. *Emergency Disaster Operations Site* – Emergency Disaster Operations Sites include but are not limited to sites such as the Governor’s Office of Homeland Security and Emergency Preparedness (GOHSEP), LDH Emergency Operations Center (LDH EOC), Regional/Parish Emergency Operations Centers (Regional/Parish EOC), Medical Special Needs Shelters (MSNS), Critical Transportation Needs Shelters (CTNS), hazardous materials sites, transportation staging sites, Point of Dispensing Sites (PODS), search and rescue operations sites, and sites designated by the LDH Emergency Preparedness Director or his/her designee.

AD. *EMS Agency* – synonymous with EMS provider; an entity that employs EMS Clinicians for the purpose of administering care.

AE. *EMS Educator/Instructor* – an individual who provides instruction on EMS topics.

AF. *EMS* – Emergency Medical Services activities designed to resolve, diminish, or prevent the needs that are inferred from the individual’s problem; includes the planning, implementation, and evaluation of said activities in accordance with the Standards of EMS practice.

AG. *EMS Clinician* – synonymous with EMS Professional; an individual licensed by the Bureau of EMS as a(n):

1. Emergency Medical Responder (EMR)
2. Emergency Medical Technician (EMT)
3. Advanced Emergency Medical Technician (AEMT)
4. Paramedic (NRP).

AH. *EMS Professional* – synonymous with EMS Clinician.

AI. *EMS Provider* – synonymous with EMS agency; an entity that employs EMS Clinicians for the purpose of administering care.

AJ. *EMS Services* – activities designed to resolve, diminish, or prevent the needs that are inferred from the individual’s problem; includes the planning, implementation, and evaluation of said activities in accordance with the Standards of EMS Practice.

AK. *EMS Student* – a person who is engaged in learning experiences in a program of study leading to candidacy for a license to practice as a licensed EMS professional. The term applies only when the person is participating in an integral part of the program of study.

AL. *Emergency Support Function 8 (ESF 8)* – Emergency Support Function 8 is Public Health and Medical Services and support to other ESFs to include Emergency Transportation, Communications, Public Works, and Engineering, Firefighting, Emergency Management, Mass Care, Housing and Human Services, Resources Support, Public Health and Medical Services, Search and Rescue, Oil Spill, Hazardous Materials and Radiological, Agriculture, Energy and Utilities, Public Safety and Security, Community Recovery, Mitigation and Economic Stabilization, Emergency Public Information or Military Support to Civilian Affairs functions as specified in the Governor’s Executive Order about the State’s Emergency Operations Plan.

AM. *Expanded Scope of Practice* – those functions, procedures, and activities that are currently not part of the approved National EMS Education Standards, but have been approved by the EMS Commission as appropriate for the various levels of EMS professionals.

AN. *Field Diagnosis* – the out-of-hospital evaluation of the patient’s condition and its cause(s).

AO. *Habit* – a mode of behavior, which an individual acquires over a period of time.

AP. *Information Management System (IMS)* – the official data management system utilized by the Bureau of EMS for credentialing of EMS Providers and EMS Clinicians, educational program and course administration, and EMS Commission investigations. All data stored in the IMS is housed on a secure state server.

1. Information submitted by licensees is the responsibility of the individual licensee. Accounts are to be accessed only by the individual licensee.
2. IMS Passwords are confidential and not to be shared. It is a violation of the Louisiana Office of Technology Services' policy to share access to an IMS account. Supervisors and instructors may not request this information from employees or students.
3. All data submitted via the IMS serves as an attestation on behalf of the licensee. Submitting false information or completing an application on behalf of a licensee is considered an act of fraud and is subject to the appropriate penalties.

AQ. *Incompetent* – a court judgment or legal insanity or incompetence or a medical diagnosis indicating insanity or incompetence.

AR. *Instructor* – an individual who possesses the appropriate academic and/or allied health credentials and an understanding of education principles and theories, but may have limited teaching experience.

1. This individual is responsible for providing instruction to students and assisting a primary instructor.
2. All instructors must have their qualifications verified and be approved by the Bureau of EMS before providing any EMS Instruction.
3. This term can be used interchangeably with *teacher* or *educator*.

AS. *Investigation* – a formal inquiry into an EMS Clinician, EMS Student, or EMS Provider prompted by a complaint.

AT. *Lab Instructor* – primarily focuses on instructing students in the laboratory setting.

AU. *Limit* – to confine within certain bounds.

AV. *Maintaining EMS Care Rendered Directly or Indirectly* – preserving the continuity of safe and effective EMS care, including the delegated EMS activities.

AW. *Managing and Supervising the Practice of EMS* – those activities that serve to fulfill the accountability of the licensed EMS Clinician for the total EMS care of the individual when tasks in the EMS care are delegated to other EMS personnel. These activities include:

1. judging the priority of EMS needs of the individual(s);
2. determining actions required to meet the needs;
3. assigning personnel, including self, qualified to implement the prescribed EMS care components of the care;
4. providing information needed by personnel for the implementation of the assigned EMS care and ascertaining the assimilation of the same information;
5. directing the EMS care and evaluating the outcomes of that care;
6. determining and initiating changes in EMS care or in the assignment of EMS personnel.

AX. *Matriculation Rate* – calculated as the number of students marked as having passed an initial EMT, AEMT, or Paramedic course divided by the total number of students that began the course.

AY. *Medical Diagnosis* – the conclusion reached in the identification of the patient's disease, especially the art of distinguishing among several possibilities with the intent of prescribing relevant treatment.

AZ. *Medical Error* – a preventable adverse effect of medical care, whether or not evident or harmful to the patient, that includes errors ranging from medication errors, misdiagnosis, and under- and over-treatment.

BA. *Medical Director* – a physician who is licensed to practice medicine in the state of Louisiana, who is associated with an EMS service provider or EMS education program, and participates in any or all of the following:

1. Education
2. Training
3. Medical coordination
4. Medical direction
5. Supervision
6. Establishment of standard operating procedures for EMS Clinicians
7. Reviewing the performance of EMS Clinicians

BB. *Medical Interventions* – all functions, activities, medications, and medical treatments of therapeutic or corrective nature approved by the Bureau of EMS and/or the EMS Commission.

BC. *Mentally Incompetent* – a court judgment of legal insanity or incompetence, or a medical diagnosis indicating insanity or incompetence.

BD. *National Registry of Emergency Medical Technicians (NREMT)* – the non-profit, independent, non-governmental agency that certifies the proficiency of EMS Clinicians through the provision of a standardized examination for individuals who have completed a state-approved EMS Education Program.

BE. *National EMS Education Standards* – the most recent edition of the guidelines published by the National Highway Traffic Safety Administration (NHTSA) of the U.S. Department of Transportation.

BF. *Negligence* – a breach of duty of care owed to an individual.

BG. *Other Causes* – includes, but is not limited to:

1. Failure to practice EMS in accordance with the standards of EMS Practice;
2. Possessing a physical impairment or mental impairment that interferes with the judgment, skills, or abilities required for the practice of EMS;
3. Failure to utilize appropriate judgment;
4. Failure to exercise technical competence in carrying out EMS care;
5. Violating the confidentiality of information or knowledge concerning the patient;
6. Performing procedures beyond the authorized scope of EMS or any specialty thereof;
7. Performing duties and assuming responsibilities within the scope of the definition of EMS practice when competency has not been achieved or maintained, or where competency has not been achieved or maintained, or where competency has not been achieved or maintained in a particular specialty;
8. Improper use of drugs, medical supplies, or equipment;
9. Misappropriating items for an individual, agency, or entity;
10. Falsifying records or documents, including patient records or any records or documents provided to the Commission, the Bureau, or any other governmental or regulatory agency;
11. Failure to act, or negligently or willfully committing any act that adversely affects the physical or psychosocial welfare of the patient;
12. Delegating or assigning EMS care, functions, tasks, or responsibilities to others contrary to regulations or failing to adequately supervise EMS tasks assigned to others during the course of providing EMS care;

13. Leaving an EMS assignment where there was a duty to act without properly notifying appropriate personnel;
14. Failing to report, or self-report, to the Bureau, through the proper channels, facts known regarding the incompetent, unethical, or illegal practice or conduct, including criminal conduct, arrest, or conviction, of any EMS Clinician, including any practice or conduct that violates any provision, requirements, or prohibitions contained in this Part or R.S. 40:1131-1141;
15. Has violated a rule, policy, or order adopted by the EMS Commission and/or the Bureau of EMS, or a state or federal law relating to the practice of EMS Clinicians, or a state or federal narcotics or controlled substance law;
16. Inappropriate, incomplete, or improper documentation;
17. Use of or being under the influence of alcoholic beverages, medications, illegal drugs, or other substances that impair judgment while on duty;
18. Failure to cooperate with the EMS Commission and/or the Bureau of EMS by:
 - a. Not furnishing in writing a complete explanation covering a matter requested in writing by the EMS Commission and/or the Bureau of EMS; or
 - b. Not responding to subpoenas or other lawful requests for information issued by the EMS Commission or Bureau of EMS directly related to an investigation or disciplinary hearing regarding an individual;
19. Exceeds professional boundaries, including but not limited to, sexual misconduct; and
20. Use of any advertisement or solicitation that is false, misleading, or deceptive to the general public or persons to whom the advertisement or solicitation is primarily directed.
21. Physically harming, or attempting to harm physically, individuals without lawful justification;
22. Engaging or attempting to engage in nonconsensual sexual acts, including solicitation of minors for sexual acts or for explicit photos or videos;
23. Violating the reasonable expectation of privacy of an individual, including, but not limited to, taking or releasing/publishing explicit photographs or video without consent;
24. Destruction or attempted destruction of the property of any person without consent;
25. Engaging in conduct that harms, or poses a serious risk of harm to, the public or any individual.

BH. *Out of Hospital Care* – patient care that occurs outside of the hospital; this may include, but is not limited to, before arriving at the hospital, during transfers between healthcare facilities, during a Community Paramedicine visit, post-hospital admittance, or as part of acute or chronic care occurring outside of the hospital.

BI. *Overtime Hour*

1. For FLSA, overtime is any hour (or portion thereof) actually worked over 40 hours in a work week or other number of hours regularly scheduled in the work week.
2. For Civil Service rules and classified employees, overtime is defined in Chapter 21 of the Civil Service rules as any hour worked:
 - a. In excess of the employee's regularly scheduled work day.
 - b. In excess of the employee's regularly scheduled work period.
 - c. On a holiday, including designated holidays.
 - d. During official closure.
3. For unclassified employees in the Executive Branch, overtime is defined in the most recent Executive Order on Rules and Policies on Leave for Unclassified Employees.

BJ. *Pass/Fail Rate* – calculated as the number of initial EMT, AEMT, or Paramedic course students passing, on their initial attempt (defined as the first attempt at each skill station), the NREMT cognitive and psychomotor exams, divided by the total number of students having passed the initial course.

1. A minimum of ten student data points is required.
2. The pass/fail rates for the cognitive and psychomotor exams are calculated independently.

BK. *Physician* – a physician's license to practice medicine by the Louisiana State Board of Medical Examiners.

BL. *Preceptor* – a person who supervises EMS students and evaluates EMS students during clinical or prehospital internship required by the EMS Education Program and who is licensed at a level that meets or exceeds the level of EMS licensure for which the person supervises or evaluates, or holds a license issued by the Louisiana State Board of Medical Examiners or the Louisiana Board of Nursing.

BM. *Preceptorship* – a period of practical experience and training for an EMS student that is supervised by a licensed subject matter expert, instructor, or experienced individual.

BN. *Prehospital Care* – patient care that occurs before the patient arrives at the hospital

BO. *Prehospital Internship* – EMS training outside of a classroom or clinical facility that allows an EMS student to develop and utilize EMS procedures and protocols under supervision in an out-of-hospital setting and allows the student to gain an understanding of the nature of EMS practice.

BP. *Preventive Instruction* – those EMS measures that provide health information and explanation to the public to reduce the incidence of death and injury.

BQ. *Primary Instructor* – an individual who may also be the program director, has the primary responsibility of delivering the cognitive, psychomotor, and affective domain information to students; has an understanding of education principles and theories, and the required teaching experience to provide quality instruction to a cohort of EMS students, must possess a National Certification and a Louisiana license as an EMS Clinician.

BR. *Primary Work Site* – an employer's place of work where the employee is domiciled.

BS. *Probate* – to stay a sentence of license suspension during good behavior and placing under the supervision of the Bureau of EMS for a period of time. The license is marked "probated," and special requirements are identified.

BT. *Professional Boundaries* – the limits of the professional relationship that allow for a safe therapeutic connection between the EMS Clinician and the patient.

BU. *Program* – an organized body that designs, develops, and/or delivers a variety of EMS education products, including primary instruction and continuing education (refresher) instruction.

1. This body may be found within a training academy, hospital, industrial setting, business, or academic setting.
2. Responsible for organizing and administering classes and events.

BV. *Program Director* – the primary responsibility and authority to administer the program.

1. This individual is responsible for all aspects of the program that include, but are not limited to, matters relating to teaching, advising, utilizing the required curriculum, program revisions, clinical site management, students' success on the credentialing exam, etc.
2. This individual may also hold another title within the Education Program.
3. Program Director Requirements
 - a. Nationally Certified and State-licensed EMS Clinician and

- b. An experienced instructor who possesses a certificate of completion from a Bureau of EMS recognized EMS Educator program (NAEMSE, Firefighter Instructor II, etc.) and
 - c. Has 1 year of active teaching experience under a mentor who is willing to sign off on the instructor's competence to serve as a program director or
 - d. Has 5 years of experience teaching in a Bureau of EMS-approved EMS Program

BW. *Protocol* – a written statement, signed and dated by the EMS Provider director, which has been submitted to the Department that lists and describes the steps within the applicable Scope of Practice that EMS Clinicians are required to follow when assessing and treating a patient.

BX. *Psychomotor Domain* – deals with skills, actions, and manual manipulation.

BY. *Reasonable Skill and Safety* – practicing EMS in accordance with the Standards of EMS Practice.

BZ. *Reprimand* – written communication to the individual stating the EMS Commission's concerns and public notification of the individual's name and reasons for the reprimand.

CA. *Restrict* – to limit or restrain EMS practice by settings, types of patients, or other means.

CB. *Revoke* – to annul or make void by calling back. Revocation of a license shall be indefinite as to the practice of EMS in Louisiana.

CC. *Scholastic Audit* – serves as a comprehensive review of an Education Program's instructional and organizational effectiveness.

- 1. Investigative in nature, the audit is performed to ensure compliance with state policies and regulations,
- 2. Usually performed on site, this audit may include personnel and student interviews and a review of all relevant records,
- 3. The audit provides information regarding the Education Program's strengths, weaknesses, and opportunities for improvement.

CD. *Scope of Practice* – the range of duties and skills EMS Clinicians are authorized to perform.

CE. *Site Visit* – inspective (not investigative) in nature, the visit is performed to assist in maintaining compliance with state policies and regulations.

- 1. A visit is performed by a representative of the Bureau of EMS, usually informally, to affirm agency quality.

CF. *Shall* – indicates mandatory requirements.

CG. *Sexual Misconduct* – an extreme boundary violation that involves the use of power, influence, and/or knowledge inherent in one's profession in order to obtain sexual gratification, romantic partners, and/or sexual deviant outlets. Any behavior that is seductive, sexually demeaning, harassing, or reasonably interpreted by a patient, co-worker, or student as sexually inappropriate is a violation of the EMS Clinician's fiduciary responsibility to the patient.

CH. *Specialized Knowledge and Skills* – required for the practice of EMS; the current theory and practice taught in state-approved EMS education programs prepare persons for EMS professional license as well as information in the biological, physical, and behavioral sciences.

CI. *Specialty Care Transport Paramedic* – those individuals who have met the requirements as approved by the EMS Commission.

CJ. *Student EMS Clinician*– a person who is engaged in learning experiences in a program of study leading to candidacy for licensure to practice as a licensed EMS Clinician. The term applies only when the person is participating in an integral part of the program of study.

CK. *Suspend* – to hold a license to practice as a licensed EMS Clinician in abeyance for a definite or indefinite period of time.

Cl. *Teaching of EMS* – instructing EMS students and providing continuing EMS education to licensed EMS Clinicians or student EMS professionals.

CJ. *Testing Rate* – calculated as the number of students in an initial EMT, AEMT, or Paramedic course who have taken the NREMT exams divided by the total number of students who have been marked as passing.

CK. *Unfit or Incompetent* – unsuitable.

§105 Staff Policies

In addition to the policies of the Louisiana Department of Health and the Office of Public Health, below are the policies that are specific to the Bureau of EMS.

A. Accountability of Time

1. Time Administration and Time Entry
 - a. Employees who have computer access and an email account in the state email system (Outlook) shall submit leave and attendance requests through Louisiana Employees Online (LEO) unless instructed to do otherwise by their supervisors or other management personnel.
 - b. Certification of Time and Attendance
 - i. Employees will input their time into LEO by the end of the pay period.
 - ii. Employees will certify their time on Monday, after noon, of the previous pay period.
 - iii. Errors in inputting time that are identified after the pay period shall be adjusted using a prior pay period adjustment form.
 - c. Time Management Guidelines
 - i. Hours worked in excess of 40 hours per week or 80 hours per pay period are considered overtime and may be compensable either by cash payment or compensatory (K) leave in accordance with Civil Service rules and the Fair Labor Standards Act. Overtime must be approved by the employee's supervisor prior to the employee working overtime.
 - ii. Overtime that accumulates to over 10 hours per pay period must be approved by the employee's supervisor, center director, and Deputy Secretary.
2. Leave Policy
 - a. Types of Leave and Policy Provisions for Each Type
 - i. Annual Leave
 - ii. Sick Leave
 - iii. Compensatory Leave.
 - iv. Civil, Emergency, and Special Leave (including, but not limited to:)
 - a) Jury Duty
 - b) Court Summons
 - c) Emergency Civilian Duty in Relation to National Defense
 - d) Special Leave/Office Closure (LSOC)
 - e) Special Leave/Act of Go (LSAG)
 - f) Special Leave/Local Conditions (LSLC)
 - g) Civil Service Exam/Licensing Board Exams
 - h) Pre-induction Physical Examination

- i) National Guard Emergency Duty
- j) Funeral Leave:
 - 1) Parent
 - 2) Step-Parent
 - 3) Child
 - 4) Stepchild
 - 5) Brother
 - 6) Step-Brother
 - 7) Sister
 - 8) Step-Sister
 - 9) Spouse
 - 10) Mother-in-law
 - 11) Father-in-law
 - 12) Grandparent
 - 13) Grandchild

Funeral leave shall not exceed two days on any one occasion. The employee must provide the name of the deceased and their relationship to the employee when requesting funeral leave.
- k) Military Leave
- l) Leave Without Pay
- m) Unscheduled Absence
- n) Maternity Leave
- o) FMLA

3. Overtime Compensation for Disaster Operations Work

- a. Applicability
 1. The provisions of this policy shall apply to all employees called to work at Emergency Disaster Operations sites.
- b. Schedule Changes
 1. While working in an Emergency Disaster Operations Site, work hours and schedule of the week may be flexed as needed to accommodate the site operation 24 hours per day. Regular work hours may be suspended for employees who perform emergency preparedness duties.
 2. If, due to scheduling difficulty or administrative error, the employee is not able to work the entire 40 hours in the work week or other number of hours regularly scheduled in the work week, Special Leave – Act of God (LSAG) may be given for sufficient hours to make the employee whole.
- c. Compensation for Overtime
 1. LDH employees working at Emergency Disaster Operations Sites shall accurately complete LDH Form HR-48 (LDH Disaster Operations Individual Time Sheet), recording all hours worked at the site. (Appointing Authorities may direct other employees performing disaster operations duties to complete the HR-48 as needed).
 2. Overtime for LDH employees working at Emergency Disaster Operations sites shall be entered as Compensatory Leave (Z001 K-time) and coded to the Emergency event as directed by the Division of Administration. Employees shall receive compensation (compensatory leave or cash payment) for overtime hours worked in accordance with this policy, LDH Overtime Policy #45, the Fair Labor Standards Act, Civil Service rules, and other federal and state laws.

3. Employees who work disaster-related overtime as defined in this policy and who earn overtime at the time-and-a-half rate are eligible for overtime compensation at the time-and-a-half rate only for those hours actually worked in **excess of 40 hours** during any affected week. For the purpose of calculating the number of hours actually worked, leave hours taken and observed holiday shall not be counted as time worked.

B. Teleworking Policy

1. Bureau of EMS employees are permitted to have a hybrid telework schedule, provided that a telework scheduling form has been completed and approved.
2. Teleworkers are expected to attend all assigned meetings related to the performance of their job, including any held on a teleworking day.
3. Teleworking does not change the conditions of employment or required compliance with LDH and OPH policies and procedures, Civil Service Rules, or any other federal or state laws, policies, and procedures while working at the alternate work site.
4. Teleworking may not be used in place of leave.

C. Alternate Work Schedule

1. Work Schedules
 - a. Based on these guidelines, the following work hours/schedules may be approved by the appropriate appointing authority for full-time employees only:
 - i. **Traditional Work Schedule** – The employee is scheduled to work five eight-hour workdays, Monday through Friday, for a total of forty hours per week.
 - ii. **Alternate Work Schedules:**
 - a) **4-10 Schedule:** The Employee is scheduled to work four 10-hour days for a total of forty hours per week. The regular day off must be the same day each week.
 - b) **9-4 Schedule:** The employee is scheduled to work four 9-hour days, plus one 4-hour day for a total of forty hours per week. The 4-hour day must be the same day each week.
 - c) **9-8 Schedule:** This option is only available to employees who are classified as exempt under the Fair Labor Standards Act and in accordance with the Louisiana State Civil Service, Civil Service Rules, Chapter 11.1. The employee is scheduled to work four 9-hour days in one week of the pay period (36-hour week) and four 9-hour days, plus one 8-hour day in the other week of the same pay period 44-hour week. The day of an 8-hour day must be the same day each week.

2. Holidays

- a. If one or more holidays fall on a full-time employee's regular day off, his holiday shall be the closest regularly scheduled workday preceding or following the legal holiday, as designated by the lead of the agency. Employees whose regular work hours do not fall in the time period, or fall only partly within the time period, of the holiday shall receive a number of hours equivalent to the holiday through compensatory time or overtime.

- b. For alternate work scheduled, holidays will be handled in the following manner. If a holiday falls on a day regularly scheduled to be an eight (8), nine (9), or ten (10) hour workday, the employee has an eight (8), nine (9), or ten (10) hour paid holiday. If a holiday falls on a day regularly scheduled to be a four (4) hour workday, the employee has a four (4) hour paid holiday.

D. Telephone Use

- 1. Communications
 - a. Employees shall practice courtesy when using the telephone. When answering a call, the employee should identify the agency and him/herself. When placing a call, the employee should identify him/herself to the person receiving the call.
 - b. Incoming phone calls should be answered within three (3) rings.
 - c. Never argue. Try to be a sympathetic and attentive listener. Try to understand the other person's point of view. No one ever truly wins an argument. Remember, in almost every bad situation, you can find an opportunity to calmly and pleasantly correct it. People are forced to respect those who remain in control and refuse to argue.
 - d. Make people feel important, but be sincere in your statements.
 - e. Know what you are talking about. Be (and sound) sure of yourself whenever giving information, but if you are not sure, get the correct information or refer the person to better sources. Do not risk misleading someone.
 - f. Be tactful and interact with people in a kind and considerate manner. Treat others as you would want to be treated.
 - g. LDH policy prohibits the use of cellular devices, even in a hands-free mode, while operating a motor vehicle as part of their job function.
- 2. Equipment
 - a. Telecommunications equipment is to be used for business purposes. Personal use of telephones should be kept to a minimum in terms of number and length.

E. Safety Policy

- 1. Horseplay, fighting, gambling, possession of firearms (where not authorized by management to carry firearms), alcoholic beverages, illegal drugs, or usage of unauthorized/non-physical prescribed medications will not be tolerated in the workplace.
- 2. Use personal protective equipment for protection from potential hazards that cannot be eliminated.
- 3. Immediately report any unsafe condition(s) and/or act(s) to your supervisor.
- 4. When doubtful of the safety of work or the method to be used, ask the supervisor for assistance.
- 5. Immediately report all accidents or property damage to a supervisor, regardless of how minor the accident may initially appear.
- 6. Maintain an orderly environment and work procedure.

G. Absences from Premises or Work Area

- 1. If a staff member leaves the premises or work area for any reason (except lunch) during the work day, the following accountability measures must be taken:
 - a. Whereabouts and time of leave will be posted on the staff member's Outlook calendar
 - b. The staff member's immediate supervisor and the Bureau of EMS Director shall be sent the calendar invite.
- 2. Any time away from premises or work area that is not accounted for will be considered leave time, and the staff member's time sheet must reflect such.

H. Dress/Uniform Policy

1. Class A Uniform

a. The Class A uniform should be worn during official ceremonies and/or meetings. This uniform consists of the following:

- i. Long-sleeve buttoned-up shirt with tie and white undershirt
- ii. Jacket for Director, Deputy Director, and Program Managers (6 small and four large buttons)
- iii. Uniform pants/skirt
- iv. Black shoes
- v. Collar brass: BEMS pin on left collar and NREMT pin on right collar
 - Director – Three Stars
 - Deputy Director – Oak Leaf
 - Program Manager – Captains Bars
 - Program Monitor – Lieutenant Bars
- vi. Rank brass on the outermost part of the shoulder epaulet
- vii. Sleeve striping ([Home - Lighthouse Uniform](#))
Home - Lighthouse Uniform
 - Director – 1 ½" appropriate license level striping and three stripes
 - Deputy Director – 1" appropriate license level stripe and two stripes
 - Program Manager – ½" appropriate license level and two stripes
 - Program Monitor Supervisor – ½" appropriate license level and one stripe
 - Program Monitor – ½" appropriate level stripe
- viii. Louisiana patch on right shoulder and NREMT patch on left shoulder

2. Class B Uniform

b. The Class B Uniform may be worn during regular business days and at specific meetings/classes. This uniform consists of the following:

- i. Short-sleeved buttoned-up shirt with white undershirt
- ii. Uniform pants/skirt
- iii. Black shoes
- iv. Collar brass: BEMS pin on left collar and NREMT pin on right collar
- v. Rank brass on the outermost part of the shoulder epaulet
- vi. Louisiana patch on right shoulder and NREMT patch on left shoulder

3. Class C Uniform

a. The Class C Uniform may be worn during regular business days. This uniform consists of the following:

- i. Polo shirt
- ii. Any pants
- iii. Any shoes

4. Non-licensed personnel and licensed personnel are permitted to wear business dress and any other Bureau of EMS logo garments at any time during the regular workdays. There may also be times when business formal is the most appropriate dress.

5. Badges should be worn while carrying out the job duties

- a. Badges should not be used in a manner that could be interpreted as malfeasance (i.e., gaining access to restrictive areas, obtaining discounts, etc.)
- J. Travel
 - 1. All travel requests should be submitted to the first-line supervisor at least 30 days before the date of travel.
 - 2. Routine travel
 - a. Email the following information to the CBA cardholder:
 - i. Name and personnel number
 - ii. Name, address, and phone number of the hotel where the reservation should be made
 - iii. Date of check-in and date of check-out of the hotel
 - iv. Attach a copy of the individual's routine travel authorization form
 - 3. Other travel (not routine)
 - a. Email the following information to the CBA cardholder:
 - i. Name and personnel number
 - ii. Name, address, and phone number of the hotel where the reservation should be made
 - iii. Date of check-in and date of check-out of the hotel
 - iv. Travel authorization form with all applicable expenses documented and signed by the appropriate supervisor(s) and appointing authority
 - v. Copy of conference/activity agenda and any other documentation regarding the conference/activity
- K. Correspondence/Internal Office Communication/Presentation
 - 1. Official correspondence with a recipient outside of the Bureau of EMS must be sent on official LDH/OPH/Bureau of EMS letterhead.
 - 2. Official internal office documents must be on official internal office letterhead.
 - 3. Presentations on behalf of the Bureau of EMS should use the Arial font
- L. Use of Department Vehicles
 - 1. Department vehicles are to be used for work-related functions only.
 - 2. Use of cell phones and hands-free cell phone devices while operating a Department vehicle is forbidden.
 - 3. The lights and siren in a Department vehicle should only be used when deployed on a disaster mission or when an emergency has been encountered while en route to a work-related function.
- K. Request for supplies
 - 1. An employee who needs a specific supply must send an email to the Bureau of EMS Director outlining the particular need and the date by which the item is required.
 - a. The Bureau of EMS Director will print the request and forward it to the Administrative Assistant for processing.
 - 2. For general office supplies such as paper clips, white out tape, etc., send an email to the Bureau of EMS Director stating that the supply is low and that these supplies are needed.
 - a. The Bureau of EMS Director will print the request and forward it to the Administrative Assistant for processing.

