SUMMARY OF EXPRESS TERMS

The proposed rulemaking would amend several sections of Part 800 of Title 10 of the New York Codes, Rules and Regulations (NYCRR) pertaining to Emergency Medical Services.

Section 800.3(w) changes the definition of continuous practice to be more inclusive of other patient care experiences.

Subdivisions (b), (c), (d) and (e) of Section 800.6 are amended to allow individuals who are 17 years of age prior to the last day of the month to qualify for initial certification; to remove reference to Emergency Critical Care technician; and to combine (d) and (e) to allow for completion of all requirements, including a passing grade on both the practical skills evaluation and a written examination, within two years of the end of course date. Amendments to this section also include changing the term "examination" to "evaluation" for determining skills competencies and clarifying that remediation is required when the candidate is unsuccessful with the skills evaluation and/or written examination. Lastly, replaced "written exam" with "cognitive exam" to accommodate for electronic methods of testing.

Section 800.7 is repealed.

Section 800.8(d) is amended to combine the tests of subdivisions (d) and (e) and to clarify that students have one year from the end date of the course to pass the practical skills evaluation and written examination.

Section 800.9 is amended to change the name of the section and to delete paragraph (2) of subdivision (b).

Section 800.10 is amended to change the name of the section and subdivision (a) is amended to state that instead of enrolling in a new course, students who fail may participate in approved remediation with the initial course sponsor. Subdivision (b) is also amended to state that students are permitted three attempts at the written examination and if they are unsuccessful, must complete an approved remediation with their course sponsor. Once completed, they can attempt the written exam three additional times. If unsuccessful again, then they must take a refresher or an original course. Lastly, replaced "written exam" with "cognitive exam" to accommodate for electronic methods of testing.

Section 800.11 is amended to remove the word "defibrillation" from subdivision (a) and to state that basic certification is required for the duration of the advanced course, changing it from "at time of written certification."

Subdivisions (a) and (b) of Section 800.12, concerning reciprocal certification requirements, are amended: to remove reference to critical care technicians, which are being phased out as a certification option and will no longer be available for reciprocity; to require completion of National EMS Educational Standards; to expand upon acceptable proofs of need for reciprocity; to clarify the process in which reciprocity may be given to an applicant and what is required; to require submission of a non-refundable fee of up to a \$99; to refer to the minimum age requirements found in section 800.6; to add a new provision that limits the use of reciprocity for recertification; to add a new provision stating that an applicant must disclose any disciplinary actions charged by other state EMS agencies in their reciprocity application. Lastly, replaced "written exam" with "cognitive exam" to accommodate for electronic methods of testing.

Section 800.13 is repealed.

Section 800.14 is amended to remove the reference to "ambulance" services as to include first response agencies as acceptable in the State's mutual aid agreement with states bordering New York.

800.15 is amended to require students who are pursuing certification at any level, to adhere to the standards of conduct set forth in the section and to revise the text to contemplate adherence to National EMS Education Standards.

Section 800.17 is amended to extend initial and subsequent candidate certifications from 37 months to 48 months. Also, replaced "written exam" with "cognitive exam" to accommodate for electronic methods of testing.

Section 800.18 is amended to repeal the current requirements for lapsed certifications and instead allow providers to recertify by enrolling in, and completing, the requirements of a refresher course.

Section 800.19 is amended to include the ability to run demonstration projects that also include education delivery models and EMS delivery models. Amendments to this section would also mean that education delivery models and EMS delivery models would no longer be subject to review by the regional emergency medical services councils; however, new skills and moving of skills between certification levels would still be subject to such review.

Subdivision (a) of Section 800.20 is amended to allow course sponsorship renewal applications that do not receive comment from the regional emergency medical services council within forty-five (45) days, to proceed directly to the department without comment.

Subdivision (b) of section 800.20 is amended to change the projected course schedule from six months to twelve months and to update the frequency of submission from twice per year to once per year. The date of submission is also adjusted from July 1st to August 1st. In addition, substantial edits were made to subdivision (c) of section 800.20, to include the specific attachments that are required in addition to course applications; to require that state sponsors not admit students who do not meet requirements for certification. Amendments to subdivision (c) also specify what happens when course paperwork is not submitted on time; update references to the U.S. Department of Transportation National EMS Educational Standards; identify the specific roles required of a course sponsor and the criteria related to the selection of those roles; clarify what courses are required to have a Certified Instructor Coordinator in attendance; change the number of certified lab faculty required from at least one (1) to at least fifty (50) percent; and remove the requirement that instructors for continuing educational courses complete a training course conducted by the Department for that specific course. In addition, amendments to this subdivision remove all specific curriculum references and simplify the regulation by stating that course sponsors adhere to the Department of Transportation National EMS curriculum; remove the requirement that sponsors conduct an annual review of test instruments and evaluation methods; expand the language that additional policies may be required and enumerate the policies that will be required. Amendments to section 800.20(c) also allow for student files to be maintained electronically; expand the list of required documents in files; allow for electronic maintenance of course files and extend the period of retention to at least five (5) years; and add that course sponsors must retain any document that is relevant to the administration and record for the course. Finally, reference to "advanced life support" is removed from paragraph (12) of subdivision (c) to encompass BLS course sponsor in clinical rotation requirements and a new

paragraph (13) is added to combine all quality assurance items that were located throughout various locations of the regulation into one location. It is also amended to develop new goals that ensure course sponsors are not only developing and maintaining quality educational programs that are evaluated by all stakeholders but are also adjusting to educational delivery models and the profession as needed. Pursuant to the authority vested in the New York State Emergency Medical Services Council and the Commissioner of Health pursuant to section 3002 of the Public Health Law, Part 800 of Title 10 (Health) of the Official Compilation of Codes, Rules and Regulations of the State of New York is amended, to be effective upon publication of a Notice of Adoption in the New York State Register, to read as follows:

Subdivision (w) of section 800.3 is amended to read as follows:

The following definitions shall apply to this Chapter unless the context otherwise requires:

* * *

(w) Continuous Practice means a certified individual having:

(1) actively provided [prehospital] patient care during their period of certification, at or below their level of certification; and

(2) [been a current, active member or employee of an EMS agency recognized by the department, during their period of certification] provided sufficient evidence of continuous and active education during their period of certification, relevant to their level of certification.

