**R426. Health and Human Services, Population Health, Emergency Medical Services.**

**R426-5. Emergency Medical Services Training, Endorsement, Certification, and Licensing Standards.**

**R426-5-100. Authority and Purpose.**

(1) Authority for this rule is found in Title 26B, Chapter 4, Part 1, Utah Emergency Medical Services System.

(2) The purpose of this rule is to:

(a) describe requirements for training, certification, endorsements, and licensing of individuals who provide emergency medical services; and

(b) provide uniform minimum standards to be met by those providing emergency medical services within the state.

**R426-5-110. Definitions as Used in this Rule.**

(1) "Advanced Emergency Medical Technician" (AEMT) as defined in Subsection R426-1-200(1).

(2) "Committee" as defined in Subsection 26B-4-101(5).

(3) "Crisis Response Technician" (CRT) is a person who provides "Behavioral Emergency Services" as defined in Subsection 26B-4-101(4)(a)(b).

(4) "Department" as defined in Subsection R426-1-200(13).

(5) "Emergency Medical Responder" (EMR) as defined in Subsection R426-1-200(16).

(6) "Emergency Medical Services" (EMS) as defined in Subsection R426-1-200(20).

(7) "Emergency Medical Technician" (EMT) as defined in Subsection R426-1-200(17).

(8) "Paramedic" as defined in Subsection R426-1-200(41).

(9) "Provider" as defined in Subsection R426-1-200(57).

**R426-5-200. Scope of Practice.**

(1) The department may license an individual as an EMR, EMT, AEMT, paramedic, or CRT who meets the requirements in this rule.

(2) The committee adopts the standard for EMR, EMT, AEMT, and paramedic training and competency as defined in the National Association of State EMS Official's National EMS Scope of Practice Model 2019 (Report No. DOT HS 812-666). Washington, DC: National Highway Traffic Safety Administration, which is incorporated by reference.

(3) An EMR, EMT, AEMT, paramedic, or CRT may perform the skills to their level of licensure, as adopted in this section.

(4) A CRT may perform skills including crisis response triage, discussion of available resources, and referral to appropriate mental health professions as determined by department-approved training and local mental health authority-approved protocols in the corresponding response area.

**R426-5-210. Professional Conduct and Code of Ethics for EMS Personnel.**

EMS personnel shall maintain professional conduct and follow the code of ethics from the 2023 EMT Student Handbook, incorporated by reference in this rule.

(1) The following are examples of conduct, while providing patient care and transport, that may result in investigation of an EMS personnel's license or a provider's license or designation pursuant to Subsection R426-5-3300(2):

(a) theft or inappropriate removal or possession of property;

(b) falsification of personal or hospital records;

(c) functioning under the influence of alcohol, illegal drugs, or medications that may impair judgment or capability;

(d) possession, distribution, sale, transfer, or use of alcohol or illegal drugs;

(e) fighting or threatening violence;

(f) negligence or improper conduct leading to damage of property;

(g) violation of safety or health rules that threatens the safety of patients receiving care;

(h) sexual or other unlawful or unwelcome harassment;

(i) possession of dangerous or unauthorized materials, such as explosives or illegal firearms;

(j) unauthorized access or disclosure of confidential information;

(k) misrepresentation of an individual's level of licensure;

(l) performing procedures or skills beyond the level of an individual's EMS licensure or provider's licensure; and

(m) violation of laws pertaining to medical practice, drugs, or controlled substances.

(2) Complaints regarding EMS personnel's actions or behaviors, on or off duty, that can be interpreted as possible violations of this section:

(a) must be submitted to the department in writing; and

(b) if determined a potential violation, will be investigated pursuant to Section R425-5-3300.

(3) Any EMS personnel who is found to have violated this section may be subject to license suspension or revocation.

**R426-5-300. EMS Personnel Licensure for EMRs, EMTs, AEMTs, Paramedics, and CRTs.**

(1) The department may license an EMR, EMT, AEMT, paramedic, or CRT for a two-year period. The department may modify a license period to standardize renewal cycles.

(2) An individual who wishes to become licensed as an EMR, EMT, AEMT, paramedic, or CRT shall:

(a) successfully complete a department-approved EMR, EMT, AEMT, paramedic, or CRT course;

(b) be able to perform the functions listed in the National EMS Education Standards referenced in Subsection R426-5-200(2) as verified by personal attestation and successful accomplishment by department-endorsed EMS instructors;

(c) achieve a favorable recommendation from the course coordinator and course medical director stating technical competence during field and clinical training and successful completion of training requirements for an EMR, EMT, AEMT, paramedic, or CRT licensure;

(d) submit the applicable fees and a completed application, including Social Security number, to the department;

(e) submit to and pass a background investigation, including an FBI background investigation; and

(f) keep documentation of having completed a department-approved cardiopulmonary resuscitation course within the prior two years that is consistent with the 2020 American Heart Association Guidelines for the Level of Adult and Pediatric Healthcare Cardiopulmonary Resuscitation and Emergency Cardiac Care Basic Life Support.

(3) An individual who wishes to become licensed as a CRT shall:

(a) successfully complete a department-approved CRT course;

(b) be able to perform the functions as described in Subsection R426-5-200(4);

(c) submit the applicable fees and a completed application, including Social Security number, to the department; and

(d) submit to and pass a background investigation, including an FBI background investigation.

(4) Age requirements:

(a) EMR may be licensed at 16 years of age or older;

(b) EMT, AEMT, and paramedic may be licensed at 18 years of age or older; and

(c) CRT may be licensed at 21 years of age or older.

(5) Within two years after the official course end date, the applicant for EMR, EMT, AEMT, paramedic, or CRT licensure shall successfully complete the department's approved National Registry of Emergency Medical Technician's written and practical EMR, EMT, AEMT, or paramedic examinations, or re-examinations, if necessary.

