

1 10A NCAC 13P .0101 is proposed for amendment as follows:

2

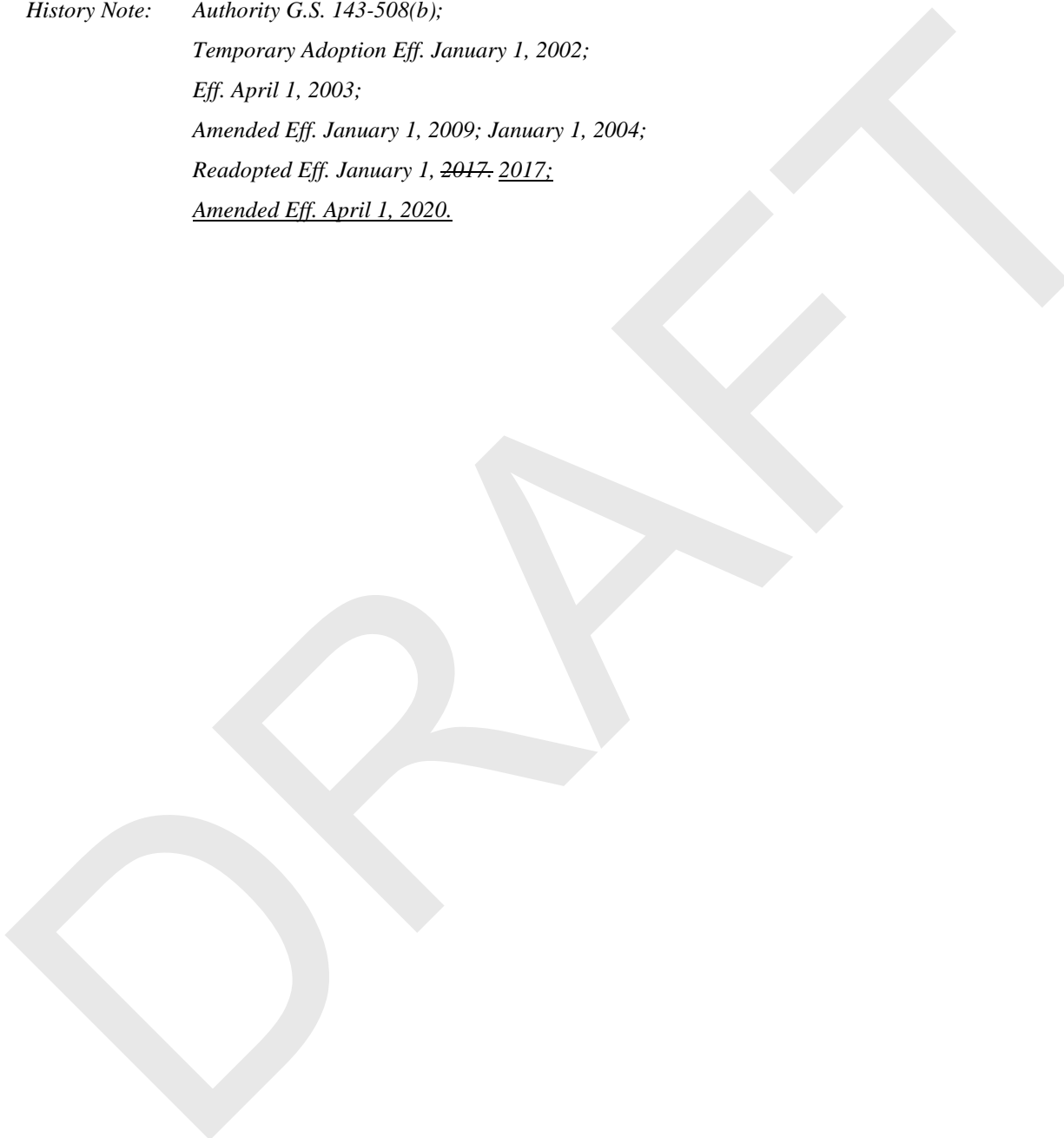
3 **10A NCAC 13P .0101 ABBREVIATIONS**

4 As used in this Subchapter, the following abbreviations mean:

- 5 (1) ACS: American College of Surgeons;
- 6 (2) AEMT: Advanced Emergency Medical Technician;
- 7 (3) AHA: American Heart Association;
- 8 (4) ASTM: American Society for Testing and Materials;
- 9 (5) CAAHEP: Commission on Accreditation of Allied Health Education Programs;
- 10 (6) CPR: Cardiopulmonary Resuscitation;
- 11 (7) ED: Emergency Department;
- 12 (8) EMD: Emergency Medical Dispatcher;
- 13 (9) EMR: Emergency Medical Responder;
- 14 (10) EMS: Emergency Medical Services;
- 15 (11) EMS-NP: EMS Nurse Practitioner;
- 16 (12) EMS-PA: EMS Physician Assistant;
- 17 (13) EMT: Emergency Medical Technician;
- 18 (14) FAA: Federal Aviation Administration;
- 19 ~~(15) FAR: Federal Aviation Regulation;~~
- 20 ~~(16)~~(15) FCC: Federal Communications Commission;
- 21 ~~(17) GCS: Glasgow Coma Scale;~~
- 22 ~~(18)~~(16) ICD: International Classification of Diseases;
- 23 ~~(19)~~(17) ISS: Injury Severity Score;
- 24 ~~(20) ICU: Intensive Care Unit;~~
- 25 ~~(21) IV: Intravenous;~~
- 26 ~~(22) LPN: Licensed Practical Nurse;~~
- 27 ~~(23)~~(18) MICN: Mobile Intensive Care Nurse;
- 28 ~~(24)~~(19) NHTSA: National Highway Traffic Safety Administration;
- 29 ~~(25)~~(20) OEMS: Office of Emergency Medical Services;
- 30 ~~(26)~~(21) OR: Operating Room;
- 31 ~~(27)~~(22) PSAP: Public Safety Answering Point;
- 32 ~~(28)~~(23) RAC: Regional Advisory Committee;
- 33 ~~(29)~~(24) RFP: Request For Proposal;
- 34 ~~(30) RN: Registered Nurse;~~
- 35 ~~(31)~~(25) SCTP: Specialty Care Transport Program;
- 36 ~~(32)~~(26) SMARTT: State Medical Asset and Resource Tracking Tool;
- 37 ~~(33)~~(27) STEMI: ST Elevation Myocardial Infarction; and

1       ~~(34)~~ ~~TR: Trauma Registrar;~~  
2       ~~(35)~~ ~~TPM: Trauma Program Manager; and~~  
3       ~~(36)~~(28) US DOT: United States Department of Transportation.  
4

5       *History Note:    Authority G.S. 143-508(b);*  
6                        *Temporary Adoption Eff. January 1, 2002;*  
7                        *Eff. April 1, 2003;*  
8                        *Amended Eff. January 1, 2009; January 1, 2004;*  
9                        *Readopted Eff. January 1, ~~2017.~~ 2017;*  
10                      *Amended Eff. April 1, 2020.*



1 10A NCAC 13P .0102 is proposed for amendment as follows:  
2

3 **10A NCAC 13P .0102 DEFINITIONS**

4 In addition to the definitions in G.S. 131E-155, the following definitions apply throughout this Subchapter:

- 5 (1) "Affiliated EMS Provider" means the firm, corporation, agency, organization, or association  
6 identified with a specific county EMS system as a condition for EMS Provider Licensing as required  
7 by Rule .0204 of this Subchapter.
- 8 (2) "Affiliated Hospital" means a non-trauma center hospital that is owned by the Trauma Center or  
9 there is a contract or other agreement to allow for the acceptance or transfer of the Trauma Center's  
10 patient population to the non-trauma center hospital.
- 11 (3) "Affiliate" or "Affiliation" means a reciprocal agreement and association that includes active  
12 participation, collaboration, and involvement in a process or system between two or more parties.
- 13 (4) "Alternative Practice Setting" means a practice setting that utilizes credentialed EMS personnel that  
14 may not be affiliated with or under the oversight of an EMS System or EMS System Medical  
15 Director.
- 16 (5) "Air Medical Ambulance" means an aircraft configured and medically equipped to transport patients  
17 by air. The patient care compartment of air medical ambulances shall be staffed by medical crew  
18 members approved for the mission by the Medical Director.
- 19 (6) "Air Medical Program" means a SCTP or EMS System utilizing rotary-wing or fixed-wing aircraft  
20 configured and operated to transport patients.
- 21 (7) "Assistant Medical Director" means a physician, EMS-PA, or EMS-NP who assists the Medical  
22 Director with the medical aspects of the management of a practice setting utilizing credentialed  
23 EMS personnel or medical crew members.
- 24 (8) "Bypass" means a decision made by the patient care technician to transport a patient from the scene  
25 of an accident or medical emergency past a receiving facility for the purposes of accessing a facility  
26 with a higher level of care, or a hospital of its own volition reroutes a patient from the scene of an  
27 accident or medical emergency or referring hospital to a facility with a higher level of care.
- 28 (9) "Community Paramedicine" means an EMS System utilizing credentialed personnel who have  
29 received additional training as determined by the EMS system Medical Director to provide  
30 knowledge and skills for the community needs beyond the 911 emergency response and transport  
31 operating guidelines defined in the EMS system plan.
- 32 (10) "Contingencies" mean conditions placed on a designation that, if unmet, may result in the loss or  
33 amendment of a designation.
- 34 (11) "Convalescent Ambulance" means an ambulance used on a scheduled basis solely to transport  
35 patients having a known non-emergency medical condition. Convalescent ambulances shall not be  
36 used in place of any other category of ambulance defined in this Subchapter.