Section 800.6 is amended to read as follows:

To qualify for initial certification, an applicant shall:

* * *

(b) [be at least 17 years of age prior to the last day of the month in which he/she is scheduled to take the written certification examination for the course in which they are enrolled,] be at least

<u>17 years of age prior to the last day of the month in which the course is completed or scheduled</u> <u>to be completed, except that an applicant for a certified first responder must be at least 16 years</u> of age prior to the last day of the month<u>:</u> [in which he/she is scheduled to take the written certification examination;]

(c) satisfactorily complete the requirements of a State-approved course given by a Stateapproved course sponsor in emergency medical care at one of the following levels for which certification is available:

* * *

[(4) emergency medical technician-critical care (EMT-CC);]

[(5)] (4) emergency medical technician-paramedic (EMT-P);

[(6)] (5) certified laboratory instructor (CLI); or

[(7)] (6) certified instructor coordinator (CIC).

(d) [pass the State practical skills examination for the level at which certification is sought within one year of the scheduled written examination date for the course] <u>complete all requirements of</u> <u>the State-approved course, including obtaining a passing grade on both the practical skills</u> <u>evaluation and a cognitive examination approved by the department, within two years of the end</u> <u>of course date as assigned by the department. Students who do not pass the practical and skills</u> <u>evaluation and cognitive examination within two years of the end of the course date as assigned</u> <u>by the department must take a remediation program approved by the department prior to any</u> additional attempts to pass the examination. For instructor level certification, if additional

attempts are needed for the cognitive examination, a remediation program approved by the department must be completed prior to any additional attempts.

[(e) after passing the practical skills examination, pass the State written certification examination for the level at which certification is sought within one year of the scheduled written examination date for the course, except at the certified instructor coordinator level and certified lab instructor level;]

[(f)] (e) if the applicant has been convicted of one or more criminal offenses, as defined in [§] <u>section 800.3(ak) of this Part</u>, be found eligible after a balancing of the factors set out in [A]<u>a</u>rticle 23-A of Corrections Law. In accordance with that [A]<u>a</u>rticle, no application for a license shall be denied by reason of the applicant having been previously convicted of one or more criminal offenses unless

* * *

[(g)] (f) not have been found guilty or in violation, in any jurisdiction, of any other non-criminal offense or statutory and/or regulatory violation, as those terms are defined in [S]section 800.3 of this Part, relating to patient safety unless the department determines such applicant would not involve an unreasonable risk to property or the safety or welfare of a specific individual or the general public.

Section 800.7 is hereby REPEALED.

Subdivisions (d)-(g) of Section 800.8 are amended to read as follows:

(d) [pass the State practical skills examination for the level at which recertification is sought within one year of the scheduled written examination date for the course] <u>pass a practical skills</u> <u>evaluation and cognitive examination, approved by the department, for the level at which</u> <u>certification is sought within one year of the end date stipulated by the department for their</u> <u>course;</u>

[(e) after passing the practical skills examination, pass the State written certification examination for the level at which certification is sought within one year of the scheduled written examination date for the course, except at the certified instructor coordinator level and certified lab instructor level;

(f)] (e) if the applicant has been convicted of one or more criminal offenses, as defined in [§] <u>section 800.3(ak) of this Part</u>, be found eligible after a balancing of the factors set out in [A]<u>a</u>rticle 23-A of Corrections Law. In accordance with that [A]<u>a</u>rticle, no recertification shall be denied by reason of the applicant having been previously convicted of one or more criminal offenses unless (i) there is a direct relationship between one or more of the previous criminal offenses and duties required of this certificate or (ii) recertification of the applicant would involve an unreasonable risk to property or the safety or welfare of a specific individual or the general public. In determining these questions, the agency will look at the eight factors listed under [New York State] Corrections Law [S]<u>s</u>ection 753; and

[(g)] (f) not have been found guilty or in violation, in any jurisdiction, of any other non-criminal offense or statutory and/or regulatory violation, as those terms are defined in [S]section 800.3 of this Part, relating to patient safety unless the department determines such applicant would not involve an unreasonable risk to property or the safety or welfare of a specific individual or the general public.

Section 800.9 is renamed and amended to read as follows:

[Continuing medical education recertification] <u>Recertification by Continuing Medical</u> Education.

