CHAPTER 33-36-02
LICENSING OF EMERGENCY MEDICAL SERVICES TRAINING INSTITUTIONS

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33-36-02-01. Definitions.

Words defined in North Dakota Century Code chapter 23-27 have the same meaning in this chapter.

1. "Acceptable criminal background requirements" means that a student’s criminal background is acceptable by the department and the national registry for entry into the profession.

2. "Accrediting agency" means the commission on accreditation on allied health education programs or its equivalent.

3. "Candidate" means a person that has completed a primary training course and is in the testing process.


5. "Department" means the North Dakota state department of health.

6. "Emergency medical services equipment" means automated external defibrillator, long back board, Kendrick extrication device, oxygen delivery equipment, rigid splints, traction splint, suction equipment, bandages, and other equipment needed to accomplish training.

7. "National registry" means the national registry of emergency medical technicians located in Columbus, Ohio.
"Physician" means a person licensed by the North Dakota board of medical examiners to practice medicine.

"Primary education course" means the initial or refresher training course for emergency medical responder, emergency medical technician, emergency medical technician-intermediate-advanced emergency medical technician, and paramedic.

"Student" means a person that is actively in a primary training course and has not yet completed the course.

**History:** Effective January 1, 2006; amended effective July 1, 2010.

**General Authority:** NDCC 23-27-04.3

**Law Implemented:** NDCC 23-27-04.3

### 33-36-02-02. License required - Fees.

1. No North Dakota emergency medical services training institution, as defined in North Dakota Century Code chapter 23-27, shall be advertised or offered to the public or any person as a licensed training institution unless the operator of such service is licensed by the department.

2. The license shall expire midnight on October thirty-first of the third year following issuance. License renewal shall be on a three-year basis.

3. A license is valid only for the training institution for which it is issued. A license may not be sold, assigned, or transferred.

4. The license shall be displayed in a conspicuous place.

5. The three-year license-application fee shall be seventy-five dollars which is nonrefundable.

**History:** Effective January 1, 2006.

**General Authority:** NDCC 23-27-04.3

**Law Implemented:** NDCC 23-27-04.3

### 33-36-02-03. Application for license.

An application for licensure as an emergency medical services training institution must be submitted on a form provided by the department, or an alternate format which includes the following information:

1. Applicant information:
   a. Name of the training institution;
   b. Mailing address;
   c. Telephone number;

2. Applicant information:
d. Name of program coordinator;
e. Name of training institution medical director; and
f. E-mail address of contact person;

2. A copy of the written agreement with the physician medical director;

3. A copy of the written agreement with the hospitals, clinics, ambulance services, and physicians’ offices that will provide field internship training;

4. A listing of the names of the persons or organizations that have financial interest in the institution;

5. A copy of the student handbook for the institution; and

6. A signed statement attesting to the accuracy of the application and all of its attachments.

History: Effective January 1, 2006.
General Authority: NDCC 23-27-04.3
Law Implemented: NDCC 23-27-04.3

33-36-02-04. Issuance and renewal of licenses.

1. The department or its authorized agent shall inspect the training institution. If minimum standards and requirements as designated by the department are met, the department may issue a license.

2. A training institution may request that the department consider it in compliance with this chapter if it is fully accredited by the commission on accreditation of allied health education programs or its equivalent. The training institution must provide any additional information to the department that is required of licensed emergency medical services training institutions but not evaluated in the accreditation process.

3. Training institutions requesting their compliance with this chapter to be verified through an accrediting agency shall submit to the department appropriate documentation to include the official site visit survey report and official site visit findings letter from the accrediting agency citing any deficiencies. Subsequent accreditation or revisit documentation must be submitted prior to license renewal along with notification of accreditation status changes.

4. Training institutions that offer paramedic training shall have the paramedic course accredited by an accrediting agency by January 1, 2010.

History: Effective January 1, 2006; amended effective January 1, 2008.
General Authority: NDCC 23-27-04.3
Law Implemented: NDCC 23-27-04.3
33-36-02-05. Training institution director requirements.

Each licensed training institution must have a director who meets requirements as set forth in the department policy including licensure by the department as a North Dakota EMS instructor/coordinator and who serves as the administrator of the training institution and who is responsible for:

1. Planning, conducting, and evaluating the program;
2. Selecting students and instructors;
3. Documenting and maintaining records;
4. Developing a curriculum; and
5. Acting as or appointing the test site coordinator for practical examinations if applicable.

History: Effective January 1, 2006.
General Authority: NDCC 23-27-04.3
Law Implemented: NDCC 23-27-04.3

33-36-02-06. Training institution medical director requirements.