- 1 (12) "Deficiency" means the failure to meet essential criteria for a designation that can serve as the basis  
2 for a focused review or denial of a designation.
- 3 (13) "Department" means the North Carolina Department of Health and Human Services.
- 4 (14) "Diversion" means the hospital is unable to accept a patient due to a lack of staffing or resources.
- 5 (15) "Educational Medical Advisor" means the physician responsible for overseeing the medical aspects  
6 of approved EMS educational programs.
- 7 (16) "EMS Care" means all services provided within each EMS System by its affiliated EMS agencies  
8 and personnel that relate to the dispatch, response, treatment, and disposition of any patient.
- 9 (17) "EMS Educational Institution" means any agency credentialed by the OEMS to offer EMS  
10 educational programs.
- 11 (18) "EMS Non-Transporting Vehicle" means a motor vehicle operated by a licensed EMS provider  
12 dedicated and equipped to move medical equipment and EMS personnel functioning within the  
13 scope of practice of an AEMT or Paramedic to the scene of a request for assistance. EMS  
14 nontransporting vehicles shall not be used for the transportation of patients on the streets, highways,  
15 waterways, or airways of the state.
- 16 (19) "EMS Peer Review Committee" means a committee as defined in G.S. 131E-155(6b).
- 17 (20) "EMS Performance Improvement Self-Tracking and Assessment of Targeted Statistics" means one  
18 or more reports generated from the State EMS data system analyzing the EMS service delivery,  
19 personnel performance, and patient care provided by an EMS system and its associated EMS  
20 agencies and personnel. Each EMS Performance Improvement Self-Tracking and Assessment of  
21 Targeted Statistics focuses on a topic of care such as trauma, cardiac arrest, EMS response times,  
22 stroke, STEMI (heart attack), and pediatric care.
- 23 (21) "EMS Provider" means those entities defined in G.S. 131E-155(13a) that hold a current license  
24 issued by the Department pursuant to G.S. 131E-155.1.
- 25 (22) "EMS System" means a coordinated arrangement of local resources under the authority of the county  
26 government (including all agencies, personnel, equipment, and facilities) organized to respond to  
27 medical emergencies and integrated with other health care providers and networks including public  
28 health, community health monitoring activities, and special needs populations.
- 29 (23) "Essential Criteria" means those items that are the requirements for the respective level of trauma  
30 center designation (I, II, or III), as set forth in Rule .0901 of this Subchapter.
- 31 (24) "Focused Review" means an evaluation by the OEMS of corrective actions to remove contingencies  
32 that are a result of deficiencies following a site visit.
- 33 (25) "Ground Ambulance" means an ambulance used to transport patients with traumatic or medical  
34 conditions or patients for whom the need for specialty care, emergency, or non-emergency medical  
35 care is anticipated either at the patient location or during transport.

- 1 (26) "Hospital" means a licensed facility as defined in G.S. 131E-176 or an acute care in-patient  
2 diagnostic and treatment facility located within the State of North Carolina that is owned and  
3 operated by an agency of the United States government.
- 4 ~~(27) "Immediately Available" means the physical presence of the health professional or the hospital~~  
5 ~~resource within the trauma center to evaluate and care for the trauma patient.~~
- 6 ~~(28)~~(27) "Inclusive Trauma System" means an organized, multi-disciplinary, evidence-based approach to  
7 provide quality care and to improve measurable outcomes for all defined injured patients. EMS,  
8 hospitals, other health systems, and clinicians shall participate in a structured manner through  
9 leadership, advocacy, injury prevention, education, clinical care, performance improvement, and  
10 research resulting in integrated trauma care.
- 11 ~~(29)~~(28) "Infectious Disease Control Policy" means a written policy describing how the EMS system will  
12 protect and prevent its patients and EMS professionals from exposure and illness associated with  
13 contagions and infectious disease.
- 14 ~~(30)~~(29) "Lead RAC Agency" means the agency (comprised of one or more Level I or II trauma centers) that  
15 provides staff support and serves as the coordinating entity for trauma planning.
- 16 ~~(31)~~(30) "Level I Trauma Center" means a hospital that has the capability of providing guidance, research,  
17 and total care for every aspect of injury from prevention to rehabilitation.
- 18 ~~(32)~~(31) "Level II Trauma Center" means a hospital that provides trauma care regardless of the severity of  
19 the injury, but may lack the comprehensive care as a Level I trauma center, and does not have trauma  
20 research as a primary objective.
- 21 ~~(33)~~(32) "Level III Trauma Center" means a hospital that provides assessment, resuscitation, emergency  
22 operations, and stabilization, and arranges for hospital transfer as needed to a Level I or II trauma  
23 center.
- 24 ~~(34) "Licensed Health Care Facility" means any health care facility or hospital licensed by the~~  
25 ~~Department of Health and Human Services, Division of Health Service Regulation.~~
- 26 ~~(35)~~(33) "Medical Crew Member" means EMS personnel or other health care professionals who are licensed  
27 or registered in North Carolina and are affiliated with a SCTP.
- 28 ~~(36)~~(34) "Medical Director" means the physician responsible for the medical aspects of the management of  
29 a practice setting utilizing credentialed EMS personnel or medical crew members, or a Trauma  
30 Center.
- 31 ~~(37)~~(35) "Medical Oversight" means the responsibility for the management and accountability of the medical  
32 care aspects of a practice setting utilizing credentialed EMS personnel or medical crew members.  
33 Medical Oversight includes physician direction of the initial education and continuing education of  
34 EMS personnel or medical crew members; development and monitoring of both operational and  
35 treatment protocols; evaluation of the medical care rendered by EMS personnel or medical crew  
36 members; participation in system or program evaluation; and directing, by two-way voice  
37 communications, the medical care rendered by the EMS personnel or medical crew members.

- 1 ~~(38)~~(36) "Mobile Integrated Healthcare" means utilizing credentialed personnel who have received  
2 additional training as determined by the Alternative Practice Setting medical director to provide  
3 knowledge and skills for the healthcare provider program needs.
- 4 ~~(39)~~—"Off line Medical Control" means medical supervision provided through the EMS System Medical  
5 Director or SCTP Medical Director who is responsible for the day to day medical care provided by  
6 EMS personnel. This includes EMS personnel education, protocol development, quality  
7 management, peer review activities, and EMS administrative responsibilities related to assurance of  
8 quality medical care.
- 9 ~~(40)~~(37) "Office of Emergency Medical Services" means a section of the Division of Health Service  
10 Regulation of the North Carolina Department of Health and Human Services located at 1201  
11 Umstead Drive, Raleigh, North Carolina 27603.
- 12 ~~(41)~~(38) "On-line Medical Control" means the medical supervision or oversight provided to EMS personnel  
13 through direct communication in-person, via radio, cellular phone, or other communication device  
14 during the time the patient is under the care of an EMS professional.
- 15 ~~(42)~~(39) "Operational Protocols" means the administrative policies and procedures of an EMS System or that  
16 provide guidance for the day-to-day operation of the system.
- 17 ~~(43)~~—"Participating Hospital" means a hospital that supplements care within a larger trauma system by  
18 the initial evaluation and assessment of injured patients for transfer to a designated trauma center if  
19 needed.
- 20 ~~(44)~~(40) "Physician" means a medical or osteopathic doctor licensed by the North Carolina Medical Board  
21 to practice medicine in the state of North Carolina.
- 22 ~~(45)~~(41) "Regional Advisory Committee" means a committee comprised of a lead RAC agency and a group  
23 representing trauma care providers and the community, for the purpose of regional planning,  
24 establishing, and maintaining a coordinated trauma system.
- 25 ~~(46)~~(42) "Request for Proposal" means a State document that must be completed by each hospital seeking  
26 initial or renewal trauma center designation.
- 27 ~~(47)~~(43) "Significant Failure to Comply" means a degree of non-compliance determined by the OEMS during  
28 compliance monitoring to exceed the ability of the local EMS System to correct, warranting  
29 enforcement action pursuant to Section .1500 of this Subchapter.
- 30 ~~(48)~~(44) "State Medical Asset and Resource Tracking Tool" means the Internet web-based program used by  
31 the OEMS both in its daily operations and during times of disaster to identify, record, and monitor  
32 EMS, hospital, health care, and sheltering resources statewide, including facilities, personnel,  
33 vehicles, equipment, and pharmaceutical and supply caches.
- 34 ~~(49)~~(45) "Specialty Care Transport Program" means a program designed and operated for the transportation  
35 of a patient by ground or air requiring specialized interventions, monitoring, and staffing by a  
36 paramedic who has received additional training as determined by the program Medical Director

1 beyond the minimum training prescribed by the OEMS, or by one or more other healthcare  
2 professional(s) qualified for the provision of specialized care based on the patient's condition.

3 ~~(50)~~(46) "Specialty Care Transport Program Continuing Education Coordinator" means a ~~Level I~~ Level  
4 II EMS Instructor within a SCTP who is responsible for the coordination of EMS continuing  
5 education programs for EMS personnel within the program.

6 ~~(51)~~(47) "Stretcher" means any wheeled or portable device capable of transporting a person in a recumbent  
7 position and may only be used in an ambulance vehicle permitted by the Department.

8 ~~(52)~~(48) "Stroke" means an acute cerebrovascular hemorrhage or occlusion resulting in a neurologic deficit.

9 ~~(53)~~(49) "System Continuing Education Coordinator" means the ~~Level I~~ Level II EMS Instructor designated  
10 by the local EMS System who is responsible for the coordination of EMS continuing education  
11 programs.

12 ~~(54)~~(50) "System Data" means all information required for daily electronic submission to the OEMS by all  
13 EMS Systems using the EMS data set, data dictionary, and file format as specified in "North  
14 Carolina College of Emergency Physicians: Standards for Medical Oversight and Data Collection,"  
15 incorporated herein by reference including subsequent amendments and editions. This document is  
16 available from the OEMS, 2707 Mail Service Center, Raleigh, North Carolina 27699- 2707, at no  
17 cost and online at [www.ncems.org](http://www.ncems.org) at no cost.