(6) Licensed personnel shall keep and submit upon request by the department any documentation required for licensure.

(7) An individual who wishes to enroll in an AEMT or paramedic course shall have as a minimum a Utah EMT license, and the license shall remain current until the new license level is obtained.

(8) An individual who wishes to enroll in a CRT course shall be a licensed EMS personnel or a law enforcement officer for at least two years before enrollment or have at least two years of equivalent experience before enrollment into a CRT course or program.

(9) Upon successful completion of the program, written verification of the successful candidates shall be submitted to the department for review.

(10) The department may extend time limits for an individual who has unusual circumstances or hardships.

**R426-5-400. Licensure at a Lower Level.**

An individual who completed a paramedic course, but has not been recommended for licensure, may request to become licensed at the AEMT levels if:

(1) the paramedic course coordinator submits to the department a favorable letter of recommendation stating that the individual has successfully obtained the knowledge and skills of the AEMT level as required by this rule; and

(2) the individual successfully completes other application and testing requirements for an AEMT.

**R426-5-500. License Challenges for EMTs or AEMTs.**

(1) The department may license an individual as an EMT or AEMT, in consecutive order, who has military medical training, a Utah registered nurse license, a Utah nurse practitioner license, a Utah physician assistant license, or a Utah physician license, and:

(a) can demonstrate knowledge, proficiency, and competency to perform the functions listed in the National EMS education standards as described in Subsection R426-5-200(2), as verified by personal attestation and successful demonstration to a currently certified course coordinator and an off-line medical director;

(b) has a knowledge of:

(i) medical control protocols;

(ii) state and local protocols; and

(iii) the role and responsibilities of an EMT or AEMT, respectively;

(c) maintains and submits documentation of having completed a CPR course within the prior two years that is consistent with the 2020 American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular, which is incorporated by reference; and

(d) is 18 years of age or older.

(2) To become licensed as either an EMT or AEMT, the individual shall:

(a) submit the applicable fees and a completed application, including Social Security number, signature, and proof of current Utah license as a registered nurse, a physician assistant, or a medical doctor, or military transcripts for training;

(b) successfully complete the National Registry of Emergency Medical Technicians EMT or AEMT cognitive and psychomotor examinations, or re-examinations, if necessary; and

(c) submit to and pass a background screening clearance, per Section R426-5-3200.

(3) The department may license as a CRT an individual with military mental health training, or a licensed mental health professional in Utah, who:

(a) can demonstrate knowledge, proficiency, and competency to perform the functions as verified by personal attestation and successful demonstration to a county mental health authority or designee;

(b) has a knowledge of:

(i) crisis response protocols;

(ii) state and local protocols; and

(iii) the role and responsibilities of a CRT;

(c) maintains and submits documentation of having completed a cardiopulmonary resuscitation course within the prior two years that is consistent with the 2020 American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular; and

(d) is 21 years of age or older.

**R426-5-510. License Challenges for CRTs.**

To become licensed as a CRT, the individual shall:

(1) submit the applicable fees and a completed application, including Social Security number, signature, and proof of current Utah license as a mental health professional, or military transcripts for training;

(2) successfully complete the department-approved written and practical CRT examinations, or re-examinations, if necessary; and

(3) submit to and pass a background screening clearance, per Section R426-5-3200.

**R426-5-600. License Renewal Requirements for EMRs, EMTs, AEMTs, and Paramedics.**

(1) The department may renew an individual license for a two-year period. The department may modify the period for a license to standardize renewal cycles.

(2) An individual seeking license renewal shall:

(a) submit the applicable fees and a completed application, including Social Security number, to the department;

(b) submit a completed Utah EMS application to the department, no later than 30 days and no earlier than six months before the individual's current license expiration date;

(c) have a current National Registry of Emergency Medical Technicians certification for their current license level;

(d) submit to and pass a background screening clearance, per Section R426-5-3200;

(e) keep documentation and submit, upon request, proof of having completed a department-approved cardiopulmonary resuscitation course within the prior two years that is consistent with the 2020 American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular;

(f) provide documentation of completion of department-approved continuing medical education requirements; and

(g) maintain cardiopulmonary resuscitation certification during licensure period.

(3) The EMR, EMT, AEMT, and paramedic shall complete the required continuing medical education hours, as outlined in Recertification Guide Version 4, published by the National Registry of Emergency Medical Technicians, incorporated by reference in this rule. The hours shall be completed throughout the prior two years.

(4) An individual is responsible to complete and submit required renewal material and the recertification application to the National Registry of Emergency Medical Technicians, per the guidance provided under "Renewal License" on the department website.

(5) A department-approved entity that provides continuing medical education may compile renewal materials on behalf of an EMR, EMT, AEMT, or paramedic; however, the individual EMR, EMT, AEMT, or paramedic is responsible for a timely and complete submission.

(6) The department may not lengthen an individual's license period to more than two years, unless the individual is a member of the National Guard or Reserve component of the Armed Forces and is on active duty when the license expires.

**R426-5-700. License Renewal Requirements for CRTs.**

(1) A CRT applying for a renewal license shall be in good standing with the local mental health authority. The local mental health authority or designee may revoke a CRT's license upon written request to the department.

(2) A CRT applying for a renewal license shall complete department-approved continuous education requirements of no less than eight hours every two years.

(3) An individual is responsible to complete and submit required renewal materials to the department at one time, no later than 30 days and no earlier than one year before the individual's current license expiration date. Renewal materials submitted less than 30 days before license expiration may result in license expiration. The department processes renewal material in the order received.

(4) The department may shorten a CRT's license period.

(5) The department may not lengthen an individual's license period to more than two years unless the individual is a member of the National Guard or Reserve component of the Armed Forces and is on active duty when the license expires.