§107 Employee Onboarding

- A. Before the first day
 - 1. I.T. assigns access to the computer and email
 - 2. Complete intent to work forms
- B. On the first day
 - 1. I.D. Badge
 - a. Schedule picture and official I.D. and appropriate access to office(s)
 - 2. Complete required paperwork
 - 3. Work Schedule Selection Form
- C. During the first week
 - 1. Mandatory training in LEO
 - a. Ethics
 - b. Workplace violence
 - c. ESF-8
 - d. Harassment
 - e. Computer
 - 2. Navigation of:
 - a. Outlook
 - b. Share drive
 - 3. Web addresses
 - a. Licensing information management system
 - b. National Registry
 - c. Bureau of EMS
 - d. LEO
 - 4. Telephone
 - a. Transfer a call
 - b. Check messages
 - c. Conference call
 - 5. Important Contacts
 - 6. Organizational Chart
 - 7. Contact information (phone and email) of
 - a. Coworkers
 - b. Human resources
 - c. National Registry
 - d. Licensing Information Management System
 - e. EMS Task Force Members
 - f. EMS Commission Members

§109 Payments and Deposit Procedures

- A. All services (licenses and exams) must be paid for in advance of the service being provided unless otherwise agreed upon.
- B. Payments are to be processed/deposited as soon as possible, but must not be kept for more than 24 hours, and must be secured until deposited in the bank.
- C. Cash is not to be accepted as payment for services.
- D. It is preferable that payment be made in the Bureau of EMS Information Management System. However, if this is not an option, the following policies apply:
 - 1. Payments are to be made by money order only for individuals. The money order is to be made payable to the Bureau of EMS (or BEMS), and the purchaser's name and address must be printed on the money order.
 - 2. Company checks made payable to the Bureau of EMS (or BEMS) are accepted for payment of services but must include a listing of the names (and license numbers, if applicable), service, and amount of payment for each name listed. Overpayment is NOT REFUNDABLE.

E. The posting and depositing process:

1. The Administrative Assistant will receive the money order/check and determine the service for which it is paying. A copy of the money order/check will be forwarded to the Competency Coordinator (if paying for exams), the Licensing Coordinator (if paying for Clinician licenses) or the Compliance Coordinator (if paying for provider licenses). This document must include the date copied and the initials of the Administrative Assistant. The money order/check will be given to the Financial Officer.
2. The following actions will be made, according to the payment's purpose
 - a. Licensing Coordinator will post the payment to the appropriate accounts in the IMS.
 - b. Competency Coordinator will post the payment to the appropriate accounts in the IMS.
 - c. Compliance Coordinator will post the payment to the appropriate accounts in the IMS.
3. The Financial Officer will print out a transaction listing, complete a bank deposit slip, and make the bank deposit. The bank deposit receipt, a copy of the deposit slip, and the transaction listing will be provided to the Administrative Assistant.
4. The Administrative Assistant will submit the original documents to the Appointing Authority for signature approval. The Appointing Authority is required to approve the deposit in CARS. Documents are returned to the Administrative Assistant.
5. The Financial Officer will provide the LDH Fiscal Office with a monthly report showing each deposit made by the Bureau of EMS each month.
6. A record of the deposits is kept in the Bureau of EMS office.
7. Deposit reports, both bank deposits and electronic deposits, are provided to the Bureau of EMS Director at the end of every month.

§111 Refund Policy

A. A refund will be issued to applicants who were incorrectly charged for a license and/or examination fee through the BEMS Information Management System.

1. Payment vendor reports will be processed one time per month by the Credentialing Coordinator and reviewed for accuracy.
(<https://admin.thepayplace.com>)
2. The duplicate/incorrect payment will be reviewed and verified in the BEMS Information Management System.
3. To issue a credit, the Credentialing Coordinator will follow the Payment Vendor Users Guide. The refund will be requested via the payment vendor within 2 weeks of verification of the incorrect charge.
4. The applicant/licensee shall be notified via email of the information listed in the BEMS Information Management System, of the credit issued to the account, within five business days of the credit by the Credentialing Coordinator.
5. A monthly spreadsheet will be kept current by the Credentialing Coordinator reflecting: name, amount, date of refund via payment vendor, and reason for refund. The spreadsheet will be forwarded to the Director by the 10th day of each month for the previous month's charges.

EMS COMMISSION

Charge of the EMS Commission

The Louisiana Emergency Medical Services Commission, placed in the Louisiana Department of Health, shall exercise and perform its powers, duties, functions, and responsibilities as provided for in R.S. 40:1133.3 et seq. The Commission shall advise the Bureau of Emergency Medical Services on requirements and standards for licensing of EMS Clinicians and continuing education requirements for license renewal. The Commission shall retain the authority to approve requirements for licensing of EMS Clinicians. The Commission shall retain the authority to approve requirements and standards of practice for EMS Clinicians; conduct disciplinary hearings for EMS Clinicians; and cause the prosecution of any individual who violates the provisions of Revised Statute 40:1133.4.

Commissioners

Otha Shamburg, Chair Public EMS Agency	Brandon Lee Professional Firefighters Association
Scott Thames, Jr., M.D., Vice-Chair Louisiana State Medical Society	Carl Flores Paramedics
Casey McBeath, Secretary Private EMS Agency	Navdeep Samra, M.D. American College of Surgeons
Toby Henry Louisiana Fire Chiefs Association	Christopher Willoughby, M.D. American College of Emergency Physicians
Kirk LaCour Louisiana Municipal Association	Meg Marino, M.D. American Academy of Pediatrics
Troy Gauthier Emergency Medical Technicians	Vacant LA State Nurses Association Emergency Nurses Association

§201. Statement of Purpose

A. The Louisiana Emergency Medical Services Commission is a legally created administrative commission acting within the governmental structure of the state and possessing legal power. To safeguard life and health of the citizens of Louisiana, the law governing the practice of Nationally Certified and State Licensed Emergency Medical Services professionals, Louisiana Revised Statutes of 1950, R.S. 40:1133 et seq., as re-enacted and amended, delegates to this Commission the responsibility to establish and publish standards of out-of-hospital practice; to regulate the scope of practice of Emergency Medical Services Clinicians, to discipline and regulate the practice of Emergency Medical Services Clinicians and to establish standards for education programs preparing individuals for out-of-hospital practice.

§203. Reporting

A. What To Report

1. Any of the following violations:
 - a. EMS Practice Act R.S. 40:1131 ET. Seq.
 - b. Bureau of EMS Policy and Procedures
 - c. Patient Care
 - d. Unprofessional Conduct
 - e. Moral Turpitude
 - f. EMS Rules
 - g. Scope of Practice
 - h. National Registry Rules
 - i. National EMS Education Guidelines
 - j. Education/Educator Violations
 - k. Failed or Refused Drug Screening
 - l. Any act that results in arrest, either misdemeanor or felony.

B. Who Should Report

1. Any student, candidate, licensed EMS Clinician, EMS Educator, EMS Provider, or EMS Employer having direct knowledge or a concerned member of the public.

C. How To Report

1. Report must be in writing and can be accomplished by fax, postal service, or electronic means. A complaint form is available on the Bureau of EMS website.

D. To Whom To Report

1. Report to: Bureau of EMS Compliance Coordinator

Phone: 225/925-4022

Fax: 225/925-7244

Email: EMS.Commission@la.gov

EMS Commission

7273 Florida Blvd.

Baton Rouge, LA 70806

§205 Criminal History Record Information and Identification

- A. The Bureau is entitled to and shall require submission of the criminal history records and identification files of the Louisiana Bureau of Criminal Identification and Information, located with the Louisiana Department of Public Safety and Corrections, of any person who is seeking an initial license as an emergency medical technician, advanced emergency medical technician or paramedic; and any person who answers affirmatively to any of the criminal background questions on a license renewal application. In such situations, fingerprints and other identifying information of the applicant shall be required and submitted to the Louisiana Bureau of Criminal Identification and Information for qualification and registry.
 1. The criminal history records must not be more than two years old.
- B. The Louisiana Bureau of Criminal Identification and Information shall, after receipt of such fingerprint cards and other identifying information from the applicant, make available to the Bureau of EMS all arrest and conviction information contained in the Louisiana Bureau of Criminal Identification and Information's criminal history record and identification files which pertain to the applicant for licensure. In addition, the fingerprints shall be forwarded by the Louisiana Bureau of Criminal Identification and Information to the Federal Bureau of Investigation for a national criminal history record check.

- C. The applicant shall pay the appropriate fees to the Louisiana Bureau of Criminal Identification and Information for furnishing information contained in the Louisiana Bureau of Criminal Identification and Information's criminal history record and identification files, including any additional cost of providing the national criminal history records check, which pertains to the applicant.
- D. The following applicants for initial licensure or permission to enroll in clinical EMS courses shall answer all legal disclosure questions on the forms (electronic or paper) published by the Bureau of EMS:
 - 1. Pre-Student Applicant
 - 2. EMS Student
 - 3. Emergency Medical Responder
 - 4. Emergency Medical Technician
 - 5. Advanced Emergency Medical Technician
 - 6. Paramedic.
- E. The Bureau of EMS may require criminal history record information inquiries of the following individuals:
 - 1. An applicant for any license, license renewal, or permission to enroll in an EMS course if there is reason to believe there is information relative to evaluating the applicant's eligibility or disqualification for licensure;
 - 2. A licensee, as part of the investigation process, if there is reason to believe there is information relative to eligibility or disqualification for initial or continued licensure.
 - 3. All applicants applying for Initial EMT, AEMT, or Paramedic licensure or are applying for a renewal EMT, AEMT, or Paramedic license with an affirmative answer regarding criminal disclosure on the questionnaire.
 - 4. All applicants applying for EMR licensure with an affirmative answer regarding criminal disclosure on the questionnaire.
- F. The Criminal History Inquiry Process
 - 1. The applicant or licensee must complete a request for a federal and state criminal history report utilizing the Louisiana State Police Idemia/Identogo Livescan fingerprint process and system.
 - 2. The applicant or licensee must request an appointment for fingerprinting utilizing <http://uenroll.identogo.com> and enter the Bureau of EMS Service Code: 27N4S2.
 - 3. All questions regarding the fingerprint and criminal history report process, including rejected fingerprint quality, need to be directed to Identogo/Idemia for assistance at 800/539-5543.
 - 4. If the applicant or licensee fails to submit necessary information, fees, and/or fingerprints, the applicant or licensee shall be denied licensure based on an incomplete application or, if licensed, denied renewal until the applicant or licensee submits the applicable documents and fee.
- G. When completing a Louisiana Bureau of EMS license application and upon answering affirmatively to any of the questions in the criminal history questionnaire, the following information should be uploaded to the Clinician application for licensure:
 - 1. Copies of any/all court minute entries and court judgments/orders; copies of probation/DA diversion or Pretrial Intervention programs, final disposition, arrest report(s), etc., occurrence/narrative/supplemental reports, etc., and any/all other relevant records of each listed instance.
 - 2. A federal and state Criminal History Report must be conducted within the last 30 days of the initial application, without a previous criminal history report.
- H. Obtaining a Federal and State Louisiana Criminal History Report from the Louisiana State Police

1. Louisiana Bureau of EMS applicants can request a federal and state Criminal History Report by requesting an appointment for fingerprinting using the Idemia/Identogo process and system. Applicants must schedule an appointment to be fingerprinted through the site <http://uenroll.identogo.com>. Applicants must enter the Bureau of EMS service code: 27N4S2.
2. The Louisiana State Police Federal and State Criminal History Report can also be requested by non-Louisiana residents or if a fingerprint site is not within 100 miles to utilize the card scan process. Applicants will need to be fingerprinted by local law enforcement and follow the Identogo directions regarding submitting fingerprints by mail.
3. Payment is required at the time of service. The fee for State and Federal Livescan fingerprinting is \$60.75 (\$55.75 for the report. If the fingerprint site is a sheriff's office, there is an additional \$5.00 fee.*).
4. Applicants must bring one of the identification documents from the list below to their enrollment appointment. Identification must be valid, not expired, and contain a photograph of the applicant.
 - Driver's license issued by a State or outlying possession of the U.S.
 - Driver's license permit issued by a State or outlying possession of the U.S.
 - Driver's license PAPER/TEMPORARY issued by a State or outlying possession of the U.S.
 - Enhanced driver's license (EDL)
 - Commercial driver's license issued by a State or outlying possession of the U.S.
 - Commercial driver's license PERMIT issued by a State or outlying possession of the U.S.
 - ID card issued by a federal, state, or local government agency or by a Territory of the U.S.
 - Enhanced Tribal Identification Card (for federally recognized U.S. tribes)
 - Department of Defense Common Access Card
 - Uniformed Services Identification Card (DD-117202)
 - U.S. Military Identification Card
 - U.S. Coast Guard Merchant Marine Card
 - Military Dependent's Identification Card
 - U.S. Passport
 - Foreign passport
 - Permanent Resident Card or Alien Registration Receipt Card (Form I-551)
 - Employment Authorization Card/Documentation (I-766) that contains a photograph
 - Canadian Driver's License
 - Foreign Driver's License (Mexico and Canada only)
 - U.S. Visa issued by the U.S. Department of Consular Affairs for travel to or within, or residence within, the United States.

I. Applicants with discrepancies between the license application and the criminal history report will be notified when discrepancies between the application and the criminal history have been identified.

1. The applicant will have fifteen (15) days to:
 - a. Correct the discrepancy
 - i. After the discrepancy is resolved, a corrected criminal history report must be submitted.
 - b. Dispute the criminal background history with the Louisiana State Police
 - i. After the discrepancy is resolved, a corrected criminal history report must be submitted.

2. The applicant has the right to review the criminal history received by the Bureau of EMS utilizing the following procedure:
 - a. Complete the Louisiana State Police "Right to Review" documents located at LSP.org
 - b. Schedule an appointment to meet with the Bureau of EMS staff
 - c. Provide a Louisiana identification card or driver's license upon arrival at the Bureau of EMS appointment.
- J. Applicants with affirmative answers on licensing applications that do not appear on the criminal history report must provide copies of any and all court documents within 15 business days after the course appearance.
 1. The applicant will be responsible for updating the Bureau of EMS regarding the court date and subsequent changes, plea, or court determination.

§207 Denial of Licensure, Reinstatement, or the Right to Practice EMS as a Student

- A. Applicants for licensure, reinstatement, or the right to practice as an EMS student may be denied approval for licensure, reinstatement, receipt of a temporary permit, eligibility to continue in, or entry into an education program (clinical or field internship aspects) for any of the grounds listed in §227 of this chapter.
- B. For purposes of this Section, a pardon, suspension of imposition of sentence, expungement, or pretrial diversion, or similar programs shall not negate or diminish the requirements of this Section.
- C. Applicants who are denied licensure, reinstatement, or the right to practice EMS as a student shall not be eligible to submit a new application until the following conditions are met:
 1. A minimum of two years has passed since the denial was issued.
 2. The applicant presents evidence that the cause for the denial no longer exists; and
 3. A hearing or conference is held before the Commission to review the evidence, to afford the applicant the opportunity to prove that the cause for the denial no longer exists, and to provide an opportunity for the Commission to evaluate changes in the person or conditions.

§209 Issuance of a Provisional License

- A. Applicants for a license (initial, renewal, or reinstatement) may be issued a Provisional License, for a period not to exceed 180 days, by the Bureau of EMS, if the applicant:
 1. Meets all other license requirements; and
 2. Has not been convicted of a felony, in any jurisdiction; and
 3. Has not pled guilty, nolo contendere, been convicted of, or committed a "crime of violence" as defined in R.S. 14:2(13).

§210 Delay of Licensure, Reinstatement, or the Right to Practice as an EMS Student

- A. Applicants for licensure, reinstatement, and for practice as an EMS student shall have approval delayed for licensure, for reinstatement, to receive a temporary working permit, to be eligible for the National Registry Exam, or to enter or progress into any clinical EMS course, if the applicant:
 1. Has any pending disciplinary action or any restrictions of any form by any licensing/certifying entity in any state; or

2. Has a pending criminal charge that involves any violence or danger to another person, or consists of a crime which constitutes a threat to patient care; or
3. Has pled guilty, nolo contendere, or been convicted of or committed any crime that directly relates to the EMS profession generally or the specific type of EMS license, permit, or eligibility sought, and the conditions of the court have not been met, or is currently serving a court-ordered probation or parole.

B. A pardon, suspension of imposition of sentence, expungement, or pretrial diversion or similar programs shall not negate or diminish the requirements of this Section.

C. Applicants who are delayed licensure, reinstatement, or the right to practice EMS as a student shall not be eligible to submit a new application until the following conditions are met:

1. The applicant presents sufficient evidence that the cause for the delay no longer exists; and
2. A hearing or conference is held before the Commission to review the evidence, to afford the applicant the opportunity to prove that the cause for the delay no longer exists, and to provide an opportunity for the Commission to evaluate changes in the person or conditions.

§211 Pre-Application Eligibility Determination

A. An individual convicted of a crime may require, at any time, including before obtaining any required education or training, a determination as to whether the individual's criminal conviction(s) disqualify the individual for licensure or certification by the Bureau of EMS.

1. The individual making the request shall provide to the Bureau of EMS all pertinent information and documents pertaining to the convictions(s), including any information relevant to the factors provided in R.S. 37:2950. Any such request shall list and include all of the individual's convictions, regardless of jurisdiction and regardless of subsequent pardon or expungement, through the date of the request. After initial receipt of the request, the Bureau may require that the individual submit additional pertinent information or documents.
2. The process for submitting the request and associated documents is posted on the Bureau of EMS' website (URL: <https://ldh.la.gov/subhome/28>). Alternatively, the request may be made in writing and mailed to the Bureau of EMS at 7273 Florida Blvd., Baton Rouge, LA 70806.
3. The individual making the request shall also provide to the Bureau the individual's pertinent identifying information, including date of birth, social security number, and driver's license number.
4. The individual making the request shall provide a valid email address to which the Bureau may send correspondence related to the request, including the determination as to whether the individual is disqualified.
5. Within forty-five (45) days after receipt of the request and all pertinent information and documents, including additional information or documents requested by the Bureau pursuant to A.1 of this Section, or within forty-five (45) days of receipt by the Bureau of any criminal background check provided or requested by the individual, whichever is later, the Bureau shall send notification to the individual concerning whether, based on the criminal information submitted, the individual is disqualified from receiving or possessing a license from the Bureau. This determination, which may be disseminated to the requesting individual by email, shall be one of the following:

- a. The conviction(s) do not make the individual ineligible to be licensed ("not ineligible"). Such determinations include instances where licensing may be necessarily accompanied by concurrent initial probation, per the Commission's Deferred Decision Matrix or Commission Review Panel, unless a requested hearing before the Commission determines otherwise.
 - b. The conviction(s) make the individual presumptively ineligible to be licensed, in which case the following information shall be provided to the individual:
 - i. specific conviction(s) that constitute the basis for the presumptive ineligibility;
 - ii. reasons the conviction(s) are directly related to the license, using the factors outlined in La. R.S. 37:2950;
 - iii. right to submit, within sixty (60) days, additional documentation or evidence relevant to each of the factors listed in R.S. 37:2950 concerning the conviction(s) upon which the presumptive ineligibility is based; and
 - iv. date of eligibility to apply or reapply for a license.
6. An individual who is informed that the conviction(s) at issue make him presumptively ineligible is entitled to a hearing ("appeal") before the Commission concerning such determination.
 - a. Such individual shall be placed on the agenda for a formal hearing at the next regularly scheduled meeting of the Commission, but may decline such a hearing if s/he does not wish to proceed. If the 60-day period for providing additional documentation or evidence, as provided in Subsection A.4.b.iii of this Section, expires after the next scheduled meeting, the individual may request that the hearing be postponed until the subsequent regularly scheduled meeting.
7. A determination of "not ineligible" made pursuant to this Section is binding upon the Bureau unless the individual is convicted of a subsequent crime between the inquiry period and the time of license application, has pending criminal charges at the time of license application, or has undisclosed criminal convictions not revealed at the time of inquiry.

B. The following information can be found on the Bureau website and/or on the EMS license application:

1. The process by which the Bureau investigates affirmative criminal background disclosures.
2. The deferred decision matrix used by the Bureau regarding the criminal history of applicants.
3. Additional details regarding the process by which potential applicants may obtain a determination regarding their license eligibility as it relates to criminal convictions.

C. When determining whether a conviction directly relates to the EMS profession, the Commission shall consider:

1. The nature and seriousness of the offense;
2. The nature of the specific duties and responsibilities of licensed EMTs, Advanced EMTs, paramedics, and emergency medical responders.
3. The amount of time since the conviction;
4. Facts relevant to the circumstances of the underlying offense, including any aggravating or mitigating circumstances, or social conditions surrounding the commission of the offense; and
5. Evidence of rehabilitation or treatment undertaken by the applicant since the conviction.

§212 Application Eligibility Determination; Criminal Convictions; Right to Hearing

- A. When determining whether an applicant's criminal conviction directly relates to the EMS profession generally or the specific type of EMS license, permit, or eligibility sought, the Commission shall consider the factors outlined in §211.C of this Part.
- B. The Bureau may utilize any "deferred decision matrix" or similar document setting forth guidelines approved by the Commission in making an initial presumptive determination concerning whether an applicant's criminal conviction directly relates to the EMS profession generally or the specific type of EMS license, permit, or eligibility sought.
- C. Any applicant who is determined by the Bureau to be presumptively ineligible, based upon the Bureau's application of a deferred decision matrix (or similar guidance document approved by the Commission) or otherwise, shall be entitled to a hearing ("appeal") before the Commission concerning such determination, at which the applicant may present testimony, documentation, or evidence relevant to each of the factors outlined in §211.C of this Part concerning the conviction upon which the presumptive ineligibility is based.

§213 Fines Imposed by the EMS Commission

- A. R.S. 40.1133.7 allows the EMS Commission to discipline emergency medical services Clinicians by directing the Bureau of EMS to deny, withhold, revoke, restrict, probate, or suspend a license to practice as an emergency medical services Clinician, impose fines and assess costs, or otherwise discipline an emergency medical services Clinician.
- B. R.S. 40.11.33.11 states that any EMS Clinician who is found guilty of violating any provision of R.S. 40:1133.10 shall, upon a first conviction, be fined not more than five hundred dollars or imprisoned for not more than six months, or both. Upon a second or subsequent conviction, the offender shall be imprisoned with or without hard labor for not more than two years and fined not more than five thousand dollars.
- C. The following fines will be imposed in the following manner:
 - 1. Any infraction that has occurred in which the petitioner receives a disciplinary sentence will include a penalty of \$50.00 per licensing cycle (2 years).
 - 2. Falsifying a license application or license renewal application: \$100.00.
 - 3. Any infraction that has occurred in which the petitioner has profited from the infraction: \$500.00.
- D. Payments will be made via the Information Management System.
- E. Fees will be charged in the Information Management System.
 - 1. An initial fee invoice will be sent via the Information Management System.
 - 2. A second notice for an unpaid balance will be sent in 30 days after the initial invoice via the Information Management System.
 - 3. A third and final notice for an unpaid balance will be sent 60 days after the initial invoice via the Information Management System.
 - 4. Outstanding balances after 90 days from the initial invoice date will result in suspension of the individual's license.

§214 Mandatory Notifications

- A. Each license holder and each applicant for licensure must provide both a valid current mailing and email address at which the licensee or applicant can receive correspondence and official notices from the Bureau. A licensee or applicant shall update either such address via the EMS Information Management System within five (5) calendar days of any change.
- B. A licensed EMS Clinician, or an EMS student, shall notify the Bureau of EMS via the Information Management System no later than ten (10) days after any of the following occur:
 1. Convicted of, or charged with, any misdemeanor or felony in any jurisdiction
 2. Any suspension, revocation, or limitation to an EMS license/certification, or other medical license/certification, by any certification or license board, in any jurisdiction.
- C. Notification from the EMS Commission
Whenever any provision of law or administrative code requires or authorizes service or delivery of a letter, notice, order, summons, or other document to be made upon a licensee or applicant, then, in addition to any other method authorized by law or administrative code for such service or delivery, the following shall constitute good and valid service or delivery for all purposes related to this Part:
 1. Service made in any manner authorized by the Louisiana Code of Civil Procedure or the Louisiana Revised Statutes of 1950;
 2. Service made by U.S. Postal Service certified mail, return receipt requested, addressed to the mailing address provided to the Bureau of EMS in accordance with the application;
 3. Service by email sent to the email address provided to the Bureau of EMS in accordance with licensing guidelines of this section, even if returned as undeliverable. A document served by email must be in a printable document format (PDF) and may be either attached, in which case the entire email with the attachment cannot exceed 20 megabytes (MB), or linked within the body of the email to a file-sharing or similar site from which it can be viewed or downloaded.
 4. If a certified mail receipt shows that service has been refused or unclaimed, then service shall nevertheless be deemed complete and valid.
 5. Certified mailing shall be deemed good and valid service if a signed receipt is returned to the Bureau, regardless of whether the licensee/applicant to whom the mailing was addressed personally signed the return receipt.
 6. Notification of any adverse action regarding licensure will be sent via email and the Bureau of EMS Information Management to the agency's Program Director in which the Clinician is affiliated.
 7. Notification of any adverse action regarding licensure will be sent via email and the Bureau of EMS Information Management to the medical director of the agency in which the Clinician is affiliated.
- D. Agendas, minutes, and decisions made by the EMS Commission will be posted under the Commission tab on the Bureau of EMS website and on the Louisiana Boards and Commissions website.

§215 Approval and Ratification of Decisions

- A. Decisions rendered according to the deferred decision matrix and review committees are approved and considered upon decision.
- B. Decisions rendered according to the deferred decision matrix and review committees are made available for review at each regular meeting of the Commission.

§217 Rights of Appeal

- A. Any person whose certification or licensure has been revoked, suspended, denied, or otherwise disciplined by the Bureau shall have the right to have the proceedings of the Commission reviewed by the court having jurisdiction over the Commission, provided that such appeal is made within 30 days after the date indicated on the registered mail receipt of the written notice of the Commission's decision. The Commission's decision is enforceable in the interim unless the court orders a stay.

§219 Scope of Practice

- A. The EMS Commission will determine the Scope of Practice for each EMS Clinician level
- B. Authority to Practice
 - 1. Skills identified in the scope of practice may be performed by licensed EMS Clinicians at the Clinician's license level only if:
 - a. The Clinician has completed training (cognitive, affective, and psychomotor) on the specified skill, which includes training to perform the skill on adults, children, and infants, as appropriate; and
 - b. The Clinician is affiliated with an EMS Service provider and operating under a written protocol approved by the agency's Medical Director, or
 - c. The Clinician is operating under a direct verbal order of a physician.
- C. National EMS Education Standards
 - 1. The Bureau of EMS has adopted the National EMS Education Standards for EMR, EMT, AEMT, or Paramedic initial education and competency.
 - 2. The Bureau of EMS has adopted the National Registry of Emergency Medical Technicians' National Continued Competency Program for continuing education competency.
- D. Changes to the Scope of Practice
 - 1. The EMS Commission retains the authority to modify, expand, limit, or change the Scope of Practice.
 - 2. When the EMS Commission makes changes to the Scope of Practice, the Bureau of EMS will publish the updated Scope of Practice matrix on the Bureau of EMS website.
- E. Limiting the Scope of Practice
 - 1. An agency Medical Director may limit the scope of practice for an agency or individual by written protocol, policy, or directive.
 - 2. A Medical Director shall not expand the scope of practice without the concurrence and modification of the Scope of Practice by the EMS Commission.

§221 Basis for Obtaining Medical Information and Records

- A. The EMS Commission may request, subpoena, or otherwise seek to obtain records from a health care provider or EMS provider, or an EMS Clinician's employer, relating to the assessment, care, or treatment provided by an individual licensed by the Bureau of EMS, without such Clinician's expressed authorization or consent, when:
 - 1. The EMS Commission has grounds for an objectively reasonable belief that the subject licensed individual's capacity to practice with reasonable skill and safety to patients is impaired by mental illness or deficiency, or physical illness, including but not limited to deterioration through the aging process or the loss of motor skills, and/or the excessive use or abuse of drugs; or

2. The EMS Commission has a reasonable basis for believing that the Clinician is in possession of information or records relevant to a determination as to whether the subject is incapable of practicing with reasonable skill and safety to patients; or
3. The EMS Commission has a reasonable basis for believing that the Clinician has been charged with, or convicted of a crime, that may pose a risk to the safety of patients or the general public.

B. Medical information and records obtained by the Bureau of EMS pursuant to the rules of this policy, and as to which the privilege of confidentiality has not otherwise been waived or abandoned, shall be maintained in confidence by the Bureau of EMS, the EMS Commission, members employees, and agent, shall not be deemed or treated as public records, and shall be privileged against disclosure or production pursuant to administrative or judicial subpoena; provided, however, that any such information or records which are admitted into evidence and made part of the administrative record in an adjudicatory proceeding before the EMS Commission shall remain confidential but shall not be privileged from disclosure and production pursuant to administrative or judicial subpoena and provided further that any such information or records made a part of an administrative adjudicatory record shall become public records upon the filing of a petition for judicial review of the EMS Commission's final decision therein.

§223 Subpoenas

- A. The Chair, or a designee of the EMS Commission, issues subpoenas for the commission for disciplinary proceedings, and when requested to do so, may issue subpoenas for the other party. Subpoenas include:
 1. A subpoena requiring a person to appear and give testimony
 2. A subpoena duces tecum which requires that a person produce books, records, correspondence, or other materials over which he has control.
- B. Unless otherwise provided, to request the issuance of a subpoena, the following procedure shall be followed:
 1. The subpoena shall be prepared and served by the party requesting the subpoena. The party requesting and serving the subpoena must file a return of service into the administrative record certifying on whom the subpoena was served, the time and date served, the location or address served, and the name of the person who served it.
 2. Departmental service of subpoenas on law enforcement officers and fire service personnel must be accomplished in accordance with R.S. 13:3661.1 to be considered adequate.
 3. A subpoena request on behalf of any party shall be accompanied by a check or money order to cover witness fees pursuant to R.S. 49:956(5), R.S. 13:3662(A) (law enforcement officers), or other applicable law. The administrative law judge shall set witness fees for experts in accordance with R.S. 49:950 et seq. The check or money order shall be made payable to each witness subpoenaed, or as provided for law enforcement witnesses.
- C. Additional witness fees must be submitted in order for a subpoena to be reissued due to a continuance or other reason.
- D. The subpoena should include the following:
 1. The name of the party and the representative or attorney requesting the subpoena;
 2. The docket number of the case;
 3. The complete name, service address (with directions if necessary), and telephone number of the person being subpoenaed;
 4. A sufficient description of any document or item to be produced; and

5. The date, time, place, and proceeding for which the subpoena is requested.

E. Failure of a witness to appear or respond to a subpoena will not be grounds for a continuance unless Paragraph B.1 above has been complied with, and the request for the subpoena was received by the division at least ten (10) days before the date required for appearance, production, or inspection. However, the administrative law judge may grant a continuance or exception when the interest of justice requires it.