18 ~~(55)~~(51) "Trauma Center" means a hospital designated by the State of North Carolina and distinguished by  
19 its ability to manage, on a 24-hour basis, the severely injured patient or those at risk for severe  
20 injury.

21 ~~(56)~~ "Trauma Center Criteria" means essential criteria to define Level I, II, or III trauma centers.

22 ~~(57)~~ "Trauma Center Designation" means a process of approval in which a hospital voluntarily seeks to  
23 have its trauma care capabilities and performance evaluated by experienced on-site reviewers.

24 ~~(58)~~ "Trauma Diversion" means a trauma center of its own volition declines to accept an acutely injured  
25 patient due to a lack of staffing or resources.

26 ~~(59)~~ "Trauma Guidelines" mean standards for practice in a variety of situations within the trauma system.

27 ~~(60)~~ "Trauma Minimum Data Set" means the basic data required of all hospitals for submission to the  
28 Trauma Registry.

29 ~~(61)~~(52) "Trauma Patient" means any patient with an ICD-CM discharge diagnosis as defined in the "North  
30 Carolina Trauma Registry Data Dictionary," incorporated herein by reference, including subsequent  
31 amendments and editions. This document is available from the OEMS, 2707 Mail Service Center,  
32 Raleigh, North Carolina 27699-2707, at no cost and online at  
33 <https://www.ncdhhs.gov/dhsr/EMS/trauma/traumaregistry.html> at no cost.

34 ~~(62)~~(53) "Trauma Program" means an administrative entity that includes the trauma service and coordinates  
35 other trauma-related activities. It shall also include the trauma Medical Director, trauma program  
36 manager/trauma coordinator, and trauma registrar. This program's reporting structure shall give it

1 the ability to interact with at least equal authority with other departments in the hospital providing  
2 patient care.

3 ~~(63)~~(54) "Trauma Registry" means a disease-specific data collection composed of a file of uniform data  
4 elements that describe the injury event, demographics, pre-hospital information, diagnosis, care,  
5 outcomes, and costs of treatment for injured patients collected and electronically submitted as  
6 defined by the OEMS. The elements of the Trauma Registry can be accessed at  
7 <https://www.ncdhhs.gov/dhsr/EMS/trauma/traumaregistry.html> at no cost.

8 ~~(64)~~(55) "Treatment Protocols" means a document approved by the Medical Directors of the local EMS  
9 System, Specialty Care Transport Program, Alternative Practice Setting, or Trauma Center and the  
10 OEMS specifying the diagnostic procedures, treatment procedures, medication administration, and  
11 patient-care-related policies that shall be completed by EMS personnel or medical crew members  
12 based upon the assessment of a patient.

13 ~~(65)~~(56) "Triage" means the assessment and categorization of a patient to determine the level of EMS and  
14 healthcare facility based care required.

15 ~~(66)~~(57) "Water Ambulance" means a watercraft specifically configured and medically equipped to transport  
16 patients.

17  
18 *History Note: Authority G.S. 131E-155(6b); 131E-162; 143-508(b), 143-508(d)(1); 143-508(d)(2); 143- 508(d)(3);*  
19 *143-508(d)(4); 143-508(d)(5); 143-508(d)(6); 143-508(d)(7); 143-508(d)(8); 143- 508(d)(13);*  
20 *143-518(a)(5);*  
21 *Temporary Adoption Eff. January 1, 2002;*  
22 *Eff. April 1, 2003;*  
23 *Amended Eff. March 3, 2009 pursuant to E.O. 9, Beverly Perdue, March 3, 2009;*  
24 *Pursuant to G.S. 150B-21.3(c), a bill was not ratified by the General Assembly to disapprove this*  
25 *rule;*  
26 *Readopted Eff. January 1, 2017;*  
27 *Amended Eff. April 1, 2020; July 1, 2018.*



1 10A NCAC 13P .0501 is proposed for amendment as follows:

2  
3 **10A NCAC 13P .0501 EDUCATIONAL PROGRAMS**

4 (a) EMS educational programs that qualify credentialed EMS personnel to perform within their scope of practice shall  
5 be offered by an EMS educational institution as set forth in Section .0600 of this Subchapter, or by an EMS educational  
6 institution in another state where the education and credentialing requirements have been approved for legal  
7 recognition by the Department pursuant to G.S. 131E-159 as determined using the professional judgment of OEMS  
8 staff following comparison of out-of-state standards with the program standards set forth in this Rule.

9 (b) Educational programs approved to qualify EMS personnel for credentialing shall meet the educational content of  
10 the "US DOT NHTSA National EMS Education Standards," which is hereby incorporated by reference, including  
11 subsequent amendments and editions. This document is available online at no cost at [www.ems.gov/education.html](http://www.ems.gov/education.html).

12 (c) Educational programs approved to qualify EMS personnel for Advanced Emergency Medical Technician and  
13 Paramedic credentialing shall meet the requirements of Paragraph (b) of this Rule and possess verification of  
14 accreditation or a valid letter of review from the Commission on Accreditation of Allied Health Education Programs  
15 (CAAHEP) or other accrediting agency determined using the professional judgment of OEMS staff following a  
16 comparison of standards.

17 ~~(d)~~ (d) Educational programs approved to qualify EMD personnel for credentialing shall conform with the "ASTM  
18 F1258 – ~~95(2006)~~; 95(2014); Standard Practice for Emergency Medical 'Dispatch" incorporated by reference  
19 including subsequent amendments and editions. This document is available from ASTM International, 100 Barr  
20 Harbor Drive, PO Box C700, West Conshohocken, PA, 19428-2959 USA, at a cost of forty eight dollars ~~(\$40.00)~~  
21 (\$48.00) per copy.

22 ~~(e)~~ (e) Instructional methodology courses approved to qualify Level I EMS instructors shall conform with the "US  
23 DOT NHTSA 2002 National Guidelines for Educating EMS Instructors" incorporated by reference including  
24 subsequent amendments and additions. This document is available online at no cost at [www.ems.gov/education.html](http://www.ems.gov/education.html).

25 ~~(f)~~ (f) Continuing educational programs approved by the OEMS to qualify EMS personnel for renewal of credentials  
26 shall be approved by demonstrating the ability to assess cognitive competency in the skills and medications for the  
27 level of application as defined by the North Carolina Medical Board pursuant to G.S. 143-514.

28 ~~(g)~~ (g) Refresher courses shall comply with the requirements defined in Rule .0513 of this Section.  
29

30 *History Note: Authority G.S. 143-508(d)(3); 143-508(d)(4); 143-514;*

31 *Temporary Adoption Eff. January 1, 2002;*

32 *Eff. January 1, 2004;*

33 *Amended Eff. January 1, 2009;*

34 *Readoption Eff. January 1, ~~2017~~; 2017;*

35 *Amended Eff. April 1, 2020.*

1 10A NCAC 13P .0502 is proposed for amendment as follows:  
2

3 **10A NCAC 13P .0502 INITIAL CREDENTIALING REQUIREMENTS FOR EMR, EMT, AEMT,**  
4 **PARAMEDIC, AND EMD**

5 (a) In order to be credentialed by the OEMS as an EMR, EMT, AEMT, or Paramedic, individuals shall:

6 (1) be at least 18 years of age. An examination may be taken at age 17; however, the EMS credential  
7 shall not be issued until the applicant has reached the age of 18.

8 (2) complete an approved educational program as set forth in Rule ~~.0501(b)~~ .0501 of this Section for  
9 their level of application.

10 (A) effective July 1, 2023, individuals applying for a Paramedic credential shall have  
11 completed post-secondary level education equal to or exceeding an Associate Degree from  
12 a regionally accredited institution.

13 (B) individuals without an Associate Degree applying for a Paramedic credential shall be  
14 credentialed at the Advanced EMT (AEMT) level. Individuals will have the four year  
15 AEMT credential period to submit proof of an Associate Degree to apply for a Paramedic  
16 credential. Individuals that fail to submit proof of an Associate Degree prior to expiration  
17 of the AEMT credential shall be renewed at the AEMT after meeting requirements set forth  
18 in Rule .0504 of this Section, the Paramedic program shall become invalid, and the  
19 individual may only become eligible for Paramedic credentialing by repeating the  
20 requirements set forth in Rule .0501 of this Section.

21 (3) complete a scope of practice performance evaluation that uses performance measures based on the  
22 cognitive, psychomotor, and affective educational objectives set forth in Rule ~~.0501(b)~~ .0501 of this  
23 Section and that is consistent with their level of application, and approved by the OEMS. This scope  
24 of practice evaluation shall be completed no more than one year prior to examination. This  
25 evaluation shall be conducted by a Level I or Level II EMS Instructor credentialed at or above the  
26 level of application or under the direction of the primary credentialed EMS instructor or educational  
27 medical advisor for the approved educational program.

28 (4) within 90 days from their course graded date as reflected in the OEMS credentialing database,  
29 complete a written examination administered by the OEMS. If the applicant fails to register and  
30 complete a written examination within the 90 day period, the applicant shall obtain a letter of  
31 authorization to continue eligibility for testing from his or her EMS Educational Institution's  
32 program coordinator to qualify for an extension of the 90 day requirement set forth in this Paragraph.  
33 If the EMS Educational Institution's program coordinator declines to provide a letter of  
34 authorization, the applicant shall be disqualified from completing the credentialing process.  
35 Following a review of the applicant's specific circumstances, OEMS staff will determine, based on  
36 professional judgment, if the applicant qualifies for EMS credentialing eligibility. The OEMS shall  
37 notify the applicant in writing within 10 business days of the decision.

1 (A) a maximum of three attempts within ~~nine~~ six months shall be allowed.