* * *

(b) To qualify for recertification using continuing medical education, an applicant shall:

* * *

[(2) be a current active member or employee of an agency already registered in the program and authorized to provide the level of care for which the participant is seeking recertification;

(3)] (2) be in continuous practice as defined in [S]section 800.3 of this Part;

[(4)] (3) file with the department a completed department-approved application form bearing the applicant's signature in ink, or an electronic application approved by the department;

[(5)] <u>(4)</u> submit the completed application[, through the EMS agency,] for recertification [postmarked] <u>so that it is received by the department at least 45 days</u>, but not more than 9 months, prior to their current certification expiration date;

[(6)] (5) if the applicant has been convicted of one or more criminal offenses, be found eligible after a balancing of the factors set out in [A]<u>a</u>rticle 23-A of Corrections Law. In accordance with that [A]<u>a</u>rticle, no recertification shall be denied by reason of the applicant having been previously convicted of one or more criminal offenses unless (i) there is a direct relationship between one or more of the previous criminal offenses and the duties required of this certification or (ii) recertifying the applicant would involve an unreasonable risk to property or the safety or welfare of a specific individual or the general public. In determining these questions, the agency will look at the eight factors listed under [New York State] Corrections Law [S]section 753; and

[(7)] <u>(6)</u> not have been found guilty or in violation, in any jurisdiction, of any other non-criminal offense or statutory and/or regulatory violation, as those terms are defined in [S]<u>s</u>ection 800.3 of this Part, relating to patient safety unless the department determines such applicant would not involve an unreasonable risk to property or the safety or welfare of a specific individual or the general public.

Section 800.10 is renamed and amended to read as follows:

[Reexaminations - applicants for recertification] <u>Retesting Applicants for Initial Certification or</u> <u>Recertification</u>.

(a) [Candidates who have failed the practical skills examination must complete a refresher or original certification course for the level of certification sought prior to being admitted to another practical skills examination at the same level of certification] <u>Candidates who have failed the</u> practical skills evaluation after three attempts must complete remediation through the initial course sponsor, as approved by the department, prior to being admitted to another practical skills evaluation at the same level of certification. Such candidates may be admitted once to a practical skills examination at a lower level of certification within one year after [the last attempt at the level of certification originally sought] the end of the course date.

(b) Candidates who have failed the [written] <u>cognitive</u> certification examination after [two attempts must complete a refresher or original certification course for the level of certification sought prior to being admitted to another [written] <u>cognitive</u> certification exam at the same level

of certification.] three attempts must complete remedial training, as approved by the department, prior to being admitted to another cognitive certification examination at the same level of certification. After remedial training, the student is allowed three additional attempts to pass the cognitive certification examination. After six total attempts to pass the cognitive certification examination, the candidate will be required to complete a full original course again. Such candidates may be admitted once to a [written] <u>cognitive</u> certification examination at a lower level of certification within one year after [the last attempt at the level of certification originally sought] the end of the course date.

Subdivision (a) of section 800.11 is amended to read as follows:

(a) A candidate, to qualify for initial certification at any level above emergency medical technician[-defibrillation], in addition to meeting the requirements set forth in section 800.6 of this Part, shall:

(1) have current certification as an emergency medical technician-basic [at the time of the written certification examination] for the duration of the advanced course; and

* * *

Section 800.12 is amended to read as follows:

(a) To qualify for New York State certification based on out-of-state emergency medical responder, emergency medical technician, advanced emergency medical technician, [emergency medical technician-critical care,] emergency medical technician-paramedic, emergency medical services instructor certification or emergency medical services training credentials, a person must be currently certified or licensed by another state, the United States Military, or the National Registry of Emergency Medical Technicians, based on an out-of-state training program. The outof-state training must be equivalent to or more stringent than New York State training and examination requirements.

(b) The applicant must:

(1) demonstrate a need for certification[, such as New York State residence or employment opportunity] by providing proof of an educational or employment opportunity, or another acceptable need as determined by the department;

(2) have successfully completed a course that meets or exceeds a curriculum based on the current [department EMS certification guidelines] <u>National Emergency Medical Services Education</u> <u>Standards (2021)</u>, as incorporated by reference in section 800.15(a)(1) of this Part and is approved by the department;

(3) have successfully completed:

(i) [an out-of-state recognized or National Registry of Emergency Medical Technicians practical skills and written examination within 18 months of the date the application is received by the department; or] <u>a recognized out-of-state</u>, or National Registry of Emergency Medical <u>Technicians</u>, certification process in which the applicant has successfully passed a practical skills evaluation and cognitive examination, or completed a recertification process by continuing medical education within the New York state certification time period that is an equivalent program or process to New York State; and

(ii) [if a member or veteran of the United States Military, an approved medical training program from the Army, Navy, Air Force, Marines or Coast Guard that meets or exceeds current national emergency medical services education guidelines within three (3) years of the date the application is received by the department;] <u>a passing score on a cognitive examination and/or practical skills evaluation to determine equivalency of training, as required by the department.</u>

* * *

(5) submit the <u>non-refundable</u> filing fee [of \$25 for emergency medical responder or emergency medical technician certification or \$50 for all other level of certification], not to exceed \$99, as determined by the department on the application;

* * *

(8) [be at least 17 years of age] <u>meet the minimum age requirements for the level of certification</u> the candidate is applying for, as stated in section 800.6 of this Part.

(c) Reciprocity cannot be used for recertification of a NYS certification unless extenuating circumstances can be shown.

(d) Reciprocity certification shall expire on the same date as the applicant's out-of-state certification, except that such certification shall be for no more than New York State certification period.

(e) The candidate shall disclose all outstanding violations or charges of rules or laws governing emergency medical services in the state(s) in which the person holds current certification or licensure.

Section 800.13 is hereby REPEALED.