§225 Disciplinary Proceedings before the EMS Commission

A. The EMS Commission has the responsibility to consider and determine the action necessary upon all charges of conduct that fail to conform to R.S. 40:1131 et seq., as re-enacted and amended, or to the rules and regulations promulgated to carry out the provisions of the policy.

§226 Disciplinary Process and Procedure Limitations on Disciplinary Proceedings by the Commission

A. Unless a special law is applicable, no disciplinary proceeding of any kind may be initiated by the Bureau or Commission as follows:

1. If the nature of the complaint is based on negligence or gross negligence, no proceeding may be initiated after two years from discovery by the complainant. However, under no circumstances shall such a proceeding be initiated more than five years from the date of the act of omission.
2. If the nature of the complaint is based on an intentional act or omission, no proceeding may be initiated after two years from discovery by the complainant. However, under no circumstances shall such a proceeding be initiated more than five years from the date of the act or omission.
3. If the nature of the complaint is based on fraud, no proceeding may be initiated after two years from discovery by the complainant.
4. If the nature of the complaint is based on a license or rules violation, no proceeding may be initiated after five years from the date of the act or omission.

§227 Proceedings against Licensed EMS Clinician or Licensed EMS Clinician, Certified Ambulance Operators, or Licensed EMS Clinician Applicants or Certified Ambulance Operator Applicants

A. The Commission may direct the Bureau of EMS to deny, revoke, suspend, probate, limit, reprimand, fine, or restrict any certification or license to practice as a licensed EMS Clinician or certified ambulance operator or otherwise discipline an individual in accordance with R.S. 40:1133.7 and R.S. 40:1133.18.

1. In accordance with R.S. 40:1133.9, the commission, through the Bureau, may obtain an injunction without bond forbidding any person from violating or continuing to violate any of the applicable provisions of Part II of Chapter 5-C of Title 40 of the Revised Statutes. This injunction shall not be subject to release upon bond.

B. Every individual subjected to disciplinary proceedings shall be afforded an opportunity for a hearing before the Commission or its duly appointed hearing officer or committee.

1. A complaint that an individual has engaged in, or is engaging in, any conduct prescribed by R.S. 40:1133.7, 40:1133.10, 40:1133.18 may be made by any person, staff, or agency to the EMS Commission. Such complaints shall be in writing, and on a form prescribed by the EMS Commission or affixed to the form prescribed by the EMS Commission. However, nothing shall prohibit the Bureau or Commission from acting upon an allegation of licensee wrongdoing learned of or submitted by other means.

- C. A complaint that an individual has engaged in, or is engaging in, any conduct proscribed by R.S. 40:1133.7, 40:1133.10, 40:1133.18, or this Part may be made by any person, staff, agency, or the commission. Such complaints shall be in writing, and on a form prescribed by the commission or affixed to the form prescribed by the commission. However, nothing shall prohibit the Bureau of EMS or the commission from acting upon an allegation or wrongdoing learned of or submitted by other means.
- D. Grounds for disciplinary proceedings against an individual, or licensed EMS Clinician, are specified in R.S. 40:1133.7, including, but not limited to, the following:
 - 1. selling or attempting to sell, falsely obtaining, or furnishing a person a licensed EMS Clinician document;
 - 2. providing emergency medical services without due regard for the health and safety of clients or patients;
 - 3. had pled guilty, nolo contendere, been convicted of, or committed a crime that directly related to the EMS profession generally or the specific type of EMS license type, permit, or eligibility sought;
 - 4. exhibiting incompetency or unfitness by reason of negligence, habit, or other cause;
 - 5. exhibiting habitual intemperance in the use of or abuses alcohol or habit-forming drugs;
 - 6. aiding or abetting another person in the violation of the Part;
 - 7. exhibiting mental incompetence;
 - 8. deceiving or defrauding the public;
 - 9. exhibiting professional or medical incompetence;
 - 10. continuing or recurring practices which fail to meet the standards of EMS care in this state;
 - 11. abandoning a patient;
 - 12. has had a certification or license to practice as an emergency medical services Clinician or to practice as another health care provider denied, revoked, suspended, or otherwise restricted;
 - 13. violating or failing to conform to any requirement or provision of this Part;
 - 14. intentionally falsifying any document related to license, emergency medical services education, or related to the care of the patient; or
 - 15. aiding or abetting another person in the violation of any conduct proscribed under this Subsection.
- E. Grounds for disciplinary proceedings against a certified ambulance driver are specified in R.S. 40:1133.18, including, but not limited to, the following:
 - 1. fraud or any misstatement of fact in the procurement of any certification or in any other statement or representation to the bureau or its representatives;
 - 2. has pled guilty, nolo contendere, been convicted of, or committed a crime that directly relates to the EMS profession generally or the specific type of EMS license type, permit, or eligibility sought;
 - 3. is unfit or incompetent by reason of negligence, habit, or other cause;
 - 4. is mentally incompetent;
 - 5. is habitually intemperate in the use of or abuses alcohol or habit-forming drugs;
 - 6. is guilty of aiding or abetting another person in violating any provision of this Part;
 - 7. continuing or recurring practices which fail to meet the standards of ambulance operators in this state;
 - 8. endeavors to deceive or defraud the public;

9. has violated any rules and regulations of the commission or the bureau or any provision of this Part;
10. intentional falsification of any document related to the procurement of any certification or license;
11. operating any vehicle in violation of state or local traffic laws;
12. revocation, suspension, or any restriction of the ambulance operator's driver's license;
13. failure to maintain all current ambulance operator training standards as required by the bureau; or
14. has had a certification or license to practice as an ambulance operator denied, revoked, suspended, or otherwise restricted in Louisiana or any other state or territory of the United States.

§229 Proceedings Involving Students Enrolled in EMS Education Programs

- A. The Commission may direct the Bureau to deny, revoke, suspend, probate, limit, reprimand, fine, or restrict any student enrolled in EMS education programs, or otherwise discipline a student enrolled in EMS education programs or attempting to enroll in EMS education programs as part of its duties and responsibilities in regulating the practice of EMS in Louisiana and in overseeing the administration of the curriculum and operation of EMS education programs in the state of Louisiana.
- B. Every student enrolled or attempting to enroll in EMS education programs, subject to the proceedings outlined in this Section, shall be afforded an opportunity for a hearing before the Commission or its duly appointed hearing officer or committee.
- C. Information obtained by the Commission that an EMS student enrolled or attempting to enroll in EMS education programs is or has engaged in any conduct prescribed by R.S. 40:1133.7 shall be received in a form prescribed by the Commission. However, nothing shall prohibit the Bureau or Commission from acting upon an allegation of wrongdoing learned of or submitted by other means. Any person, staff, agency, or the Commission may furnish this information.
- D. Grounds for proceedings against a student enrolled or attempting to enroll in EMS education programs are:
 1. All of the grounds for disciplinary proceedings against a person, individual, or licensed EMS Clinician, as applicable, listed in Subsection D of § 505 of this Chapter; or
 2. Has been denied a request to enroll in EMS education programs or has been denied a license to practice in any healthcare field or had such privileges revoked, suspended, or otherwise restricted.

§231 Disciplinary Process and Procedures

- A. The provisions of this policy shall govern proceedings on questions of violation of R.S. 40:1131 et seq., as reenacted and amended.
 1. A disciplinary proceeding, including the formal hearing, is less formal than a judicial proceeding. It is not subject to strict rules and technicalities, but it must be conducted in accordance with considerations of fair plan and constitutional requirements of due process.
 2. The purpose of a disciplinary proceeding is to determine contested issues of law and fact; whether the individual did certain acts and, if he did, whether those acts violated the provisions or requirements of this part; and to determine the appropriate disciplinary action.
 3. Any disciplinary action shall also be forwarded to all applicable licensing agencies and/or required reporting entities.

B. Investigation

1. The process of a disciplinary proceeding shall include specific steps and may include other steps as follows:
 - a. The Bureau of EMS or EMS Commission receives information alleging that an individual has acted in violation of the provisions or requirements of this Part.
 - b. Communications from the informant shall be privileged and shall not be revealed to any person unless such documents will be offered for evidence in a disciplinary review panel, settlement, or informal or formal hearing, or unless those documents are subpoenaed by a court, or requested by another regulatory or law enforcement agency.
 - c. The information is investigated by the Bureau of EMS's staff to determine if there is sufficient evidence to warrant disciplinary proceedings. The EMS Commission chair, or designee, may issue a subpoena before the filing of charges if, in the opinion of the chair, such a subpoena is necessary to investigate any potential violation or lack of compliance with R.S. 40:1131 et seq., or the rules, regulations, or orders of the Bureau of EMS or the EMS Commission. The subpoena may be to compel the attendance of any person to appear for the purpose of giving sworn testimony and/or to compel the production of books, records, papers, or other objects.
2. An agreement worked out between the complainant and the individual does not preclude disciplinary action by the EMS Commission. The nature of the offense alleged and the evidence before the EMS Commission must be considered.

C. Informal Disposition with No Disciplinary Action

1. Some allegations may be settled informally by the Commission and the individual, without formal disciplinary action. The following types of informal dispositions may be utilized.
 - a. Disposition by Correspondence
 - i. For less serious allegations, the chair, or a designee of the Commission, may write to the individual explaining the nature of the information received. The individual's subsequent response may satisfactorily explain that no violation of the provisions or requirements of this Part occurred, or that the matter does not rise to the level requiring formal disposition at this time, and the matter may be dropped. If the situation is not satisfactorily explained, it shall be investigated and disposed of through another informal means or brought before the Commission for a formal hearing.
 - b. Informal Conference
 - i. The chair, or a designee of the chair, and another member of the Commission may hold a conference with the individual, in lieu of, or in addition to correspondence, in cases of less serious allegations. If the respondent can satisfactorily explain that no violation of the provisions or requirements of this Part occurred, or that the matter does not rise to the level requiring formal disposition at this time, then the matter may be dismissed.
 - ii. The individual shall be given adequate notice of the fact that information brought out at the conference may later be used in a formal hearing.
 - iii. Referral to an alternative to the disciplinary process.

§232 Disciplinary Process and Procedure Limitations on Disciplinary Proceedings by the Commission

A. Unless a special law is applicable, no disciplinary proceeding of any kind may be initiated by the Bureau or Commission as follows.

1. If the nature of the complaint is based on negligence or gross negligence, no proceeding may be initiated after two years from the discovery by the complainant. However, under no circumstances shall such a proceeding be initiated more than five years from the date of the act of omission.
2. If the nature of the complaint is based on an intentional act or omission, no proceeding may be initiated after two years from discovery by the complainant. However, under no circumstances shall such a proceeding be initiated more than five years from the date of the act or omission.
3. If the nature of the complaint is based on fraud, no proceeding may be initiated after two years from discovery by the complainant.
4. If the nature of the complaint is based on a license or rules violation, no proceeding may be initiated after five years from the date of the act or omission.

§233 Formal Disciplinary Action

A. A decision to initiate formal disciplinary proceedings is made if one or more of the following conditions exist:

1. The complaint is sufficiently serious;
2. The individual fails to respond to the EMS Commission's correspondence concerning the complaint;
3. The individual's response to the EMS Commission's letter or investigative demand is not convincing that no action is necessary;
4. An informal approach is used, but fails to resolve all of the issues.

B. Informal Procedures

1. The matter may be resolved without a formal administrative hearing by either a voluntary surrender of the license, consent order, or settlement order. These actions shall constitute disciplinary action and shall be a public record of the EMS Commission. Except in cases of voluntary surrender, the EMS Commission shall publish the individual's name, a brief description of the violation, and the disciplinary action.

C. Voluntary Surrender of License. An individual who is under investigation for violation of the provisions or requirements of the Part may voluntarily surrender his or her license to the Bureau of EMS. The voluntary surrender invalidates the license at the time of its relinquishment. An individual practicing as a licensed EMS Clinician during the period of voluntary license surrender is considered an illegal Clinician and is subject to the penalties provided by the chapter and R.S. 40:1133 et seq.

1. Any license surrender shall not be deemed to be an admission of the alleged facts of any pending investigation or complaint. The fact of license surrender, while an individual is under investigation or has a pending disciplinary hearing, shall be deemed a disciplinary action, and the commission shall publish the individual's name and the disciplinary action (i.e., voluntary surrender) in the same manner as other disciplinary actions.
2. Surrender or non-renewal of licensure shall not preclude the Commission from investigating or completing a disciplinary proceeding based upon the individual's conduct before or after the surrender of the license.

3. Individuals who surrender their license are not eligible for reinstatement of license for a minimum of two years following such surrender and, in addition, not until meeting the requirements for reinstatement of license as described in this Chapter.

C. Consent Order

1. An order involving disciplinary action may be made by the EMS Commission with the consent of the individual.
2. The EMS Commission chair is authorized to offer the individual the choice of a consent order in lieu of an administrative hearing.
3. A consent order signed by an individual is an irrevocable offer by the individual until approved, or rejected, by the EMS Commission chair or designee.
4. A consent order requires formal approval of a quorum of the EMS Commission. All actions of the Bureau of EMS shall be reported to the EMS Commission at its next regularly scheduled meeting.
5. A consent order is not the result of the EMS Commission's deliberation; it is the EMS Commission's formal approval of an agreement reached between the Bureau of EMS and the individual. The order is issued by the EMS Commission to carry out the parties' agreement.
 - a. Should the EMS Commission require evidence before arriving at the decision, the individual shall be notified and allowed a hearing.
 - b. Should the EMS Commission revise the terms of the agreement, the revised agreement shall be presented for the individual's acceptance. The EMS Commission may formulate its order contingent upon an individual's acceptance.
 - c. The EMS Commission shall have the right to refer any case directly to an administrative hearing without first offering a consent agreement.

E. Settlement Order

1. Disciplinary Settlement Committee, consisting of the chair, or a designee of the chair, and another member of the Commission or a Bureau staff member, is delegated the authority to render a final decision regarding the settlement of a contested administrative matter by offering a settlement order in lieu of an administrative hearing. The settlement order shall be deemed an order of the Commission, effective immediately upon the signature of all parties to the agreement.
 - a. The disciplinary settlement shall be submitted to the Commission for review at the next regularly scheduled disciplinary hearing.
 - b. Should the Disciplinary Settlement Committee be unable to resolve a case successfully, or should the committee believe that the public would be better protected by a decision rendered by the entire Commission, the matter will be forwarded to the Commission for a formal hearing.

§235 Formal Hearing

A. The Commission has the authority, granted by R.S. 40:1333.4, to bring administrative proceedings against licensed EMS Clinicians, applicants for license, individuals seeking enrollment or progression in an approved EMS education program, certified ambulance operators, and individuals practicing EMS without licensure or certification. The individual has the right to appear and be heard, either in person or by counsel; the right of notice, a statement of what accusations have been made; the right to present evidence and to cross-examine; and the right to have witnesses subpoenaed.

B. Notice and Service

1. The chair of the EMS Commission or a designee fixes a time and place for a hearing.
2. At least thirty (30) days before the date of the hearing, a copy of the charges and a notice of the time and place of the hearing shall be sent to the individual respondent by any means authorized for such purpose of this policy.
3. At least twenty (20) working days before the scheduled hearing date, the individual shall respond in writing as to his or her intention to appear or not appear at the scheduled hearing. At least twenty (20) working days before the scheduled hearing, the individual shall also file with the Commission a written response to the specific allegation contained in the notice of charges. Allegations not specifically answered shall be deemed admitted.
4. If the individual does not appear, in person or through counsel, after proper notice has been given, the individual has waived these rights and the EMS Commission may proceed with the hearing without the presence of the individual.
5. An individual who fails without a valid continuance to appear at two consecutive meetings after being validly served with a notice to appear, as set forth in Subsection B of this Section, at each may be summarily suspended for such reason. Any such suspension shall continue until the individual appears for a hearing before the Commission, opportunity for which shall be afforded at the next regularly scheduled meeting thereof.

C. Motions for Continuance

1. The EMS Commission shall not postpone cases that have been scheduled for hearing absent good cause. A written motion by a licensed EMS Clinician, applicant, or student for continuance shall be filed with the EMS Commission at least five (5) working days before the time set for the hearing, except for extreme emergencies. The motion shall contain the reason for the request, which reason must be based upon good cause and have relevance for due process. Requests for continuances may be approved or denied by the chair or designee. No more than three requests for continuance shall be granted.

D. Subpoenas

1. The EMS Commission chair or a designee of the chair may issue a subpoena(s) for the EMS Commission for disciplinary proceedings, and when requested to do so, may issue subpoenas for the other party. Subpoenas include:
 - a. A subpoena requiring a person to appear and give testimony;
 - b. A subpoena duces tecum, which requires that a person produce books, records, correspondence, or other materials over which he has control.

E. Hearing

1. The hearing is held, at which time the EMS Commission's primary role is to hear evidence and argument, and to reach a decision. Any Commission members who, because of bias or interest, are unable to assure a fair hearing shall be recused from that particular proceeding. The reasons for the recusal are made part of the record. Should the majority of the EMS Commission members be recused for a specific proceeding, the governor shall be requested to appoint a sufficient number of pro tem members to obtain a quorum for the proceeding.
2. The EMS Commission shall be represented by a Louisiana Department of Health attorney. Evidence is presented that disciplinary action should be taken against the individual. The individual may present evidence personally or through an attorney, and witnesses may testify on behalf of the individual.

3. Evidence includes the following:
 - a. Oral testimony given by witnesses at the hearing, except that, for good cause, testimony may be taken by deposition (cost of the deposition is borne by requesting party) and/or by sworn affidavits;
 - b. Documentary evidence, i.e., written or printed materials including public, business, or institutional records, books, and reports; such documentary evidence may be received in the form of copies or excerpts, or by incorporation by reference, if the incorporated materials are available for examination by the parties before being received into evidence;
 - c. Visual, physical, and illustrative evidence;
 - d. Admissions, which are written or oral statements of a party made either before or during the hearing;
 - e. Facts officially noted into the record, usually readily determined facts, making proof of such unnecessary;
 - f. All testimony is given under oath. If the witness objects to swearing, the word "affirm" may be substituted.
4. The chair of the EMS Commission presides, and the customary order of proceedings at a hearing is as follows:
 - a. The Director of the Bureau of EMS, or their designee, or an attorney thereof, presents the case against the individual.
 - b. The individual, or his attorney, makes an opening statement, explaining why he believes that the charges against him/her are not legally founded.
 - c. The individual Commission members ask relevant questions.
 - d. The individual, or his attorney, may make any statements.
 - e. The Director of the Bureau of EMS, or their designee, or the Department attorney, therefore, makes the final statement.
 - f. The commission may impose reasonable time limits on all sides in a hearing, provided that limits will not unduly prejudice the rights of the parties.
 - g. The commission may exclude incompetent, irrelevant, immaterial, or unduly repetitious evidence. Objections to evidentiary offers may be made and shall be noted in the record.
 - h. When a hearing will be expedited, and the interests of the parties will not be prejudiced substantially, any part of the evidence may be received in written form.
 - i. Motions may be made before, during, or after a hearing. All motions shall be made at an appropriate time, according to the nature of the request. Motions made before or after the hearing shall be in writing. Those made during the course of the hearing may be made orally since they become part of the transcript of the proceeding.
5. The records of the hearing shall include:
 - a. All papers filed and served in the proceeding;
 - b. All documents and other material accepted as evidence at the hearing;
 - c. Statements of matters officially noticed;
 - d. Notices required by the statutes or rules, including notice of the hearing;
 - e. Affidavits of service or receipts for mailing or process or other evidence of service;
 - f. Stipulations, settlement agreements or consent orders, if any;
 - g. Records of matters agreed upon at a pre-hearing conference;

- h. Orders of the EMS Commission and its final decision;
 - i. Actions taken subsequent to the decision, including requests for reconsideration and rehearing;
 - j. A transcript of the proceedings, if one has been made, or a tape recording or stenographic record;
- 6. The record of the proceeding shall be retained until the time for any appeal has expired, or until the appeal has been concluded. The record is not transcribed unless a party to the proceeding so requests, and the requesting party pays for the cost of the transcript. A party that appeals a decision of the EMS Commission shall pay all of the costs incurred by the Louisiana Department of Health for preparation of the original and any licensed copy of the record of the proceeding that is required to be transmitted to the reviewing court.
- 7. The decision of the EMS Commission shall be reached according to the following process:
 - a. Determine the facts in the issue based on evidence submitted at the hearing;
 - b. Determine whether the facts in the case support the charges brought against the individual;
 - c. Determine whether charges brought are a violation of the Emergency Medical Services Practice Act or rules and regulations of the EMS Commission or the Bureau of EMS.
- 8. The vote of the EMS Commission shall be recorded. Minority views may be made part of the record.
- 9. Sanctions against the individual who is a party to the proceeding are based upon the findings of fact and conclusions of law determined by the hearing. The party is notified by certified mail of the decision of the EMS Commission.

F. Disciplinary Sanctions

- 1. The type of disciplinary sanctions and length of time specified for the sanctions shall be determined on an individual basis, considering all acts pertinent to the case.
- 2. The EMS Commission sets forth guidelines with ranges of disciplinary sanctions from which disciplinary penalties may be imposed. These guidelines are intended to serve only as a guide for staff and Commission members when considering penalties, which could be imposed for specific violations of the provisions or requirements of this Part. The EMS Commission may order license or certification sanctions.
- 3. The disciplinary guidelines are based upon a single count violation. Multiple counts of violations of the same action, or other unrelated violations contained in the same complaint, will be grounds for enhancement of penalties. Each day of a continuum of violations may be treated as a separate violation.
- 4. In determining sanctions, the staff shall consider aggravating or mitigating circumstances identified by the EMS Commission in addition to any other factors. The list of aggravating and mitigating circumstances in the guidelines is not to be considered an exclusive list of circumstances.
 - a. Aggravating circumstances may result in the EMS Commission issuing maximum sanctions, or they may justify enhancement of a penalty beyond the maximum guidelines.
 - b. Mitigating or extenuating circumstances may justify lessening of the sanctions below the minimum guidelines. License suspensions may be stayed with stipulated probation in some extenuating circumstances.

5. The order may stipulate remedial education, specific evaluation and therapy, and other sanctions as deemed necessary and appropriate to the case.

G. Reconsideration or Rehearing

1. The EMS Commission shall reconsider a matter when ordered to do so by a higher administrative authority or when the case is remanded for reconsideration or rehearing by a court to which the EMS Commission's decision has been appealed.
2. The EMS Commission may reconsider a matter that it has decided. This may involve rehearing the case, or it may involve reconsidering the case based on the record. Such reconsideration may occur when a party files a petition requesting that the EMS Commission reconsider the decision and specifies the particular grounds, therefore.
3. A petition by a party for reconsideration or rehearing must be in proper form and filed within 20 days from the date of entry of the decision. A decision is deemed to be entered when it is signed by the chair or designee and sent by certified mail to the individual's address of record. The petition shall set forth the grounds for the rehearing, which include one or more of the following:
 - a. The EMS Commission's decision is clearly contrary to the law and the evidence;
 - b. There is newly discovered evidence, which was not available to the individual at the time of the hearing and which may be sufficient to reverse the EMS Commission's action;
 - c. Previously considered ought to be examined in order to dispose of the case properly;
 - d. It would be in the public interest to further consider the issues and the evidence;
 - e. Upon the EMS Commission's receipt of a petition for rehearing or reconsideration, the EMS Commission may affirm or modify the decision or grant a rehearing to all or any of the parties and on all or part of the issues for any of the above-stated reasons. An order granting a rehearing shall specify with particularity the ground or grounds on which the rehearing is granted, and the rehearing shall cover only those matters so specified.

H. Emergency Action

1. If the Commission finds that public health, safety, and welfare require emergency action and a finding to that effect is incorporated in its order, summary suspension of a license may be ordered by the chair or designee pending proceedings for revocation or other action. Such proceedings shall be promptly instituted and determined at the next regularly scheduled Commission meeting.
2. Individuals will be notified via email and certified return receipt mail.

I. Disciplinary Proceedings in Another Licensing Jurisdiction

1. When a licensed EMS professional has a license or certification revoked, suspended, denied, or sanctioned in other ways for disciplinary reasons by the National Registry of EMTs, or a certification/licensing agency in another jurisdiction that licenses EMS personnel, the EMS Clinician shall be notified that his or her Louisiana license or certification is automatically suspended. Except for the following:
 - a. Nonpayment of fees;
 - b. A person in a recovery program for chemical dependency receives permission from the state of origin to transfer to another state;

- c. The licensed EMS professional is issued a reprimand, and the licensed EMS professional agrees to have his or her Louisiana license reprimanded identically to, or in excess of, the said jurisdiction's reprimand; and
- d. The licensure is encumbered with a reprimand with stipulations, and the licensed EMS professional agrees to have his Louisiana license probated with stipulations that are identical to or exceed the stipulations in said jurisdiction.

- 2. The licensed EMS Clinician may have his license reinstated, provided that the licensed EMS Clinician:
 - a. Provides evidence of an unencumbered license by the involved license/licensing authority and all subsequent license/licensing authorities; and
 - b. Meets requirements for reinstatement of license as described in this policy.

§237 Appeal of the EMS Commission's Decision

- A. Any person whose license has been revoked, suspended, denied, or otherwise disciplined by the commission shall have the right to have the proceedings of the EMS Commission reviewed by the court having jurisdiction of the EMS Commission, provided that such appeal is made within thirty (30) days after the date indicated on the registered mail receipt of the written notice of the EMS Commission's decision. The EMS Commission's decision is enforceable in the interim unless the court orders a stay.

§239 Reinstatement of License

- A. Application for the reinstatement of a suspended or surrendered license shall be in writing.
- B. The application for reinstatement of a suspended license or certification does not require the satisfaction of all the requirements for initial licensure. However, the requirements of this Part, as determined by the commission or the Bureau of EMS, shall be met.
- C. Prior to reinstatement of a license previously suspended, a hearing or conference is held before the EMS Commission to afford the applicant the opportunity to present evidence that the cause for the revocation or suspension no longer exists and to provide an opportunity for the EMS Commission to evaluate changes in the person or condition(s). In certain situations, the license may be reinstated by consent order or settlement order. The burden of proof is on the applicant to provide that the conditions that led to the suspension no longer exist and/or no longer affect the applicant's ability to practice safely. If reinstatement is granted, a period of probation with stipulations may be imposed.

§241 Proceedings Against Certified Education Program

- A. The Commission may direct the Bureau of EMS to deny, revoke, suspend, probate, limit, reprimand, or restrict any EMS education programs, or otherwise discipline a student enrolled in EMS education programs or attempting to enroll in EMS education programs as part of its duties and responsibilities in regulating the practice of EMS in Louisiana and in overseeing the administration of the curriculum and operation of EMS education programs in the state of Louisiana.
- B. Every State-approved EMS Education Program subject to proceedings set forth in this section shall be afforded an opportunity for a hearing before the Commission or its duly appointed hearing officer or committee.

- C. Information obtained by the commission that an EMS student enrolled or attempting to enroll in EMS education programs is or has engaged in any conduct prescribed by R.S. 40:1133.7 shall be received in a form prescribed by the commission. However, neither shall prohibit the Bureau of EMS or the commission from action upon an allegation of wrongdoing learned of or submitted by other means. This information may be furnished by any person, staff, agency, or by the commission.
- D. Grounds for disciplinary proceedings against a State-approved EMS Education Program include, but are not limited to, items specified in R.S. 40: 1133.7
 1. All of the grounds for disciplinary proceedings against a person, individual, or licensed EMS Clinician, as applicable, listed in Subsection D of §277 of this Chapter; or
 2. Has been denied a request to enroll in EMS education programs, or has been denied a license to practice in any healthcare field, or has had such privileges revoked, suspended, or otherwise restricted.
- E. A complaint that a State-approved MES Education Program has engaged in, or is engaging in, any conduct prescribed by R.S. 40:1133.7 may be made by any person, staff, or agency to the EMS Commission.
 1. Such complaints shall be in writing, and on a form prescribed by the EMS Commission or affixed to the form prescribed by the EMS Commission.