2 (B) ~~if the individual fails to pass a written examination, the individual may continue eligibility~~  
 3 ~~for examination for an additional three attempts within the following nine months by~~  
 4 ~~submitting to the OEMS evidence the individual repeated a course specific scope of~~  
 5 ~~practice evaluation as set forth in Subparagraph (a)(3) of this Rule, and evidence of~~  
 6 ~~completion of a refresher course as set forth in Rule .0513 of this Section for the level of~~  
 7 ~~application; or~~

8 ~~(C)(B)~~ if unable to pass the written examination requirement after ~~six~~ three attempts ~~within an 18~~  
 9 ~~a six month period following course grading date as reflected in the OEMS credentialing~~  
 10 ~~database, the educational program shall become invalid and the individual may only~~  
 11 ~~become eligible for credentialing by repeating the requirements set forth in Rule .0501 of~~  
 12 ~~this Section.~~

13 (5) submit to a criminal background history check as set forth in Rule .0511 of this Section.

14 (6) submit evidence of completion of all court conditions resulting from any misdemeanor or felony  
 15 conviction(s).

16 (b) An individual seeking credentialing as an EMR, ~~EMT, AEMT or Paramedic~~ EMT may qualify for initial  
 17 credentialing under the legal recognition option set forth in G.S. 131E-159(c).

18 (c) An individual seeking credentialing as an AEMT or Paramedic may qualify for initial credentialing under the legal  
 19 recognition option set forth in G.S. 131E-159(c) and:

20 (1) the completed courses must be from a CAAHEP Accredited program.

21 (2) effective July 1, 2023, individuals seeking a Paramedic Credential shall possess a minimum of an  
 22 Associate's degree from a regionally accredited institution.

23 (3) individuals not possessing minimum of an Associate's degree shall be credentialed at the Advanced  
 24 EMT Level (AEMT). Individuals will have no more than four years from the OEMS date of  
 25 approved legal recognition to submit proof of an Associate Degree to apply for a Paramedic  
 26 credential. Individuals that fail to submit proof of an Associate Degree after four years from the  
 27 approved legal recognition date shall be renewed at the AEMT after meeting requirements set forth  
 28 in Rule .0504 of this Section, the educational program shall become invalid, and the individual may  
 29 only become eligible for Paramedic credentialing by repeating the requirements set forth in Rule  
 30 .0501 of this Section.

31 ~~(e)(d)~~ In order to be credentialed by the OEMS as an EMD, individuals shall:

32 (1) be at least 18 years of age;

33 (2) complete the educational requirements set forth in Rule ~~.0501(e)~~ .0501 of this Section;

34 (3) complete, within one year prior to application, an AHA CPR course or a course determined by the  
 35 OEMS to be equivalent to the AHA CPR course, including infant, child, and adult CPR;

36 (4) submit to a criminal background history check as defined in Rule .0511 of this Section;

1 (5) submit evidence of completion of all court conditions resulting from any misdemeanor or felony  
2 conviction(s); and

3 (6) possess an EMD nationally recognized credential pursuant to G.S. 131E-159(d).

4 ~~(d)~~(e) Pursuant to G.S. 131E-159(h), the Department shall not issue an EMS credential for any person listed on the  
5 Department of Public Safety, Sex Offender and Public Protection Registry, or who was convicted of an offense that  
6 would have required registration if committed at a time when registration would have been required by law.

7  
8 *History Note: Authority G.S. 131E-159(a); 131E-159(b); 131E-159(g); 131E-159(h); 143-508(d)(3); 143B-952;*  
9 *Temporary Adoption Eff. January 1, 2002;*

10 *Eff. February 1, 2004;*

11 *Amended Eff. January 1, 2009;*

12 *Readopted Eff. January 1, ~~2017~~ 2017;*

13 *Amended Eff. April 1, 2020.*

1 10A NCAC 13P .0507 is proposed for amendment as follows:

2  
3 **10A NCAC 13P .0507 INITIAL CREDENTIALING REQUIREMENTS FOR LEVEL I EMS**  
4 **INSTRUCTORS**

5 (a) Applicants for credentialing as a Level I EMS Instructor shall:

- 6 (1) be currently credentialed by the OEMS as an EMT, AEMT, or Paramedic;
- 7 ~~(2)~~ effective July 1, 2023, have completed post-secondary level education equal to or exceeding a  
8 minimum of an Associate Degree from a regionally accredited institution;
- 9 ~~(2)(3)~~ have three years experience at the scope of practice for the level of application;
- 10 ~~(3)(4)~~ within one year prior to application, complete an in-person evaluation that demonstrates the  
11 applicant's ability to provide didactic and clinical instruction based on the cognitive, psychomotor,  
12 and affective educational objectives in ~~Rule .0501(b)~~ Rule .0501 of this Section consistent with their  
13 level of application and approved by the OEMS:
- 14 (A) for a credential to teach at the EMT level, this evaluation shall be conducted under the  
15 direction of a Level II EMS Instructor credentialed at or above the level of application; and
- 16 (B) for a credential to teach at the AEMT or Paramedic level, this evaluation shall be conducted  
17 under the direction of the educational medical advisor, or a Level II EMS Instructor  
18 credentialed at or above the level of application and designated by the educational medical  
19 advisor;
- 20 ~~(4)(5)~~ have 100 hours of teaching experience at or above the level of application in an approved EMS  
21 educational program or a program determined by OEMS staff in their professional judgment  
22 equivalent to an EMS education program;
- 23 ~~(5)(6)~~ complete an educational program as described in ~~Rule .0501(d)~~ Rule .0501 of this Section; and  
24 ~~(6)(7)~~ within one year prior to application, attend an OEMS Instructor workshop sponsored by the OEMS.  
25 A listing of scheduled OEMS Instructor workshops is available from the OEMS  
26 at <https://eis.emspic.org/CIS/Go>; and <https://www2.ncdhhs.gov/dhsr/ems>.
- 27 ~~(7)~~ have a high school diploma or General Education Development certificate.

28 (b) An individual seeking credentialing for Level I EMS Instructor may qualify for initial credentialing under the  
29 legal recognition option defined in G.S. 131E-159(c).

30 (c) The credential of a Level I EMS Instructor shall be valid for four years, or less pursuant to G.S. 131E-159(c)  
31 unless any of the following occurs:

- 32 (1) the OEMS imposes an administrative action against the instructor credential; or
- 33 (2) the instructor fails to maintain a current EMT, AEMT, or Paramedic credential at the highest level  
34 that the instructor is approved to teach.

35 (d) Pursuant to the provisions of G.S. 131E-159(h), the Department shall not issue an EMS credential for any person  
36 listed on the Department of Public Safety, Sex Offender and Public Protection Registry, or who was convicted of an

1 offense that would have required registration if committed at a time when registration would have been required by  
2 law.

3

4 *History Note:* Authority G.S. 131E-159; 143-508(d)(3);  
5 Temporary Adoption Eff. January 1, 2002;  
6 Eff. February 1, 2004;  
7 Amended Eff. January 1, 2009;  
8 Readopted Eff. January 1, ~~2017~~ 2017;  
9 Amended April 1, 2020.

1 10A NCAC 13P .0508 is proposed for amendment as follows:

2  
3 **10A NCAC 13P .0508 INITIAL CREDENTIALING REQUIREMENTS FOR LEVEL II EMS**  
4 **INSTRUCTORS**

5 (a) Applicants for credentialing as a Level II EMS Instructor shall:

6 (1) be currently credentialed by the OEMS as an EMT, AEMT, or Paramedic;

7 ~~(2)~~ be currently credentialed by the OEMS as a Level I Instructor at the EMT, AEMT, or Paramedic  
8 level;

9 ~~(2)(3)~~ effective July 1, 2023, have completed post-secondary level education equal to or exceeding an  
10 Associate Degree; a Bachelor's Degree from a regionally accredited institution;

11 ~~(3)(4)~~ within one year prior to application, complete an in-person evaluation that demonstrates the  
12 applicant's ability to provide didactic and clinical instruction based on the cognitive, psychomotor,  
13 and affective educational objectives in Rule ~~.0501(b)~~ .0501 of this Section consistent with their level  
14 of application and approved by the OEMS:

15 (A) for a credential to teach at the EMT level, this evaluation shall be conducted under the  
16 direction of a Level II EMS Instructor credentialed at or above the level of application; and

17 (B) for a credential to teach at the AEMT or Paramedic level, this evaluation shall be conducted  
18 under the direction of the educational medical advisor, or a Level II EMS Instructor  
19 credentialed at or above the level of application and designated by the educational medical  
20 advisor;

21 ~~(4)(5)~~ within one year prior to application, have a minimum two concurrent years teaching experience as  
22 a Level I EMS Instructor at or above the level of application application, or as a Level II EMS  
23 Instructor at a lesser credential level applying for a higher level in an approved EMS  
24 educational program program, or teaching experience determined by OEMS staff in their  
25 professional judgment to be equivalent to an EMS Level I education program;

26 ~~(5)(6)~~ complete the "EMS Education Administration Course" conducted by a North Carolina Community  
27 College or the National Association of EMS Educators Level II Instructor ~~Course; Course, that shall~~  
28 remain valid for the duration of the current Instructor credential; and

29 ~~(6)(7)~~ within one year prior to application, attend an OEMS Instructor workshop sponsored by the OEMS.  
30 A listing of scheduled OEMS Instructor workshops is available from the OEMS  
31 at ~~https://eis.emspic.org/CIS/Go.~~ https://www2.ncdohhs.gov/dhsr/ems.

32 (b) An individual seeking credentialing for Level II EMS Instructor may qualify for initial credentialing under the  
33 legal recognition option defined in G.S. 131E-159(c).