**R426-5-800. Reciprocity for EMRs, EMTs, AEMTs, and Paramedics.**

(1) The department may license an individual as an EMR, EMT, AEMT, or paramedic who is licensed or certified by another state or certifying body if the applicant can demonstrate the applicant's out-of-state training and experience requirements are equivalent to or greater than what is required in Utah.

(2) An individual seeking reciprocity for licensure in Utah based on out-of-state training and experience shall:

(a) submit the applicable fees and a completed application, including Social Security number, to the department; and

(b) complete the following within two years of submitting the application:

(i) submit to and pass a background screening clearance, per Section R426-5-3200;

(ii) keep and submit upon request documentation of having completed a department-approved cardiopulmonary resuscitation course within the prior two years that is consistent with the 2020 American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular;

(iii) successfully complete the National Registry of Emergency Medical Technician cognitive and psychomotor for EMR, EMT, AEMT, or paramedic examinations, or re-examinations, if necessary; and

(iv) submit a current certification or license from one of the states of the United States or its possessions, or current registration and the name of the training institution if registered with the National Registry of EMTs.

(3) A paramedic candidate shall also keep documentation of successful completion of Advanced Care Life Support or equivalent.

(4) AEMT and paramedic licensed personnel shall keep documentation of PEPP, PALS, or equivalent courses within the prior two years.

**R426-5-810. Reciprocity for CRTs.**

(1) The department may license an individual as a CRT who is licensed or certified by another state or certifying body if the applicant can demonstrate the applicant's out-of-state training and experience requirements are equivalent to or greater than what is required in Utah.

(2) An individual seeking reciprocity for CRT licensure in Utah based on out-of-state training and experience shall:

(a) submit the applicable fees and a completed application, including Social Security number, to the department; and

(b) complete the following within two years of submitting the application:

(i) submit to and pass a background screening clearance, per Section R426-5-3200;

(ii) keep documentation of having completed a CPR course within the prior two years that is consistent with the 2020 American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular; and

(iii) submit a current certification or license from one of the states of the United States or its possessions, or current registration and the name of the training institution.

**R426-5-900. Lapsed Licenses with National Registry of Emergency Medical Technician Certification.**

(1) An individual whose EMR, EMT, AEMT, paramedic, or CRT license has expired for less than one year shall recertify with the National Registry of Emergency Medical Technicians.

(2) An individual whose license for EMR, EMT, AEMT, or paramedic has expired for more than one year shall:

(a) comply with the recertification requirements per the guidance of the National Registry of Emergency Medical Technicians;

(b) pay a late licensure fee; and

(c) complete renewal requirements.

(3) If an EMR, EMT, AEMT, or paramedic license for an individual remains expired for more than a year, any new license will be issued with an expiration date two years from the previous license's expiration.

(4) An individual whose license for CRT has expired for more than one year shall:

(a) submit a letter of recommendation including results of an oral examination, from a county mental health director or designee, verifying proficiency in behavioral health care skills at the licensure level;

(b) successfully complete the applicable department's approved written examination; and

(c) complete renewal requirements.

(5) If a CRT license for an individual remains expired for more than a year, any new CRT license will be issued with an expiration date two years from the completion of renewal materials.

(6) An individual whose certification or license has lapsed, is not authorized to provide care as an EMR, EMT, AEMT, paramedic, or CRT until the individual completes the renewal process.

**R426-5-1000. Emergency Medical Care During Clinical Training.**

A student enrolled in a department-approved training program may, under the direct supervision of the course coordinator, an instructor in the course, or a preceptor for the course, perform activities delineated within the training curriculum that otherwise require licensure to perform.

**R426-5-1100. Instructor Requirements.**

(1) The department may endorse an individual as an EMS instructor who:

(a) meets the initial licensure requirements in Section R426-5-1200;

(b) is currently in Utah as an EMR, EMT, AEMT, or paramedic; and

(c) has been a licensed EMR, EMT, AEMT, or paramedic for a minimum of two years.

(2) The department adopts the United States Department of Transportation's EMS Instructor Training Program as the standard for EMS instructor training and competency in the state, which is incorporated by reference in this rule.

(3) An EMS instructor may only teach up to the license level to which the instructor is licensed.

(4) An EMS instructor shall comply with the teaching standards and procedures in the March 2023 Course Coordinator Manual as incorporated by reference in this rule.

(5) An EMS instructor shall maintain the EMS license for the level the instructor is endorsed to teach. If an individual's EMS license lapses, the instructor endorsement is invalid until the EMS license is renewed.

**R426-5-1200. Instructor Endorsement.**

(1) The department may endorse an individual who is a licensed EMR, EMT, AEMT, or paramedic as an EMS instructor for a two-year period.

(2) An individual who wishes to become endorsed as an EMS instructor shall:

(a) submit an application and pay applicable fees;

(b) submit one letter of recommendation regarding EMS skills and teaching abilities from a licensed or designated agency, which must be on department or agency letterhead and signed;

(c) submit documentation of 15 hours of teaching experience with teaching experience in EMS or other related medical discipline, such as first aid or CPR, being preferred; and

(d) successfully complete the department-sponsored initial EMS instructor training course.

(3) An individual who wishes to be endorsed as an EMS instructor to teach EMR, EMT, AEMT, or paramedic courses or CME shall provide documentation of a minimum of 25 patient contacts within the prior year with a licensed or designated agency or an emergency health care facility. Documentation must be on department or agency letterhead and signed.

(4) An individual shall submit a completed and signed instructor contract to the department every two years agreeing to abide by the standards and procedures in the March 2023 Course Coordinator Manual.

**R426-5-1300. Instructor Endorsement Renewal.**

An EMS instructor who wishes to renew an endorsement as an instructor shall:

(1) maintain current EMS licensure;

(2) attend the required department-approved instructor seminar at least once in the two-year endorsement renewal cycle; and

(3) submit an application and pay applicable fees.