§243 Disciplinary Process and Procedures of an EMS Education Program

- A. A disciplinary proceeding, including the formal hearing, is less formal than a judicial proceeding. It is not subject to strict rules and technicalities, but must be conducted in accordance with consideration of fair play and constitutional requirements of due process.
- B. The purpose of a disciplinary proceeding is to determine contested issues of law and fact; whether the institution did certain acts and whether those acts violated the Emergency Medical Services Practice Act or rules and regulations of the EMS Commission or the Bureau of EMS; and to determine the appropriate disciplinary action.
- C. Investigation
 1. The process of a disciplinary proceeding shall include certain steps and may include other steps as follows:
 - a. The Bureau of EMS or EMS Commission receives information alleging that an accredited training institution has acted in violation of the Emergency Medical Services Practice Act or the Policy.
 - i. Communications from the information shall be privileged and shall not be revealed to any person unless such documents will be offered for evidence in a formal hearing, or unless those documents are subpoenaed by a court, or requested by other regulatory or law enforcement agencies.
 - b. The information is investigated by the Bureau of EMS's staff to determine if there is enough evidence to warrant disciplinary proceedings. Information received by the Bureau of EMS or EMS Commission shall not be considered a complaint until the individual furnishing that information provides the information in writing.

- i. The EMS Commission chair, or designee, may issue a subpoena before the filing of charges if, in the opinion of the chair, such a subpoena is necessary to investigate any potential violation or lack of compliance with R.S. 40:1131 et seq., or the policy, regulations, or orders of the Bureau of EMS or the EMS Commission. The subpoena may be to compel the attendance of any person to appear for the purposes of giving sworn testimony and/or to compel the production of books, records, papers, or other objects.
2. An agreement worked out between the complainant and the education program does not preclude disciplinary action by the EMS Commission. The nature of the offense alleged and the evidence before the EMS Commission must be considered.

§245 Formal Disciplinary Action of an EMS Education Program

- A. A decision to initiate formal disciplinary proceedings is made if one or more of the following conditions exist:
 1. The complaint is sufficiently serious in the opinion of the Director of the Bureau of EMS or an EMS Commission member;
 2. The accredited training institution fails to respond to the EMS Commission's correspondence concerning the complaint;
 3. The accredited education program's response to the EMS Commission's letter or investigative demand is not convincing that no action is necessary;
 4. An informal approach is used, but fails to resolve all of the issues.
- B. Informal Procedures
 1. The matter may be resolved without a formal administrative hearing by either a voluntary surrender of license, Consent Order, or Settlement Order. These actions shall constitute disciplinary action and shall be a public record of the EMS Commission. The EMS Commission shall publish the accredited education program's name, a brief description of the violation, and the disciplinary action.
- C. Consent Order
 1. An order involving some disciplinary action may be made by the EMS Commission with the consent of the accredited education program.
 2. The EMS Commission chair is authorized to offer the Bureau of EMS a certified education program, the choice of a consent order in lieu of an administrative hearing.
 3. A consent order signed by an accredited training institution is an irrevocable offer by the accredited education program until approved, or rejected, by the EMS Commission chair or designee.
 4. A consent order requires formal approval of a quorum of the EMS Commission. All actions of the Bureau of EMS shall be reported to the EMS Commission at its next regularly scheduled meeting.
 5. A consent order is not the result of the EMS Commission's deliberation; it is the EMS Commission's formal approval of an agreement reached between the Bureau of EMS and the accredited education program. The order is issued by the EMS Commission to carry out the parties' agreement.
 - a. Should the EMS Commission require evidence before arriving at a decision, the accredited education program shall be notified and given an opportunity for a hearing.
 - b. Should the EMS Commission revise the terms of the agreement, said revised agreement shall be presented for the accredited education program acceptance.

- c. The EMS Commission may formulate its order contingent upon the accredited education program's acceptance.
- d. The EMS Commission shall have the right to refer any case directly to an administrative hearing without first offering a consent agreement.

D. Settlement Order

- 1. Disciplinary Settlement Committee, consisting of the chair, or a designee of the chair, and another member of the Commission or a Bureau staff member, is delegated the authority to render a final decision regarding the settlement of a contested administrative matter by offering a settlement order in lieu of an administrative hearing. The settlement order shall be deemed an order of the Commission, effective immediately upon the signature of all parties to the agreement.
 - a. The disciplinary settlement shall be submitted to the Commission for review at the next regularly scheduled disciplinary hearing.
 - b. Should the Disciplinary Settlement Committee be unable to resolve a case successfully, or should the committee believe that the public would be better protected by a decision rendered by the entire Commission, the matter will be forwarded to the Commission for a formal hearing.

§247 Formal Hearing of an EMS Education Program

- A. The EMS Commission, the Bureau of EMS, and the accredited education program are the parties of the proceeding. The accredited training institution has the right to appear and be heard, either in person or by counsel; the right of notice, a statement of what accusations have been made; the right to present evidence and to cross-examine; and the right to have witnesses subpoenaed.
- B. Notice and Service
 - 1. The chair or a designee fixes a time and place for a hearing.
 - 2. At least thirty (30) days before the date set for a hearing, a copy of the charges and notice of the time and place of the hearing shall be sent to the accredited education program's address of record by means authorized for such purpose of this policy.
 - 3. At least twenty (20) working days before the scheduled hearing date, the accredited education program shall respond in writing as to its intention to appear or not appear at the scheduled hearing.
 - 4. At least twenty (20) working days before the scheduled hearing date, the accredited education program shall file with the EMS Commission a written response to the specific allegation contained in the notice of charges. Allegations not specifically answered shall be deemed admitted.
 - 5. If the accredited education program does not appear, in person or through counsel, after proper notice has been given, the accredited education program has waived these rights, and the EMS Commission may proceed with the hearing without the presence of the accredited education program.
 - 6. An accredited education program that fails without a valid continuance to appear at two consecutive meetings after being validly served with a notice to appear as set forth in Subsection C of this Section, at each may be suspended for such reason. Any such suspension shall continue until the accredited education program appears for a hearing before the Commission, opportunity for which shall be afforded at the next regularly scheduled meeting thereof.

C. Motions for Continuance

1. The EMS Commission shall not postpone cases that have been scheduled for hearing absent good cause. A written motion by a licensed EMS Clinician, applicant, or student for a continuance shall be filed with the EMS Commission at least five (5) working days before the time set for the hearing. The motion shall contain the reason for the request, which reason must be based upon good cause and have relevance for due process. Requests for continuances may be approved or denied by the chair or designee. No more than three requests for continuance shall be granted.

D. Subpoenas

1. The EMS Commission chair, a designee of the chair, may issue a subpoena(s) for the EMS Commission for disciplinary proceedings, and when requested to do so, may issue subpoenas for the other party. Subpoenas include:
 - a. A subpoena requiring a person to appear and give testimony;
 - b. A subpoena duces tecum, which requires that a person produce books, records, correspondence, or other materials over which he has control.

E. Hearing

1. The EMS Commission's primary role is to hear evidence and argument and to reach a decision. Any EMS Commission member who, because of bias or interest, is unable to assure a fair hearing shall be recused from that proceeding. The reasons for the recusal are made part of the record. Should most of the EMS Commission members be recused for a particular proceeding, the governor shall be requested to appoint a sufficient number of pro temp members to obtain a quorum for the proceeding.
2. The EMS Commission shall be represented by a Louisiana Department of Health attorney. Evidence is presented that disciplinary action should be taken against the accredited education program. The accredited training institution may present evidence personally or through an attorney, and witnesses may testify on behalf of the accredited education program.
 - a. Evidence includes the following:
 - i. Oral testimony given by witnesses at the hearing, except that, for good cause, testimony may be taken by deposition (cost of the deposition is borne by requesting party) and/or by sworn affidavits;
 - ii. Documentary evidence, i.e., written or printed materials including public, business, or institutional records, books and reports; such documentary evidence may be received in the form of copies or excerpts, or by incorporation by reference, if the incorporated materials are available for examination by the parties before being received into evidence;
 - iii. Visual, physical, and illustrative evidence;
 - iv. Admissions, which are written or oral statements of a party made either before or during the hearing;
 - v. Facts officially noted into the record, usually readily determined facts, making proof of such unnecessary;
 - b. All testimony is given under oath. If the witness objects to swearing, the word "affirm" may be substituted.
3. The chair of the EMS Commission presides, and the customary order of proceedings at a hearing is as follows.
 - a. The Director of the Bureau of EMS, or a designee, or an attorney, therefore presents the case against the accredited education program.
 - b. The accredited education program, or its attorney, makes an opening statement, explaining why it is believed that the charges against it are not legally founded.

- c. The EMS Commission members will ask the accredited education program relevant questions.
- d. The accredited education program, or its attorney, may make any statements or ask any questions to the EMS Commission.
- e. The EMS Commission enters into a period of deliberation.
- f. The chair of the EMS Commission makes the final statement.
- g. The EMS Commission may impose reasonable time limits on all sides in a hearing, provided that limits will not unduly prejudice the rights of the parties.
- h. The EMS Commission may exclude incompetent, irrelevant, immaterial, or unduly repetitious evidence. Objections to evidentiary offers may be made and shall be noted in the record.
- i. When a hearing will be expedited, and the interests of the parties will not be prejudiced substantially, any part of the evidence may be received in written form.
- j. Motions may be made before, during, or after a hearing. All motions shall be made at an appropriate time, according to the nature of the request. Motions made before or after the hearing shall be in writing. Those made during the course of the hearing may be made orally since they become part of the transcript of the proceeding.

4 The records of the hearing shall include:

- a. All papers filed and served in the proceedings;
- b. All documents and other materials accepted as evidence at the hearing;
- c. Statements of matters officially noticed;
- d. Notices required by the statutes or policy, including notice of the hearing;
- e. Affidavits of service or receipts for mailing or process or other evidence of service;
- f. Stipulations, settlement agreements or consent orders, if any;
- g. Records of matters agreed upon at a pre-hearing conference;
- h. Orders of the EMS Commission and its final decision;
- i. Actions taken subsequent to the decision, including requests for reconsideration and rehearing;
- j. A transcript of the proceedings, if one has been made, or a tape recording or stenographic records;
- k. The record of the proceeding shall be retained until the time for any appeal has expired, or until the appeal has been concluded. The record is not transcribed unless a party to the proceeding so requests, and the requesting party pays for the cost of the transcript. A party that appeals a decision of the EMS Commission shall pay all of the costs incurred by the Louisiana Department of Health for preparation of the original and any licensed copy of the record of the proceeding that is required to be transmitted to the reviewing court.

5. The decision of the EMS Commission shall be reached according to the following process:

- a. Determine the facts in the issue based on the evidence submitted at the hearing;
- b. Determine whether the facts in the case support the charges brought against the accredited education program
- c. Determine whether charges brought are a violation of the Emergency Medical Services Practice Act or rules and regulations of the EMS Commission or the Bureau of EMS.

6. The vote of the EMS Commission shall be recorded. Minority views may be made part of the records.
7. Sanctions against the accredited training institution that is a party to the proceeding are based upon the findings of fact and conclusions of law determined by the hearing. The party is notified by certified mail of the decision of the EMS Commission.

F. Disciplinary Sanctions

1. For violations of the Emergency Medical Services Practice Act, state law, regulation, or any portion of this policy, the EMS Commission may impose sanctions, including, but not limited to:
 - a. Suspend, revoke, restrict, refuse to issue, or refuse to renew a Certificate of Accreditation of the education program
 - b. Impose a fine not to exceed one thousand dollars.
2. The type of disciplinary sanctions and length of time specified for the sanctions shall be determined on an accredited education program basis, considering all facts pertinent to the case.
3. The EMS Commission sets forth guidelines with ranges of disciplinary sanctions from which disciplinary penalties may be imposed. These guidelines are intended to serve only as a guide for staff and commission members when considering penalties, which could be imposed for specific violations of the Emergency Medical Services Practice Act. Guidelines are in no way binding on the EMS Commission when dealing with disciplinary matters.
4. The disciplinary guidelines are based upon a single count violation. Multiple counts of violations of the same action, or other unrelated violations contained in the same complaint, will be grounds for the enhancement of penalties. Each day of the continuum of violations may be treated as a separate violation.
5. In determining sanctions, the staff shall consider aggravating or mitigating circumstances identified by the EMS Commission in addition to any other factors. The list of aggravating and mitigating circumstances in the guidelines is not to be considered an exclusive list of circumstances.
 - a. Aggravating circumstances may result in the EMS Commission issuing maximum sanctions, or they may justify the enhancement of a penalty beyond the maximum guidelines.
 - b. Mitigating or extenuating circumstances may justify the lessening of the sanctions below the minimum guidelines. Certification suspensions may be stayed with stipulated probation in some extenuating circumstances.
6. The Order may stipulate remedial education, specific evaluation and therapy, and other sanctions as deemed necessary and appropriate to the case.

G. Reconsideration or Rehearing

1. The EMS Commission shall reconsider a matter when ordered to do so by a higher administrative authority or when the case is remanded for reconsideration or rehearing by a court to which the EMS Commission's decision has been appealed.
2. The EMS Commission may reconsider a matter that it has decided. This may involve rehearing the case, or it may involve reconsidering the case based on the records. Such reconsideration may occur when a party files a petition requesting that the EMS Commission reconsider the decision and specifies the grounds, therefore.

3. A petition by a party for reconsideration or rehearing must be in proper form and filed within twenty (20) days from the date of entry of the decision. A decision is deemed to be entered when it is signed by the chair or designee and sent by certified mail to the accredited education program's address of record. The petition shall set forth the grounds for the rehearing, which include one or more of the following:
 - a. The EMS Commission's decision is clearly contrary to the law and the evidence;
 - b. There is newly discovered evidence, which was not available to the accredited training institution at the time of the hearing and which may be enough to reverse the EMS Commission's action;
 - c. There is a showing that issues not considered ought to be examined in order to dispose of the case properly;
 - d. It would be in the public interest to further consider the issues and the evidence;
 - e. Upon the EMS Commission's receipt of a petition for rehearing or reconsideration, the EMS Commission may affirm or modify the decision or grant a rehearing to all or any of the parties and on all or part of the issues for any of the above-stated reasons. An order granting a rehearing shall specify with particularity the ground or grounds on which the rehearing is created, and the rehearing shall cover only those matters so specified.

H. Disciplinary Proceedings in Another Licensing Jurisdiction

1. When an EMS education program has a certification revoked, suspended, denied, or sanctioned in other ways for disciplinary reasons by another license, certification, or accreditation body, the EMS education program must notify the Bureau of EMS within fifteen (15) days.

§249 Appeal of the EMS Commission's Decision by an EMS Education Program

A. Any EMS Education Program whose certification has been revoked, suspended, denied or otherwise disciplined by the Bureau of EMS shall have the right to have the proceedings of the EMS Commission reviewed by the court having jurisdiction over the EMS Commission, provided that such appeal is made within thirty (30) days after the date indicated on the certified mail receipt of the written notice of the EMS Commission's decision. The EMS Commission's decision is enforceable in the interim unless the court orders a stay.

§251 Meetings of the EMS Commission

- A. Regular business meetings shall be held at the office of the Bureau of EMS or at a place designated by the Bureau of EMS.
- B. A minimum of four regular meetings shall be held quarterly.
- C. The chair shall call special meetings, or a designee, or upon the request of four voting members of the Commission.
- D. A quorum shall be defined as a simple majority of the appointed Commissioners for the purpose of conducting business.
- E. Any person wishing to have a special topic added to the agenda for a commission meeting shall notify the Bureau of EMS or Chair of the EMS Commission at least twenty-one (21) days before the meeting. Items of an emergency nature may be considered at any meeting without prior notice.
- F. The Bureau of EMS, or a designee of the Chair of the EMS Commission, shall keep a record of all meetings, and such records shall be retained as permanent records of the transactions of the EMS Commission.

G. Meetings of the EMS Commission for the conduct of regular business and for the formation of policy shall be open to the public in accordance with R.S. 42:13 et seq.

§253 Public Comment at Meetings of the EMS Commission

A. At every open meeting of the EMS Commission, members of the public shall be afforded an opportunity to make public comment addressing any matters set by the agenda for discussion at that meeting.

1. Concerns and public comments shall be limited to five minutes per individual unless a majority of the EMS Commission members present waive the time limitations.
2. Anyone wishing to speak on a specific item must present the request before the convening of the meeting. Cards shall be available to place the request for public comment, along with the requester's name and the requester's appearance.
3. The chair may defer public comment on a specific agenda item until the item is brought up for discussion. However, the five-minute limitation for public comment shall remain in effect unless waived by a majority of the EMS Commission members present.
4. In addition, the chair of the EMS Commission may recognize individuals at a public meeting at his or her discretion.
5. Unless otherwise provided by law, public comment is not part of the evidentiary record of a hearing or case unless sworn, subject to cross-examination, offered by a party as relevant testimony, and received in accordance with the Louisiana Administrative Procedure Act, R.S. 49:950 et seq.

§255 Declaratory Statements/Advisory Opinions of the EMS Commission

A. The EMS Commission may issue a declaratory statement in accordance with the Administrative Procedure Act. These include a declaratory statement or an advisory opinion, in the form of a ruling, which has the same stature as EMS Commission decisions in adjudicated cases, in response to a request for clarification of the effect of rules and regulations or of R.S. 40:1131 et seq. Advisory opinions as a statement of the EMS Commission's statement relative to the petition, with the principles and rationale that support the ruling. Neither an advisory opinion nor a declaratory statement has the binding force of law, but they represent the EMS Commission's expert opinion relative to the matter in question.

B. A request for a declaratory statement or for an advisory opinion is made in the form of a petition to the EMS Commission. The petition shall include at least:

1. The name and address of the petitioner;
2. Specific reference to the statutes or rules and regulations to which the petition relates;
3. A concise statement of the manner in which the petitioner is aggrieved by the rule or statute or by its potential application to her/him, or in which (s)he is uncertain of its effects;
4. A statement of whether an oral hearing is desired;
5. Other information appropriate for the EMS Commission's deliberation on the request.

C. The EMS Commission shall consider said petition at its next regularly scheduled meeting, provided that the petition has been filed at least fifteen (15) days before the next scheduled meeting.

1. The EMS Commission may take the following actions after the petition is considered:
 - a. Issues a declaratory statement or advisory opinion
 - b. Render a decision of no opinion.
- D. The declaratory statement/advisory opinion of the EMS Commission on said petition shall be in writing and mailed to the petitioner at the last address furnished to the EMS Commission and posted on the Bureau of EMS website.

§257 EMS Compact License Adverse/Disciplinary Action

- A. The licensee's home state shall have exclusive power to impose adverse action against an individual's license issued by the home state.
- B. If the licensee's home state is Louisiana, the license will be subject to the provisions as noted in section §201 of this policy manual, related application administrative rule, or legislation related to the EMS Commission.
 1. Adverse action orders shall include a statement that the individual's compact privileges are inactive. The order may allow the individual to practice in remote states with prior written authorization from both the home state and the remote state's EMS authority.
 2. If an individual's Louisiana license is restricted or suspended, the individual shall not be eligible to practice in a remote state under the privilege to practice until the individual's Louisiana license is restored.
 3. An individual currently subject to adverse action in the home state shall not practice in any remote state without prior written authorization from both the home state and the remote state's EMS authority.
 4. The EMS Commission shall report adverse actions and any occurrences in which the individual's compact privileges are restricted, suspended, or revoked to the National Compact Database in accordance with the rules of the EMS Compact Commission.
- C. If the licensee's home state is not Louisiana, Louisiana as the remote state, may take adverse action on an individual's privilege to practice within the state.
- D. The EMS Commission may take disciplinary action against an individual's privilege to practice in Louisiana based on the factual findings of another member state. It shall follow the noted procedures for imposing such adverse action.
- E. A home state's EMS authority shall investigate and take appropriate action with respect to reported conduct in a remote state as it would if such conduct had occurred within the home state. In such cases, the home state's law shall control in determining the appropriate adverse action.
- F. The EMS Compact shall not override a member state's decision that participation in an alternative program may be used in lieu of adverse action and that such participation shall remain nonpublic if required by the member state's laws. Member states must require individuals who enter any alternative programs to agree not to practice in any other member state during the term of the alternative program without prior authorization from such other member state.



EMS TASK FORCE

Charge of the EMS Task Force

The Emergency Medical Services Task Force is composed of individuals subject to the approval of the Secretary of the Louisiana Department of Health, which advises and makes recommendations to the Bureau of Emergency Medical Services and the Department on matters related to emergency medical services.

EMS Task Force Members

Justin Antarikananda	Louisiana Approved Education Program
Otha Shamburg	EMS Commission
	EMS Commission Subcommittee Chair
Kirk Coussan	Flight Medic
Brent Crawford, Chair	Licensed Paramedic
	Ambulance Standards Subcommittee Chair
Gavin Hall	License Paramedic
	Examination Subcommittee Chair
Timothy Dronet	CAAHEP EMS Education Program
	Education Subcommittee Chair
Preston Landry	Fire EMS Agency
Blance Bankston	Firemen's Association
Amy Fowler	Professional Fire Fighters of Louisiana
David Wells	Louisiana Ambulance Alliance
Jade Gabb	Telecommunicators
	911 Communications Subcommittee Chair
Eric Coley	Industrial EMS Provider
Bill Salmeron	Municipal EMS Provider
Sean Scott	Licensed EMT
John Lane	Louisiana Association of Nationally Registered EMTs
Dawn Young	High School Educator
	Credentialing Subcommittee Chair
Kevin Jura, Vice-Chair	Louisiana Chapter of NAEMSP

Task Force State Partners

Tonya Joiner	Office of Public Health
Glennis Gray	Office of Public Health
Cindy Duplessis	EMS for Children
Paige Hargrove	Louisiana Emergency Response Network
Charmaine Cureton	Louisiana Department of Education

§301. Duties and Responsibilities

A. Meetings

1. The task force shall have regular meetings at a time and place to be fixed by the task force. The task force shall hold meetings at least quarterly.
2. The chair, or a majority of the task force, upon giving adequate notice to each member, may call special meetings or cancel regular meetings.
3. The task force shall give public notice to any regular, special, or rescheduled meeting.
4. Such notice shall include the agenda, date, time, and place of the meeting. The agenda shall not be changed less than twenty-four (24) hours, exclusive of Saturdays, Sundays, and legal holidays, before the scheduled time of the meeting.
5. The agenda for any meeting shall be presented to the members of the task force not less than three business days before the scheduled meeting. In addition to the agenda, any supporting material associated with a particular agenda item shall be submitted to the task force members concurrent with the agenda. The agenda and supporting material may be provided electronically through email or facsimile.
6. Upon unanimous approval of the members present at a meeting of the task force, the task force may take up a matter not on the agenda.
7. The task force shall keep records and minutes of its business and official actions. The minutes of the proceedings of the task force shall be prepared and maintained on behalf of, and subject to, the approval of the task force.

B. Chairman

1. The task force members shall elect a chairman and vice-chairman annually from the duly appointed members of the task force. The term for each position shall be one year.
2. If necessary, the task force shall elect other necessary officers from among its membership.

C. Removal of Members

1. The LDH Secretary may remove any member of the task force for cause, including misconduct, incompetence, neglect of duty, or absence from more than half of the regularly scheduled task force meetings in any calendar year.
2. The task force may request that the secretary remove a member from the task force for cause. The recommendation shall come after a hearing by the task force during which cause for removal has been established, and provided that a majority of the members have recommended removal.
3. If circumstances regarding the member's representation of the stakeholder group in which they were appointed to represent change, it will be recommended that the member be replaced at the expiration of their current term.

D. Quorum

1. A majority of the task force members duly appointed by the LDH Secretary, excluding vacant positions, present in person shall constitute a quorum. No action may be taken without a quorum present and voting.

E. Voting

1. Each duly appointed member shall have one vote on all matters before the task force. Members of state agencies that participate in task force meetings shall be considered ex officio members of the task force, have no voting privileges, and shall not be considered for a quorum.
2. Members must vote in person at scheduled task force meetings. Voting by proxy is not permitted.

F. Public

1. All meetings and hearings of the task force shall be open to the public. Time at each meeting shall be set aside for public comment.

G. Sub-Committees

1. The Task Force may establish subcommittees as needed to conduct the business of the Task Force.
2. There shall be a minimum of two (2) duly appointed members of the Task Force serving on every sub-committee, one of which will serve as the chairperson of the sub-committee.
3. In addition to the two (2) duly appointed members of the Task Force serving on a sub-committee, additional members from the community, the public, subject matter experts, or any other person for any reason may serve on a sub-committee of the Task Force, subject to the discretion of the sub-committee chairperson.

H. Meeting Attendance

1. Appointed members of the Task Force must attend no less than one-third of regularly scheduled meetings of the Task Force, in person, as a member of the quorum.
2. Appointed members of the Task Force must attend at least fifty percent (50%) of all regularly scheduled meetings of the Task Force as either voting members, in person as a member of the quorum, or via teleconference.

I. Executive Session

1. Certain confidential and/or sensitive matters may arise from time to time, which require special consideration by the appointed membership of the Task Force.
 - a. It may be necessary for the appointed members of the Task Force to discuss such matters outside the public's purview.
 - b. When confidential and/or sensitive matters arise requiring discussion by the Task Force members, the Task Force shall, upon motion by a voting member and a vote approved by a simple majority, enter into an executive session.
2. An executive session of the Task Force shall consist only of duly appointed members of the Task Force and any specifically named subject matter experts and/or presenters required by the members of the Task Force.
 - a. Whenever possible, an executive session shall occur after the conclusion of all other business of the Task Force.
 - b. Should it be required, and should the members vote to enter into executive session as required herein, executive session may be had at any time during the course of any regular meeting or special meeting of the Task Force.
3. In any executive session of the Task Force, minutes shall be kept.
 - a. The minutes shall be kept under seal for the lesser of five (5) years or upon approval of a majority of voting members present at any regular or special meeting of the Task Force.

EDUCATION

Educational Guidelines

The State of Louisiana requires that Emergency Medical Services Clinicians adhere to the strictest standards of quality as it relates to education, training, testing, and service. Training Programs are required to design and implement a competency-based curriculum to ensure students are adequately prepared for the National Registry of EMTs cognitive and psychomotor certification examinations and/or Louisiana licensure. The National EMS Education Standards define the minimal entry-level educational competencies for each level of EMS personnel.

§401 Instructor to Student Ratio

- A. In line with other national healthcare programs, the instructor-to-student ratio for all levels of EMS education should be 1:6/8 for the lab and psychomotor portion of the program.
- B. EMS and other Healthcare Clinicians with the appropriate expertise may be utilized to fulfill these ratios.

§403 Education Program Responsibilities

- A. The responsibilities of the Education Program include, but are not limited to:
 - 1. Provide administrative support (to include clerical, audiovisual, student record keeping, and student counseling).
 - 2. Provide training equipment and supplies unique to this program.
 - 3. Maintain the current standards of compliance with the guidelines of the CoAEMSP (if applicable), the National Registry of EMTs, and the Louisiana Bureau of EMS for this Education Program.
 - 4. Maintain student selection criteria consistent with the workforce demands and national guidelines (if applicable).
 - 5. Maintain instructor qualification standards consistent with the workforce demands.
 - a. Education Programs are responsible for employing educators and the subsequent actions of these employees
 - b. Education programs are responsible for submitting in writing to the Bureau of EMS the names and qualifications of prospective agency instructor appointees. The Bureau of EMS will verify eligibility and must approve the appointment before the appointee may provide instruction.
 - i. Individuals not approved as instructors by the Bureau of EMS are not permitted to teach any EMS content.
 - ii. Any coursework provided by an unapproved instructor shall be deemed invalid, and the education program may face disciplinary action.
 - 6. Negotiate field internship and hospital clinical agreements with required supporting agencies (ambulance providers and hospitals) of both parties.
 - 7. Ensure that all students have EMS Commission clearance by possessing an "EMS Student" license before any patient contacts during clinical experiences.

- B. The Education Program must notify the Bureau of EMS immediately:
 - 1. Upon the discovery of any potential criminal activity on the part of a current student, instructor, or employee.
 - 2. Upon the dismissal of a student from a course or program for any reason other than attendance or academic reasons.
- C. The Education Program is expected to demonstrate quality instruction as determined by student performance metrics.
 - 1. Education programs are expected to maintain a Pass/Fail Rate that exceeds 70% on both cognitive and psychomotor exams, respectively.
 - 2. Education programs are expected to maintain a Matriculation rate that exceeds 70%.

§405 Course Documentation/Records

- A. Education Programs shall submit the following information to the Bureau of EMS via the Information Management System:
 - 1. Program Information
 - a. Location
 - b. Levels/Types of Instruction
 - c. Personnel
 - i. List of authorized program administrators
 - ii. List of authorized primary instructors
 - iii. Name of program Medical Director
 - 2. Course Information
 - a. Course title
 - b. Course type
 - c. Primary instructor
 - d. Co-Instructor(s)
 - e. Location
 - f. Hours of credit granted
 - g. Start date
 - h. End date
 - i. Upload of syllabus
 - j. Course participants
 - i. Name
 - ii. Verification of Attendance
 - ii. Disposition (pass, fail, withdraw, incomplete)
- B. Timelines
 - 1. All courses must be registered with the Bureau of EMS and have an assigned course number before the first day of class.
 - 2. All students must be enrolled in the course and entered onto the electronic course roster by the scheduled registration close date.
 - 3. Within 14 days of the course end date, the student(s) final course disposition must be recorded in the Bureau of EMS Information Management System.

§407 Student Requirements

- A. Emergency Medical Responder
 - 1. Entry Requirements
 - a. Must possess a valid Louisiana Driver's license or state-issued ID.
 - b. Prospective students must complete the criminal history report request in the Bureau of EMS Information Management System.
 - 2. Initial Course
 - a. Must include at least 48 hours of instruction that covers the cognitive, psychomotor, and affective domain information.