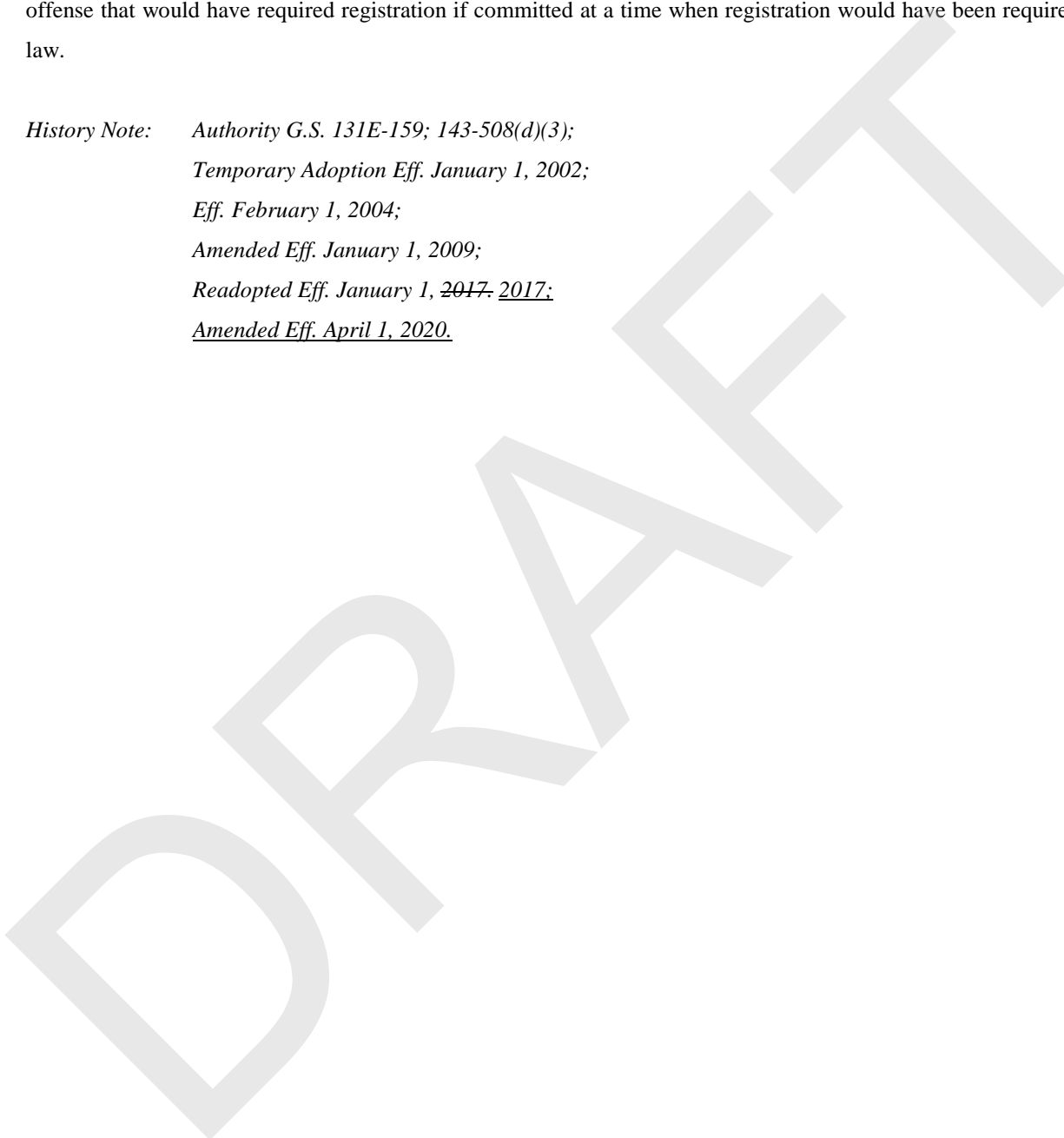
34 (c) The credential of a Level II EMS Instructor is valid for four years, or less pursuant to G.S. 131E-159(c) unless  
35 any of the following occurs:

36 (1) the OEMS imposes an administrative action against the instructor credential; or

1           (2)     the instructor fails to maintain a current EMT, AEMT, or Paramedic credential at the highest level  
2                     that the instructor is approved to teach.

3     (d) Pursuant to the provisions of G.S. 131E-159(h) the Department shall not issue an EMS credential for any person  
4     listed on the Department of Public Safety, Sex Offender and Public Protection Registry, or who was convicted of an  
5     offense that would have required registration if committed at a time when registration would have been required by  
6     law.

7  
8     *History Note:*     *Authority G.S. 131E-159; 143-508(d)(3);*  
9                     *Temporary Adoption Eff. January 1, 2002;*  
10                    *Eff. February 1, 2004;*  
11                    *Amended Eff. January 1, 2009;*  
12                    *Readopted Eff. January 1, ~~2017~~ 2017;*  
13                    *Amended Eff. April 1, 2020.*





1 10A NCAC 13P .0510 is proposed for amendment as follows:

2  
3 **10A NCAC 13P .0510 RENEWAL OF CREDENTIALS FOR LEVEL I AND LEVEL II EMS**  
4 **INSTRUCTORS**

5 (a) Level I and Level II EMS Instructor applicants shall renew credentials by presenting documentation to the OEMS  
6 that they:

- 7 (1) are credentialed by the OEMS as an EMT, AEMT or Paramedic;
- 8 (2) within one year prior to application, complete an evaluation that demonstrates the applicant's ability  
9 to provide didactic and clinical instruction based on the cognitive, psychomotor, and affective  
10 educational objectives in Rule ~~.0501(b)~~ .0501 of this Section consistent with their level of  
11 application and approved by the OEMS:
- 12 (A) to renew a credential to teach at the EMT level, this evaluation shall be conducted under  
13 the direction of a Level II EMS Instructor credentialed at or above the level of application;  
14 and
- 15 (B) to renew a credential to teach at the AEMT or Paramedic level, this evaluation shall be  
16 conducted under the direction of the educational medical advisor, or a Level II EMS  
17 Instructor credentialed at or above the level of application and designated by the  
18 educational medical advisor;
- 19 (3) ~~completed 96 hours of EMS instruction at the level of application; and application. Individuals~~  
20 identified as EMS Program coordinators or positions determined by OEMS staff in the professional  
21 judgment to the equivalent to an EMS Program coordinator may provide up to 72 hours related to  
22 the institution's needs, with the remaining 24 hours in EMS instruction;
- 23 (4) completed 24 hours of educational professional development as defined by the educational  
24 institution that provides for:
- 25 (A) enrichment of knowledge;
- 26 (B) development or change of attitude in students; or
- 27 (C) acquisition or improvement of skills; and
- 28 (5) within one year prior to renewal application, attend an OEMS Instructor workshop sponsored by the  
29 OEMS.

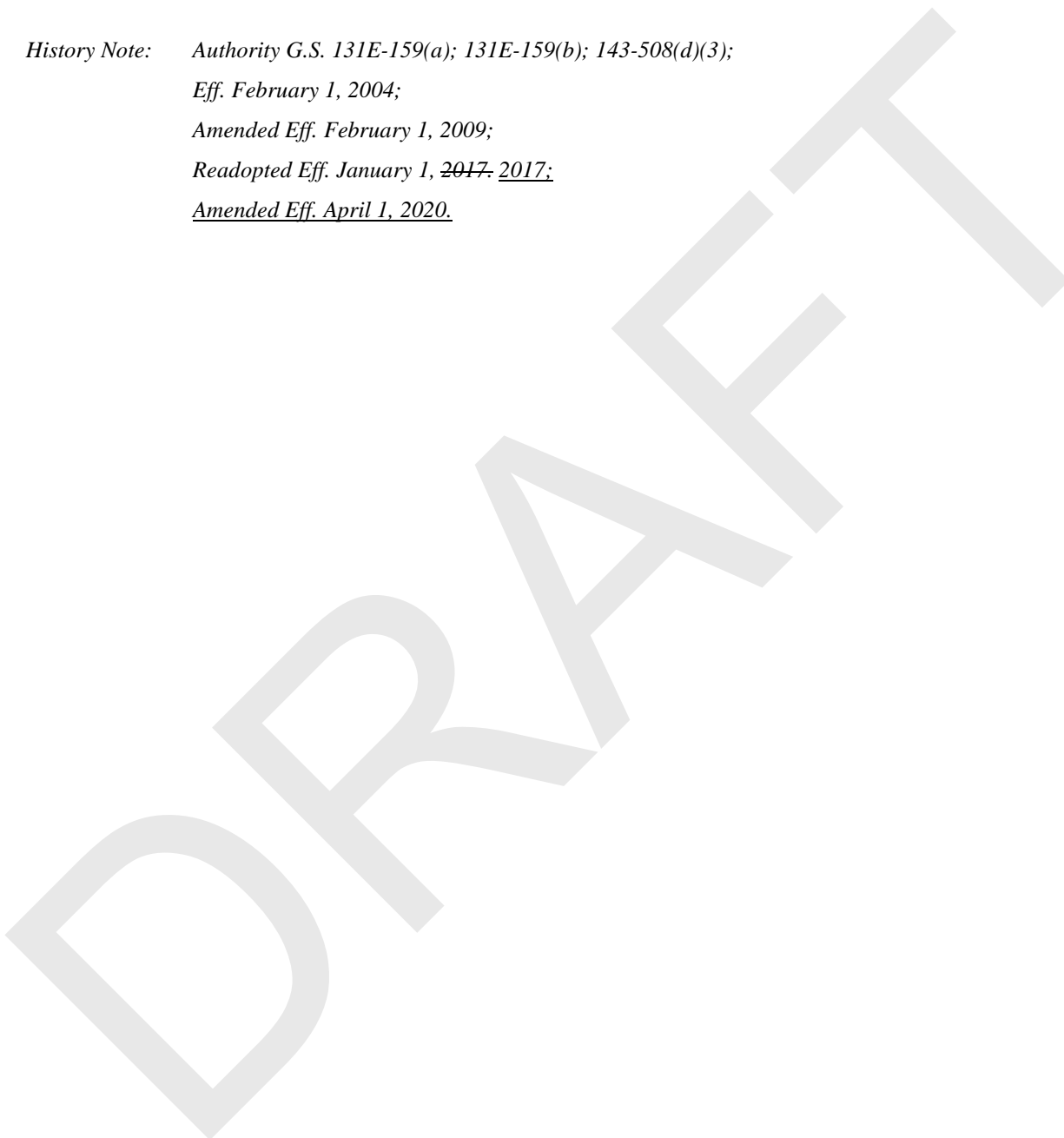
30 (b) An individual may renew a Level I or Level II EMS Instructor credential under the legal recognition option defined  
31 in G.S. 131E-159(c).