**R426-5-1400. Instructor Lapsed Endorsement.**

(1) An EMS instructor whose instructor endorsement expired less than one year ago may again become endorsed by:

(a) completing endorsement requirements;

(b) submitting an application; and

(c) paying any associated fees.

(2) An EMS instructor whose instructor endorsement has expired for more than one year shall complete any initial instructor endorsement requirements and reapply as if there were no prior endorsement.

**R426-5-1500. Training Officer Endorsement.**

(1) The department may endorse a licensed individual who is an endorsed EMS instructor as a training officer for a two-year period.

(2) An individual who wishes to become endorsed as an EMS training officer shall:

(a) have completed a minimum of 30 hours of EMS instruction within the past year and have a current EMS instructor endorsement;

(b) successfully complete the department's course for new training officers;

(c) submit an application and pay applicable fees; and

(d) submit biennially a completed and signed training officer contract to the department agreeing to abide by the standards and procedures in the July 2023 Training Officer Manual, incorporated by reference in this rule.

(3) A training officer shall maintain an EMS instructor endorsement.

(4) An EMS training officer shall abide by the terms of the training officer contract and comply with the standards and procedures in the Training Officer Manual as incorporated into the respective training officer contract.

**R426-5-1600. Training Officer Endorsement Renewal.**

A training officer who wishes to renew an endorsement as a training officer shall:

(1) attend a training officer seminar at least once in the two-year endorsement renewal cycle;

(2) maintain a current EMS instructor endorsement and EMS license;

(3) submit an application and pay applicable fees; and

(4) submit a completed and signed new training officer contract to the department agreeing to abide by the standards and procedures in the current Training Officer Manual.

**R426-5-1700. Training Officer Lapsed Endorsement.**

(1) An individual whose training officer endorsement expired less than one year ago may again become endorsed by completing the endorsement renewal requirements and paying applicable fees. The individual's new expiration date will be two years from the old expiration date.

(2) An individual whose training officer endorsement expired more than one year ago shall complete each initial training officer endorsement requirement and reapply as if there were no prior endorsement.

**R426-5-1800. Course Coordinator Endorsement.**

(1) The department may endorse an individual as an EMS course coordinator for a two-year period.

(2) An individual who wishes to become endorsed as a course coordinator shall:

(a) be endorsed as an EMS instructor;

(b) be a co-coordinator of record for one department-approved course with an endorsed course coordinator;

(c) co-coordinate a course equivalent to what they will be functioning as a course coordinator;

(d) submit a written evaluation and recommendation from the course coordinator in the co-coordinated course;

(e) complete endorsement requirements within one year of completion of the department's course for new course coordinators;

(f) submit an application and pay applicable fees;

(g) complete the department's course for new course coordinators;

(h) sign and submit the course coordinator contract to the department agreeing to abide to the standards and procedures in the March 2023 Course Coordinator Manual; and

(i) maintain EMS instructor endorsement.

(3) A course coordinator may only coordinate courses up to the licensure level to which the course coordinator is licensed.

(4) A course coordinator shall abide by the terms of the course coordinator contract and comply with the standards and procedures in the March 2023 Course Coordinator Manual as incorporated into the course coordinator contract.

(5) A course coordinator shall maintain an EMS instructor endorsement and the EMS license for the level that the course coordinator is endorsed to coordinate. If an individual's EMS license or EMS instructor endorsement lapses, the course coordinator endorsement is invalid until EMS license or EMS instructor endorsement is renewed.

**R426-5-1900. Course Coordinator Endorsement Renewal.**

A course coordinator who wishes to renew an endorsement as a course coordinator shall:

(1) maintain a current EMS instructor endorsement and EMR, EMT, AEMT, or paramedic license;

(2) coordinate or co-coordinate at least one department-approved course every two years;

(3) attend a course coordinator seminar at least once in the two-year endorsement renewal cycle;

(4) submit an application and pay applicable fees; and

(5) sign and submit a course coordinator contract to the department agreeing to abide by the policies and procedures in the March 2023 Course Coordinator Manual.

**R426-5-2000. Course Coordinator Lapsed Endorsement.**

(1) An individual whose course coordinator endorsement expired less than one year ago may again become endorsed by completing the renewal requirements. The individual's new expiration date will be two years from the old expiration date.

(2) An individual whose course coordinator endorsement has expired for more than one year shall complete each initial course coordinator endorsement requirement and reapply as if there were no prior endorsement. The department may waive the co-coordinator requirement if the candidate provides written verification they coordinated or co-coordinated a course within the past two years.

**R426-5-2100. Critical Care Paramedic Endorsement.**

(1) The department may endorse an individual as a critical care paramedic for up to a four-year period.

(2) An individual who wishes to become endorsed as a critical care paramedic shall:

(a) be a licensed paramedic in Utah;

(b) be certified by the International Board of Specialty Certification as a:

(i) certified critical care paramedic (CCP-C); or

(ii) certified flight paramedic (FP-C);

(c) submit an application for critical care paramedic certification and pay applicable fees;

(d) submit proof of certification from the International Board of Specialty Certification; and

(e) maintain a paramedic license.

(3) Education cannot be used in lieu of a valid and current International Board of Specialty Certification critical care or flight paramedic certification to maintain the critical care endorsement.

**R426-5-2200. Critical Care Paramedic Endorsement Renewal.**

A critical care paramedic who wishes to renew shall:

(1) maintain a paramedic license;

(2) submit an application for critical care paramedic;

(3) pay applicable fees; and

(4) submit proof of certification from the International Board of Specialty Certification.