- b. Must include a BLS CPR course.
 - c. A written exam(s) must be given, and a minimum of 70% must be achieved.
 - d. A psychomotor exam(s) must be given, and a passing score must be received.
 - e. Must include the required competencies as outlined in the National EMS Education Standards.
- 3. Continuing Education Requirements
 - a. Required every two years.
 - b. Must include at least 16 hours of instruction based on the NREMT requirements for the EMR level that covers the cognitive, psychomotor, and affective domain information.
 - c. Must include a BLS CPR course with a maximum of 4 hours counting toward the total hours of the renewal course.
 - d. If offered as a single course:
 - i. A written exam(s) must be given, and a minimum of 70% must be achieved.
 - ii. A psychomotor exam(s) must be given, and a passing score must be received.
 - e. Continuing education must be taken within 24 months of the license expiration date and completed by the date of license expiration.

B. Emergency Medical Technician

- 1. Entry Requirements
 - a. Must possess a valid Louisiana Driver's license or state-issued ID.
 - b. Students are required to prove high school graduation or equivalency to obtain a Louisiana EMT license.
 - c. Must demonstrate an 8th-grade reading level on a standardized proficiency exam.
 - d. Prospective students must complete the criminal history report request in the Bureau of EMS Information Management System.
- 2. Initial Course
 - a. Must be within the guidelines of the National EMS Education Standards.
 - b. Must include a BLS CPR course.
 - c. Must include the required competencies as outlined in the National EMS Education Standards.
- 3. Continuing Education Requirements
 - a. Required every two years.
 - b. Must complete the recertification requirements outlined by NREMT.

C. Advanced Emergency Medical Technician

- 1. Entry Requirements
 - a. Must possess a current NREMT EMT certification and Louisiana EMT license or have successfully completed a Bureau of EMS-approved EMT program and be licensed as an EMT before any patient contact during the clinical or field internship portion of the AEMT course occurs.
 - b. Must possess a valid Louisiana Driver's license or state-issued ID.
 - c. Must demonstrate a 10th-grade reading level and an 8th-grade math level on a standardized proficiency exam.
 - d. Prospective students must complete the criminal background affidavit in the Bureau of EMS Information Management System.
- 2. Initial Course
 - a. Must be within the guidelines of the National EMS Education Standards.

- b. Must include the required competencies as outlined in the National EMS Education Standards.
 - 3. Continuing Education Requirements
 - a. Required every two years.
 - b. Must complete the recertification requirements outlined by NREMT.
- D. Paramedic
 - 1. Entry Requirements
 - a. Must possess a current NREMT EMT or AEMT certification and Louisiana EMT or AEMT license or have successfully completed a Bureau of EMS-approved EMT program and be licensed as an EMT before any patient contact during the clinical or field internship portion of the Paramedic course occurs.
 - b. Must possess a valid Louisiana Driver's license or state-issued ID.
 - c. Must demonstrate a 12th-grade reading level and a 10th-grade math level on a standardized proficiency exam.
 - d. Prospective students must complete the criminal background affidavit in the Bureau of EMS Information Management System.
 - 2. Initial Course
 - a. Must be within the guidelines of the National EMS Education Standards.
 - b. Human Anatomy and Physiology is required as a prerequisite or a corequisite.
 - c. Must include the required competencies as outlined in the National EMS Education Standards.
 - 3. Continuing Education Requirements
 - a. Required every two years.
 - b. Must complete the requirements outlined by NREMT.

§409 Medical Directors for Education Programs

- A. All EMS instruction must be performed under the supervision of a Medical Director.
- B. The Medical Director position may be voluntary or paid by the Education Program.
- C. The Medical Director should be actively involved in emergency medicine or a related field.
- D. The Medical Director shall review and approve the content for each course syllabus.

§411 High School Education Programs

- A. High school teachers who possess a minimum of a current teaching certificate (Level 1 or higher) issued by the Louisiana Department of Education may teach Emergency Medical Responder courses within their educational system after successfully completing the following:
 - 1. Earn a state EMR license by completing a state-approved Emergency Medical Responder Course
 - 2. Earn NREMT certification
 - A. When candidates successfully complete the National Registry computer adaptive exam, and send the results of the NREMT EMR computer adaptive exam and a copy of the skill sheets documenting successful completion to the Bureau of EMS Competency Coordinator, skills verification will be updated in the candidate's account with the National Registry.
- 3. CPR Instructor Course.
 - A. Must possess a current CPR Instructor Card

B. High school teachers who possess a current teaching certification (Level 1 or higher) issued by the Louisiana Department of Education may teach Emergency Medical Technician courses within their education system after successfully completing the following:

1. Emergency Medical Technician Course
2. National Registry of EMTs Emergency Medical Technician Exam (computer adaptive exam and psychomotor exam)
3. CPR Instructor Course.
 - a. Must possess a current CPR Instructor Card
4. Submission and approval of an education program application to the Bureau of EMS.
5. Complete one year of successful teaching of a high school EMR course.

§413 Right to Practice EMS as a Student

A. Individuals seeking to function as an EMT-level EMS Student during the supervised clinical or internship phase of a Bureau of EMS-approved course shall:

1. Submit a completed application, in the format prescribed by the Bureau of EMS, and receive an EMS Student Authorization.
2. Be enrolled, in good standing, in a Bureau of EMS-approved EMT course.
3. Perform patient care under the direct supervision of a Louisiana-licensed healthcare provider from the list below:
 - a. Advanced Emergency Medical Technician
 - b. Paramedic
 - c. Registered Nurse
 - d. Respiratory Therapist
 - e. Physician Assistant
 - f. Physician
 - g. Emergency Medical Technician
 - i. This option may be utilized only during a time of severe workforce shortages in which any of the options listed above are not available.
4. Maintain a valid BLS CPR card.

B. Individuals seeking to function as an AEMT-level EMS Student during the supervised clinical or internship phase of a Bureau of EMS-approved course shall:

1. Be licensed by the Louisiana Bureau of EMS as an EMT.
2. Submit a completed application, in the format prescribed by the Bureau of EMS, and receive an EMS Student Authorization.
3. Be enrolled in a Bureau of EMS-approved AEMT course.
4. Perform patient care under the direct supervision of a Louisiana-licensed healthcare provider from the list below:
 - a. Paramedic
 - b. Registered Nurse
 - c. Respiratory Therapist
 - d. Physician Assistant
 - e. Physician
5. Students who are affiliated with a Louisiana-licensed EMS Provider may utilize on-duty responses to meet formative EMS experience requirements. The Education Program Director, the Education Program Medical Director, the EMS Provider Director/Chief, and the EMS Provider Medical Director must authorize the expansion of the Scope of Practice to provide AEMT-level care under the direct supervision of an approved Paramedic Preceptor.

- a. The student may be authorized to perform advanced airway management, establish peripheral IV/IO access, infuse IV fluids, and administer medications that are within the scope of the National EMS Education Standards via intravenous, intramuscular, inhalation, intranasal, subcutaneous, sublingual, and oral routes.
 - i. These attempts (both successful and unsuccessful) may be counted as skill attempts/completions provided that the proper documentation is completed and submitted to the Educational Program.
- 6. Maintain a valid BLS CPR card.

C. Individuals seeking to function as a Paramedic-level EMS Student during the supervised clinical or internship phase of a Bureau of EMS-approved course shall:

- 1. Be certified as an EMT or AEMT by NREMT or licensed as an RN.
- 2. Be in good standing with all state licensing and national certification organizations or agencies.
- 3. Submit a completed application, in the format prescribed by the Bureau of EMS, and receive an EMS Student Authorization.
- 4. Be enrolled in a Bureau of EMS-approved course as part of a CAAHEP-accredited Paramedic program.
- 5. Perform patient care under the direct supervision of a Louisiana-licensed healthcare provider from the list below:
 - a. Paramedic (with at least 3 years' experience)
 - b. Registered Nurse
 - c. Respiratory Therapist
 - d. Physician Assistant
 - e. Physician
- 6. Students who are affiliated with a Louisiana-licensed EMS Provider may utilize on-duty responses to meet formative EMS experience requirements. The Education Program Director, the Education Program Medical Director, the EMS Provider Director/Chief, and the EMS Provider Medical Director must authorize the expansion of the Scope of Practice to provide Paramedic-level care, under the direct supervision of an approved Paramedic Preceptor.
 - a. The student may be authorized to perform advanced airway management, establish peripheral IV/IO access, infuse IV fluids, acquire and interpret single lead and 12 lead ECGs, perform defibrillation and cardioversion, and administer medication via intravenous, intramuscular, inhalation, intranasal, subcutaneous, sublingual, and oral routes.
 - i. These attempts (both successful and unsuccessful) may be counted as skill attempts/completions provided that the proper documentation is completed and submitted to the Educational Program.
- 7. Maintain a valid BLS CPR card.

D. All policies outlined in Chapter 2 apply to all EMS Student applicants, and the applicant may be denied entry or progress into any clinical or internship aspect of an EMS course.

- 1. Applicants who are denied the right to practice EMS as a student shall not be eligible to submit a new application until the following conditions are met.
 - a. A hearing or conference is held before the EMS Commission to review the evidence, to afford the applicant the opportunity to prove that the cause for the denial no longer exists, and to provide an opportunity for the EMS Commission to evaluate changes in the person or conditions; or

- b. A minimum of two years has passed since the denial was issued; or
- c. The applicant presents evidence that the cause for the denial no longer exists.

§415 Education Program Approval

- A. The Bureau of EMS shall approve an Education Program applicant who is of good reputation and meets the requirements set forth.
- B. The Bureau of EMS shall grant or deny approval within 90 days of receipt of the application.
- C. The Bureau of EMS may issue or renew approval on a provisional basis to an applicant who is of good reputation and is in substantial compliance with the requirements. The Bureau of EMS shall inform an applicant receiving such approval of the conditions that must be met to complete compliance.
- D. An approval is valid for up to five years and may be renewed by the Bureau of EMS pursuant to procedures and standards established in these policies.
- E. An approval issued on a provisional basis is valid for the length of time established by the Bureau of EMS.
 - 1. If the Bureau of EMS finds that the holder of a provisional approval has met the conditions it specifies, the Bureau of EMS shall issue the appropriate approval.
- F. Approval is valid only for the EMS Education Program for which it is issued. The program may apply to operate additional training sites. All training sites shall expire on the expiration date of the applicant's current approval.
- G. The approved program may offer courses at more than one location.

§417 Education Program Approval Requirements

- A. The Bureau of EMS shall issue approval to any applicant who is of good reputation and demonstrates that the EMS training program meets the following requirements:
 - 1. Has submitted a completed application for an Education Agency via the Bureau of EMS Information Management System.
 - 2. Has an authorizing official in good standing with the Bureau of EMS who assumes responsibility for the following:
 - a. Serves as program director or designates a person in good standing with the Bureau of EMS to serve as program director.
 - b. Administers and operates the EMS Education Program.
 - c. Complies with all rules and laws applicable to EMS education and the EMS Education Program.
 - d. Performs ongoing review and maintains a written evaluation of the Education Program content and instructors.
 - e. Maintains written documentation of regular evaluations of student performance and achievement throughout the course.
 - f. Assigns faculty responsibilities and scheduling of program courses.
 - g. Defines the role and objective of student preceptors.
 - h. Assures courses offered within an EMS Education Program are developed in consultation with a physician who specializes in emergency medicine.
 - i. Prepares or approves all documents required to be submitted for approval pursuant to this policy.
 - j. Issues a certificate of completion to each student who successfully completes the EMS Education Program and passes the course final cognitive and psychomotor examinations. Such certificates may be paper or electronic, and shall include, but not be limited to, the following information:

- i. Medical Director's signature (if required by a national accrediting body).
- ii. Program director's signature.
- iii. Student's name.
- iv. Date course completed.
- v. Course title.
- vi. Bureau of EMS Course ID number.

- k. Performs ongoing review and maintains written evaluation of clinical and prehospital internship sites.
- l. Outlines the requirements of the EMS Educators employed for the Education Program

3. Has a program Medical Director who assists in the development of the medical components of the Education Program.
4. Meets the curriculum requirements for licensure as an emergency medical responder, emergency medical technician, advanced emergency medical technician, or paramedic as set forth in the policies.
5. Utilizes individuals as educators who hold valid and current certifications and/or licenses as mandated by their credentialing agency.
6. Has a sufficient number of EMS instructors or assistant EMS instructors to ensure the ratio of instructors to students in all psychomotor skills does not exceed 1:8.
7. Has and maintains one office in a fixed geographic location where records are maintained in a secure fashion.
8. Has successfully completed a site visit by a Bureau of EMS representative to determine that adequate classroom and laboratory facilities exist to accommodate the students participating in the program.
9. Provides classroom environments that are safe, sanitary, and conducive to learning.
10. Possesses, or has affiliation agreements for the use of, equipment to adequately train EMS students to meet the course requirements
11. Possesses current and valid written affiliation agreements with each organization that provides EMS students with clinical experience and/or prehospital internship required by the EMS training program.
12. Possesses current and valid written affiliation agreements with clinical and/or prehospital organizations to assure sufficient training opportunities for EMS students to meet the course requirements.
13. Utilizes a sufficient number of preceptors to provide appropriate supervision and written evaluation of students in both the clinical experience and/or prehospital internship components of the EMS training program.
14. Requires a student to possess and maintain a current and valid Louisiana license to practice as an Emergency Medical Technician, at a minimum, prior to the start of any Advanced Emergency Medical Technician or Paramedic Education Program.
15. Has written policies that are made available to students, identifying all the following:
 - a. Admission requirements.
 - b. Prohibition of discrimination in acceptance of students based on race, color, religion, sex, or national origin.
 - c. Costs associated with the training program, including tuition, materials, and fees
 - d. Refund of tuition payments.
 - e. Information regarding course schedules, subject areas, content, and objectives approved by the Bureau of EMS.

- f. Criteria for successful completion of each component of the curriculum.
 - g. Criteria for successful completion of the full training program.
 - h. Methodology used in determining grades.
 - i. Attendance requirements.
 - j. Requirements or restrictions regarding student attire.
 - k. Procedures for voluntary student withdrawal from the program.
 - l. Disciplinary policy that includes grounds for dismissal from the program.
 - m. Grievance procedures, including a mechanism for appeals.
 - n. Requirement that students are not used to meet minimum staffing requirements or in substitution for essential personnel in a clinical experience or prehospital internship setting.
 - o. Requirement that all students are notified of the process for obtaining a license to practice under section 40:1133 of the Revised Statutes and that a Louisiana license to practice may not be granted if the individual fails to meet the qualifications for a certificate to practice set forth in these rules.
 - p. Security parameters protecting the students' financial and personal information in accordance with state and federal laws.
- B. In addition to meeting the requirements set forth in this policy, an EMS-approved Education Program or applicant for approval to operate an EMS Paramedic training program shall meet all the following:
 - 1. Has been accredited by CAAHEP or issued a letter of review from CoAEMSP no later than January 1, 2015.
- C. An EMS-approved Education Program or applicant for approval shall:
 - 1. Allow access by the Bureau of EMS, during regular business hours and at all other reasonable times, to conduct an inspection of students' EMS training records and all EMS instructor records for the purposes of investigations or scholastic audits.
 - 2. Allow the Bureau of EMS to review the program materials and monitor the testing process utilized by the EMS training program.
 - 3. Maintain written documentation, to include documentation of compliance with these rules, of all EMS training programs, including the following:
 - a. EMS continuing education programs.
 - b. EMS instructor training programs, to include documentation of all requirements set forth in these rules.
 - c. EMS courses taught at an off-site location.
- D. An EMS-approved Education Program shall retain written or electronic files in a secure location with the following documentation for each course offered by the institution:
 - 1. Course schedules/syllabi, lesson plans, and policies in compliance with this rule.
 - 2. Record of a valid and current certificate and/or license to practice for each instructor utilized in the EMS Education Program.
 - 3. Written affiliation agreements as outlined in this rule and documentation of compliance with terms therein.
 - 4. Attendance records for each EMS education course conducted by an EMS-approved Education Program, which demonstrate completion of the required hours and standards by the EMS education program in accordance with written policies that are made available to students.
 - 5. Evaluations of student cognitive performance.
 - 6. Evaluations of students' in-class and final psychomotor skills performance.
 - 7. Preceptor evaluations of student performance.

8. Records of clinical skills requirements.
9. Student evaluations of course and instructors.
10. Accident and injury reports.

E. The EMS-approved Education Program shall maintain all documentation required in this policy for the duration of the current approval cycle and for the previous approval cycle.

F. An approved Education Program that provides education through the online or distance learning delivery systems shall comply with all requirements set forth in these policies and maintain documentation of compliance.

G. An approved Education Program shall only provide an EMS training program through online education or distance learning delivery systems when first approved by the Bureau of EMS and is compliant with all requirements set forth in these policies.

§419 Education Program Approval Application

- A. An applicant for approval shall submit an "Approval Application" in the format prescribed by the Bureau of EMS.
- B. A "Certification Application" that is not filled out in the manner specified on the application will be deemed incomplete. Incomplete applications will not be considered and will not be reviewed by the Bureau of EMS.

§421 Mandatory Notifications

- A. An EMS-approved Education Program shall provide written notice to the Bureau of EMS no later than ten days after any of the following changes occur in the Program for which the approval was issued:
 1. Mailing address and/or physical location
 2. Authorizing official name and/or contact information
 3. Program director name and/or contact information
 4. Program medical director name and/or contact information.
- B. An EMS-approved Education Program may not make substantive changes to the Education Program without first receiving approval for the proposed changes from the Bureau of EMS.

§423 Renewal of Certificate of Approval

- A. No later than ninety days before its expiration, the Education Program shall notify the Bureau of EMS of the intention to renew the Education Program's approval status.
- B. The Bureau of EMS shall renew approval if all of the following apply:
 1. The "Approval Application" is completed and submitted to the Bureau of EMS no later than the thirtieth day before the expiration of the current approval;
 2. The Education Program remains in compliance with the requirements for approval as set forth in this policy;
 3. During the cycle of being renewed, each EMS training program meets one of the following:
 - a. Not less than eighty percent of the EMS Education Program's students who took the cognitive portion of the initial certification examination (up to a maximum of six attempts) received a passing score; or
 - b. Not less than sixty-five percent of the EMS Education Program's students who took the cognitive portion of the initial certification examination received a passing score in their first attempt to pass the examination.
 - c. The Education Program's cumulative pass rate is within five percentage points of the national pass rate for the same period.

4. Otherwise, the Bureau of EMS may deny approval or issue a provisional approval.

§425 Bureau of EMS Approved Courses

- A. Courses required to be conducted by a Bureau of EMS Education Program institution:
 1. All initial EMR, EMT, AEMT, or Paramedic courses conducted with the purpose of preparing participants for licensure as an EMS Clinician must be conducted by an Education Program approved by the Bureau of EMS.
 2. All "state-approved" continuing education courses at the EMR, EMT, AEMT, or Paramedic level must be conducted by an Education Program that is approved by the Bureau of EMS.
 3. All "state-approved" NREMT recertification required courses at the EMR, EMT, AEMT, or Paramedic level must be conducted by an Education Program approved by the Bureau of EMS.
- B. Any EMS courses taught that do not adhere to the policies outlined in this manual shall be deemed "invalid" and may not be used for the purposes of qualifying for the National Registry cognitive and psychomotor certification exam and/or for Louisiana licensure.

§427 Education Course Content

- A. Emergency Medical Responder (EMR) Training Course Requirements
 1. The EMR education course shall include content and behavioral objectives that meet or exceed the *National EMS Education Standards and Instructional Guidelines* as published by the National Highway Traffic Safety Administration.
 2. An Education Program may develop a curriculum to teach any additional skills, equipment, or medications that are included in the Louisiana-approved scope of practice.
 3. In accordance with Act 308, the Education Program shall ensure that Alzheimer's and dementia content is incorporated into the course.
 4. The Education Program shall utilize the Bureau of EMS-approved cognitive and psychomotor exams at the conclusion of the course.
 5. The Education Program shall ensure that all EMR students, upon successful completion of the Education Program, have a current BLS CPR or equivalent credential, as approved by the Bureau of EMS, and have demonstrated competence in the Emergency Medical Responder (EMR) skills.
 6. The Education Program shall instruct the student on the requirements and the process of applying for a Louisiana EMR license.
- B. Emergency Medical Responder (EMR) Renewal Training Course Requirements
 1. The EMR education course shall meet or exceed the content and behavioral objectives that meet or exceed the Bureau of EMS and National Registry of EMTs-approved EMR curriculum.
 - a. This includes, but is not limited to, the content outlined in the EMR National Continued Competency Program (NCCP), which includes the National Component, Local or State Component, and the Individual Component.
 2. An Education Program may develop a curriculum to teach any additional skills, equipment, or medications that are included in the Louisiana-approved scope of practice.
 3. The Education Program shall ensure that all EMR students, upon the successful completion of the program, have a current BLS CPR or equivalent credential, as approved by the Bureau of EMS, and have demonstrated competence in Emergency Medical Responder (EMR) skills.

4. The Education Program shall instruct the student on the requirements and the process of renewing or applying for a Louisiana EMR license.
5. The EMR renewal training course must include the content as outlined by the National Registry of EMTs' National Core Competency Program.
6. In accordance with Act 308, the Education Program shall ensure that Alzheimer's and dementia content is incorporated into the course.
7. EMS wishing to forego a traditional course and relicense through CEUs, including CAPCE courses, must submit continuing education through a state-approved EMS education program.
 - a. The Bureau of EMS does not accept direct submission of CEUs for license renewal.
 - b. Individual EMS education programs decide whether or not to participate in awarding coursework to licensees. An education program is not required to accept outside CEUs.
 - i. Participating EMS education programs will verify that the CEUs requested are valid and meet the NCCP requirements.
 - ii. Upon verification, the agency can create a course in the IMS titled "EMS CEUs" and award credit. Once course credit is awarded, the licenses may apply for license renewal.
 - iii. The EMR education program must maintain copies of all CAPCE certificates and state-approved CEUs for a minimum of two license cycles for auditing purposes.
 - c. It is the responsibility of the licensee to locate an EMS education program willing to accept CEUs.

C. Emergency Medical Technician (EMT) Training Course Requirements

1. The EMT education course shall include content and behavioral objectives that meet or exceed the *National EMS Education Standards and Instructional Guidelines* as published by the National Highway Traffic Safety Administration.
2. An Education Program may develop a curriculum to teach any additional skills, equipment, or medications that are included in the Louisiana-approved scope of practice.
3. In accordance with Act 308, the Education Program shall ensure that Alzheimer's and dementia content is incorporated into the course.
4. The Education Program shall ensure that all EMT students, upon the successful completion of the program, have a current BLS CPR or equivalent credential, as approved by the Bureau of EMS, and have demonstrated competence in the Emergency Medical Technician (EMT) skills.
5. The Education Program shall arrange for a minimum of 24 hours of supervised field training of students with an ambulance service provider that is licensed at or above the level of education provided to the students. The arrangement shall be in a written agreement between the education program and the ambulance service provider.
 - a. Clinical hours should occur on an ALS ambulance that is providing emergency response.
 - b. The use of sprint vehicles, fire apparatus, police cars, and non-transport vehicles may not count toward the required clinical hours.
 - c. Precepted skills in hospitals, at events, or while riding in sprint vehicles, fire apparatus, police cars, and non-transport vehicles may be documented in the student portfolio.
6. An Education Program shall ensure that any student who enters supervised field training holds an EMS student authorization issued by the Bureau of EMS.

7. The Education Program shall instruct the student on how to apply for the NREMT cognitive and psychomotor exams at the conclusion of the course.
8. The Education Program shall instruct the student on the requirements and the process of applying for a Louisiana EMT license.

D. Emergency Medical Technician (EMT) Renewal Training Course Requirements

1. The EMT education course shall meet or exceed the content and behavioral objectives that meet or exceed the Bureau of EMS and National Registry of EMTs approved EMT curriculum.
 - a. This includes, but is not limited to, the content outlined in the EMT National Continued Competency Program (NCCP), which includes the National Component, Local or State Component, and the Individual Component.
2. An Education Program may develop a curriculum to teach any additional skills, equipment, or medications that are included in the Louisiana-approved scope of practice.
3. In accordance with Act 308, the Education Program shall ensure that Alzheimer's and dementia content is incorporated into the course.
4. The Education Program shall ensure that all EMT students, at the successful completion of the program, have a current BLS CPR or equivalent credential, as approved by the Bureau of EMS, and have demonstrated competence in Emergency Medical Technician (EMT) skills.
5. The Education Program shall instruct the student on the requirements and the process of renewing or applying for a Louisiana EMT license.

E. Advanced EMT (AEMT) Training Course Requirement

1. The Advanced EMT education program shall include content and behavioral objectives that meet or exceed the *National EMS Education Standards and Instructional Guidelines* as published by the National Highway Traffic Safety Administration.
 - a. The AEMT Student Minimum Competencies (SMCs) are required to be included in the psychomotor skills taught and evaluated by the education program.
 - b. The AEMT SMCs are to be documented in a student portfolio to be maintained by the education program in accordance with record retention policies.
2. An Education Program may develop a curriculum to teach any additional skills, equipment, or medications that are included in the Louisiana-approved scope of practice.
3. In accordance with Act 308, the Education Program shall ensure that Alzheimer's and dementia content is incorporated into the course.
4. The Education Program shall ensure that all AEMT students, upon the successful completion of the program, have a current BLS CPR or equivalent credential, as approved by the Bureau of EMS, and have demonstrated competence in Advanced Emergency Medical Technician (AEMT) skills.
5. The Education Program shall arrange for supervised field training of students with an ambulance service provider that is licensed at or above the level of training provided to the students. The arrangement shall be in a written agreement between the education program and the ambulance service provider.
6. An Education Program shall ensure that any student who enters supervised field training holds an EMS Student authorization issued by the Bureau of EMS.
7. The Education Program shall instruct the student on how to apply for the NREMT cognitive and psychomotor exams at the conclusion of the course.

8. The Education Program shall instruct the student on the requirements and the process of applying for a Louisiana AEMT license.

F. Advanced EMT (AEMT) Renewal Training Course Requirements

1. The AEMT education course shall meet or exceed the content and behavioral objectives that meet or exceed the Bureau of EMS and National Registry of EMTs approved AEMT curriculum.
 - a. This includes, but is not limited to, the content outlined in the AEMT National Continued Competency Program (NCCP), which includes the National Component, Local or State Component, and the Individual Component.
2. An Education Program may develop a curriculum to teach any additional skills, equipment, or medications that are included in the Louisiana-approved scope of practice.
3. In accordance with Act 308, the Education Program shall ensure that Alzheimer's and dementia content is incorporated into the course.
4. The Education Program shall ensure that all AEMT students, upon the successful completion of the program, have a current BLS CPR or equivalent credential, as approved by the Bureau of EMS, and have demonstrated competence in Advanced Emergency Medical Technician (AEMT) skills.
5. The Education Program shall instruct the student on the requirements and the process of renewing or applying for a Louisiana Advanced EMT license.

G. Paramedic Training Course Requirements

1. The Paramedic education course shall include content and behavioral objectives that meet or exceed the *National EMS Education Standards and Instructional Guidelines* as published by the National Highway Traffic Safety Administration.
2. The Education Program may develop a curriculum to teach any additional skills, equipment, or medications that are included in the Louisiana-approved scope of practice.
3. In accordance with Act 308, the Education Program shall ensure that Alzheimer's and dementia content is incorporated into the course.
4. An Education Program shall ensure that all Paramedic students, upon the successful completion of the program, have a current BLS CPR or equivalent credential, as approved by the Bureau of EMS, and have demonstrated competence in Paramedic skills.
5. The Education Program shall arrange for supervised field and clinical training of students with an ambulance service provider and a healthcare facility that is licensed at or above the level of training provided to the students. The arrangement shall be set in a written agreement between the education program and the ambulance service provider.
6. The Education Program shall ensure that any student who enters supervised field training holds an EMS Student authorization issued by the Bureau of EMS.
7. The Education Program shall instruct the student on how to apply for the NREMT cognitive and psychomotor exams at the conclusion of the course.
8. The Education Program shall instruct the student on the requirements and the process of applying for a Louisiana Paramedic license.
9. A new Paramedic Education Program is required to submit a CoAEMSP Letter of Review before the Bureau of EMS will approve the admission of students.
10. A Paramedic Education Program must have at least two full-time equivalent employees. This includes the full-time program director, who should have time dedicated to administrative tasks. The second full-time position can be multiple employees whose time and contribution to the program equals at least one full-time person.

H. Paramedic Renewal Training Course Requirements

1. The Paramedic education course shall meet or exceed the content and behavioral objectives that meet or exceed the Bureau of EMS and National Registry of EMTs approved Paramedic curriculum.
 - a. This includes, but is not limited to, the content outlined in the Paramedic National Continued Competency Program (NCCP), which includes the National Component, Local or State Component, and the Individual Component.
2. The Education Program may develop a curriculum to teach any additional skills, equipment, or medications that are included in the Louisiana-approved scope of practice.
3. In accordance with Act 308, the Education Program shall ensure that Alzheimer's and dementia content is incorporated into the course.
4. The Education Program shall ensure that all Paramedic students, upon the successful completion of the program, have a current BLS CPR or equivalent credential, as approved by the Bureau of EMS, and have demonstrated competence in Paramedic skills.
5. The Education Program shall instruct the student on the requirements and the process of renewing or applying for a Louisiana Paramedic license.