32 (c) The credential of a Level I or Level II EMS Instructor is valid for four years, or less pursuant to G.S. 131E159(c)  
33 unless any of the following occurs:

- 34 (1) the OEMS imposes an administrative action against the instructor credential; or
- 35 (2) the instructor fails to maintain a current EMT, AEMT, or Paramedic credential at the highest level  
36 that the instructor is approved to teach.

1 (d) Pursuant to the provisions of G.S. 131E-159(h), the Department shall not issue an EMS credential for any person  
2 listed on the Department of Public Safety, Sex Offender and Public Protection Registry, or who was convicted of an  
3 offense that would have required registration if committed at a time when registration would have been required by  
4 law.

5  
6 *History Note: Authority G.S. 131E-159(a); 131E-159(b); 143-508(d)(3);*  
7 *Eff. February 1, 2004;*  
8 *Amended Eff. February 1, 2009;*  
9 *Readopted Eff. January 1, ~~2017~~ 2017;*  
10 *Amended Eff. April 1, 2020.*



1 10A NCAC 13P .0511 is proposed for amendment as follows:

2  
3 **10A NCAC 13P .0511 CRMINAL HISTORIES**

4 (a) The criminal background histories for all individuals who apply for, seek to renew, or hold EMS credentials shall  
5 be reviewed pursuant to G.S. 131E-159(g).

6 (b) In addition to Paragraph (a) of this Rule, the OEMS shall carry out the following for all EMS Personnel whose  
7 primary residence is outside North Carolina, individuals who have resided in North Carolina for 60 months or less,  
8 and individuals under investigation by the OEMS ~~who~~ or have been found to have relevant convictions or pending  
9 charges or indictments through the Administrative Office of the Courts may be subject to administrative enforcement  
10 action by the Department under the provisions of Rule .1507 of this Subchapter:

- 11 (1) obtain a signed consent form for a criminal history check;
- 12 (2) obtain fingerprints on an SBI identification card or live scan electronic fingerprinting system at an  
13 agency approved by the North Carolina Department of Public Safety;
- 14 (3) obtain the criminal history from the Department of Public Safety; and
- 15 (4) collect any processing fees from the individual identified in Paragraph (a) or (b) of this Rule as  
16 required by the Department of Public Safety pursuant to G.S. 143B-952 prior to conducting the  
17 criminal history background check.

18 (c) An individual who makes application for renewal of a current EMS credential or advancement to a higher level  
19 EMS credential who has previously submitted a criminal background history through the OEMS within the last 12  
20 months as required under the criteria contained in Paragraph (b) of this Rule may be exempt from the residency  
21 requirements of Paragraph (b) of this Rule if determined by OEMS that no other circumstances warrant another  
22 criminal history check as set forth in Paragraph (b) of this Rule.

23 (d) An individual shall not be eligible for initial or renewal of EMS credentials if the applicant refuses to consent to  
24 any criminal history check as required by G.S. 131E-159(g). Since payment is required before the fingerprints may be  
25 processed by the Department of Public Safety, failure of the applicant or credentialed EMS personnel to pay the  
26 required fee in advance shall be considered a refusal to consent for the purposes of issuance or retention of an EMS  
27 credential.

28  
29 *History Note: Authority G.S. 131E-159(g); 143-508(d)(3); 143-508(10); 143B-952;*

30 *Eff. January 1, 2009;*

31 *Amended Eff. January 1, 2013;*

32 *Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. February 2,*  
33 *2016;*

34 *Amended Eff. April 1, 2020; January 1, 2017.*

1 10A NCAC 13P .0512 is proposed for amendment as follows:

2  
3 **10A NCAC 13P .0512 REINSTATEMENT OF LAPSED EMS CREDENTIAL**

4 (a) EMS personnel enrolled in an OEMS approved continuing education program as set forth in Rule .0601 of this  
5 Subchapter and that was eligible for renewal of an EMS credential prior to expiration, may request the EMS  
6 educational institution submit documentation of the continuing education record to the OEMS. OEMS shall renew  
7 the EMS credential to be valid for four years from the previous expiration date.

8 (b) An individual with a lapsed North Carolina EMS credential is eligible for reinstatement through the legal  
9 recognition option defined in G.S. 131E-159(c) and Rule .0502 of this Section.

10 (c) EMR, EMT, AEMT, and Paramedic applicants for reinstatement of an EMS credential, lapsed up to ~~24~~ six months,  
11 shall:

- 12 (1) be ineligible for legal recognition pursuant to G.S. 131E-159(c);  
13 (2) be a resident of North Carolina or affiliated with a North Carolina EMS Provider;  
14 (3) at the time of application, present evidence that renewal education requirements were met prior to  
15 expiration or complete a refresher course at the level of application taken following expiration of  
16 the credential;  
17 (4) ~~EMRs and EMTs~~ shall complete an OEMS administered written examination for the individual's  
18 level of credential application;  
19 (5) undergo a criminal history check performed by the OEMS; and  
20 (6) submit evidence of completion of all court conditions resulting from applicable misdemeanor or  
21 felony conviction(s).

22 ~~(d) EMR and EMT applicants for reinstatement of an EMS credential, lapsed more than 24 months, must:~~

- 23 ~~(1) be ineligible for legal recognition pursuant to G.S. 131E-159(c); and~~  
24 ~~(2) meet the provisions for initial credentialing set forth in Rule .0502 of this Section~~

25 ~~(e) AEMT and Paramedic applicants for reinstatement of an EMS credential, lapsed between 24 and 48 months, shall:~~

- 26 ~~(1) be ineligible for legal recognition pursuant to G.S. 131E-159(c);~~  
27 ~~(2) be a resident of North Carolina or affiliated with a North Carolina EMS Provider;~~  
28 ~~(3) present evidence of completion of a refresher course at the level of application taken following~~  
29 ~~expiration of the credential;~~  
30 ~~(4) complete an OEMS administered written examination for the individuals level of credential~~  
31 ~~application;~~  
32 ~~(5) undergo a criminal history check performed by the OEMS; and~~  
33 ~~(6) submit evidence of completion of all court conditions resulting from applicable misdemeanor or~~  
34 ~~felony conviction(s).~~

35 ~~(d)~~ EMR, EMT, AEMT, and Paramedic applicants for reinstatement of an EMS credential, lapsed more  
36 than ~~48~~ six months, shall:

- 37 (1) be ineligible for legal recognition pursuant to G.S. 131E-159(c); and

1 (2) meet the provisions for initial credentialing set forth in Rule .0502 of this Section.

2 (e) EMT, AEMT, and Paramedic applicants for reinstatement of an EMS Instructor Credential, lapsed up to six  
3 months, shall:

4 (1) be ineligible for legal recognition pursuant to G.S. 131E-159(c);

5 (2) be a resident of North Carolina or affiliated with a North Carolina EMS Provider; and

6 (3) at the time of application, present evidence that renewal requirements were met prior to expiration  
7 or within six months following the expiration of the Instructor credential.

8 (f) EMT, AEMT, and Paramedic applicants for reinstatement of an EMS Instructor credential, lapsed greater than six  
9 months, shall:

10 (1) be ineligible for legal recognition pursuant to G.S. 131E-159(c) ; and

11 (2) meet the requirements for initial Instructor credentialing set forth in Rules .0507 and .0508 of this  
12 Section.

13 (g) EMD applicants shall renew a lapsed credential by meeting the requirements for initial credentialing set forth in  
14 Rule .0502 of this Section.

15 (h) Pursuant to G.S. 131E-159(h), the Department shall not issue or renew an EMS credential for any person listed  
16 on the Department of Public Safety, Sex Offender and Public Protection Registry, or who was convicted of an offense  
17 that would have required registration if committed at a time when registration would have been required by law.

18  
19 *History Note: Authority G.S. 131E-159; 143-508(d)(3); 143B-952;*  
20 *Eff. January 1, 2017. 2017;*  
21 *Amended Eff. April 1, 2020.*

1 10A NCAC 13P .0601 is proposed for amendment as follows:

2

3 **10A NCAC 13P .0601 CONTINUING EDUCATION EMS EDUCATIONAL INSTITUTION**  
 4 **REQUIREMENTS**

5 (a) Continuing Education EMS Educational Institutions shall be credentialed by the OEMS to provide EMS  
 6 continuing education programs. An application for credentialing as an approved EMS continuing education institution  
 7 shall be submitted to the OEMS for review.

8 (b) Continuing Education EMS Educational Institutions shall have:

9 (1) at least a ~~Level I~~ Level II EMS Instructor as program coordinator and shall hold a ~~Level I~~ Level II  
 10 EMS Instructor credential at a level equal to or greater than the highest level of continuing education  
 11 program ~~offered in the EMS System or Specialty Care Transport Program;~~ offered;

12 (2) a continuing education program shall be consistent with the services offered by the EMS System or  
 13 Specialty Care Transport Program;

14 (A) In an EMS System, the continuing education programs shall be reviewed and approved by  
 15 the system continuing education coordinator and Medical Director; and

16 (B) In a Specialty Care Transport Program, the continuing education program shall be reviewed  
 17 and approved by Specialty Care Transport Program Continuing Education Coordinator and  
 18 the Medical Director;

19 (3) written educational policies and procedures to include each of the following;

20 (A) the delivery of educational programs in a manner where the content and material is  
 21 delivered to the intended audience, with a limited potential for exploitation of such content  
 22 and material;

23 (B) the record-keeping system of student attendance and performance;

24 (C) the selection and monitoring of EMS instructors; and

25 (D) student evaluations of faculty and the program's courses or components, and the frequency  
 26 of the evaluations;

27 (4) access to instructional supplies and equipment necessary for students to complete educational  
 28 programs as defined in Rule ~~.0501(b)~~ .0501 of this Subchapter;

29 (5) meet at a minimum, the educational program requirements as defined in Rule ~~.0501(e)~~ .0501 of this  
 30 Subchapter;

31 (6) Upon request, the approved EMS continuing education institution shall provide records to the  
 32 OEMS in order to verify compliance and student eligibility for credentialing; and

33 (7) unless accredited in accordance with Rule .0605 of this Section, approved education institution  
 34 credentials are valid for a period not to exceed four years.