**R426-5-2300. Course Approvals.**

A course coordinator offering EMS training to individuals who wish to become licensed as an EMR, EMT, AEMT, or paramedic shall obtain department approval before initiating an EMS training course. The department shall approve a course if:

(1) the applicant submits the course application and fees no earlier than 90 days and no later than 30 days before commencing the course;

(2) the applicant has sufficient equipment available for the training;

(3) the department finds the course meets the department rules and contracts governing training;

(4) the course coordinators and instructors hold current respective course coordinator and EMS instructor endorsements; and

(5) the department has the capacity to offer the applicable examinations in a timely manner after the conclusion of the course.

**R426-5-2400. Paramedic Training Institutions Standards Compliance.**

(1) A person shall be authorized by the department to provide training leading to the licensure of a paramedic.

(2) To become authorized and maintain authorization to provide paramedic training, a person shall follow:

(a) the March 2023 Course Coordinator Manual; and

(b) the 2023 Standard and Guidelines for the Accreditation of Education Programs in the Emergency Medical Services Professions, incorporated by reference in this rule.

**R426-5-2500. Off-line Medical Director Requirements.**

(1) The department may certify an off-line medical director for a four-year period.

(2) An off-line medical director shall be:

(a) a physician actively engaged in providing emergency medical care or meets this requirement at the discretion of the state EMS medical director;

(b) familiar with Title 26B, Chapter 4, Part 1, Utah Emergency Medical Services System and applicable EMS administrative rules under Title R426; and

(c) familiar with medical equipment and medications required.

**R426-5-2600. Off-line Medical Director Certification.**

(1) An individual who wishes to certify as an off-line medical director shall:

(a) complete an American College of Emergency Physicians or National Association of Emergency Medical Services Physicians medical director training course or the department's medical director training course within 12 months of becoming a medical director;

(b) submit an application; and

(c) pay applicable fees.

(2) An individual who wishes to recertify as an off-line medical director shall:

(a) attend the medical directors annual workshop at least once every four years;

(b) submit an application; and

(c) pay applicable fees.

**R426-5-2700. Epinephrine Auto-Injector and Stock Albuterol Use.**

(1)(a) Any qualified entity or qualified adult shall receive training approved by the department.

(b) The epinephrine auto-injector training shall include:

(i) recognition of life-threatening symptoms of anaphylaxis;

(ii) appropriate administration of an epinephrine auto-injector;

(iii) proper storage of an epinephrine auto-injector;

(iv) disposal of an epinephrine auto-injector; and

(v) an initial and annual refresher course.

(c) The stock albuterol training shall include:

(i) recognition of life-threatening symptoms of an asthma emergency;

(ii) appropriate administration of stock albuterol;

(iii) proper storage of stock albuterol;

(iv) disposal of stock albuterol; and

(v) an initial and annual refresher course.

(2) The annual refresher course requirement may be waived if:

(a) the qualified entities or qualified adults are currently licensed at the EMR or higher level by the state; or

(b) the approved training is the Red Cross Anaphylaxis and Epinephrine Auto-Injector course, found within the online classes and training section of https://redcross.org.

(3) Training in the school setting shall be based on approved department trainings found on https://heal.utah.gov/SN-training/ pursuant to Sections 26B-4-107 and 26B-4-108.

(4) To become qualified, a teacher or school employee who is 18 years of age or older shall successfully complete the training program listed in Subsection (1).

(5) Any epinephrine auto-injector and stock albuterol shall be kept in a secure unlocked location for use in an emergency.

(6) Devices shall be disposed of following the manufacturer's specifications.

**R426-5-2800. Law Enforcement Blood Draws Authorized Individual Qualifications.**

Individuals who are not authorized to draw blood pursuant to Subsection 41-6a-523(1)(b), or individuals who are not licensed by the department, such as AEMTs, or paramedics, shall meet one of the following requirements as a prerequisite for authorization to withdraw blood to determine its alcohol or drug content when requested to do so by a peace officer:

(1) training in blood withdrawal procedures obtained as a defined part of a successfully completed college or university course taken for credit;

(2) training in blood withdrawal procedures obtained as a defined part of a successfully completed training course that prepares individuals to function in routine clinical or emergency medical situations; or

(3) training of no less than three weeks duration in blood withdrawal procedures under the guidance of a licensed physician.

**R426-5-2900. Permits for Blood Draws.**

(1) The department may issue permits to withdraw blood to determine the alcohol or drug content therein, when requested by a peace officer, to qualified applicants, as determined by the department. Individuals described in Section R426-5-2800 are exempt from permit requirements.

(2) An applicant shall submit to the department an application on forms the department provides.

(3) When the permit holder is requested to withdraw blood for the purpose stated in Subsection (1), the permit holder shall have a valid permit card.

(4) Permits shall be valid for a three-year period. The date the permit expires shall appear on the permit.

(5) An individual shall submit an application to the department on department-provided forms to renew permits within three months before the expiration date to ensure that it will not lapse. The permit holder shall either verify that they have been engaged in performing blood withdrawal procedures during the current permit period or submit verification signed by a physician attesting to their competence to perform blood withdrawal procedures.

(6) Permit holders shall notify the department within 15 days of a change in name or mailing address.

**R426-5-3000. Cause for Blood Draw Permit Termination or Revocation.**

Permits shall be subject to termination or revocation under any of the following conditions:

(1) the permit holder has made a misrepresentation of a material fact in the application, or any other communication to the department or its representatives, which misrepresentation was material to the eligibility of the permit holder;

(2) the permit holder is not qualified to hold a permit;

(3) the permit holder after having received a permit has been convicted of a felony or of a misdemeanor that involves moral turpitude; or

(4) the permit holder does not comply with the possession requirements.

**R426-5-3100. Published List of Individuals Permitted to Draw Blood.**

(1) The department shall make available to the public a list of individuals permitted to withdraw blood for determination of its alcohol or drug content.

(2) The department may publish amended lists.