I. Requirements to License/Test at Level Below Course

1. A student who has successfully completed a course at the EMT level may request licensure at the EMR level under the following circumstances:
 - a. The student is currently licensed as an EMR.
 - i. The EMT course was completed before license expiration.
 - ii. The EMT Education Program agrees to award CEUs.
 - b. The student has been unsuccessful in completing NREMT.
 - i. The student must have exhausted all six NREMT exam attempts.
 - ii. The EMT Education Program agrees to create a concurrent EMR Initial course.
 - iii. The course must have been completed within the last two calendar years.
2. A student who has successfully completed a program at the Paramedic level may request an "Authorization to Test" at the AEMT level under the following circumstances:
 - a. The student has been unsuccessful in completing NREMT.
 - i. The student must have exhausted all six NREMT exam attempts.
 - ii. The Paramedic Education Program agrees to create a concurrent AEMT Initial course.
 - iii. The program must have been completed within the last two calendar years.

J. Accommodations

1. An EMS license permits licensees to perform emergency medical services. Thus, licensees must be capable Clinicians
 - a. No accommodations will be accepted that are not reasonably available in a prehospital environment.
 - b. Students may use performance aids (e.g., hearing aids) that could be readily available and easily accessible to them in the prehospital setting.
2. To ensure that students will be able to operate in this capacity with reasonable and appropriate accommodation, only non-scholastic accommodations (e.g., preferential seating, printed notes) are permitted. Any form of a scholastic accommodation (e.g., extended time, tests read aloud, modified tests) forfeits the student's eligibility to license.

3. All students must be able to complete all of the requisite skills necessary for licensing. A license will not be granted to individuals incapable of successfully completing the psychomotor exam.

§429 CEUs for Clinical Field Competency

- A. Louisiana-approved EMS Clinicians who have documented successful clinical practice may request that the Louisiana-approved EMS Education program review the documented successful clinical practice and award CEUs for the purpose of recertification/relicensing.
- B. To receive CUEs for clinical practice, the following guidelines must be followed:
 1. EMS providers must use electronic patient care reports (e-PCRs) to track and generate a skills report for each employee.
 - a. Only skills documented as having been administered successfully shall be eligible for consideration. Procedures documented in the narrative section of the PCR shall not be counted.
 - b. If an electronic PCR system is not available, a documented system of tracking skill attempts and success rates that includes skills documented in a PCR must be demonstrated to and approved by the Bureau of EMS Competency Coordinator.
 2. A bullet point on the table represents each skill. To receive credit for the skill, the individual must perform the skill. Credit is not awarded for taking over a skill from another provider.
 3. EMS providers shall generate a report of skills performed within the current license cycle of a licensee. Skills performed outside of the two-year license/certification cycle are not eligible for CEUs.
 4. EMS providers seeking to have CEUs awarded to personnel must provide their skills report to a state-approved EMS education program for review, verification, and awarding of CEUs.
 - a. It is the discretion of the EMS provider to participate.
 - b. It is the responsibility of the EMS provider to identify an EMS Education program to award the CEUs and to submit the information in a timely fashion to allow for the awarding of CEUs.
 5. Participating EMS education programs will need to build a "Continuing Education" course in the IMS, add all eligible licensees that qualify for credit to the course roster, and assign credit by verifying attendance and marking the final disposition.
 - a. The course should be named "CEU Skills Year: Skill name"
 - b. A separate course is to be used for each bulleted skill.
 6. Documentation of skills performed and credited must be uploaded into IMS in place of a syllabus. Failure to provide appropriate documentation may result in CEUs being declared invalid.
 7. Upon review, verification, and awarding of CEUs, licensees will be given a certificate by the education program noting the course number generated by the IMS and the number of CEUs awarded.
 8. The number of CEUs awarded via this policy is limited to no more than 25% of the total CEUs required for license renewal at the respective level. Licensees may achieve 1 CEU per bulleted skill.
 9. The Bureau of EMS shall review courses created for the purpose of awarding CEUs for clinical skills experience as a standard EMS Education course. These courses are subject to the Quality Assurance/Quality Improvement (QA/QI) measure utilized by the Bureau of EMS.
 10. One hour per skill per licensing cycle will be awarded for qualifying skill competency.

§431 Scope of Practice Optional Models

- A. An agency may elect to provide the additional education and training required to permit staff members to perform the optional modules as listed in the Scope of Practice.
 - 1. Agencies utilizing these skills must maintain documentation demonstrating that all individuals authorized by the agency's Medical Director to perform these skill(s)/procedure(s) have attended an agency-specific training module.
 - a. The continuing education course must be registered in the Bureau of EMS Information Management System (IMS).
 - b. A syllabus containing a medical director's signature must be uploaded as an attachment to the course.
 - c. The course roster must be completed and include each student's name and the student's outcome in the course.
 - 2. Agency documentation of the competency validation is required every 24 months.

§433 Quality Assurance & Complaint Investigations

- A. The Bureau of EMS, to ensure the quality and integrity of EMS educational programs, may conduct site visits, scholastic audits, review of documentation, and investigations.
- B. The Bureau of EMS shall conduct portfolio audits on Advanced EMT candidates. Portfolio audits are subject to the record retention policy in force by the Louisiana Bureau of EMS, which is a minimum of two license cycles. Audits will be conducted randomly. The Education Program Administrator will be notified before the audit.
- C. The Bureau of EMS shall conduct complaint investigations brought against an Education Program in accordance with R.S. 40:1131 and R.S. 40:1133, et seq.
- D. Complaint investigations may be unannounced.
- E. Upon request by the Bureau of EMS, an acceptable plan of correction must be submitted to the Bureau of EMS for any complaint investigation where deficiencies have been cited.
- F. A follow-up survey may be conducted for any complaint investigation where deficiencies have been cited to ensure correction of the deficient practices.
- G. The Bureau of EMS may issue appropriate sanctions, including but not limited to civil fines, directed plans of correction, provisional approval, denial of approval renewal, and approval revocation for non-compliance with any state law or regulation.
- H. The Bureau of EMS's surveyors, investigators, and staff shall be given access to all areas of the education program and all relevant files during any complaint investigation. The department's surveyors, investigators, and staff shall be allowed to interview any instructor, staff, or student as necessary or required to conduct the investigation.
- I. Any program that is found to knowingly interfere with a scholastic audit or investigation being performed by a Bureau of EMS representative(s) shall be subject to immediate revocation of approved status, and the individuals involved shall be referred to the EMS Commission for disciplinary action.

§435 Instructor Credentials & Roles

- A. An Instructor Credential may be added to an individual practitioner's license upon meeting the following requirements:
 - 1. Possess a valid Louisiana EMS license and have been in good standing for one calendar year.
 - 2. Earn NREMT certification

3. Possess one of the following:
 - a. A certificate of completion from a Bureau of EMS recognized EMS Educator program (NAEMSE, Firefighter Instructor II, etc.) or
 - b. A bachelor's degree or higher in education or a related field.
4. An Instructor Credential remains valid for the duration that an individual practitioner maintains their license unless acted upon by the EMS Commission or the Bureau of EMS.
 - a. Should an instructor's license lapse, the credential will also lapse.
 - b. Should the EMS Commission take action upon an instructor's license, the status of the Instructor Credential may be subject to review.

B. Primary Instructor is an individual who may also be the program director, has the primary responsibility of delivering the cognitive, psychomotor, and affective domain information to students; has an understanding of education principles and theories, and the required teaching experience to provide quality instruction to a cohort of EMS students must possess a National Certification and a Louisiana license as an EMS Practitioner.

C. *Instructor* – an individual who possesses the appropriate academic and/or allied health credentials and an understanding of education principles and theories, but may have limited teaching experience.

1. This individual is responsible for providing instruction to students and assisting a primary instructor.
2. All instructors must have their qualifications verified and be approved by the Bureau of EMS before providing any EMS Instruction.

D. *Program Director* – the primary responsibility and authority to administer the program.

1. This individual is responsible for all aspects of the program that include, but are not limited to, matters relating to teaching, advising, utilizing the required curriculum, program revisions, clinical site management, students' success on the credentialing exam, etc.
2. Program Director Requirements
 - a. Nationally Certified and State-licensed EMS Practitioner and
 - b. An experienced instructor who possesses a certificate of completion from a Bureau of EMS recognized EMS Educator program (NAEMSE, Firefighter Instructor II, etc.) and
 - e. Has 1 year of active teaching experience under a mentor who is willing to sign off on the instructor's competence to serve as a program director or
 - f. Has 5 years of experience teaching in a Bureau of EMS-approved EMS Program

EXAMINATION

The Bureau of EMS utilizes the National Registry of Emergency Medical Technicians' examination as its certification examination and recertification process. Candidates must pass the National Registry exam before they are eligible for state licensure at the EMT level or above. The Bureau of EMS conducts psychomotor exams at the EMT level to ensure the minimum entry-level competency.

§501 Emergency Medical Responder

- A. Examination Process
 - 1. Written and practical exams are administered as part of the course.
 - 2. The National Registry exam is optional for the EMR level (except for Instructors).
 - A. The psychomotor exam will be completed by the Education Program and sent to the Bureau of EMS Competency Coordinator with proof of successful completion of the computer adaptive exam; the candidate's account skill verification will be updated in the National Registry.
 - 3. A separate fee is required for the National Registry cognitive exam.
 - 4. High School Instructors should refer to section 411.
- B. Psychomotor Skill Stations
 - 1. Cardiac Arrest Management/AED
 - 2. Patient Assessment/Management Trauma
 - 3. Patient Assessment/Management Medical
 - 4. BVM Ventilation of an Apneic Adult Patient
 - 5. Oxygen Administration by Non-rebreather mask

§503 Emergency Medical Technician

- A. Examination Process
 - 1. The computer adaptive exam can be scheduled on the NREMT website.
 - 2. The psychomotor exams are scheduled by the Bureau of EMS and are held multiple times throughout the month.
 - a. specific dates can be found on the Bureau of EMS Information Management System and website calendar.
 - 3. Candidates are strongly encouraged to register for a psychomotor exam at least 15 days before the date of the exam.
 - 4. The psychomotor stations at the EMT level are regulated by the Bureau of EMS.
- B. Psychomotor Skill Stations
 - 1. The psychomotor stations are:
 - a. Integrated Out-of-Hospital Scenario A
 - b. Integrated Out-of-Hospital Scenario B
 - c. Cardiac Arrest Management/AED
 - 2. Pass/Fail Criteria
 - a. Successful completion of all three stations – PASS
 - b. Unsuccessful completion of the Cardiac Arrest Management/AED station – ELIGIBLE FOR RETEST

- c. Unsuccessful completion of one Integrated Out of Hospital Scenario – ELIGIBLE FOR RETEST
- d. Unsuccessful completion of Cardiac Arrest Management/AED station and one Integrated Out of Hospital Scenario – ELIGIBLE FOR RETEST
- e. Unsuccessful completion of both Integrated Out of Hospital Scenario stations – FAILURE OF ATTEMPT
- f. Unsuccessful completion of all three stations – FAILURE OF ATTEMPT

3. Prompts for Scenario Stations
 - a. The candidate may receive two prompts per error for up to two significant errors. A multitude of prompts causing the partner to become the team leader would constitute incompetence.
 - i. A significant error in the scenario station would be the treatment of the wrong field diagnosis, dosage errors, or incorrect medication, and/or failure to assess and manage life-threatening issues.
 - ii. An insignificant error is an error that can be attributable to nerves, i.e., holding a BVM but calling it a non-rebreather mask.

§505 Advanced Emergency Medical Technician

- A. Examination Process
 1. The computer adaptive exam is scheduled on the NREMT website.

§507 Paramedic

- A. Examination Process
 1. The computer adaptive exam is scheduled on the NREMT website.

§509 Exam Guidelines

- A. Reservations
 1. Reservations will be accepted on a first-come, first-served basis, with the number dependent on the size of the exam site.
 2. EMR and EMT students must have a status of “pass” for their education program in the licensing information management system before reservations will be granted.
- B. Cancellation
 1. Cancellations must be made no later than 7 days before the exam date.
 2. Exam fees are non-refundable. However, a credit can be awarded if the cancellation policy is adhered to.
 3. It is the responsibility of the candidate to request a reservation for a later date.
- C. Failure to Show
 1. Failure to appear at the scheduled exam will forfeit all fees submitted for the exam.
 2. A new exam application must be completed, and applicable fees must be paid.
- D. Exam Results
 1. The Exam Coordinator or the National Registry Representative will notify each candidate of the results of their psychomotor exam the day of the exam, after the individual has completed the entire psychomotor exam.
- E. Routing Procedure
 1. The candidate must register for the psychomotor exam when they arrive at the exam. During the registration process, the candidate’s ID will be viewed, and they will receive a document to be completed.

2. When the document is completed, the candidate will receive a routing badge. The number on the badge will be called when the candidate is sent to a station.
3. When the routing number is called, the candidate is to report to the routing table for assignment to the psychomotor station. The candidate will receive a station card that will have the name of the station on it.
4. The candidate will go directly to the assigned psychomotor station, knock on the door, and wait for the examiner to direct the candidate to enter the station.
5. The examiner will ask for the candidate's name and routing number.
6. Before the station begins, the examiner will read a brief set of instructions for the station. These instructions will contain pertinent information pertaining to that specific station.
7. When the candidate is finished with the station, they must take the station card and return directly to the routing table.
8. When arriving at the routing table, the candidate must advise the router of their routing number and return the station card to the router.

F. Complaints

1. Complaints regarding the administration of the examination may be filed by completing a document that can be obtained at the routing desk.
2. Complaints will not be valid after the results are issued.
3. A complaint may be filed for two reasons:
 - a. The candidate feels that they have been discriminated against. Any situation that can be documented in which the candidate received an unfair evaluation of their abilities may be considered discriminatory.
 - b. An equipment failure or malfunction occurred during the station.

G. Invoicing for Examination of an Education Program

1. An EMS program may elect to pay for the students of their program to take the psychomotor exam. The following procedures will apply in this circumstance:
 - a. The program director/instructor will contact the Exam Coordinator to register/schedule the students to take the psychomotor exam.
 - b. The Exam Coordinator will register the students for the psychomotor exam.
 - c. Within 7 days after the psychomotor exam, an invoice will be sent to the education program
 - d. If the invoice has not been paid after 60 days, a final invoice will be sent notifying the education program that the invoice must be paid within 30 days.
 - e. If the invoice has not been paid after 90 days, the education program will be suspended until payment has been received.

H. Accommodations to the psychomotor exam due to physical illness or injury

1. Administration of any part of the examination in any manner different from other candidates constitutes an examination accommodation.
2. All candidates must complete the psychomotor examination in the same standardized format.
3. All accommodations must be approved at least 30 days in advance by the Bureau of EMS Exam Coordinator.
 - a. The Candidate will be provided with a letter that details the accommodations, if any, that will be made.
4. Candidates must present a letter to the Bureau of EMS Exam Coordinator granting accommodations to the candidate and the details included.

§511 Staffing the Exams

- A. The Bureau of EMS will contract with EMS Clinicians to carry out the functions of examiner, partner, bystander, or patient for the psychomotor exams. Contracted examiners must abide by the rules and instructions as outlined by the NREMT and/or the Bureau of EMS, which includes, but is not limited to, discussing any portion of the exam materials with anyone other than the NREMT Representative, the Exam Coordinator, and/or the Exam Facilitator.
- B. Job Descriptions
 - 1. *The Medical Director* is a licensed physician who provides clinical direction over the exam. This individual participates in the Quality Assurance committee when investigating a complaint. It is preferred that this individual has completed training by the National Registry of EMTs to conduct an exam.
 - 2. *National Registry Representative* is a Paramedic who has successfully completed training by the National Registry of EMTs to conduct the exam. This individual is responsible for all aspects of the exam, which includes, but is not limited to:
 - a. Providing concise and accurate exam instructions to the candidates
 - b. Securing the exam materials to ensure confidentiality
 - c. Accurately grading the evaluation instruments
 - d. Promptly notifying the candidates of the exam results
 - e. Investigating all complaints from candidates and/or examiners that occur during the exam and facilitating the quality assurance committee in determining the validity of the complaint
 - f. Facilitating the registration of the candidates
 - 3. *Exam Coordinator* is a Bureau of EMS employee who is responsible for the day-to-day scheduling and examination activities. This person can also act as the National Registry Representative. Duties include, but are not limited to:
 - a. Scheduling exams
 - b. Ensuring the exam documents are available and ready for use
 - c. Ensuring that the equipment is clean and in good working order
 - e. Monitor the routing room to ensure that the candidates' behavior is appropriate
 - f. Completing the exam report for the Bureau of EMS Director
 - g. Ensuring that the evaluation sheets are routed to the grading room
 - h. Assisting the National Registry Representative with grading evaluation instruments
 - i. Completing the reporting forms to ensure that the completion reflects the candidate's performance
 - 4. *Exam Facilitator* is an individual who is responsible for assisting with the administration of the exam. Duties include, but are not limited to:
 - a. Organizing evaluators so that they are provided with the information and materials needed to accurately perform the functions required to execute the skill station appropriately
 - b. Providing concise and accurate exam instructions to the evaluation team members
 - c. Scheduling breaks and lunch for the evaluators in a manner that the exam continues to be conducted in an organized and efficient manner
 - d. Assisting the examiners with questions or clarification related to the specific skills station in which they are an examiner.
 - e. Facilitating the logistics of the exam
 - f. Audit the exam skill stations to ensure that the candidates are receiving a fair and objective exam

5. *Evaluator* is an individual who participates in a specific skill stations to ensure that the candidate is able to perform skills required to meet minimal competencies. Evaluators, whose role may include that of documenter, patient, or partner, possess expertise in the specific skill that enables the candidate to perform the simulation in an optimal setting.
6. *A router* is an individual who ensures that candidates are efficiently routed to the skill stations to avoid undue delays in the examination process.

B. Responsibilities of the Evaluation Team

1. All members of the evaluation team must report to the exam site at the time indicated on the exam invitation.
2. Evaluation team members are responsible for notifying the Bureau of EMS if they are unable to attend a scheduled exam.
3. All members must be willing to accept reassessments as deemed appropriate by the Exam Coordinator, National Registry Representative, or Exam Facilitator. The Exam Coordinator has the final decision on examiner assignments.
4. Report all complaints from the candidates or evaluators to the National Registry Representative and/or Exam Coordinator.
5. Evaluation team members must have a positive attitude towards the examination process at all times.
6. Evaluation team members are required to ensure the testing site and exam equipment are clean, assembled, and ready for use for the next exam.
7. Evaluation team members must attend an "exit" session as applicable.
8. Evaluation team members must attend examiner workshops as applicable.

§513 Challenge of National Registry Exam

A. Physicians

1. Physicians are permitted to challenge the NREMT exam, at any level, after the following criteria are met.
 - a. Provide official evidence of a current and valid Louisiana State Medical license.
 - b. Meet all other entry requirements outlined in the current requirements to take the exam on the NREMT website.
 - c. All challenges of NREMT exams must be initiated through NREMT using support@nremt.org.

B. Other Healthcare Clinicians

1. The Bureau of EMS does not authorize the challenge of EMS courses or certification exams for the following (but not limited to):
 - a. Physician's Assistants
 - b. Registered Nurses
 - c. Licensed Practical Nurses
 - d. Nurse Clinicians
2. Healthcare Clinicians seeking to become a Louisiana Licensed Paramedic are encouraged to contact a CoAEMSP Accredited Paramedic Program for pathways of eligibility to take the NREMT Paramedic exam.

§515 NREMT Psychomotor Examinations

A. Authority

1. The Bureau of EMS shall be the primary responsible party and point of contact for all NREMT examinations conducted in Louisiana.

B. Eligibility for Examination

1. To be eligible for examination, an applicant must meet the requirements established by the NREMT and submit an application and applicable fees to the Bureau of EMS.
2. The Bureau of EMS reserves the right to accept or deny an application to take the psychomotor exam.

C. Dates, Places of Examinations

1. The dates and places where the NREMT psychomotor examinations are given shall be scheduled and approved by the Bureau of EMS.
2. Requests to become an exam site shall be submitted to the Bureau of EMS at least 90 days in advance of the initial requested exam date.
 - a. The request shall be made by the program director of the approved education program.
 - b. The request shall include the requested exam type, location, date, time, and estimated number of students.
 - c. The requester shall be responsible for providing the required equipment, supplies, and materials, as designated by the NREMT.
 - d. The requester shall be responsible for providing examiners to conduct the exam. Examiners are subject to the approval of the Bureau of EMS.
 - e. The requester may charge exam candidates a reasonable and customary facilities fee.

D. Observance of Examinations

1. All NREMT exams shall be attended by an NREMT appointed representative and the Bureau of EMS Exam Coordinator or a designee approved by the Director of the Bureau of EMS. These representatives are authorized and directed by the Bureau of EMS to obtain positive photographic identification from all exam candidates appearing and properly registered for the examination, and to observe that all candidates abide by the rules of conduct established by the NREMT.
2. A candidate who appears for the examination shall:
 - a. Present to the NREMT representative and/or the Bureau of EMS Exam Coordinator or their designee proof of registration for the examination and positive personal photographic and other identification in the form prescribed by the Bureau of EMS; and
 - b. Thoroughly and promptly comply with any and all rules, procedures, instructions, directions, or requests made or prescribed by the NREMT and/or the Bureau of EMS.

E. Subversion of Examination Process

1. An applicant-examinee who engages or attempts to engage in conduct that subverts or undermines the integrity of the examination process shall be subject to the sanctions specified in this policy.
2. Conduct which subverts or undermines the integrity of the examination process shall be deemed to include:
 - a. Refusing or failing to fully and promptly comply with any rules, procedures, instructions, directions, or requests made or prescribed by the NREMT, or the Bureau of EMS;
 - b. Removing from the examination room or rooms any of the examination materials;
 - c. Reproducing or reconstructing, by copying, duplication, written notes, or electronic recording, any portion of the licensing examination;
 - d. Selling, distributing, buying, receiving, obtaining, or having unauthorized possession of a future, current, or previously

- administered licensing examination;
- e. Communicating exam material or information, in any manner, with any other examinee or any other person during the administration of the examination;
- f. Impersonating an examinee by appearing for and as an applicant and taking the examination for, as, and in the name of an applicant other than himself;
- g. Permitting another person to appear for and take the examination on one's behalf and in one's name; or
- h. Engaging in any conduct that disrupts the examination or the taking thereof by other examinees.

F. Sanctions for Subversion of Examination

- 1. An applicant who is found by the Bureau of EMS, before the administration of the examination, to have engaged in conduct or to have attempted to engage in conduct which subverts or undermines the integrity of the examination process may be permanently disqualified from taking the examination for purposes of licensure and from obtaining an EMS Clinician licensure in the state of Louisiana.
- 2. An applicant-examinee who is found by the Bureau of EMS to have engaged or to have attempted to engage in conduct that subverts or undermines the integrity of the examination process shall be deemed to have failed the examination for purposes of licensure. Such failure shall be recorded in the official records of the Bureau of EMS and transmitted to the NREMT.
- 3. In addition to the sanctions permitted or mandated by other sections of this policy, an applicant-examinee found by the Bureau of EMS to have engaged or to have attempted to engage in conduct which subverts or undermines the integrity of the examining process, the Bureau of EMS may:
 - a. Revoke, suspend, or impose probationary conditions on any license issued to such applicant;
 - b. Disqualify the applicant, permanently or for a specified period of time, from eligibility for licensure in the state of Louisiana;
 - c. Disqualify the applicant, permanently or for a specified number of subsequent administrations of the examination, from eligibility for examination for purposes of licensure;
 - d. Refer the case for criminal prosecution.

LICENSING

Licensing Guidelines

In the State of Louisiana, both National Registry certification and Louisiana license are required by law at each level of prehospital care (except for Emergency Medical Responder). The licensing agency for all of the Emergency Medical Services Clinician levels is the Louisiana Bureau of EMS. Failure to obtain licensure will place the individual in violation of RS 40:1131, which mandates licensure by the Bureau of EMS.

§601 Recognized Licensure Levels

- A. Emergency Medical Responder (EMR)
 - 1. Initial License (within two years of completing the course)
 - a. To receive a Louisiana license, the individual must:
 - i. Successfully complete a state-approved EMR course or present a valid, unrestricted NREMT certification as an EMR.
 - ii. Complete the EMR application on the Bureau of EMS Information Management System.
 - iii. Submit the required licensure fee. Applications are not reviewed or considered by the Bureau of EMS until the appropriate license fee is paid.
 - iv. Maintain a valid BLS CPR Provider credential.
 - v. Initial applicants disclosing criminal history will need to complete a state and federal background check through Identogo.
 - a. The required background check can be scheduled through Identogo's website, <http://uenroll.identogo.com/>, using the Bureau of EMS Service Code 27N4S2.
 - 2. License Renewal
 - a. Every two years, the individual EMR must:
 - i. Successfully complete 16 hours of continuing education to be eligible to renew. All education must be documented in the training profile and must have been obtained within 2 years before expiration, or present a valid, unrestricted NREMT certification as an EMR.
 - a. Applicants may use CAPCE accredited courses and are responsible for finding an approved Louisiana EMS agency to verify the courses are valid, meet the NCCP requirements, and document the course in the applicant's training profile.
 - ii. Complete the EMR application on the Bureau of EMS Information Management System. EMR renewal applications will be accepted six months before the license expiration date.
 - iii. Submit the required licensure fee. Applications are not reviewed or considered by the Bureau of EMS until the appropriate license fee is paid.
 - iv. Maintain a valid BLS CPR Provider credential.

3. All required materials must be submitted electronically by September 30 of the expiration year.
 - a. There is a reinstatement period available from October 1 to October 31 of the expiration year.
 - i. This reinstatement period is not to be used as a month's extension to the September 30 deadline.
 - b. Failure to renew a license after October 31 will require the individual to take an initial EMR course and apply for an initial license.
4. Waiver of Licensing Fees
 - a. Licensure fees are waived for volunteer Emergency Medical Responders who serve their community voluntarily and who receive no compensation of any kind for such services. A community volunteer responder is not an individual who provides EMS services as a component of their employment or paid profession.
 - b. Applicants for an initial EMR license who can demonstrate enrollment in an approved Louisiana high school program shall be exempt from payment of the initial license fee.

B. Emergency Medical Technician (EMT)

1. Initial License (within two years of completing the course)
 - a. To receive a Louisiana license, the individual must:
 - i. Successfully complete a state-approved EMT course.
 - ii. Present a valid, unrestricted NREMT certification as an EMT by successfully completing the NREMT computer adaptive exam and a Louisiana Bureau of EMS psychomotor exam.
 - iii. Complete the EMT application on the Bureau of EMS Information Management System.
 - iv. Submit the required licensure fee. Applications are not reviewed or considered by the Bureau of EMS until the appropriate license fee is paid.
 - v. Maintain a valid BLS CPR Provider credential.
 - vi. Initial licenses require a state and federal background check through Identogo. Background checks must be completed prior to licenses being issued and are valid for a period of 24 months.
 - a. The required background check can be scheduled through Identogo's website, <http://uenroll.identogo.com/>, using the Bureau of EMS Service Code 27N4S2.
2. License Renewal
 - a. Every two years, the individual EMT must:
 - i. Successfully complete the recertification requirements outlined by NREMT or renew by examination conducted by NREMT.
 - ii. Present a valid, unrestricted NREMT certification as an EMT.
 - iii. Complete the EMT application on the Bureau of EMS Information Management System. EMT renewal applications will be accepted six months before the license expiration date.
 - iv. Submit the required licensure fee. Applications are not reviewed or considered by the Bureau of EMS until the appropriate license fee is paid.
 - v. Maintain a valid BLS CPR Provider credential.
3. All required materials must be submitted electronically by March 31 of the expiration year.
 - a. There is a reinstatement period available from April 1 to April 30 of the expiration year.
 - i. This reinstatement period is not to be used as a one-month extension to the March 31 deadline.

- b. The National Registry of EMTs outlines actions for reinstatement after April 30.
- 4. Waiver of Licensing Fees
 - a. Licensure fees are waived for volunteer Emergency Medical Technicians who serve their community voluntarily and who receive no compensation of any kind for such services. A community volunteer responder is not an individual who provides EMS services as a component of their employment or paid profession.

C. Advanced Emergency Medical Technician (AEMT)

- 1. Initial License (within two years of completing the course)
 - a. To receive a Louisiana license, the individual must:
 - i. Successfully complete a state-approved AEMT course.
 - ii. Present a valid, unrestricted NREMT certification as an AEMT by completing the NREMT computer adaptive exam and psychomotor exam.
 - iii. Complete the AEMT application on the Bureau of EMS Information Management System.
 - iv. Submit the required licensure fee. Applications are not reviewed or considered by the Bureau of EMS until the appropriate license fee is paid.
 - v. Maintain a valid BLS CPR Provider credential.
 - vi. Initial licenses require a state and federal background check through Identogo. Background checks must be completed prior to licenses being issued and are valid for a period of 24 months.
 - a. The required background check can be scheduled through Identogo's website, <http://uenroll.identogo.com/>, using the Bureau of EMS Service Code 27N4S2.
- 2. License Renewal
 - a. Every two years, the individual AEMT must:
 - i. Successfully complete the recertification requirements outlined by NREMT or renew by examination conducted by NREMT.
 - ii. Present a valid, unrestricted NREMT AEMT certification.
 - iii. Complete the AEMT application on the Bureau of EMS Information Management System. AEMT renewal applications will be accepted six months before the license expiration date.
 - iv. Submit the required licensure fee. Applications are not reviewed or considered by the Bureau of EMS until the appropriate license fee is paid.
 - v. Maintain a valid BLS CPR Provider credential.
- 3. All required materials must be submitted electronically by March 31 of the expiration year.
 - a. There is a reinstatement period available from April 1 to April 30 of the expiration year.
 - i. This reinstatement period is not to be used as a one-month extension to the March 31 deadline.
 - b. Actions for reinstatement after April 30 are outlined by the National Registry of EMTs

D. Paramedic

- 1. Initial License (within two years of completing the course)
 - a. To receive a Louisiana license, the individual must:
 - I. Successfully complete a state-approved Paramedic course.
 - ii. Present a valid, unrestricted NREMT Paramedic certification by completing the NREMT computer adaptive exam and psychomotor exam.