Section 800.14 is amended to read as follows:

Emergency medical technicians certified by Vermont, Massachusetts, Connecticut, New Jersey, or Pennsylvania may practice in New York State without New York State certification, while (a) transferring a patient across the border between New York State and the certifying state or (b) providing emergency medical care in New York State pursuant to a mutual aid agreement with a New York State-certified or registered ambulance service. The mutual aid agreement must be in writing, signed by an authorized officer of both [ambulance] services, and must delineate the protocols to be adhered to by the out-of-state emergency medical technicians and shall be on file with the department.

Section 800.15 is amended to read as follows:

Every person certified at any level, or pursuing certification at any level, pursuant to this Part or [A]article 30 of the Public Health Law shall:

(a) comply with prehospital practice standards, applicable for the geographic region of the State in which the individual is practicing, as established by:

(1) <u>National Emergency Medical Services Education Standards (2021)</u>, as published by the U.S. Department of Transportation, National Highway Traffic Safety Administration, which have been incorporated by reference in this section, a copy of which can be found online at EMS.gov -EMS Education Standards 2021. This publication is also available for public inspection and copying at the Regulatory Affairs Unit, New York State Department of Health, Corning Tower, Empire State Plaza, Albany, NY 12237. (2) other State-approved training curricula, and State-approved training standards, in accordance with section 800.20 of this Part;

[2] (3) State-approved protocols developed by State and/or Regional Medical Advisory Committees pursuant to sections 3002-a and 3004-a of the Public Health Law; and

[3] (4) Scope of Practice as defined in [S]section 800.3 of this Part; and

* * *

Section 800.17 is amended to read as follows:

(a) Expiration of initial certification. A candidate's initial certification shall expire at 11:59 p.m.
on the last day of the month [37] <u>48</u> months following the month in which the candidate passed the [written] <u>cognitive</u> certification examination.

(b) Expiration of subsequent certifications.

 A candidate who completes the requirements of section 800.8 <u>of this Part</u> during the last nine months of his or her certification shall have his or her certification extended for an additional [thirty-six] <u>48</u> months;

(2) The certification of a candidate who completes the requirements of section 800.8 <u>of this Part</u> at any other time while certified shall expire at 11:59 p.m. on the last day of the month [37] <u>48</u> months following the month in which the candidate passed the [written] <u>cognitive</u> certification examination.

(3) The certification of a candidate who recertifies pursuant to section 800.18 <u>of this Part</u> shall expire at 11:59 p.m. on the last day of the month [37] <u>48</u> months following the month in which the candidate passes the [written] <u>cognitive</u> certification examination.

Section 800.18 is amended to read as follows:

(a) [During the twelve months immediately following the expiration of certification, a candidate may recertify by meeting the requirements of section 800.8] Formerly certified lapsed providers may recertify by enrolling in, and completing the requirements of, a refresher course.

Section 800.19 is amended to read as follows:

(a) [Purpose. The state emergency medical services council may authorize, after review by the appropriate regional emergency medical services council and subject to the approval of the commissioner, demonstration projects of a limited duration for the purpose of demonstrating either:

(1) new skills not currently practiced by CFRs, EMTs or AEMTs, or

(2) the appropriateness of moving a skill to another level.] <u>The State Emergency Medical</u> <u>Services Council may authorize, subject to the approval of the commissioner, demonstration</u> projects of a limited duration.

(b) Types of projects may include:

(1) education delivery models; or

(2) EMS delivery models.

(c) Additional projects that may be reviewed by the appropriate Regional Emergency Medical Services Council prior to the State Emergency Medical Services Council authorization include the following:

(1) new skills not currently practiced by CFRs, EMTs, or AEMTs, or;

(2) the appropriateness of moving a skill to another level.

[(b)] (d) Requirements of demonstration projects.

(1) The commissioner shall specify the duration of the project and the requirements for evaluation of the project.

(2) The State Emergency Medical Services Council shall recommend the training requirements for each project, including the knowledge and skill objectives, subject to the approval of the commissioner.

Section 800.20 is amended to read as follows:

(a) Approval of course sponsors.

* * *

(2) Approval of a course sponsor shall be for no more than two years. Approvals shall expire on July 1. One half the approvals of sponsors conducting courses on the effective date of this [p]Part shall expire on the next succeeding July 1 and the other half shall expire on the second succeeding July 1.

(3) Original and renewal sponsorship applications shall be reviewed by the appropriate regional emergency medical services council, which shall forward its recommendation to the department within 45 days of receiving the application. <u>Renewal applications not reviewed by the appropriate regional emergency medical services councils within forty-five (45) days will proceed to the department without comment.</u> If the regional council is a course sponsor, it shall consider only the capability of the sponsor to meet the requirements of this [p]Part. If the regional council is not a course sponsor, it may also consider the size of the potential student pool and the impact of an additional sponsor on the ability of existing sponsors to sustain a student body of adequate size.

(4) The department, when making a determination with regard to original and renewal sponsorship applications, shall consider the capability of the sponsor to meet the requirements of this [p]Part, the size of the potential student pool and the impact of an additional sponsor on the ability of existing sponsors to sustain a student body of adequate size.

[(4)] (5) The application for approval shall include the names of all certified instructor coordinators and certified lab instructors who will be providing instructional services.

(b) Course planning. Each course sponsor shall on or before [July 1 and January 1] <u>August 1</u> of each year, submit to the appropriate regional emergency medical services councils and the department a projected schedule of courses for the next [six months] <u>calendar year</u>, including the course type, tentative dates and locations, and proposed certified instructor coordinators.