**R426-5-3200. Background Screening Clearance for EMS Licensure.**

(1) The department shall conduct a background screening on each individual who seeks licensure or renewal as an EMR, EMT, AEMT, paramedic, or EMD. The department shall approve EMS licensure upon successful completion of a background screening. Background clearance indicates the individual does not pose an unacceptable risk to public health and safety.

(2) The individual seeking licensure or renewal shall submit the completed applications, including fees, before submission of fingerprints.

(3) The department may review relevant information obtained from the following sources:

(a) Department of Public Safety arrest, conviction, and disposition records described in Title 53, Chapter 10, Criminal Investigations and Technical Services Act, including information in state, regional, and national records files;

(b) juvenile court arrest, adjudication, and disposition records, as allowed under Section 78A-6- 209;

(c) federal criminal background databases available to the state;

(d) the Department of Health and Human Services' Division of Child and Family Services Licensing Information System described in Section 80-2-1001;

(e) child abuse or neglect findings described in Section 78A-6-3a;

(f) the Department of Health and Human Services' Division of Aging and Adult Services vulnerable adult abuse, neglect, or exploitation database described in Section 26B-6-210; and

(g) licensing and certification records of individuals licensed or certified by the Division of Professional Licensing under Title 58, Occupations and Professions.

(4) If the department determines an individual is not eligible for licensure based upon the criminal background screening and the individual disagrees with the information provided by the Criminal Investigations and Technical Services Division or court record, the individual may challenge the information as provided in Title 77, Chapter 18a, The Appeal.

(5) If the department determines an individual is not eligible for licensure based upon the noncriminal background screening and the individual disagrees with the information provided, the individual may challenge the information through the appropriate agency.

(6) If an individual has been convicted, has pleaded no contest, is subject to a plea in abeyance, or a diversion agreement, for the following offenses within the past 15 years, they may not be approved for licensure:

(a) any felony or Class A misdemeanor under Title 76, Chapter 5, Offenses Against the Individual;

(b) any felony or Class A misdemeanor under Title 76, Chapter 9, Offenses Against Public Order and Decency, excluding Sections 76-9-103 and 76-9-108;

(c) any felony or Class A or B misdemeanor under the following:

(i) Section 76-9-301.8, Bestiality;

(ii) Section 76-9-702.1, Sexual battery; or

(iii) Section 76-9-702.5, Lewdness involving a child.

(7) If an individual has been convicted or has pleaded no contest for the following offenses, 15 years have passed since the last conviction, and the offense cannot be expunged, they shall be considered for licensure:

(a) any felony or Class A misdemeanor under Title 76, Chapter 5, Offenses Against the Individual;

(b) any felony or Class A misdemeanor under Title 76, Chapter 9, Offenses Against Public Order and Decency, excluding Sections 76-9-103 and 76-9-108; or

(c) any felony or Class A or B misdemeanor under the following:

(i) Section 76-9-301.8, Bestiality;

(ii) Section 76-9-702.1, Sexual battery; or

(iii) Section 76-9-702.5, Lewdness involving a child.

(8) If an individual has been convicted, has pleaded no contest, is subject to a plea in abeyance, or a diversion agreement, for the following offenses, they shall be considered for licensure:

(a) any felony or Class A misdemeanor not listed in Subsections (6)(a) through (6)(c).

(b) any class B or C misdemeanor under Title 76, Chapter 5, Offenses Against the Individual;

(c) any felony, Class A misdemeanor under Title 76, Chapter 6, Offenses Against Property;

(d) any felony or Class A misdemeanor under Title 76, Chapter 6a, Pyramid Scheme Act;

(e) any felony or Class A misdemeanor under Title 76, Chapter 8, Offenses Against the Administration of Government;

(f) any felony, Class A misdemeanor under Title 76, Chapter 10, Offenses Against Public Health, Safety, Welfare and Morals;

(g) any felony, Class A, B, or C misdemeanor under the following:

(i) Sections 76-10-1201 through 79-10-1229.5, Pornographic and Harmful Materials and Performances; and

(ii) Sections 76-10-1301 through 76-10-1314, Prostitution;

(iii) any felony or Class A misdemeanor under Section 76-10-2301, Contributing to the Delinquency of a Minor;

(h) any felony or Class A or B misdemeanor under Utah Motor Vehicles Traffic Code Sections 41-6a-502, 41-6a-502.5, and 41-6a-517.

(i) any felony or Class A or B misdemeanor under Title 58, Chapter 37, Utah Controlled Substances Act.

(j) any felony or Class A or B misdemeanor under Section 32B-4-409.

(k) any criminal conviction or pattern of convictions that may represent an unacceptable risk to public health and safety.

(9) An individual seeking licensure who has been convicted or has pleaded no contest, is subject to a plea in abeyance, a diversion agreement, a warrant for arrest, arrested or charged for any of the identified offenses in Subsection R426-5-3200(8), shall be considered for licensure.

(10) A licensed EMS personnel who is subject to a warrant of arrest, arrested or charged for any of the identified offenses in Subsection R426-5-3200(8), and after an investigation and peer review board process as established in Section R426-5-3400, the department may issue license, suspend or revoke a license, or place a license on probation.

(11) A licensed EMS personnel who is subject to a warrant of arrest, arrested, or charged for any of the identified offenses in Subsection R426-5-3200(6) shall immediately have the individual's EMS license placed on restriction pending the outcome of a department investigation as per the process established in Section R426-5-3300.

(12) As required by Subsection 26B-4-124(5)(b), juvenile court records shall be reviewed if an individual is:

(a) under the age of 28; or

(b) over the age of 28 and has convictions or pending charges identified in Subsection R426-5-3200(6).

(13) Adjudications by a juvenile court may exclude the individual from licensure if the adjudications refer to an act that, if committed by an adult, would be a felony or a misdemeanor of the identified offenses in Subsection R426-5-3200(6).