- iii. Complete the Paramedic application on the Bureau of EMS the Bureau of EMS Information Management System.
- iv. Submit the required licensure fee. Applications are not reviewed or considered by the Bureau of EMS until the appropriate license fee is paid.
- v. Maintain a valid BLS CPR Provider credential.
- vi. Initial licenses require a state and federal background check through Identogo. Background checks must be completed prior to licenses being issued and are valid for a period of 24 months.
 - a. The required background check can be scheduled through Identogo's website, <http://uenroll.identogo.com/>, using the Bureau of EMS Service Code 27N4S2.

2. License Renewal

- a. Every two years, the individual EMS Clinician must:
 - i. Successfully complete the recertification requirements outlined by NREMT or renew by examination conducted by NREMT.
 - ii. Present a valid, unrestricted NREMT Paramedic certification.
 - iii. Complete the Paramedic application on the Bureau of EMS Information Management System. Paramedic renewal applications will be accepted six months before the license expiration date.
 - iv. Submit the required licensure fee. Applications are not reviewed or considered by the Bureau of EMS until the appropriate license fee is paid.
 - v. Maintain a valid BLS CPR Provider credential.

3. All required materials must be submitted electronically by March 31 of the expiration year.

- a. There is a reinstatement period available from April 1 to April 30 of the expiration year.
 - i. This reinstatement period is not to be used as a one-month extension to the March 31 deadline.
- b. The National Registry of EMTs outlines actions for reinstatement after April 30.

§603 Licensure Periods/Expiration Dates

- A. The Bureau of EMS licenses individuals who meet the license requirements as an Emergency Medical Responder (EMR), Emergency Medical Technician (EMT), Advanced Emergency Medical Technician (AEMT), or as a Paramedic.
 - 1. Licensed EMS Clinicians must maintain compliance with the license requirements for the duration of the license period. Failure to maintain compliance with the license requirements is grounds for the Bureau of EMS to initiate license discipline in accordance with the policy.
- B. Upon demonstration of compliance with the prescribed requirements, individuals applying for an initial EMT, AEMT, or Paramedic license between the dates of January 1 and June 30 will receive a license with an expiration date of March 31, two years in the future. Individuals successfully completing the process between July 1 and December 31 will receive an expiration date of March 31, three years in the future.
- C. Upon demonstration of compliance with the prescribed requirements, individuals applying for an initial EMR license between January 1 and June 30 will receive a license with an expiration date of September 30, two years in the future. Individuals successfully completing the process between July 1 and December 31 will receive an expiration date of September 30, three years in the future.

D. Upon demonstration of compliance with the prescribed requirements, individuals applying to renew an EMR license between the dates of April 1 and September 30 will receive a license with an expiration of September 30, two years in the future.

1. There is a reinstatement period available from October 1 to October 31 of the expiration year. This reinstatement period is not to be used as a one-month extension to the September 30 deadline.

§605 Review of Applications by the Bureau of EMS

- A. Upon initial review, the Bureau of EMS shall decide on an application that has been completed in accordance with all of the Bureau of EMS' instructions for completion within seven business days of receiving the application. If the Bureau of EMS approves the application, the Bureau of EMS will notify the applicant and issue a license. If the Bureau of EMS denies the application, the Bureau of EMS will inform the applicant of the reason for the denial and any appeal rights.
 1. Applicants who fail to comply with the request for corrections to the application within the specified time frame or who have been abandoned for more than 30 days will be cancelled. Any license fees will be forfeited, and the applicant will have to complete an initial application if he or she wishes to apply for a license in the future.
- B. Incomplete applications will not be forwarded to the review queue in the Bureau of EMS Information Management System (IMS). If the applicant fails to complete the application within 30 days from the date of the initial submission, the application will be canceled. The Bureau of EMS will not take any action on the incomplete application. To be considered further by the Bureau of EMS, the applicant shall meet the eligibility requirements and submit a new application as required.
 - a. Any license fees will be forfeited at the time of the license being canceled.

§607 License Fee Waivers

- A. Active United States Uniformed Service Members
 1. Applicants for an EMR, EMT, AEMT, or Paramedic license (initial or renewal) that can demonstrate active status with the United States Uniformed Service, and otherwise meet the requirements of Louisiana licensing, shall be exempt from payment of the initial or renewal license fees.
 2. This waiver is for the use of this license exclusively in the United States Uniformed Service and is not for use in the private sector.
- B. Federal Government Employee
 1. Applicants for EMR, EMT, AEMT, or Paramedic license (initial or renewal) who can demonstrate employment by the federal government shall be exempt from payment of the initial or renewal license fees.
 2. This waiver is for the use of this license exclusively in the employment of the federal government and is not for use in the private sector.
- C. High School and Secondary School Students
 1. Applicants for an initial EMR license who can demonstrate enrollment in an approved Louisiana high school program shall be exempt from payment of the initial license fee.
- D. Volunteer EMR or EMT
 1. Applicants for an EMR or EMT license (initial or renewal) who serve as bona fide volunteer community responders and otherwise meet the requirements shall be exempt from payment of the initial or renewal license fees.
 2. Individuals functioning as an EMR or EMT in conjunction with any compensated employment, even if the employer classifies the EMR or EMT functions as a volunteer, shall not be classified as a volunteer for licensure.

3. The Bureau of EMS shall add a notation to all electronic or paper license documents obtained indicating that the licensee is functioning as an EMR or EMT for a volunteer agency, and is not eligible for private sector employment.
- E. EMTs Employed at a Municipality
 1. Applicants for EMT license (initial) who serve as an employee of the state of Louisiana or another public entity, a municipal fire department, a fire protection district, or a municipal law enforcement agency who does not perform emergency medical services outside of the individual's official governmental responsibilities for any form of compensation and otherwise meet the requirements, shall pay the reduced fee for an initial EMT license.
 2. Applicants for an EMT license (renewal) who serve as an employee of the state of Louisiana or another public entity, a municipal fire department, a fire protection district, or a municipal law enforcement agency who does not perform emergency medical services outside of the individual's official governmental responsibilities for any form of compensation and otherwise meets the requirements, shall pay the reduced rate to renew an EMT license.
 3. The Bureau of EMS shall add a notation to all electronic or paper license documents obtained indicating that the licensee is functioning as an EMT for a municipality and is not eligible for private sector employment.

§609 Determination of Residency

- A. Residency Requirements
 1. For the purpose of licensure, licensure fees, and examination, an applicant shall be considered a Louisiana resident if:
 - a. The applicant is domiciled in Louisiana; and
 - b. The official residential address of the applicant listed on the application is in the State of Louisiana; and
 - c. The applicant has taken the psychomotor exam in the State of Louisiana; or
 - d. The federal government employs the applicant; or
 - e. The applicant is a member of the United States Uniformed Services.
 2. Applicants not meeting the criteria in Paragraph A.1. shall be considered non-residents for the purpose of licensure, licensure fees, or examination fees.

§610 Reciprocity

- A. The Bureau of EMS accepts reciprocity requests from individuals who are certified by the National Registry of EMTs at the EMR, EMT, AEMT, and Paramedic levels.
- B. Individuals applying for a Louisiana EMS license must possess a current National Registry certification for the level in which they are applying, as well as provide notice of current licenses held in other states.
 1. All qualified applicants must complete the appropriate license level application in the Bureau of EMS Information Management System
 - a. The Bureau of EMS reciprocity application can be found at:
Louisiana Reciprocity Form
<https://ldh.la.gov/assets/oph/ems/forms/210701ReciprocityForm.pdf>
- C. To be eligible for licensure, an applicant for an initial EMT license who took a course out of state and has earned NREMT certification, but did not obtain a license in the state where the education program is located, must do one of the following:
 1. Obtain an EMT license from the state in which the course was registered and apply to Louisiana for reciprocity
or
 2. Challenge and successfully complete the Louisiana EMT Psychomotor exam.

§611 Information Management System License Application Process

- A. Applicants shall follow the following process to apply for an initial license or renew a license:
 - 1. Applicants shall complete the first-time user registration process and create an account in the Bureau of EMS Information Management System, if not previously completed.
 - 2. Applicants shall select "Create a new STUDENT/EMR/AEMT/PARAMEDIC APPLICATION" and complete the sections:
 - a. Demographics
 - b. License Details
 - i. Applicants who are not currently licensed and/or have not ever held a license must select the license level of "initial EMS – Student (Non-licensed)"
 - c. Legal Questionnaire
 - d. Service Affiliation Request
 - e. Affidavit
 - 3. After completion, the applicant should "Proceed to Payment" and submit for processing.
 - 4. Applicants can view and/or print their license application, view and/or print their EMS license, or edit their contact details by accessing the related links on their account home page.
 - 5. The public can view EMS licenses through the "Click Here to Search Licenses" option on the Bureau of EMS Information Management System login page.
- B. Applicants shall follow the following process to revise their license application.
 - 1. Applicants shall select "Revise Your License Application" to revise an existing license application and edit the information as needed in the sections:
 - a. Demographics
 - b. License Details
 - c. Legal Questionnaire
 - d. Service Affiliation Request
 - e. Affidavit
 - 2. After completion, the applicant should submit for processing.
 - 3. Applicants can view and/or print their license application, view and/or print their EMS license, or edit their contact details by accessing the related links on their account home page.
 - 4. The public can view EMS licenses through the "Click Here to Search Licenses" option on the Bureau of EMS Information Management System login page.
- C. When completing a Louisiana Bureau of EMS license application and upon answering affirmatively to any of the questions in the criminal background questionnaire, the following information should be uploaded to the Clinician application for licensure:
 - 1. Any and all supporting documentation regarding the affirmative answers on the questionnaire, as instructed by the application:
 - a. Criminal History Disclosure: Attach copies of any/all report(s), etc., occurrence/narrative/supplemental reports; copies of any/all court minute entries and court judgments/orders; copies of probation/DA diversion or Pretrial Intervention programs, final disposition, etc., and any/all other relevant records of each listed instance.

- b. Military Service Discharge Disclosure: Attach copies of any/all military discharge documents, including any/all documentation of the underlying action(s) that resulted in discharge, with any/all other related records regarding where the applicant was granted an 'Other than Honorable Discharge,' 'Dishonorable Discharge,' or 'Bad Conduct Discharge.'
- c. Physical/Medical/Mental Limitations Disclosure: Attach copies of any/all discharge summaries, relevant medical records, and/or treatment records, written statement(s) sent directly from treating physician(s) addressing current ability to safely practice as an EMS Clinician, along with any/all related records.
- d. Substance Abuse Disclosure: Attach copies of any/all discharge summaries, relevant medical records, and/or treatment records, written statement(s) sent directly from treating physician(s) addressing current ability to safely practice as an EMS Clinician, along with any/all related records.
- e. Previous EMS Licensure Disclosure: Attach copies of any/all other board actions by other licensing boards, along with any/all related and/or subsequent actions.
- f. NPDB/Clinical Privileges Disclosure: Attach copies of any/all related records.
- g. Healthcare License Application Denial Disclosure: Attach copies of any/all relevant documents from the state/jurisdiction regarding the denial.
- h. Previous Bureau of EMS Disciplinary Action Disclosure: Attach a copy of the letter received from the Bureau of EMS.

- 2. For pending charges/criminal conviction disclosures, a Louisiana State Police Bureau of Criminal Identification and Information Fingerprint Background Report from the last 30 days, as well as any and all related case/court documents regarding your affirmative answers on the questionnaire.
- 3. For Physical/Mental Limitations or Substance Abuse disclosures: A letter from your physician (on the Physician's practice letterhead) stating the facts of your care and if you are cleared by your physician to work in the rigors and stress of the EMS field regarding your affirmative answers on the questionnaire.

D. Obtaining a Federal and State History Report from the Louisiana State Police

- 1. The applicant or licensee must complete a request for a federal and state criminal history report through Identogo, <http://uenroll.identogo.com/>, using the service code: **27N4S2**
- 2. The applicant or licensee is responsible for any fees at the time of service.
- 3. If Identogo returns the fingerprints or the application as inadequate or unreadable, the applicant or licensee must submit a second set of fingerprints and fees, if applicable, for submission to Identogo. All questions need to be directed to Identogo/Idemia for assistance at 800/539-5543.
- 4. If your state (or country) does not have Idemia/Identogo services, you must obtain a printed fingerprint card from a local law enforcement agency and mail your prints in for card scan processing. This process is completed through the same website <https://uenroll.identogo.com/>, and code **27N4S2**. To mail in cards, you must pay for the service online and use the shipping label provided. To mail in cards, you must pay for the service online and use the shipping label provided. The Card scan service fee is \$55.75
 - a. Choose the "Submit a Fingerprint by Mail" selection.
 - b. You will be required to pay before you can proceed. Complete the instructions, print, and mail as directed.

§613 Interstate Commission for EMS Personnel Practice

The EMS Compact facilitates the day-to-day movement of EMS personnel across state boundaries in the performance of their duties. EMS personnel, including EMTs, Advanced EMTs, and Paramedics, licensed in a compact member state, are granted a Privilege to Practice in the other compact member states. The EMS Compact is a legal agreement between states, enacted by state legislation in over 20 states. (<https://www.emscompact.gov/>). The Recognition of Emergency Medical Services Personnel Licensure Interstate Compact (REPLICA) has been enacted into state law under Act 31 of the 2020 2nd Extraordinary Session of the Louisiana Legislature and may be found under R.S. 40:1141.

In Louisiana, a Clinician is permitted to move across state boundaries to a COMPACT state to perform their duties without requiring a license. The Clinician's Louisiana-affiliated agency is responsible for oversight and management of the Clinician.

- A. Obtaining a license after successfully completing the NREMT exam
 - 1. If a Federal and State criminal history report was obtained at the beginning of the EMS Education Course, and the report is dated not longer than 2 years from the date of the report, and there have been no criminal issues since the report, the previously submitted Federal and State criminal background report will satisfy the requirement.
 - 2. If an FBI criminal history report was **not** obtained at the beginning of the EMS Education Course, a Federal and State criminal history report must be requested and submitted as noted in §205 of the policy manual.
- B. Obtaining a license when entering Louisiana
 - 1. From a Compact State: The Clinician should follow the Clinician's home license compact state's rules and regulations regarding practicing in Louisiana under the EMS Compact. The Clinician should follow the application requirements as noted in §601-§611 of the policy manual, should they wish to apply for a Louisiana license.
 - 2. From a **non-Compact** State: Out-of-state Clinicians who intend to obtain a license to work in Louisiana shall follow the application requirements as noted in §601-§611 of the policy manual
- C. Defining when a Louisiana license is required/not required
 - 1. A license to practice in Louisiana is required if the Clinician is not licensed in a COMPACT state.
 - 2. Clinicians are allowed to move across state boundaries from COMPACT states to perform their duties without requiring a Louisiana license. The Clinician's Louisiana affiliated agency is responsible for oversight and management of the Clinician.
- D. Expedited Processing of Licensure Applications for Veterans, Service Members, and Their Spouses
 - 1. Purpose
 - a. This policy outlines the procedures for identifying and expediting the processing of EMS licensure applications submitted by veterans, active military service members, members of the National Guard and Reserves separating from active duty, and their spouses, as mandated by Section 7 of the EMS Compact Legislation.
 - 2. Scope
 - a. This policy applies to all EMS licensure applications received by the State EMS Office from veterans, active military service members, National Guard and Reserve members separating from active duty, and their spouses.

3. Policy Statement
 - a. In accordance with state legislative requirements and the EMS Compact Model Legislation, the Bureau of EMS is committed to providing expedited processing of licensure applications for the following individuals:
 - i. Veterans
 - ii. Active military service members
 - iii. Members of the National Guard and Reserves separating from an active duty tour
 - iv. Spouses of the above individuals
 - b. These individuals must hold a current, valid, and unrestricted National Registry of Emergency Medical Technicians (NREMT) certification at or above the level of the state license being sought and meet all other state licensure requirements.
4. Procedure
 - a. Identification of Applicants
 - i. Upon receipt of any licensure application, the Bureau of EMS will screen applications to identify if the applicant is a veteran, active military service member, a member of the National Guard or Reserves separating from an active duty tour, or their spouse.
 - ii. Applicants may be required to provide supporting documentation such as:
 - Military identification
 - DD-214 form (or equivalent separation paperwork)
 - Proof of NREMT certification
 - Marriage certificate (for spouse)
5. Prioritization for Expedited Processing
 - a. Once identified, the application will be flagged as a priority for expedited processing.
 - b. The State EMS Office shall take reasonable steps to ensure that applications meeting the eligibility criteria are moved to the front of the processing queue and processed without delay.
 - c. A designated team or individual will be responsible for ensuring that any necessary follow-ups with the applicant are conducted without delay.
6. Eligibility Criteria
 - a. To be eligible for expedited processing, the applicant must:
 - i. Self-identify on the licensure application their status as a veteran, active military service member, National Guard or Reserves separating from active duty, or spouse of the above.
 - ii. Hold a current, valid, and unrestricted NREMT certification at or above the level of licensure being sought.
 - iii. Meet **all other state licensure requirements**, including but not limited to:
 - Completion of a criminal history report
 - Payment of all applicable fees
 - iv. Any discrepancies or missing documentation will be communicated to the applicant immediately for resolution.

AMBULANCE STANDARDS

Mission Statement

The Louisiana Department of Health, Office of Public Health, Bureau of EMS has the responsibility of licensing EMS providers, Clinicians, and vehicles functioning in the State of Louisiana that are subject to licensing statutes. Emergency Medical Services providers (ambulance services) are licensed by the Louisiana Department of Health, Office of Public Health, Bureau of EMS. This includes both ground and air ambulance services. In addition, all emergency medical vehicles (ground ambulances, air ambulances, emergency medical response, and sprint vehicles) are required to be licensed by LDH.

The mission of the Ambulance Standard section of the Bureau of EMS is to enforce regulatory compliance of EMS agencies within the State of Louisiana. This is accomplished through periodic surveys/inspections of the providers that are licensed to operate in Louisiana. All inspectors have earned, or are in the process of earning, certification from the Council on Licensure, Enforcement, and Regulation (CLEAR).

The Bureau of EMS also investigates complaints received regarding allegations of abuse, neglect, exploitation, extortion, and noncompliance with federal and/or state regulations, which fall under the purview of the state survey agency.

§701 Initial Licensure of the EMS Provider

- A. Emergency Medical Services providers shall be licensed by the Louisiana Department of Health (LDH). LDH is the only licensing authority for EMS providers in the State. It shall be unlawful to operate as an EMS Provider without possessing a current, valid license issued by LDH.
- B. A completed initial license application packet for an EMS provider shall be submitted to and approved by LDH before an applicant can function as an Emergency Medical Services provider. Applications must be completed in the online information management system at labems.ldh.la.gov.
- C. An initial licensing packet includes the following:
 1. Completed Emergency Medical Services Provider licensure application.
 2. Non-refundable licensing fee of \$150 plus \$75 per vehicle (ambulance, sprint, or aircraft).
 3. Written declaration of the service area and a map of the service area.
 4. Attach copies of all pertinent municipal and parish licenses and permits, including Certificates of Need if they apply.
 5. List of all ambulance stations – include complete geographical address, including zip code.
 6. List of all EMS Clinicians and/or employees that are certified or licensed personnel, including National Certification number and expiration, Louisiana license number and expiration date, driver's license number and expiration date, CPR type and expiration date, pilot's license number and expiration date, if applicable.

7. The name of the medical director and evidence that such director is a physician licensed to practice medicine by the Louisiana State Board of Medical Examiners and specializes in any of the following areas:
 - a. Family practice
 - b. Internal medicine
 - c. General surgery
 - d. Emergency medicine
 - e. Emergency medical services
 - f. Pediatrics
 - g. General Practice
8. List of all vehicles: ambulance and sprint vehicles include VIN, make, year, model, type, license plate number, and unit (fender) number.
9. Certificates of Insurance: Medical Malpractice, Automobile Liability, General Liability - We do not accept Louisiana Automobile Insurance Identification Cards.
10. Copy of current medical protocols signed by the physician/medical director, accompanied by a cover letter from the appropriate parish or component medical society or societies for use in their service area. Protocols shall include the treatment of the following conditions:
 - a. Universal Care
 - b. Cardiovascular
 - c. General Medical
 - d. Resuscitation
 - e. OB/GYN
 - f. Respiratory
 - g. Trauma
 - h. Toxins & Environmental
 - i. Stroke
 - j. Myocardial Infarction
 - k. Care for adult, geriatric, and pediatric patients, where applicable.
11. A copy of the standard operating procedures.
12. A copy of the service's current equipment and supply checklist.
13. Attach a copy of your current appropriate CLIA Waiver certificate, Louisiana CDS license, and United States Drug Enforcement Administration Controlled Substance registration.
14. Attach a copy of the Articles of Incorporation.
15. Attach a copy of the Act of Sale or other Act of Transfer.
16. The applicant's criminal history report from the Louisiana State Police or an approved background agency. Criminal history report instructions can be found on the Bureau of EMS' website at ldh.la.gov/page/ems-credentialing.
17. Proof of United States or legal resident alien status from the United States Department of Homeland Security.
18. For air ambulance services only:
 - a. FAA Part 135 Certificate.
 - b. FAA Aircraft Certificate of Registration*. (*denotes that one is required for each aircraft).
 - c. FAA Certificate of Airworthiness*. (*denotes that one is required for each aircraft).
 - d. FAA pilot's license (for each pilot).

D. The applicant must be prepared to be operational for an initial inspection within 90 days after payment of the application fee. If the applicant is unable to do so, the application will be closed.

E. Prior to the initial license being issued to the provider, an initial licensing inspection shall be conducted on-site at the ambulance provider's location to assure compliance with licensing standards and appropriate federal, state, or local statutes, laws, ordinances, rules, and regulations.

F. Inspection Procedure

1. All submitted paperwork will be reviewed before the inspection date. Any questions or concerns will be addressed on the day of the inspection.
2. All vehicles will be inspected for:
 - a. Siren
 - b. Emergency lights
 - c. Motor vehicle inspection sticker
 - d. Vehicle decals: agency name and unit number
 - e. Non-emergency lights
 - f. Temperature control in the patient compartment
 - g. Narcotic Storage
 - h. Seat belts: adult and pediatric
 - i. Fire extinguisher
 - j. Reflective wear
 - k. Radio communication with the ability to communicate with a physician and/or hospital
 - l. Supplies and equipment required as outlined in agency protocol and/or standing operating procedures. Equipment shall include the following categories:
 - i. Airway, ventilation, and oxygenation
 - ii. Bleeding, hemorrhage control, shock management, and wound care
 - iii. Cardiovascular and circulation
 - iv. Diagnostic tools
 - v. Infection control
 - vi. Medications
 - vii. Medication delivery and vascular access
 - viii. AED/defibrillator and pads for adults and pediatric patients
2. An administrative review will be conducted and shall include a survey of the following items:
 - a. Patient care protocols, to include:
 - i. Universal care
 - ii. Cardiovascular
 - iii. General medical
 - iv. Resuscitation
 - v. OB/GYN
 - vi. Respiratory
 - vii. Trauma
 - viii. Toxins & Environmental
 - ix. Stroke
 - x. Myocardial infarction
 - xi. Care for adult, geriatric, and pediatric patients
 - xii. Consistency with the Louisiana Scope of Practice
 - xiii. Directives for substitute medications during a national drug shortage
 - xiv. Parish Medical Society, Medical Director, or LERN approval; reviewed annually

- b. Policy and procedures manual:
 - i. Infection control
 - ii. Communications/dispatch
 - iii. Personnel, employment, hiring qualifications
 - iv. Emergency preparedness, including training
 - v. Equipment and medical
 - vi. Safe Haven relinquishment
 - vii. Quality assurance, including goals and objectives, a responsible person, reports to the governing body, evaluation of care, solution of problems, practices to improve the quality of care, and a method to document skill competencies.
- c. CLIA Waiver
- d. Louisiana Controlled Dangerous Substance (CDS) License
- e. United States Drug Enforcement Agency (DEA) Certificate
- f. Local permits and certificates of need
- g. Proof of a dispatch facility with a 24-hour phone number and a means to record and store dispatch records.
- h. Verification that the ambulance service has a governing body and contact information for the governing body
 - i. Verification of an orientation and in-service training program
 - j. Verification of the Director of Operations' requirements
 - k. Verification of the Medical Director's requirements
 - l. Narcotic storage and records to include a dispenser's log and perpetual inventory
- m. Verification of automobile, general liability, and medical malpractice insurance.
- n. Verification of Personnel Requirements
 - i. Proof of defensive driving
 - ii. National Registry Certification
 - iii. Valid Driver's License
 - iv. BLS CPR Provider/Instructor
 - v. Criminal background check
 - vi. Clinical competency evaluation
- o. Random audit or patient care reports; verifying the following information for every patient encounter:
 - i. Demographic information
 - ii. Location of response
 - iii. Date and time of response
 - iv. Patient's chief complaint
 - v. Signs and symptoms
 - vi. Narrative that includes an initial and complete assessment of the patient
 - vii. Vital signs
 - viii. Past medical history
 - ix. Interventions or treatment
 - x. Transport destination and arrival time, if applicable
 - xi. Any other significant information that pertains to the patient
- p. Verification that patient records are stored in accordance with HIPAA regulations
- q. Verification of an emergency preparedness plan; the plan shall include:
 - i. All hazards plan approved by the local OHSEP is on file
 - ii. Terrorist incidents and WMD
 - iii. ICS that is compliant with NIMS and the US Department of Homeland Security

- iv. Communications plan
- v. Mutual aid agreements with all services that are within the same LDH established region
- r. Verification of an ongoing Quality Assurance process that is included in the standard operating procedures manual; this process must include:
 - i. Goals and objectives of the program
 - ii. Identity of the person responsible for the QA program
 - iii. Annual reports, if applicable
 - iv. Methods of evaluation (i.e., patient care reports, unit checklists, etc.)
 - v. Method for resolving problems identified in the QA process
 - vi. Method for implementing practices to improve patient care
 - vii. Annual review and revisions by the Medical Director and Director of Operations
- G. Until the initial license is issued to the Provider by the Department, no patient shall be provided ambulance services.

§703 Licensure Renewal of Emergency Medical Services Provider

- A. An ambulance service license must be renewed annually. In order to renew a license, the Emergency Medical Services provider shall submit a completed license renewal application packet to the department at least 30 days before the expiration of the existing current license.
- B. The license renewal application packet shall include:
 - 1. A completed EMS Provider license renewal application. Applications must be completed in the online information management system at labems.ldh.la.gov.
 - 2. A non-refundable licensing fee of \$100 plus \$75 per vehicle (ground ambulance, sprint, or aircraft).
 - 3. List of all EMS Clinicians and/or employees that are certified or licensed personnel, including National Certification number and expiration (if applicable), Louisiana license number and expiration date, driver's license number and expiration date, CPR type and expiration date, pilot's license number and expiration date, if applicable.
 - 4. List of all ambulance stations – include complete geographical address, including zip code.
 - 5. List of all vehicles: ambulance and sprint vehicles include VIN, make, year, model, type, license plate number, and unit (fender) number.
 - 6. Certificates of Insurance: Medical Malpractice, Automobile Liability, General Liability- We do not accept Louisiana Automobile Insurance Identification Cards.
 - 7. A copy of current medical protocols, signed by the physician/medical director and accompanied by a cover letter from the appropriate parish or component medical society or societies for use in their service area.
 - 8. A current copy of the standard operating procedures.
 - 9. For air ambulance services only:
 - a. FAA Part 135 Certificate.
 - b. FAA Aircraft Certificate of Registration*. (*denotes that one is required for each aircraft)
 - c. FAA Certificate of Airworthiness*. (*denotes that one is required for each aircraft)
 - d. FAA pilot's license. (for each pilot)
 - e. A copy of their standard operating procedures. An electronic copy may be submitted.

10. A copy of the service's current equipment and supply checklist
11. CLIA Waiver
12. Louisiana CDS License
13. US DEA Certificate
14. Local permits/occupational licenses
15. Governing body and contact information
16. Mutual aid agreements
17. Emergency operations plan

C. Inspections will occur during the month of the license expiration. A random list of unit numbers will be supplied the morning that the inspection begins.