(c) All course sponsors shall meet the following requirements:

(1) Administration. Course sponsors shall comply with the following administrative requirements:

 (i) [The course sponsor shall file applications for courses by the deadline included in a schedule supplied by the Department] <u>Submit all course paperwork as necessary including, but not limited</u> to:

(a) course file applications for courses by the deadline specified by the department;

(b) student applications by the deadline specified by the department; and

(c) end of course paperwork by the end of course date.

(ii) The course sponsor shall not admit students who do not meet the [age] requirements for certification in accordance with this Part.[, or who do not meet the requirements for entry into a refresher course (i.e., previous completion of an original course);]

(iii) [The course sponsor shall submit student applications, in accordance with a schedule supplied by the department; and] <u>Any course paperwork not submitted on time will have the end</u> <u>of course date delayed by at least one month.</u>

(iv) The course sponsor shall certify to the department those students who have met the requirements of the [curriculum approved by the department and the State Emergency Medical Services Council] <u>current National Emergency Medical Services Education Standards (2021)</u>, as incorporated by reference in section 800.15(a)(1) of this Part.

(v) The course sponsor shall identify individuals that fill the roles of Course Sponsor Administrator, Paramedic Program Director (if applicable), Course Sponsor Liaison (optional), and CEO/Department Chair.

(a) One person cannot serve in more than one role unless prior approval from the department and should not be a regular occurrence.

(b) The Course Sponsor Administrator or Course Sponsor Liaison must possess current or prior experience as a Certified Instructor Coordinator at, or above, the level of course certification being taught unless otherwise approved by the department.

* * *

(3) Instructional faculty. Every <u>department approved</u> course [except continuing education courses,] shall have a Certified Instructor Coordinator <u>in attendance unless approved by the department</u>. [Each continuing education course shall be conducted by faculty who have completed an instructor training course, conducted by the Department, for that specific course. The lab faculty of all courses except continuing education courses shall include one or more certified laboratory instructors] <u>The lab faculty of all courses shall have at least 50% as certified instructors unless otherwise approved by the department</u>.

* * *

(5) Curricula. [The minimum curricula for courses are listed below. A course sponsor offering a particular course must adhere to the minimum curriculum specified for that course. The course sponsor may exceed the minimum instructional hours (consistent with the needs of students) and minimum content as long as the course does not exceed the scope of practice for the certification level.

(i) The following course curricula, which pertain to the courses specified and which are contained in the publications listed below, are hereby incorporated by reference with the same force and effect as if set forth at length herein. The publications are available for public inspection and copying at the Records Access Office, New York State Department of Health, Corning Tower, Empire State Plaza, Albany, New York 12237. Copies are also available from the publishers, Health Education Services, P.O. Box 7126, Albany, New York 12224. (a) Certified First Responder (original course) Certified First Responder Course Curriculum: Course Guide, Instructor Lesson Plans (August 1991)

(b) Certified First Responder (refresher course) Certified First Responder Refresher Course Curriculum: Standard Course Guide and Instructor's Lesson Plans (1989)

(c) Emergency Medical Technician (original course)

(1) Instructor's Lesson Plan For Emergency Medical Technicians (Basic) (Revised June 1985)(Appendices dated April 1989 and July 1989).

(2) The Expanded Primary Assessment/Resuscitation: Standard Curriculum (1989)

(3) Instructor's Slide Script: Hazardous Materials, Lesson #22, Section #2 (First Edition)

(d) Emergency Medical Technician (refresher course) Certified Emergency Medical Technician -Refresher Course Curriculum: Standard Course Guide and Instructor's Lesson Plans (1990)

(e) Emergency Medical Technician - Defibrillation (original course) Emergency MedicalTechnician - Defibrillation: Course Content and Outline (Automatic/Semi-automatic Only)(January 1991)

(f) Emergency Medical Technician - Intermediate (original course). Certified Emergency Medical Technician - Intermediate EMT - 1 Course Curriculum: Standard Course Guide and Instructor's Lesson Plans (April 1989)

(g) Emergency Medical Technician - Intermediate (refresher course). Certified Emergency
Medical Technician - Intermediate EMT - 1 Refresher Course Curriculum: Standard Course
Guide and Instructor's Lesson Plans (November 1990)

(h) Emergency Medical Technician - Critical Care (original course). Emergency Medical
Technician - Critical Care Course Curriculum: Course Guide and Instructor's Content Outline
(January 1992)

(i) Emergency Medical Technician - Critical Care (refresher course). Outline for Refresher
Training For Advanced Emergency Medical Technicians Category 3 and Basic Emergency
Medical Technician (July 1, 1981)

 (j) Emergency Medical Technician - Paramedic (refresher course). Certified Emergency Medical Technician - Paramedic Refresher Course Curriculum: Standard Course Guide and Instructor's Lesson Plans (November 1989)

(k) Critical Trauma Care (CTC) (continuing education course) Critical Trauma Care, "A Continuing Education Course for Basic EMT's": Instructor Outline (1987)

(1) Ambulance Accident Prevention Seminar (continuing education course). Ambulance Accident Prevention Seminar, "A Continuing Education Course for EMT's": Instructor Outline (1989)

(m) Combined EMT refresher/CTC (continuing education course)

(1) Certified Emergency Medical Technician - Refresher Course Curriculum: Standard CourseGuide and Instructor's Lesson Plans (1990)

(2) Critical Trauma Care, "A Continuing Education Course for Basic EMT's": Instructor Outline (February 1987)

(n) Certified Instructor Coordinator Certified Instructor Coordinator Course: Standard Curriculum (1989)

(o) Certified Lab Instructor Certified Lab Instructor Course: Standard Curriculum (1989)

(p) Certified Instructor Upstate Certified Instructor Update: Regional Faculty Manual (1990/1991)