(14) The department may deny licensure based on a supported finding from:

(a) the Department of Health and Human Services' Division of Child and Family Services Licensing Information System described in Section 80-2-1001;

(b) child abuse or neglect findings described in Section 78A-6-3a; or

(c) the Department of Health and Human Services' Division of Aging and Adult Services vulnerable adult abuse, neglect, or exploitation database described in Section 26B-6-210;

(15) The department may deny licensure based on a finding from licensing records of individuals licensed by the Division of Professional Licensing under Title 58, Occupations and Professions.

(16) Results of background screening review, as listed in Subsection R426-5-3200(7), (8), (12), or (14), may be reviewed to determine under what circumstance, if any, the individual may be granted licensure. The following factors may be considered:

(a) types and number;

(b) passage of time;

(c) surrounding circumstances;

(d) intervening circumstances; and

(e) steps taken to correct or improve.

(17) The department shall rely on relevant information identified in Subsection R426-5-3200(2) as conclusive evidence and may deny licensure based on that information.

(18) A licensed EMS personnel may appeal a department licensure decision as listed in Subsection R426-5-3200(16) to the department per the process established in Section R426-5-3400.

(19) A licensed EMS personnel who has been arrested, charged, or convicted shall notify the department and each employer or affiliated entity who utilizes the EMS personnel's license within seven business days. The licensed EMS personnel shall also notify the department of each entity they work for or are affiliated with.

(20) A licensed or designated EMS provider who is notified or becomes aware of a licensed EMS personnel's arrest, charge, or conviction shall notify the department within seven business days.

**R426-5-3300. Review and Investigation of Complaints and Referrals.**

(1) The department shall review each complaint filed against an EMS provider and a licensed EMS personnel.

(2)(a) The department may investigate designated or licensed provider complaints.

(b) The department may conduct interviews with a provider or EMS personnel.

(c) The department may allow the licensed EMS personnel or provider an opportunity to respond to the allegations and to provide supporting witnesses and documentation.

(d) Based on the investigation, the department shall make a recommendation to the department's office director.

(e) If the department's recommendation is that the licensed EMS personnel or provider is to be placed on probation or suspension, the department's recommendation shall include terms and conditions.

(f) The department may take action against a designated or licensed provider's license or designation based on the investigative findings.

(g) The department shall notify the licensed EMS personnel or provider in writing of the department's decision within 30 days of completion of the investigation.

(3)(a) Licensed EMS personnel complaints shall be investigated either by the department or by the primary affiliated provider (PAP).

(b) The department shall investigate and may take action if the department determines any of the following applies to a licensed EMS personnel:

(i) the licensed EMS personnel demonstrates a threat to themselves or to a coworker;

(ii) the licensed EMS personnel demonstrates a threat to the public health;

(iii) the licensed EMS personnel demonstrates a threat to the safety or welfare of the public;

(iv) the licensed EMS personnel potentially violated Subsection R426-5-3200(4); or

(v) the department determines the risk cannot be reasonably mitigated.

(c) The department may place the licensed EMS personnel on a restricted license while an investigation is pending until terms are reached for a provisional license using the process outlined in Subsection R426-5-3300(5)(f)(i).

(d) The department may conduct interviews with any individual necessary. The department may gather information and evidence, which may include requiring the licensed EMS personnel to submit to a drug or alcohol screening or any other appropriate evaluation.

(e) The licensed EMS personnel shall have an opportunity to respond to the allegations and to provide supporting witnesses and documentation.

(f) Once the department has completed its investigation, it shall submit the report with any findings and recommendations to the peer review board per Subsection R426-5-3400(4) for review.

(g)(i) The PAP shall investigate a complaint against the licensed EMS personnel who the department refers to the PAP.

(ii) The PAP investigation shall:

(A) be investigated by the licensed or designated EMS provider's EMS-endorsed training officer or designee; and

(B) be completed and findings submitted to the department within 30 calendar days from receipt of complaint from the department;

(iii) If the department determines that the PAP actions are insufficient, the department may initiate an investigation of the licensed EMS personnel which follows the department and the peer review board process.

(4) The department shall investigate an EMS personnel's license, a provider's license or designation, or an individual's department endorsement for any of the following reasons:

(a) refusal to submit to a drug test requested by the EMS provider or the department;

(b) failure to report by an individual or any affiliated provider pursuant to Subsections R426-5-3200(19) and R426-5-3200(20);

(c) non-prescribed use of or addiction to narcotics or drugs;

(d) use of alcoholic beverages or being under the influence of alcoholic beverages at any level while on call or on duty as an EMS personnel or while driving an EMS vehicle;

(e) being under the influence of a prescribed or non-prescribed medication or drug, legal or illegal, while on call or on duty as a licensed EMS personnel that affects the person's ability to operate or function safely;

(f) failure to comply with the training, licensing, or relicensing requirements for the license;

(g) failure to comply with a contractual agreement as an EMS instructor, a training officer, or a course coordinator. Action taken by the department on this item shall only be against the individual's ability to perform this particular function and would not affect their base EMS license;

(h) fraud or deceit in applying for or obtaining a license;

(i) fraud, deceit, lack of professional competency, patient abuse, or theft in the performance of the duties as a licensed EMS personnel;

(j) false or misleading information or failure to disclose criminal background information during an investigation or an EMS personnel peer review board proceeding;

(k) unauthorized use or removal of narcotics, medications, supplies, or equipment from a provider, emergency vehicle, or health care facility;

(l) performing procedures or skills beyond the level of an individual's EMS licensure or provider's licensure;

(m) violation of laws pertaining to medical practice, drugs, or controlled substances;

(n) mental incompetence as determined by a court of competent jurisdiction;

(o) demonstrated inability and failure to perform adequate patient care;

(p) inability to provide EMS with reasonable skill and safety because of illness, or as a result of any other mental or physical condition, when the individual's condition demonstrates a clear and unjustifiable threat or potential threat to oneself, coworkers, or the public health, safety, or welfare that cannot be reasonably mitigated;

(q) misrepresentation of an individual's level of licensure;

(r) failure of a licensed EMS personnel to display a clearly identifiable level of EMS licensure during an EMS response;

(s) unsafe, unnecessary, or improper operation of an emergency vehicle that would likely cause concern or create a danger to the general public; or

(t) improper or unnecessary use of emergency equipment.