35 (c) Program Coordinators shall attend an OEMS Program Director workshop annually. A listing of scheduled OEMS  
 36 Program Coordinator Workshops is available at <https://www2.ncdhhs.gov/dhsr/ems>.

1 ~~(e)~~(d) Assisting physicians delegated by the EMS System Medical Director as authorized by Rule ~~.0403(b)~~ .0403 of  
2 this Subchapter or SCTP Medical Director as authorized by Rule ~~.0404(b)~~ .0404 of this Subchapter for provision of  
3 medical oversight of continuing education programs must meet the Education Medical Advisor criteria as defined in  
4 the "North Carolina College of Emergency Physicians: Standards for Medical Oversight."  
5

6 *History Note: Authority G.S. 143-508(d)(4); 143-508(d)(13);*

7 *Temporary Adoption Eff. January 1, 2002;*

8 *Eff. January 1, 2004;*

9 *Amended Eff. January 1, 2009;*

10 *Readopted Eff. January 1, ~~2017~~ 2017;*

11 *Amended Eff. April 1, 2020.*

1 10A NCAC 13P .0602 is proposed for amendment as follows:

2  
3 **10A NCAC 13P .0602 BASIC AND ADVANCED EMS EDUCATIONAL INSTITUTION**  
4 **REQUIREMENTS**

5 (a) Basic and Advanced EMS Educational Institutions may offer educational programs for which they have been  
6 credentialed by the OEMS.

7 (1) EMS Educational Institutions shall complete a minimum of two initial courses for each educational  
8 program approved for the Educational Institution's credential approval period.

9 (2) EMS Educational Institutions failing to complete two initial courses for each educational program  
10 approved may be reduced to the next lowest Institutional Level as determined by OEMS staff in  
11 their professional judgment.

12 (b) For initial courses, Basic EMS Educational Institutions shall meet all of the requirements for continuing EMS  
13 educational institutions defined in Rule .0601 of this Section and shall have:

14 (1) credentialing courses shall be delivered in a traditional or blended method as defined by the North  
15 Carolina Community College Instructional Delivery Method Codes, incorporated herein by  
16 reference including subsequent amendments and editions. This document is available at no cost at  
17 <https://www.nccommunitycolleges.edu/colleges>;

18 ~~(1)~~ (2) at least a Level I EMS Instructor as each lead course instructor for EMR and EMT courses. The lead  
19 course instructor must be credentialed at a level equal to or higher than the course offered; and shall  
20 be responsible for delivering fifty percent of the didactic content for each assigned course;

21 ~~(2)~~ (3) a lead EMS educational program coordinator. This individual may be either shall be a Level II EMS  
22 Instructor credentialed at or above the highest level of course offered by the institution, or a  
23 combination of staff who cumulatively meet the requirements of the Level II EMS Instructor set  
24 forth in this Subparagraph. These individuals may share the responsibilities of the lead EMS  
25 educational coordinator. The details of this option shall be defined in the educational plan required  
26 in Subparagraph (b)(5) of this Rule; institution, and;

27 (A) have EMS or related allied health education, training, and experience;

28 (B) be knowledgeable about methods of instruction, testing, and evaluation of students;

29 (C) have field experience in the delivery of pre-hospital emergency care;

30 (D) have academic training and preparation related, at least equivalent to that of a paramedic;

31 (E) be knowledgeable of current versions of the National EMS Scope of Practice and National  
32 EMS Education Standards, as defined by USDOT NHTSA National EMS Guidelines and  
33 pursuant to Rule .0501 of this Section, and evidenced-informed clinical practice.

34 (4) the lead EMS educational program coordinator is responsible for the following:

35 (A) the administrative oversight, organization, and supervision of the program;

36 (B) the continuous quality review and improvement of the program;

37 (C) the long range planning on ongoing development of the program;



- (D) evaluating the effectiveness of the instruction, faculty, and overall program;
- (E) the collaborative involvement with the medical advisor;
- (F) the training and supervision of clinical and field internship preceptors;
- (G) the effectiveness and quality of fulfillment of responsibilities delegated to another qualified individual.

~~(3)~~(5) written educational policies and procedures that include:

- (A) the written educational policies and procedures set forth in Rule ~~.0601(b)(4)~~ .0601 of this Section;
- (B) the delivery of cognitive and psychomotor examinations in a manner that will protect and limit the potential for exploitation of such content and material;
- (C) the exam item validation process utilized for the development of validated cognitive examinations;
- (D) the selection and monitoring of all in-state and out-of-state clinical education and field internship sites;
- (E) the selection and monitoring of all educational institutionally approved clinical education and field internship preceptors;
- (F) utilization of EMS preceptors providing feedback to the student and EMS program;
- (G) the evaluation of preceptors by their students, including the frequency of evaluations;
- (H) the evaluation of the clinical education and field internship sites by their students, including the frequency of evaluations; and
- (I) completion of an annual evaluation of the program to identify any correctable deficiencies;

~~(4)~~(6) an Educational Medical Advisor that meets the criteria as defined in the “North Carolina College of Emergency Physicians: Standards for Medical Oversight and Data ~~Collection;~~” Collection” who is responsible for the following:

- (A) medical oversight of the program;
- (B) collaboration to provide appropriate and updated educational content for the program curriculum;
- (C) establish minimum requirements for program completion;
- (D) oversight of student evaluation, monitoring, and remediation as needed;
- (E) ensuring entry level competence;
- (F) ensure interaction of physician and students.

~~(5)~~(7) written educational policies and procedures describing the delivery of educational programs, the record-keeping system detailing student attendance and performance, and the selection and monitoring of EMS instructors.

(c) For initial courses, Advanced Educational Institutions shall meet all requirements defined in Paragraph (b) of this Rule, and have a Level II EMS Instructor as lead instructor for AEMT and Paramedic initial courses. The lead instructor shall be credentialed at a level equal to or higher than the course offered. Rule, and;

1           (1) have a Level II EMS Instructor as the lead instructor for AEMT and Paramedic courses. The lead  
2           course instructor must be credentialed at a level equal to or higher than the course and shall be  
3           responsible for delivering fifty percent of the didactic content for each assigned course;

4           (2) For Advanced EMS Educational Institution programs, the education program coordinator should be  
5           supported by a program faculty member. The faculty member shall assist in teaching and clinical  
6           coordination.

7 (d) Basic and Advanced EMS Educational Institution credentials shall be valid for a period of four years, unless the  
8 institution is accredited in accordance with Rule .0605 of this Section.

9  
10 *History Note: Authority G.S. 143-508(d)(4); 143-508(d)(13);*  
11 *Temporary Adoption Eff. January 1, 2002;*  
12 *Eff. January 1, 2004;*  
13 *Amended Eff. January 1, 2009;*  
14 *Readopted Eff. January 1, ~~2017~~, 2017;*  
15 *Amended Eff. April 1, 2020.*

1 10A NCAC 13P .1505 is proposed for amendment as follows:

2  
3 **10A NCAC 13P .1505 EMS EDUCATIONAL INSTITUTIONS**

4 (a) For the purpose of this Rule, "focused review" means an evaluation by the OEMS of an educational institution's  
5 corrective actions to remove contingencies that are a result of deficiencies in the initial or renewal application process.

6 (b) The Department shall deny the initial or renewal designation, without first allowing a focused review, of an EMS  
7 Educational Institution for any of the following reasons:

8 (1) significant failure to comply with the provisions of ~~Section .0600~~ Sections .0500 and .0600 of this  
9 Subchapter; or

10 (2) attempting to obtain an EMS Educational Institution designation through fraud or misrepresentation.

11 (c) When an EMS Educational Institution is required to have a focused review, it shall demonstrate compliance with  
12 the provisions of ~~Section .0600~~ Sections .0500 and .0600 of this Subchapter within ~~42~~ six months or less.

13 (d) The Department shall amend, suspend, or revoke an EMS Educational Institution designation at any time whenever  
14 the Department finds that the EMS Educational Institution has significant failure to comply, as defined in Rule .0102  
15 of this Subchapter, with the provisions of Section .0600 of this Subchapter, and:

16 (1) it is not probable that the EMS Educational Institution can remedy the deficiencies within ~~42~~ six  
17 months or less as determined by OEMS staff based upon analysis of the educational institution's  
18 ability to take corrective measures to resolve the issue of non-compliance with Section .0600 of this  
19 Subchapter;

20 (2) although the EMS Educational Institution may be able to remedy the deficiencies, it is not probable  
21 that the EMS Educational Institution shall be able to remain in compliance with credentialing rules;

22 (3) failure to produce records upon request as required in Rule ~~.0601(b)(6)~~ .0601 of this Subchapter;

23 (4) the EMS Educational Institution failed to meet the requirements of a focused review within ~~42~~ six  
24 months, as set forth in Paragraph (c) of this Rule;

25 (5) the failure to comply endangered the health, safety, or welfare of patients cared for as part of an  
26 EMS educational program as determined by OEMS staff in their professional judgment based upon  
27 a complaint investigation, in consultation with the Department and Department of Justice, to verify  
28 the results of the investigations are sufficient to initiate enforcement action pursuant to G.S. 150B;  
29 or

30 (6) the EMS Educational Institution altered, destroyed, or attempted to destroy evidence needed for a  
31 complaint investigation.