(q) Prehospital Pediatric Care Course (continuing education course) Prehospital Pediatric Care Course, "A continuing Education Course For EMT's": Instructor Outline (1990)

(r) EMS Dispatcher Course (continuing education course) Emergency Medical Services
Dispatcher: National Standard Curriculum: Standard Course Guide and Instructor's Lesson Plans
(Second Edition 1983)

(s) Crash Victim Extrication (continuing education course) Crash Victim Extraction Training Course, Emergency Medical Technician: Instructor's Manual (Revised April 1979)

(t) Emergency Vehicle Operator

(1)Training Program for Operation of Emergency Vehicles: Course Guide (1978)

(2) Training program for Operation of Emergency Vehicles: Instructor's Lesson Plans (1978)

(u) Infection Control Workshop (continuing education course) Protecting Yourself From AIDS and Other Infectious Diseases: Instructor Guide (June, 1991)

(ii) The following course curricula, which pertain to the courses specified and which are contained in the publications listed below, are hereby incorporated by reference with the same force and effect as if set forth at length herein. The publications are available for public inspection and copying at the Records Access Office, New York State Department of Health, Corning Tower, Empire State Plaza, Albany, New York 12237. Copies are also available from the publisher, Association for Medical Emergency Information, Inc., 21155 Woodfield Road, Gaithersburg, Md. 20882. (a) Emergency Medical Technician - Paramedic (original course) (1) Emergency Medical Technician - Paramedic: National Standard Curriculum: Course Guide(1985)

(2) Emergency Medical Technical - Paramedic: National Standard Curriculum: Instructor's Lesson Plans (1985)] <u>A course sponsor offering a particular course must adhere to the minimum</u> <u>curriculum specified by the *National Emergency Medical Services Education Standards (2021)*, as incorporated by reference in section 800.15(a)(1) of this Part.</u>

(6) Evaluation. Evaluation of students shall be conducted on a recurring basis and with sufficient frequency to provide the student, course medical director and certified instructor coordinator with valid and timely indicators of the student's progress toward and the achievement of the competencies and objectives stated in the curriculum. [In order to ensure effectiveness of student evaluation, the test instruments and evaluation methods shall undergo at least annual review. When appropriate, reviews shall result in the update, revision, or formulation of more effective test instruments or evaluation methods. The reviewers shall include at least a certified instructor coordinator.]

* * *

(8) Fair Operational Practices. Announcements and advertising shall accurately reflect the program offered. Student and faculty recruitment, student admission, and faculty employment practices shall be non-discriminatory with respect to race, color, creed, sex, age and national origin. The course sponsor shall have written policies which shall be approved by the department as being consistent with the curriculum, equitable in their treatment of students and in compliance with the requirements of this Part. Such policies shall be issued to all students at the

first course session [or earlier covering each of the following subjects], or earlier, including each of the following subjects:

(i) course goals and objectives,

[(ii) interim testing requirements and pass/fail criteria,

(iii)] (ii) interim exam retesting,

[(iv)] (iii) attendance requirements and make-up procedure,

[(v)] (iv) requirements regarding personal conduct and ethics,

[(vi) emergency] (v) class communication and cancellation procedure,

[(vii)] (vi) progressive discipline, course termination/expulsion and appeal procedure,

[(viii) textbooks required,

(ix) tuition refund schedule] (vii) social media and information technology (IT),

[(x) a student-course sponsor learning contract for all refresher courses.] (viii) course completion requirements,

(ix) certification examination information, and

(x) other topics, subjects and policies as requested by the department.

(9) Record keeping.

(i) The course sponsor shall maintain, <u>physically or electronically</u>, for a period of at least five years, files which contain, <u>but are not limited to</u>, the following documentation on individual students. There shall be a system for accessing individual information.

* * *

(d) practical skills [examination] evaluation sheets, [and]

(*e*) clinical experience documentation and field internship experience documentation which show the student achieved the objectives of the clinical and field internship experiences and who evaluated the student's performance[.].

(f) ancillary course exams,

(g) all documentation relevant to the student's education and interactions with the course sponsor shall be producible upon request by the department, and

(h) other items as required by the department.

(ii) The course sponsor shall maintain, physically or electronically, on file for a period of at least five (5) years individual course files which shall contain, the following documentation:

* * *

(d) a copy of each interim examination administered, or a record of where it can be found. [and]
(e) a copy of the course application, schedule and course approval from the department[.], and
(f) copies of any other documents that are relative to the administration and documented record of the course shall be producible upon request by the department.

(iii) The course sponsor shall maintain the names, last known addresses, business telephone numbers, and qualifications of all faculty. This information shall be maintained on file for the duration of the faculty member's working association with the sponsor plus 5 years.

(10) Sponsor's Medical Director. Each course sponsor shall have a physician medical director, who shall be responsible for assuring the medical accuracy and medical appropriateness of the educational program and supervising all advanced life support course clinical and internship programs. The sponsor's medical director may delegate the medical direction of a specific course to another physician, provided that the department is notified in writing at least thirty days prior to the start of the course.

(11) Practical Skills [Examinations] <u>Evaluations</u>. The course sponsor shall follow the administrative procedures issued by the department for conducting the practical skills [examination] evaluations.