D. Inspection Procedure. The following items will be inspected during the licensing survey or reviewed before the inspection date:

1. All paperwork that is submitted with the licensing application
2. All vehicles will be inspected for:
 - a. Siren
 - b. Emergency lights
 - c. Inspection sticker
 - d. Decals with the agency name/logo and unit numbers
 - e. Non-emergency lights
 - f. Temperature control in the patient compartment
 - g. Narcotic storage
 - h. Seat belts for adult and pediatric patients
 - i. Fire extinguisher
 - j. Reflective wear
 - k. Radio communications
 - l. Supplies and equipment required as outlined in agency protocol and/or standing operating procedures
 - i. Airway, ventilation, oxygenation
 - ii. Bleeding, hemorrhage control, shock management, wound care
 - iii. Cardiovascular and circulation
 - iv. Diagnostic tools
 - v. Infection Control
 - vi. Medications
 - vii. Medication delivery and vascular access
 - viii. AED/defibrillator and pads for adult and pediatric patients
3. Medical directive for drug shortages, if applicable
4. Proof of dispatch facility
5. Verification of the Director of Operations' requirements
6. Verification of Medical Director's requirements
7. Verification of Personnel Requirements
 - a. Proof of defensive driving
 - b. National Registry Certification
 - c. Louisiana Bureau of EMS license
 - d. CPR Provider/Instructor
 - e. Clinical competency evaluations
8. Narcotic storage and records
 - a. Dispenser log and perpetual inventory
9. Random audit of patient care reports; verifying the following information for every patient encounter:
 - a. Demographic information
 - b. Location of response
 - c. Date and time of response
 - d. Patient's chief complaint

- e. Signs and symptoms
- f. Narrative that includes an initial and complete assessment of the patient
- g. Vital signs
- h. Past medical history
- i. Interventions or treatment
- j. Transport destination and arrival time, if applicable
- k. Any other significant information that pertains to the patient
- 10. Verification that patient records are stored in accordance with HIPAA regulations
- 11. Verification of an ongoing Quality Assurance process that is included in the standards operating procedures manual; this process must include:
 - a. Goals and objectives of the program
 - b. Identity of the person responsible for the QA program
 - c. Annual reports, if applicable
 - d. Method of evaluation (i.e., patient care reports, unit checklists, etc.)
 - e. Method for resolving problems identified in the QA process
 - f. Method for implementing practices to improve patient care quality
 - g. Annual review and revisions by the Medical Director and Director of Operations

§705 EMS Provider Fleet Addition or Temporary Vehicle Use

- A. Fleet Addition
 - 1. All additions to the fleet (ground, air, or sprint), whether permanent or temporary, must be reported to the department and "permitted" for use prior to the vehicle being used to run calls and transport patients.
 - 2. The vehicle must be added to the agency's vehicle roster in the IMS with the following:
 - i. Completed Request for Inspection Form.
 - ii. Copy of the certificate of registration from the office of Motor Vehicles or the Federal Aviation Administration.
 - iii. Proof of commercial automobile or aircraft liability insurance on the vehicle.
 - iv. \$75.00 per vehicle inspection fee.
 - 3. If the fleet addition is a replacement for a current fleet vehicle, the old vehicle should be removed from the agency's vehicle roster.
 - 4. Once the required documents are received, a 90-day permit will be issued, and an inspection date will be established.
 - 5. A full license will be issued after a successful inspection of the vehicle.
- B. Temporary Vehicles
 - 1. Any vehicle borrowed, leased, or rented by the service for less than 90 days shall not be subject to a vehicle inspection fee.
 - 2. All vehicles shall be subject to compliance with the minimum licensing regulations for EMS providers and shall be issued a temporary notice of approval for use. The temporary approval shall be carried in the vehicle at all times.
 - 3. Submit the following:
 - f. Request to Utilize Temporary Vehicle form.
- C. Removal of a vehicle
 - 1. If a vehicle is being removed from the fleet and is not being replaced, the agency should remove the vehicle from the vehicle roster in the information management system.

§707 Bureau of EMS Payment Procedure

A. All documents and payments (in the form of a money order or company check) must be mailed to the same location:

Bureau of EMS
Attn: Ambulance Standards Coordinator
7273 Florida Blvd.
Baton Rouge, LA 70806

§709 Significant Changes in Operation

A. EMS Provider Physical Address of the Headquarters

1. Submit the following:
 - a. A "Letter of Intent" describing the specifics of the change (address changed from and to) that has occurred, and the effective date of that change.
 - b. A completed license application.
 - c. The fee of \$100.

B. EMS Agency Name Change

1. Submit the following:
 - a. A "Letter of Intent" describing the specifics of the change that has occurred and the effective date of that change.
 - b. A completed license application.
 - c. The fee of \$25.
 - d. A copy of the documents or articles of incorporation from the Secretary of State's Office, indicating the change

C. Substation Changes

1. Phone number, 24-hour contact procedure, address or phone number of any substation, or the addition of any substations, and insurance coverage

D. EMS Agency Key Administrative Personnel Change

1. Any change regarding the facility's key administrative personnel shall be reported in writing to the department within five working days of the change.
2. Key administrative personnel include the following:
 - a. Administrator
 - b. Director of Operations
 - c. Medical Director
3. Key administrative personnel changes should be reported by completing and submitting the Key Personnel Change Form and updating the agency's personnel roster in the information management system.

E. EMS Provider Cessation of Business

1. If at any time the ambulance service is no longer operational, for any reason other than man-made or natural disaster, the license shall be deemed invalid and shall be returned to the department within five working days.
2. The agency owner shall be responsible for notifying the department of the location of all records and a contact person.
3. All emergency vehicles no longer in use shall have all audible and visible warning signals and markings indicating their emergency status removed.

F. EMS Provider Change in Service Area

1. Expansion of Service Areas
 - a. An ambulance service area is that territory in which the ambulance provider renders services, has vehicles posted or domiciled, and is legally authorized by the local governing body(ies) to provide services.
 - b. If an ambulance provider wishes to expand into additional service areas, they must notify the department at least 72 hours in advance.

- c. The provider shall also provide a copy of all necessary local permits and licenses or other legal clearances.
- d. Within 90 days of moving into a new territory, the ambulance service shall furnish the department with a copy of the necessary protocol approvals by the appropriate parish or component medical society in accordance with RS 40:1135.3.C(1)(c).
- 2. Withdrawal from a Service Area
 - a. If an ambulance service withdraws from a territory, it must notify the department at least 30 days in advance.
 - b. It must provide the department with evidence that it has notified the appropriate local authorities that it will no longer be providing ambulance service in the area.

§711 Change of Ownership of the EMS Provider Information

- A. Providers must complete this document when they have a change in their ownership structure. This document would be used for both a change of ownership (CHOW) as defined by state and/or federal regulations, or a change of ownership information (CHOI) that does not meet the state and/or federal regulations CHOW definition.
- B. Change in Ownership Information: Submit the following documents:
 - 1. Letter of Intent (including d/b/a and entity name of the previous and the new owner, the effective date of transfer of ownership, address, and phone number).
 - 2. A diagram showing the ownership structure "before" and "after" the change.
 - 3. Copy of the executed Bill of Sale.
 - 4. Initial License Application
- C. Change of Ownership: Submit the following documents:
 - 1. All documents listed in B.1-4.
 - 2. Any changes in the name or address of the ambulance service.
 - 3. Changes in the medical director, director of operations, administrator, or chief of EMS.
 - 4. Disclosure of ownership forms.
 - 5. A new license application and licensing fee.
 - 6. The purchaser of the agency must meet all criteria required for initial licensure as an ambulance service/provider.

§713 Complaints

- A. Complete the Complaint Form

§715 Inspection of Vehicles

- A. All fleet additions will be inspected within 90 days of the in-service date.
- B. Only vehicles with a DPS/OMV license will be inspected.
- C. Annual inspections will take place during the month of license expiration.

§717 Surge Ambulance Placarding

- A. Placard Types
 - 1. Advanced Life Support (ALS) Ambulance
 - A. Unit must have at least one ALS NREMT certified and Louisiana licensed crew member, as defined by Louisiana law, on board at all times and contain ALS equipment in accordance with Louisiana law.

2. Basic Life Support (BLS) Ambulance
 - a. Unit must be staffed with at least one NREMT-certified and Louisiana-licensed crew member, as defined by Louisiana law, on board at all times and contain BLS equipment in accordance with Louisiana law.
3. Service Vehicle
 - a. A support vehicle that assists with the mechanical maintenance of the vehicles.
 - b. A support vehicle that assists crews with logistics.

B. Surge Unit Registration

1. The EMS Provider must complete the surge unit registration form for each unit deployed. The form can be found on the Bureau of EMS website.
 - a. Surge unit registration forms must be submitted to the Bureau of EMS no later than the time of departure of the unit from home base.
2. The Bureau of EMS will verify the information on the unit registration form and issue a placard. Upon successful inspection of the vehicle and crew at the staging site, a placard will be issued.
3. Designated staging site inspections
 - a. Each unit shall be inspected for compliance at the designated staging site.
 - b. After successful inspection, the placard will be initialed by a Bureau of EMS representative.
 - c. Each unit and its accompanying crew must be verified by a Bureau of EMS representative before accepting mission assignments.
 - i. Both crew members and the unit must be present before the inspection will be completed.

4. The placard is to be printed and displayed in the ambulance at all times.

C. Crew Change Form

1. Anytime a new crew is assigned to a deployed unit, a crew change form must be completed and submitted to the Bureau of EMS at least 24 hours prior to the proposed crew change time.
 - a. The timestamp of the email shall denote crew change form receipt time.
 - b. Only crew change forms sent by the EMS Provider will be accepted.
2. Emergency Crew changes (less than 24 hours' notification) may occur when there is a circumstance that causes the crew member(s) to be replaced immediately (illness, family emergency, etc.).
 - a. The EMS Provider will contact the Bureau of EMS and provide the nature of the emergency and the credentials of the on-coming crew members.
 - b. The Bureau of EMS will verify the on-coming crew member's credentials.
 - c. A replacement crew member cannot be placed on the unit until the on-coming crew member's credentials are verified by the Bureau of EMS representative.
 - d. A crew change form must be completed within 12 hours of the emergency crew change.
3. Crew change may not take place until the Bureau of EMS verifies the information on the form.
4. The Crew Change Form can be found on the Bureau of EMS website.

D. Vehicle Change

1. Anytime a new truck is deployed, a new surge unit registration form must be submitted. This includes swapping a vehicle for mechanical/functional issues, but keeping the same crew.
 - a. Surge unit registration forms must be submitted to the Bureau of EMS no later than the time of departure of the unit from home base.
2. The Bureau of EMS will assign a placard number and forward the placard via email to the EMS Provider and the Surge Unit Contractor.
3. Placard is to be printed and displayed in the ambulance at all times.

E. Demobilization

1. Any time a unit is to be withdrawn from the event, a demobilization form must be completed and submitted to the Bureau of EMS.
2. The unit must be returned to the designated staging site, where the Bureau of EMS representative and the Surge Unit Contractor representative will be present to collect equipment and issue the demobilization form.
3. The Bureau of EMS will verify the demobilization form and forward it to the Surge Unit Contractor.
 - a. The Bureau of EMS representative will sign/date and time-stamp the demobilization form.
4. The demobilization form can be found on the Bureau of EMS website.

F. Patient Care Reports

1. Instructions provided on the Bureau of EMS website
2. PCRs are to be submitted to the designated representative with the Surge Unit Contractor.

G. The Bureau of EMS reserves the right to conduct random inspections of crew licensure, unit licensure, and equipment inventory for quality assurance at any point during an active incident.

H. The Bureau of EMS is not responsible for the completion, collection, or handling of patient care reports (PCRs).

I. The following forms must be submitted to ambulance.standards@la.gov and shall come from the EMS Provider. The Bureau of EMS will not process forms submitted by a third party or submitted to any other email address associated with the Bureau of EMS.

1. Surge unit registration form
2. Crew change form
3. Demobilization form

§719 Protocol Requirements for Employing Agencies

A. Purpose

1. To ensure all EMS Clinicians are operating under protocols that the agency's Medical Director has approved in accordance with R.S. 40:1133.14(2)

B. Applicability

1. This policy is intended for use by any employing agency that is registered with the Louisiana Bureau of EMS.

C. Policy

1. All employing agencies must submit protocols, which have been approved by their medical director, to the Bureau of EMS by April 1, 2023.
 - a. Medical Director approval shall be denoted with the Medical Director's signature and date of approval.
 - b. Protocols must be uploaded into the agency's IMS account
 - c. Agencies that fail to submit protocols by April 1, 2023, will be placed on inactive status.

- d. Employing agency applications will not be approved until protocols are submitted.
- 2. Protocols must be resubmitted to the Bureau of EMS in the following circumstances:
 - a. An agency updates or changes its protocols.
 - b. A new medical director is appointed.

D. Special Consideration

- 1. Transporting Agency, Licensed EMS and/or Fire Agency, including any agency that holds a current EMS Provider license.
 - a. Protocols are submitted annually with the provider license renewal application.
 - b. These agencies do not need to resubmit protocols.
- 2. Educational Agency, including educational programs, whose employees are not approved to provide patient care by their medical director.
 - a. For educational programs that are approved to provide patient care, see "all other non-transporting agencies."
 - b. Upload a letter stating employees are not approved to provide patient care. This letter must be on agency letterhead, dated, and signed by the Medical Director.
- 3. Non-Transporting Hospital Agency or Clinic, including agencies that employ EMS Clinicians to function within the limitations of their EMS license AND whose EMS Clinicians work under a licensed Physician AND the licensed Physician issues verbal or written orders for patient care.
 - a. Upload protocols into the IMS. Protocols must be approved and signed by the Medical Director; OR upload a letter stating the EMS Clinician(s) work(s) under direct orders from a physician. This letter must be on agency letterhead, dated, and signed by the Medical Director.
- 4. All Other Non-Transporting Agencies, including all agencies that do not fit into the previously listed criteria.
 - a. Upload protocols into the IMS. Protocols must be approved and signed by the Medical Director; OR upload a letter stating that the EMS Clinician(s) work(s) under direct orders from a physician. This letter must be on agency letterhead, dated, and signed by the Medical Director.

§721 Informal Reconsideration

- A. An ambulance service/provider shall have the right to an informal reconsideration of the deficiencies cited as a result of a survey or investigation.
 - 1. The Informal Reconsideration team will be composed of the Bureau of EMS Examination Coordinator and Education Manager.
 - 2. Facts regarding the deficiency will be presented to the Informal Reconsideration team in a manner that the identity of the ambulance service/provider will be anonymous.
 - a. The ambulance service/provider has a right to be present with counsel during the informal reconsideration. If this occurs, the process will not be anonymous.
 - 3. The decision of the Informal Reconsideration team shall be the final administrative decision regarding the deficiencies.

TELEPHONE CARDIOPULMONARY RESUSCITATION (T-CPR) CERTIFICATION

TELEPHONE CPR CERTIFICATION

The Bureau of EMS shall oversee and identify all public and private agencies, institutions, and individuals that are or may be engaged in the T-CPR training, along with setting minimum standards for course approval based on nationally recognized guidelines. The Bureau of EMS shall implement an efficient means for each public safety agency employing public safety Telecommunicators to provide a certificate of completion of the T-CPR training required by the state.

The Bureau of EMS shall issue Ambulance Operator Certifications to qualified applicants who submit the proper documentation.

§801 Telephone Cardiopulmonary Resuscitation (T-CPR)

- A. A public safety Telecommunicator shall be trained in telephone cardiopulmonary resuscitation (T-CPR) utilizing training that meets or exceeds nationally recognized emergency cardiovascular care guidelines adopted by the Bureau every two years. At a minimum, this training shall incorporate recognition protocols for out-of-the-hospital cardiac arrest, compression-only CPR instructions for callers, and continuing education as appropriate.
 1. Telecommunicators must submit a Telecommunicator Certification Application to the Bureau of EMS Information Management System. Quick Link: <https://labems.ldh.la.gov/>
 2. Emergency Medical Dispatch (EMD) and Telephone CPR Certificates obtained through APCO, IAED, or ALETA are acceptable. Quick Link: <https://ldh.la.gov/bureau-of-emergency-medical-services/ems-certifications>
 3. It shall be the employing agency's responsibility to ensure its employees stay current with their EMD or T-CPR certifications. Employees must submit a renewal application and upload a copy of their renewed certificate for approval through the Bureau of EMS IMS. Quick Link: <https://labems.ldh.la.gov/>
 4. It will be the Agency Administrator's responsibility to update, delete, or make any changes regarding personnel access level, associated with their agency, within the BEMS IMS.
- B. The T-CPR Certification must be obtained and uploaded into the BEMS IMS system for each parish as follows:
 1. On or before January 1, 2019, each public safety Telecommunicator in a parish with a population greater than one hundred thousand, according to the latest federal decennial census.
 2. On or before January 1, 2020, each public safety Telecommunicator in a parish with a population between fifty thousand and one hundred thousand, according to the latest federal decennial census.

3. On or before January 1, 2021, each public safety Telecommunicator in a parish with a population of less than fifty thousand, according to the latest federal decennial census.
- C. A public safety agency may enter into a reciprocal agreement with another public safety agency to provide T-CPR, provided that the agency that accepts the call has a public safety communicator who is trained in T-CPR.
 1. The reciprocal agreement shall be kept on hand for review upon request/audit performed by the Bureau of EMS.
 2. Telecommunicators are required to maintain a Telecommunicator Certification, and this requirement fundamentally supersedes any operating agreement to transfer T-CPR/EMD calls to another agency if there is not a reciprocal agreement in place.

§803 Loading Documentation in the Bureau of EMS Information Management System (IMS)

- A. Creating a new account/agency in the Bureau of EMS IMS
 1. Telecommunicators must be registered in the Bureau of EMS IMS for tracking purposes.
 2. The Agency's Administrator shall create an account to track current employees.
 - a. The Agency Administrator must create a personal account, then create the Agency Account from their personal account.
 - b. This can be accomplished by logging into the Bureau of EMS IMS at <https://labems.Idh.la.gov/>.
 - c. Step-by-step instructions on creating a new account/agency are provided under the IMS "How to" documents tab at <http://www.Idh.la.gov/index.cfm/page/759>.
- B. Update an existing account in the Bureau of EMS IMS
 1. Log in to the Bureau of EMS IMS, <https://labems.Idh.la.gov/>
 2. Update the information by answering YES to "Are you a Telecommunicator?"
 3. Upload a current copy of the EMD/TCPN certificate.
 4. When finished uploading, check the box on the last page under AFFIDAVIT next to "I Agree" then submit.

§805 Ambulance Operator Certification

- A. Each applicant for certification as an ambulance operator shall submit all of the following to the Bureau of EMS IMS <<https://labems.Idh.la.gov/>> via an Ambulance Operator Certification Application:
 1. A copy of the applicant's valid, unrestricted driver's license at the appropriate level required by law
 2. A copy of a current and valid defensive driving certificate issued by the National Safety Council or its equivalent, as determined by the department
 3. A copy of a current and valid American Heart Association Health Care Provider credential, American Red Cross Professional Rescuer credential, or an equivalent cardiopulmonary resuscitation certification approved by the department.
 4. A copy of the applicant's current official driving record from the Department of Public Safety and Corrections.
- B. Applicants must be at least 18 years of age.
- C. The ambulance operator certification shall expire within one year of the date of issuance and is not renewable.

D. Duties of the certified ambulance operator

1. Operate an ambulance in compliance with federal, state, and local law
2. Assist with handling and movement of a sick, injured, or disabled individual if a licensed emergency medical services Clinician, registered nurse, physician assistant, or physician directly supervises the operator.

JUMP START YOUR HEART ACT

The Bureau of EMS shall oversee and identify all education facilities that are required to possess an AED in compliance with Act 234 of the 2023 Regular Legislative Session. The Bureau of EMS shall implement an efficient means for each education facility to register AEDs with the Bureau of EMS.

§901 Postsecondary Education Institution Requirements

- A. Must possess an AED that must be on premises in an easily accessible location within the athletic department
- B. Must have an AED and a trained AED user who is also minimally trained in hands-only CPR at every intercollegiate athletic event
- C. Must have a "cardiac emergency response plan" with specific steps to reduce death from cardiac arrest at intercollegiate athletic events. The plan shall integrate the following guidelines, at a minimum:
 1. Establishing a cardiac emergency response team.
 2. Activating the team in response to a sudden cardiac arrest.
 3. Implementing AED placement and routine maintenance within the institution.
 4. Maintaining ongoing staff training in CPR and AED use.
 5. Practicing using drills.
 6. Integrating local EMS with the plan.
 7. Annually reviewing and evaluating the plan.

§903 Elementary, Middle, or High School Requirements

- A. Must have an AED and a trained AED USER who is also minimally trained in hands-only CPR at every interscholastic athletic event.
- B. Must have a "cardiac emergency response plan" with specific steps to reduce death from cardiac arrest at an interscholastic athletic event. The plan shall integrate the following guidelines, at a minimum:
 1. Establishing a cardiac emergency response team.
 2. Activating the team in response to a sudden cardiac arrest.
 3. Implementing AED placement and routine maintenance within the school.
 4. Maintaining ongoing staff training in CPR and AED use.
 5. Practicing using drills.
 6. Integrating local EMS with the plan.
 7. Annually reviewing and evaluating the plan.

§905 Bureau of EMS Responsibilities

- A. Promulgate all necessary rules and regulations. Such rules and regulations shall, at a minimum, provide for:
 1. Compliance, enforcement, and penalties.
 2. Periodic maintenance and testing of each AED to ensure each AED is in working order.
 3. Appropriate training for persons designated to use and maintain an AED.

APPENDICES

APPENDIX A

LOUISIANA BUREAU OF EMS POLICY GOVERNING FINGERPRINT-BASED CRIMINAL HISTORY RECORD INFORMATION (CHRI) CHECKS MADE FOR NON-CRIMINAL JUSTICE PURPOSES

This policy is applicable to any fingerprint-based state and national criminal history record check made for non-criminal justice purposes and requested under applicable federal authority and/or state statute authorizing such checks for Emergency Medical Services Clinician licensing purposes. Where such checks are allowable by law, the following practices and procedures will be followed.

Requesting CHRI checks

Fingerprint-based CHRI checks will only be conducted as authorized by the FBI and LSP, in accordance with all applicable state and federal rules and regulations. If an applicant or employee is required to submit to a fingerprint-based state and national criminal history record check, they shall be informed of this requirement and instructed on how to comply with the law. Such instruction will include information on the procedure for submitting fingerprints. In addition, the applicant or employee will be provided with all information needed to successfully register for a fingerprinting appointment.

Acceptable Use

All CHRI is subject to strict state and federal rules and regulations. CHRI is used only for the official purpose for which it was requested, and CHRI cannot be shared with other entities for any purpose, including subsequent hiring determinations. All receiving entities are subject to audit by the Louisiana State Police (LSP) and the FBI, and failure to comply with such rules and regulations could lead to sanctions. Furthermore, an entity can be charged with federal and state crimes for the willful, unauthorized disclosure of CHRI.

CHRI Training

An informed review of a criminal record requires training. Accordingly, all personnel authorized to receive and/or review CHRI at the Louisiana Bureau of EMS will review and become familiar with the educational and relevant training materials regarding CHRI laws and regulations made available by the appropriate agencies.

In addition to the above, all personnel authorized to receive and/or review CHRI must undergo Security Awareness Training on a biennial basis. This training will be accomplished using the training provided by CJIS Online.

Adverse Decisions Based on CHRI

If inclined to make an adverse decision based on an individual's CHRI, the Louisiana Bureau of EMS will take the following steps prior to making a final adverse determination:

- Provide the individual the opportunity to complete or challenge the accuracy of his/her CHRI; and
- Provide the individual with information on the process for updating, changing, or correcting CHRI.

A final adverse decision based on an individual's CHRI will not be made until the individual has been afforded a reasonable time of 15 days to correct or complete the CHRI.

Non-Criminal Agency Coordinator (NAC)

The Louisiana Bureau of EMS NAC is the Deputy Director, Stacy Barbay. The NAC is responsible for the following:

- Maintaining an updated Authorized Personnel List on file with the LSP Bureau.
 - Ensuring everyone included on this list must undergo the appropriate level of CJIS Security Awareness Training.
- Inform the LSP Bureau of changes in the agency head or any relevant business information (agency name changes, mailing/physical address changes, etc.).
 - Contact the LSP Bureau immediately to update the User Agreement and, if necessary, submit the new authorization to the LSP Bureau.
 - Submit an NAC change form to the LSP Bureau in the event of a change in roles.

Local Agency Security Officer (LASO)

The Louisiana Bureau of EMS, LASO, is the Deputy Director, Stacy Barbay. The LASO is responsible for the following: de-identifying who is using or accessing CHRI and/or systems with access to CHRI.

- Ensuring that personnel security screening procedures are being followed as stated in this policy.
- Ensuring the approved and appropriate security measures are in place and working as expected.

When changes in the LASO appointment occur, the Louisiana Bureau of EMS shall notify the Louisiana State Police of the change. The LASO will complete specific LASO training on an annual basis, provided through CJIS Online.

Personnel Security

All Personnel

All personnel requiring access to CHRI must first be deemed "Authorized Personnel." The LSP will review and determine if access is appropriate. Access is denied if the individual has ever had a felony conviction, of any kind, no matter when it occurred. Access may be denied if the individual has one or more recent misdemeanor convictions.

In addition to the above, an individual believed to be a fugitive from justice or having an arrest history without convictions will be reviewed to determine if access to CHRI is appropriate. The LSP will take into consideration extenuating circumstances where the severity of the offense and the time that has passed would support a possible variance.

Persons already having access to CHRI and who are subsequently arrested and/or convicted of a crime will:

- Have their access to CHRI suspended until the outcome of an arrest is determined and reviewed by the LSP in order to determine if continued access is appropriate.
- Have their access suspended indefinitely if a conviction results in a felony of any kind.
- Have their access denied by the LSP where it is determined that access to CHRI by the person would not be in the public's best interest.

All access to CHRI by support personnel, contractors, and custodial workers will be denied. If a need arises for such persons to be in an area(s) where CHRI is maintained or processed (at rest or in transit), they will be escorted by, or be under the supervision of, authorized personnel at all times while in these area(s).

Personnel Termination

The LASO shall terminate access to CHRI immediately upon notification of an individual's termination of employment.

Louisiana Bureau of EMS CHRI access termination process:

- Notification will be sent via email to the LSP
- This is to be done within 24 hours of receiving notification of termination
- All keys, email accounts, etc., will be obtained/disabled from the user within 24 hours

Storage of CHRI

CHRI shall only be stored for extended periods of time when needed for the integrity and/or utility of an individual's personnel file. Administrative, technical, and physical safeguards, which are in compliance with the most recent LSP and FBI Security Policy, have been implemented to ensure the security and confidentiality of CHRI. Each individual involved in the handling of CHRI is to familiarize himself/herself with these safeguards.

In addition to the above, each individual involved in the handling of CHRI will strictly adhere to the policy on the storage and destruction of CHRI.

Media / Physical Protection

All media containing CHRI is to be protected and secured at all times. The following is established and to be implemented to ensure the appropriate security, handling, transporting, and storing of CHRI media in all its forms.

Physical Storage and Access

Physical CHRI media shall be securely stored within physically secured locations or controlled areas. Access to such media is restricted to authorized personnel only and shall be secured at all times when not in use or under the supervision of an authorized individual.

Physical CHRI media:

- Is to be stored within an applicant file when feasible or by itself when necessary
- Is to be maintained within a lockable filing cabinet, drawer, closet, office, safe, vault, or other secure container

Media Storage and Access

Electronic CHRI media shall not be stored within the Louisiana Bureau of EMS.

Destruction of CHRI

Disposal of Physical Media

Once physical CHRI media (paper/hard copies) is determined to be no longer needed by the Louisiana Bureau of EMS, it shall be destroyed and disposed of appropriately. Physical CHRI media shall be destroyed by shredding, cross-cut shredding, or incineration. Louisiana Bureau of EMS will ensure such destruction is witnessed or carried out by authorized personnel:

- The LASO shall witness or conduct the disposal.
- Cross-cut shredding will be the method of destruction used by the Louisiana Bureau of EMS.

Retention of CHRI

Federal law prohibits the repurposing or dissemination of CHRI beyond its initial requested purpose. Once an individual's CHRI is received, it will be securely retained in internal agency documents for the following purposes only:

- Historical reference and/or comparison with future CHRI requests
- Dispute over the accuracy of the record
- Evidence for any subsequent proceedings based on information contained in the CHRI. CHRI will be kept for the above purposes in:
- Hard copy form in applicant files located in the locked filing cabinet located in the licensing staff office.

- CHRI will be maintained for up to six (6) months or until the case has been adjudicated and past the appropriate appeal time frame. At the end of this term, the CHRI will be disposed of according to the Disposal of Physical Media policy.

Disciplinary

If an individual at the Louisiana Bureau of EMS has misused or is currently misusing CHRI, the following requirements will be adhered to.

- Using CHRI for any purpose other than what is allowed by state statute or Federal code is considered misuse.
- The specific steps your agency will take in the event that intentional misuse is discovered.
- Misuse of CHRI can result in loss of access to CHRI, loss of employment, and/or criminal prosecution.
- Misuse of CHRI shall be reported to the state.

Incident Response

The security of information and systems in general, and of CHRI in particular, is a top priority for the Louisiana Bureau of EMS. Therefore, we have established appropriate operational incident handling procedures for instances of an information security breach. It is each individual's responsibility to adhere to established security guidelines and policies and to be attentive to situations and incidents that pose risks to security. Furthermore, it is each individual's responsibility to immediately report potential or actual security incidents to minimize any breach of security or loss of information. Each individual must follow the following security incident handling procedures:

- All incidents will be reported directly to the LASO.
- If any records were stolen, the incident will also be reported to the appropriate authorities.
- Once the cause of the breach has been determined, disciplinary measures will be taken in accordance with the disciplinary policy.

In addition to the above, the LASO shall report all security-related incidents to the LSP within 24 hours.

All agency personnel with access to FBI and/or LSP CHRI have a duty to protect the system and related systems from physical and environmental damage and are responsible for the correct use, operation, care, and maintenance of the information. All existing laws and the Louisiana Bureau of EMS regulations and policies apply, including those that may apply to personal conduct. Misuse or failure to secure any information resources may result in temporary or permanent restriction of all privileges up to employment termination.