Each licensed training institution shall have an agreement on file at the department with a physician acting as medical director. This agreement as designated by the department will outline the responsibilities of the medical director whose responsibilities include:

1. Ensuring an accurate and thorough presentation of the medical content of each training program;
2. Certifying that each candidate has successfully completed the training course;
3. In conjunction with the training program director, planning the clinical training;
4. Being available for practical test site consultations; and
5. Acting as a liaison between the training institution and the medical community.

History: Effective January 1, 2006.
General Authority: NDCC 23-27-04.3
Law Implemented: NDCC 23-27-04.3

33-36-02-07. Course instructors.

Primary course instructors must be licensed as an instructor coordinator as defined in section 33-36-01-04 and hold a certificate or license in or above the discipline that they are teaching.
History: Effective January 1, 2006; amended effective January 1, 2008; July 1, 2010.
General Authority: NDCC 23-27-04.3
Law Implemented: NDCC 23-27-04.3

33-36-02-08. Training institution policies, records, and quality assurance requirements.

North Dakota licensed emergency medical services training institutions must:

1. Publish a student handbook which includes at least the following information as required by department policy:

   a. The full name and address of the school;

   b. Names of owners and officers, including governing boards;

   c. A description of each educational service offered, including tuition, fees, and length of courses;

   d. Enrollment procedures and entrance requirements, including late enrollment if permitted;

   e. A description of the institution’s tuition assistance. If no assistance is offered, the institution must state this fact;

   f. Attendance policy, including minimum attendance requirements;

   g. A policy explaining satisfactory student progress which includes:

      (1) How progress is measured and evaluated, including an explanation of any system of grading used;

      (2) The conditions under which the student may be readmitted if terminated for unsatisfactory progress; and

      (3) Explanation of any probation policy;

   h. A description of the system used to make progress reports to students; and

   i. An explanation of the refund policy which also includes the training agency’s method of determining the official date of termination.

2. Maintain as a minimum records as required by the department, the following records for emergency medical services courses taught:

   a. Student records must be maintained for five years and include:
(1) Name and address for each student enrolled in an emergency medical services course;

(2) Grades for each written examination;

(3) Copies of each student’s documentation of entrance requirements to each course, including a copy of the individual’s cardiopulmonary resuscitation certification and criminal history statement; and

(4) Field internship student evaluation forms from each field or clinical internship session. The form must include the evaluator’s printed name, contact information, and signature.

b. Instructor and course records that include:

(1) Names and qualifications of the primary instructors;

(2) Names and qualification of guest instructors;

(3) Instructor evaluation records completed by students and training institution personnel; and

(4) Names of the practical examination evaluators.

3. Have at least seventy percent of the candidates who successfully complete a primary training course certified or licensed by the department or certified by the national registry within two years of course completion.

3. Publish, in a readily accessible place on their own website or request publishing on the department website, course outcome data as prescribed by department policy.

4. Develop and implement a quality assurance and quality improvement program for instruction. The quality assurance program must:

   a. Establish and implement policies and procedures for periodic evaluation of all instructors, field internship sites, equipment, and other training resources;

   b. Establish and implement a mentoring program for each new instructor. Each new instructor will be assigned a mentor who has a background in the course being taught or in teaching. The assigned mentor will complete an evaluation of the assignee at least once;

   c. Establish and have completed student evaluations during and after each course taught; and

   d. Establish and implement a remediation plan for all noted instructor deficiencies. Documentation of remediation shall be maintained for five years.

5. Ensure capabilities to offer real-time didactic distance learning by January 1, 2020.
33-36-02-09. Other training institution requirements.

North Dakota licensed emergency medical services training institutions must:

1. Have adequate classroom and laboratory space to conduct emergency medical services training.

2. Have appropriate dedicated emergency medical services equipment for training.

3. Determine the eligibility of prospective students in regard to age, minimum prior training requirements, and acceptable criminal background requirements.

4. Maintain a written agreement with a licensed medical facility and licensed ambulance service designating a field internship site.

5. After each primary training class is complete, notify the department of the starting date and number of students initially enrolled and the number of students fully completing the course.

6. Provide proof of liability insurance that covers the training institution and primary instructors.

7. Notify the department prior to conducting primary education courses in a format determined by the department.

33-36-02-10. Practical examination administration.

A licensed training institution may conduct practical examinations upon approval by the department under the following conditions.

1. The institution must be designated by the department to conduct practical examinations.

2. The facility must have adequate room to accommodate a test. Each test station must be well away from others so that the privacy of the candidate and the security of the test are maintained. There must be a separate monitored room for candidates to wait. The designated department representative may shut down or cancel a test because of inadequate facilities.
3. Test site dates must be approved by the department. For an advanced life support test site, the test site coordinator must notify the department eight weeks prior to the test date and submit a roster of probable candidates for the practical test. For a basic life support test site, the test site coordinator must notify the department two weeks prior to the test date and submit a roster of probable candidates for the practical test. The test site coordinator may accept candidates from other licensed training institutions or department-authorized courses or qualified candidates from other states if the test site coordinator has verified the eligibility of the candidate.