[(d)](12) The following requirements apply to [advanced life support] course sponsors and accredited paramedic course sponsors:

[(1)](i) Clinical Resources. Clinical affiliations shall be established and confirmed in written affiliation agreements with institutions and agencies that provide clinical experience under appropriate medical direction and clinical supervision. Students shall have access to patients who present common problems encountered in the delivery of [advanced] emergency care so that the students may meet the clinical objectives. Supervision in the clinical setting shall be provided by program instructors or hospital personnel, such as nurses or physicians, if they have been approved by the program to function in such roles. The ratio of instructors to students in the clinical facilities shall be no greater than 1:6.

[(2)](ii) Fair Operational Practices. Each sponsor shall have written policies which shall be approved by the department as being consistent with the curriculum, equitable in their treatment

of students and in compliance with the requirements of this Part. Such policies shall be issued to all students at the first course session, or earlier, covering each of the following subjects:

[(i)](a) clinical experience requirements and objectives, and

[(ii)](b) field internship experience requirements and objectives.

[(3) Evaluation. The annual review of test instruments and evaluation methods shall be conducted by the sponsor's medical director and one or more certified instructor coordinators.]

(13) Quality Assurance. Each course sponsor shall continuously work to improve the delivery of EMS education and shall:

(i) have records as specified by the department that the medical director have evaluated at least one course and participated in one education course review on content delivery, written evaluations, and best practices for EMS educational student learning experience. Such reviews and evaluations shall be conducted on an annual basis, at a minimum;

(ii) evaluate in the classroom environment each lead instructor and provide instructional feedback to the instructor, by a method approved by the department;

(iii) provide an opportunity to every student to complete an end of course student feedback survey, either electronically or on paper, by a method approved by the department;

(iv) provide an opportunity to every instructor and lab instructor to complete an end of course instructor feedback survey, either electronically or on paper, by a method approved by the department;

(v) complete a review of EMS educational delivery materials, including but not limited to, instructor feedback, student feedback, equipment evaluation, course delivery models, medical director feedback, previous improvement plans and develop a plan for continuous educational improvement. Such review shall be conducted on an annual basis, at a minimum;

(vi) provide all faculty opportunities, on an annual basis, for educational professional

development; and

(vii) all course sponsor surveys, periodic reviews, and any written evaluations and/or recommendations by the medical director may be stored electronically, must be maintained for a period of five years, and provided to the department upon request.

REGULATORY IMPACT STATEMENT

Statutory Authority:

Public Health Law (PHL) § 3002(2) authorizes the State Emergency Medical Services Council, subject to approval of the Commissioner of Health, to enact, and from time to time, amend and repeal, rules and regulations establishing minimum standards for ambulance services, ambulance service certification, advanced life support first response services, the provision of prehospital emergency medical care, public education, the development of a statewide emergency medical services system, the provision of ambulance services outside the primary territory specified in the ambulance services' certificate and the training, examination, and certification of certified first responders, emergency medical technicians, and advanced emergency medical technicians.

Legislative Objectives:

The legislative objective of PHL § 3002 is, in part, to protect the public health, safety and welfare by authorizing the State Emergency Medical Service Council (SEMSCO) to develop minimum training and certification standards for emergency medical service (EMS) providers.

Needs and Benefits:

The EMS industry is experiencing a shortage of certified EMS providers available to work. Over the past ten years, New York State has experienced a 10% decline in the number of certified EMS providers. The proposed changes to Part 800 of Title 10 of the Official Compilation of Codes, Rules and Regulations (NYCRR) are necessary to improve the overall educational experience that will ease barriers to recruitment of individuals seeking initial certification and provide improved quality requirements that will provide a better overall experience to support the retention of individuals. Specifically, the new requirements for initial certification increases the number of attempts to pass the written exam to be in line with the requirements of the National Registry of Emergency Medical Technicians. Additionally, the process for obtaining a certification through reciprocity has been streamlined and clarified. The requirements for recertification have been modified to allow a broader definition of continuous practice. In addition, it brings New York in line with industry educational changes over the last decade as well as puts similar expectations of quality on all the state's educational course sponsors. The proposed regulations would remove outdated standards and practices while providing better clarity for the Bureau of EMS and educational course sponsors and improving transparency for providers throughout the state. In particular, the course materials have been updated to remove outdated information and will be in line with the National Education Standard. The proposed changes also clarify the roles and responsibilities for course sponsors. The proposed changes encompass outlining new policies for course sponsors and guidance on retention of records. Lastly, the changes provide a path for quality assurance measures to ensure the highest level of delivery in EMS education.

These changes are a result of review and comment by the SEMSCO's Training and Education Committee.

Costs:

Costs for the Implementation of, and Continuing Compliance with the Regulation to the Regulated Entity:

This regulation imposes no new costs to regulated entities. Out-of-state EMS providers seeking to qualify for New York State certification would need to submit a non-refundable filing fee of up to \$99, as determined by the Department on the application. Currently, such fees are \$25 for

emergency medical responders or emergency medical technicians and \$50 for all other levels of certification.

Costs to State and Local Governments:

This regulation imposes no new costs or fees to state and local governments.

Costs to the Department of Health:

This regulation imposes no new costs to the Department of Health.

Local Government Mandates:

This regulation imposes no new mandates on local governments.

Paperwork:

This regulation results in a change to the paperwork and process for applicants seeking initial certification and recertification. However, these changes will streamline the process and make it easier for applicants applying for certification and recertification.

Duplication:

This regulation does not duplicate, overlap, or conflict with any existing state or federal rules or other legal requirements.

Alternatives:

The alternative to the proposed changes would be to allow the regulations to remain the same. This is not a viable option because the proposed changes will allow for increased retention; reciprocity from other states; and update the education of new and existing providers to current standards.

Federal Standards:

The regulations are consistent with applicable federal requirements and national standards.