32 (e) The Department shall give the EMS Educational Institution written notice of ~~revocation and denial~~ action taken  
33 on the Institution designation. This notice shall be given personally or by certified mail and shall set forth:

34 (1) the factual allegations;

35 (2) the statutes or rules alleged to be violated; and

36 (3) notice of the EMS Educational Institution's right to a contested case hearing, set forth in Rule .1509  
37 of this Section, on the revocation of the designation.

1 (f) Focused review is not a procedural prerequisite to the revocation of a designation as set forth in Rule .1509 of this  
2 Section.

3 (g) If determined by the educational institution that suspending its approval to offer EMS educational programs is  
4 necessary, the EMS Educational Institution may voluntarily surrender its credential without explanation by submitting  
5 a written request to the OEMS stating its intention. The voluntary surrender shall not affect the original expiration  
6 date of the EMS Educational Institution's designation. To reactivate the designation:

7 (1) the institution shall provide OEMS written documentation requesting reactivation; and

8 (2) the OEMS shall verify the educational institution is compliant with all credentialing requirements  
9 set forth in Section .0600 of this Subchapter prior to reactivation of the designation by the OEMS.

10 (h) If the institution fails to resolve the issues that resulted in a voluntary surrender, the Department shall revoke the  
11 EMS Educational Institution designation.

12 (i) In the event of a revocation or voluntary surrender, the Department shall provide written notification to all EMS  
13 Systems within the EMS Educational Institution's defined service area. The Department shall provide written  
14 notification to all EMS Systems within the EMS Educational Institution's defined service area when the voluntary  
15 surrender reactivates to full credential.

16 (j) When an accredited EMS Educational Institution as defined in Rule .0605 of this Subchapter has administrative  
17 action taken against its accreditation, the OEMS shall determine if the cause of action is sufficient for revocation of  
18 the EMS Educational Institution designation or imposing a focused review pursuant to Paragraphs (b) and (c) of this  
19 Rule is warranted.

20  
21 *History Note:* Authority G.S. 143-508(d)(4); 143-508(d)(10);

22 *Eff. January 1, 2013;*

23 *Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. February 2,*  
24 *2016;*

25 *Amended Eff. April 1, 2020; July 1, 2018; January 1, 2017.*

1 10A NCAC 13P .1507 is proposed for amendment as follows:

2  
3 **10A NCAC 13P .1507 EMS PERSONNEL CREDENTIALS**

4 (a) ~~An~~ Any EMS credential that has been credentials forfeited under G.S. 15A-1331.1 may not be reinstated until the  
5 person has complied with the court's requirements, has petitioned the Department for reinstatement, has completed  
6 the disciplinary process, and has received Department reinstatement approval.

7 (b) The Department shall amend, deny, suspend, or revoke the credentials of EMS personnel for any of the following:

- 8 (1) significant failure to comply with the applicable performance and credentialing requirements as  
9 found in this Subchapter;
- 10 (2) making false statements or representations to the Department, or concealing information in  
11 connection with an application for credentials;
- 12 (3) making false statements or representations, concealing information, or failing to respond to inquiries  
13 from the Department during a complaint investigation;
- 14 (4) tampering with, or falsifying any record used in the process of obtaining an initial EMS credential,  
15 or in the renewal of an EMS credential;
- 16 (5) in any manner or using any medium, engaging in the stealing, manipulating, copying, reproducing,  
17 or reconstructing of any written EMS credentialing examination questions, or scenarios;
- 18 (6) cheating, or assisting others to cheat while preparing to take, or when taking a written EMS  
19 credentialing examination;
- 20 (7) altering an EMS credential, using an EMS credential that has been altered, or permitting or allowing  
21 another person to use his or her EMS credential for the purpose of alteration. "Altering" includes  
22 changing the name, expiration date, or any other information appearing on the EMS credential;
- 23 (8) unprofessional conduct, including a significant failure to comply with the rules relating to the  
24 function of credentialed EMS personnel contained in this Subchapter, or the performance of or  
25 attempt to perform a procedure that is detrimental to the health and safety of any person, or that is  
26 beyond the scope of practice of credentialed EMS personnel or EMS instructors;
- 27 (9) being unable to perform as credentialed EMS personnel with reasonable skill and safety to patients  
28 and the public by reason of illness that will compromise skill and safety, use of alcohol, drugs,  
29 chemicals, or any other type of material, or by reason of any physical impairment;
- 30 (10) conviction in any court of a crime involving moral turpitude, a conviction of a felony, a conviction  
31 requiring registering on a sex offender registry, or conviction of a crime involving the scope of  
32 practice of credentialed EMS personnel;
- 33 (11) by false representations obtaining or attempting to obtain, money or anything of value from a  
34 patient;
- 35 (12) adjudication of mental incompetence;
- 36 (13) lack of competence to practice with a reasonable degree of skill and safety for patients, including a  
37 failure to perform a prescribed procedure, failure to perform a prescribed procedure competently, or

- 1 performance of a procedure that is not within the scope of practice of credentialed EMS personnel  
2 or EMS instructors;
- 3 (14) performing as a credentialed EMS personnel in any EMS System in which the individual is not  
4 affiliated and authorized to function;
- 5 (15) performing or authorizing the performance of procedures, or administration of medications  
6 detrimental to a student or individual;
- 7 (16) delay or failure to respond when on-duty and dispatched to a call for EMS assistance;
- 8 (17) testing positive, whether for-cause or at random, through urine, blood, or breath sampling, for any  
9 substance, legal or illegal, that is likely to impair the physical or psychological ability of the  
10 credentialed EMS personnel to perform all required or expected functions while on duty;
- 11 (18) failure to comply with G.S. 143-518 regarding the use or disclosure of records or data associated  
12 with EMS Systems, Specialty Care Transport Programs, Alternative Practice Settings, or patients;
- 13 (19) refusing to consent to any criminal history check required by G.S. 131E-159;
- 14 (20) abandoning or neglecting a patient who is in need of care, without making arrangements for the  
15 continuation of such care;
- 16 (21) falsifying a patient's record or any controlled substance records;
- 17 (22) harassing, abusing, or intimidating a patient, student, bystander, or OEMS staff, either physically,  
18 verbally, or in writing;
- 19 (23) engaging in any activities of a sexual nature with a patient, including kissing, fondling, or touching  
20 while responsible for the care of that individual;
- 21 (24) any criminal arrests that involve charges that have been determined by the Department to indicate a  
22 necessity to seek action in order to further protect the public pending adjudication by a court;
- 23 (25) altering, destroying, or attempting to destroy evidence needed for a complaint investigation being  
24 conducted by the OEMS;
- 25 (26) significant failure to comply with a condition to the issuance of an encumbered EMS credential with  
26 limited and restricted practices for persons in the chemical addiction or abuse treatment program;
- 27 (27) unauthorized possession of lethal or non-lethal weapons, chemical irritants to include mace, pepper  
28 (oleoresin capsicum) spray and tear gas, or explosives while in the performance of providing  
29 emergency medical services;
- 30 (28) significant failure to comply to provide EMS care records to the licensed EMS provider for  
31 submission to the OEMS as required by Rule .0204 of this Subchapter;
- 32 (29) continuing to provide EMS care after local suspension of practice privileges by the local EMS  
33 System, Medical Director, or Alternative Practice Setting; or
- 34 (30) representing or allowing others to represent that the credentialed EMS personnel has a credential  
35 that the credentialed EMS personnel does not in fact have.
- 36 (c) Pursuant to the provisions of G.S. 131E-159(h), the OEMS shall not issue an EMS credential for any person listed  
37 on the North Carolina Department of Public Safety, Sex Offender and Public Protection Registry, or who was

1 convicted of an offense that would have required registration if committed at a time when the registration would have  
2 been required by law.

3 (d) Pursuant to the provisions of G.S. 50-13.12, upon notification by the court, the OEMS shall revoke an individual's  
4 EMS credential until the Department has been notified by the court that evidence has been obtained of compliance  
5 with a child support order. The provisions of G.S. 50-13.12 supersede the requirements of Paragraph (f) of this Rule.

6 (e) When a person who is credentialed to practice as an EMS professional is also credentialed in another jurisdiction  
7 and the other jurisdiction takes disciplinary action against the person, the Department shall summarily impose the  
8 same or lesser disciplinary action upon receipt of the other jurisdiction's action. The EMS professional may request a  
9 hearing before the EMS Disciplinary Committee. At the hearing the issues shall be limited to:

10 (1) whether the person against whom action was taken by the other jurisdiction and the Department are  
11 the same person;

12 (2) whether the conduct found by the other jurisdiction also violates the rules of the N.C. Medical Care  
13 Commission; and

14 (3) whether the sanction imposed by the other jurisdiction is lawful under North Carolina law.

15 (f) The OEMS shall provide written notification of the amendment, denial, suspension, or revocation. This notice  
16 shall be given personally or by certified mail, and shall set forth:

17 (1) the factual allegations;

18 (2) the statutes or rules alleged to have been violated; and

19 (3) notice of the individual's right to a contested hearing, set forth in Rule .1509 of this Section, on the  
20 revocation of the credential.

21 (g) The OEMS shall provide written notification to the EMS professional within five business days after information  
22 has been entered into the National Practitioner Data Bank and the Healthcare Integrity and Protection Integrity Data  
23 Bank.

24  
25 *History Note: Authority G.S. 131E-159; 143-508(d)(10); 143-519;*

26 *Eff. January 1, 2013;*

27 *Readopted Eff. January 1, ~~2017~~. ~~2017~~;*

28 *Amended Eff. April 1, 2020.*