4. The test site coordinator is responsible for all logistics of the test site. The test site coordinator must remain at the test site for the duration of the test.

5. A national registry representative approved by the department or a designated department representative must oversee the test site. The national registry or department representative’s only duties are to ensure the integrity of the test site and submit results to the national registry or the department. The designated department representative may not have an affiliation with the training institution.

6. The training institution must provide an adequate number of qualified evaluators for the number of students to be tested. For every eight candidates there must be at least one evaluator. The evaluators may not evaluate a candidate in a practical station for which the evaluator had been a guest lecturer, or had been the training institution coordinator or the primary instructors of the candidates. Evaluators must use and adhere to the department’s testing evaluation forms.

7. An emergency medical technician candidate must pass all stations of a practical test site within two years of course completion. The required practical stations are:

a. Patient assessment management—trauma;

b. Patient assessment management—medical;

c. Cardiac arrest management/automated external defibrillator;

d. Spinal immobilization, seated or supine;

e. Bag valve mask, apneic patient with a pulse; and

f. One of the following random skills chosen by the department:

   (1) Long bone immobilization;

   (2) Joint dislocation immobilization;

   (3) Traction splinting;

   (4) Bleeding control and shock management;

   (5) Upper airway adjuncts and suction; or
(6) Supplemental oxygen administration.

8. A candidate may fail no more than three stations at any one test site. The candidate may retest those failed stations one time on the same day at the discretion of the test site coordinator. If a candidate fails four or more stations, the candidate must retest all stations at a later date.

9. All emergency medical technician practical test results must be reported to the department within one week of the practical test by the department representative. The department will determine the eligibility of the candidates to retest according to department policy.

10. Retesting candidates that have failed all or part of the emergency medical technician practical test will be done in accordance with department policy. The number of times a candidate may retest all or part of the emergency medical technician practical test is determined by department policy.

11. An advanced level practical test site must be approved by the department and comply with national registry rules and policies.

History: Effective January 1, 2006; amended effective January 1, 2008; July 1, 2010.

General Authority: NDCC 23-27-04.3

Law Implemented: NDCC 23-27-04.3


33-36-02-12. Denial, suspension, or revocation of licensure.

The department may deny, suspend, or revoke the license of a training institution or license of an individual to instruct or practice under the following circumstances:

1. Negligence in performing or instructing emergency medical care.

2. Fraud, forgery, or misrepresentation of facts in procuring or attempting to procure licensure as an emergency medical service training institution.

3. Violation of this chapter promulgated to regulate emergency medical services training institutions.

4. Falsely passing candidates or discrimination of candidates at a practical test site.

5. Grossly immoral or dishonorable conduct.

6. As an institution conducting themselves inappropriately or conducting education of poor quality or courses resulting in poor outcome as determined by the department.

67. Diversion of drugs for personal or unauthorized use.
The licensed training institution receives adverse accreditation action from a national accrediting agency.

8. Failing to submit required course documentation to the department either prior to the conduct of the course, for those courses that require prior authorization, or within a reasonable amount of time after the course is complete, for those courses that require course completion documentation submission.

History: Effective January 1, 2006; amended effective January 1, 2008; July 1, 2010.
General Authority: NDCC 23-27-04.3
Law Implemented: NDCC 23-27-04.3

33-36-02-13. Suspension or revocation process.

The department may suspend or revoke a training institution’s or individual’s license after making a diligent effort to:

1. Inform the training institution or individual of the allegations.

2. Inform the training institution or individual of the department’s investigation results.

3. Inform the training institution or individual of the department’s intent to suspend or revoke and provide a notice of right to request hearing.

4. Provide the training institution or individual opportunity to request a hearing and rebut the allegations.

History: Effective January 1, 2006; amended effective July 1, 2010.
General Authority: NDCC 23-27-04.3
Law Implemented: NDCC 23-27-04.3


A request for hearing must be received by the department no later than twenty days following the training institution’s or individual’s receipt of the allegations. If a hearing is requested, the department will apply to the office of administrative hearings for appointment of a hearing officer. The department will notify any complainants and the accused of the date set for the hearing. The hearing officer will conduct the hearing and prepare recommended findings of fact and conclusions of law as well as a recommended order for the department. The department shall notify the training institution or individual of its findings in writing after receiving the hearing officer’s finding of fact, conclusion of law, and recommended order.

History: Effective January 1, 2006.
General Authority: NDCC 23-27-04.3
Law Implemented: NDCC 23-27-04.3