Compliance Schedule:

This regulation will become effective upon publication of a Notice of Adoption in the New York

State Register.

Contact Person:

Katherine Ceroalo New York State Department of Health Bureau of Program Counsel, Regulatory Affairs Unit Corning Tower Building, Rm. 2438 Empire State Plaza Albany, New York 12237 (518) 473-7488 (518) 473-2019 (FAX) <u>REGSQNA@health.ny.gov</u>

STATEMENT IN LIEU OF REGULATORY FLEXIBILITY ANALYSIS

No regulatory flexibility analysis is required pursuant to section 202-(b)(3)(a) of the State Administrative Procedure Act. The proposed amendment does not impose an adverse economic impact on small businesses or local governments, and it does not impose reporting, record keeping or other compliance requirements on small businesses or local governments.

STATEMENT IN LIEU OF RURAL AREA FLEXIBILITY ANALYSIS

A Rural Area Flexibility Analysis for these amendments is not being submitted because the amendments will not impose any adverse impact or significant reporting, record keeping or other compliance requirements on public or private entities in rural areas. There are no professional services, capital, or other compliance costs imposed on public or private entities in rural areas as a result of the proposed amendments.

STATEMENT IN LIEU OF JOB IMPACT STATEMENT

A Job Impact Statement for these amendments is not being submitted because it is apparent from the nature and purposes of the amendments that they will not have a substantial adverse impact on jobs and/or employment opportunities.

ASSESSMENT OF PUBLIC COMMENT

The New York State Department of Health (NYSDOH or "the Department") published a Notice of Proposed Rulemaking in the State Register on December 6, 2023, regarding amendments to Part 800.3 to 800.20 of 10 New York Codes, Rules and Regulations (NYCRR) pertaining to certification, reciprocity, and education regulations for all levels of emergency medical services providers. The Department received six public comments from individuals. These comments and the Department's responses are summarized below.

Comment: Two commenters were in full support of the proposed regulations and did not provide any recommend changes to the proposed regulation.

Response: The Department thanks these commentors for their support. No changes to the regulation were necessary as a result of these comments.

Comment: A commenter disagreed with the proposed changes to remediation and additional attempts during a practical skills evaluation.

Response: While the Department understands the commenters remarks, the proposed changes to remediation and additional attempts during a practical skills evaluation will bring the Department's Bureau of Emergency Medical Services in line with National Registry Emergency Medical Technician requirements for a practical skills evaluation. This alignment of requirements will ensure consistency in practical skills evaluation requirements. No changes were made as a result of these comments.

Comment: A commenter was generally in support of the proposed amendments to the proposed regulations; however the commenter submitted specific questions and comments that largely requested clarification on the proposed regulations that would be too specific to include in regulation. For example, the commenter asked for clarification for a word change from "examination" to "evaluation," requested the Department's Bureau of Emergency Medical Services support instructor development, and asked for clarification on the inclusion of National Registry of Emergency Medical Technician tests would be applicable toward certification requirements. Furthermore, the commenter provided a suggestion for a change to section 800.6(d) that would clarify the additional attempts to pass an instructor level exam. Additionally, the commenter provided a suggestion for a change to section 800.8(d) to rectify a discrepancy in the length of time allowed to re-test between original certification and recertification candidates. Also, the commenter provided a recommendation for a change to section 800.9(d)(4) for the language to be updated to reflect other forms of submission aside from regular mail. Lastly, the commenter provided a suggestion for a change to section 800.10(a) for clarification on the time requirements for providers who have failed to pass the practical skills evaluation and the ability to test at a lower level of certification.

Response: The Department acknowledges the commenter's recommendations to various sections within the proposed regulations; however, the bulk of these comments are more appropriately explained in policy statements and Course Sponsor guidance documents. The Department will continue to work to ensure that explanations will be provided in policy statements and guidance documents at a later date. As a result of these comments, the Department has amended the proposed regulation to remove an improper reference to "certified instructor coordinator level and certified lab instructor level" that was accidentally included at

the end of language being added to section 800.6(d). The department also removed the reference to "postmarked" in section 800.9 to better contemplate other forms of submission aside from regular mail. Lastly, the proposed regulation has been amended to clarify that candidates who have failed to pass the practical skills evaluation after three attempts have the ability to test at a lower level of certification within one year after the end of the course date.

Comment: A commenter submitted a comment in opposition to the removal of EMT- Critical Care level from the proposed regulation.

Response: The Department worked in conjunction with the State Emergency Medical Services Committee to sunset this level of certification so that the providers within New York State are in concert with nationally recognized levels of provider. While the commenter's opposition is noted, the Department finds it necessary to proceed with sunsetting the EMT-Critical Care certification. No amendments were made as a result of these comments.

Comment: Another commenter was generally in support of the proposed regulations but requested clarification regarding the changes to recertification based on continuous medical education and reciprocity. The commenter also provided a suggestion for a change to section 800.6(d) to change the word "written" to "final" or other similar wording to allow for online or computer-based testing that the Bureau of Emergency Medical Services accepts. Lastly, the commenter provided a suggestion for a change to section 800.30(3) to modify language to allow time for the Regional Emergency Medical Services Councils (REMSCOs) to review course sponsor renewal applications.

Response: The Department finds that the requests for clarification made by the commenter will more appropriately be addressed and answered in policy statements and Course Sponsor guidance documents at a later date. The Department agrees with many of the suggested edits made by the commenter and the text of the proposed regulation has been modified to be inclusive of online or computer based final testing for providers.