(5)(a) Background screening referrals may be submitted to the department for review and investigation.

(b) The department shall review any case referred under Section R426-5-3200.

(c) The department may require the licensed EMS personnel to provide the proper criminal background documentation.

(d) The licensed EMS personnel shall notify the department of each entity they work for or are affiliated with or that they may become affiliated with in connection with their EMS licensure.

(e) Failure to comply with any department requirements may result in disciplinary action against the EMS personnel's licensure.

(f)(i) The department may negotiate with the licensed EMS personnel and their PAP to determine terms and conditions of the EMS personnel's provisional licensure.

(ii) When the department determines an EMS personnel's license will be restricted, the department shall notify both the licensed EMS personnel and each licensed or designated provider the individual is affiliated with.

(iii) The department shall try to contact and begin negotiations with the PAP and the licensed EMS personnel. Each individual shall try to determine reasonable terms and conditions to the EMS personnel's license.

(iv) If terms and conditions are agreed upon between the parties, the licensed EMS personnel and each affiliated licensed or designated provider shall be notified immediately. This notification shall include information that the licensed EMS personnel is under a provisional license with terms and conditions until the resolution of any criminal charge or the completion of an investigation.

(v) If the licensed EMS personnel is not employed or affiliated with a licensed or designated provider or if terms and conditions are not agreed upon, the department may act as necessary to protect the public's best interest.

(vi) The department, the licensed EMS personnel, and the PAP, if applicable, shall sign the terms of the provisional licensure agreement. Any other affiliated licensed or designated EMS providers shall be notified of the provisional license and its terms and conditions.

(vii) Once the provisional license has been signed, the department shall notify any known EMS provider the licensed EMS personnel is affiliated with.

(viii) If an affiliated licensed or designated EMS provider or the licensed EMS personnel fail to abide by the terms and conditions of a provisional license, they may be subject to sanctions by the department.

(g) The department shall submit recommended background clearance actions for licensed EMS personnels to the peer review board under Section R426-5-3400.

(6) Appeal process:

(a)(i) If a licensed or designated EMS provider or a licensed EMS personnel chooses to appeal an action by the department, they may appeal to the EMS committee or pursue a remedy under the Utah Administrative Procedures Act, Title 63G, Chapter 4, Administrative Procedures Act.

(ii) If the department action is appealed to the EMS committee, then the recommendation shall be given to the department executive director for a final decision.

(b) If a licensed EMS personnel chooses to appeal an action by the department, they may appeal to the executive director, or pursue a remedy under the Utah Administrative Procedures Act, Title 63G, Chapter 4, Administrative Procedures Act.

**R426-5-3400. EMS Personnel Peer Review Board.**

(1) The EMS personnel peer review board is created under Subsection 26B-4-102(4).

(2) The EMS personnel peer review board shall be composed of the following 15 members appointed by the executive director of the Department of Health and Human Services:

(a) one EMS administrative officer representing a licensed ambulance provider, a licensed paramedic provider, or a designated quick response unit provider from a county of the first or second class;

(b) one EMS administrative officer representing a licensed ambulance provider, a licensed paramedic provider, or a designated quick response unit provider from a county of the third through sixth class;

(c) one educational representative from an accredited EMS training program;

(d) one physician certified and practicing as an EMS medical director;

(e) one EMD;

(f) two representatives from professional employee groups, one fire based, and one non-fire based;

(g) two endorsed EMS training officers;

(h) two non-supervisory licensed EMTs;

(i) two non-supervisory licensed AEMTs; and

(j) two non-supervisory licensed paramedics.

(3) The EMS personnel peer review board member's terms of office shall comply with the following criteria.

(a) Except as provided in Subsection (2)(b), members shall be appointed for a six-year term.

(b) The department shall adjust the length of terms to ensure the terms of members of the board are staggered so about one-third of the board is appointed every two years.

(c) No member shall serve consecutive full terms.

(d) When a vacancy occurs in the membership of the board for any reason, the executive director of the department shall appoint the replacement for the balance of the unexpired term. If the balance of the term is greater than 50% of the initial term, then the term shall be considered a full term.

(e) The EMS personnel peer review board shall organize and select one of its members as chair and one of its members as vice chair to serve no more than two years in each position.

(f) If a board member becomes ineligible for the EMS personnel peer review board membership position through promotion, an increase in level of licensure, or transfer out of the employment position that qualified them for the appointment, they shall be replaced at the next two-year interval.

(g) An equitable mix of urban and rural members is preferred.

(4) The EMS personnel peer review board meeting shall take place quarterly.

(a) Regular meetings shall be noticed and posted to employers and posted in accordance with the Utah Open and Public Meetings Act, Section 52-4-202.

(b) Failure to attend three or more consecutive meetings by any member may be grounds for removal of that member and replacement in accordance with Subsection (2)(d).

(c) A member may not receive compensation or benefits from the department for the member's service. The member may receive per diem and travel expenses in accordance with department rules and policies.

(5) Once a complaint or background screening finding against a licensed EMS personnel is investigated, the department shall refer the case and provide a report with any findings and recommendations to the EMS personnel peer review board.

(6) If the EMS personnel peer review board chooses to recommend any action that deviates from the department recommendation, the board shall provide written justification for that recommendation.

(7) The EMS personnel peer review board may make recommendations to the department's office director of:

(a) no department action;

(b) a letter of notice;

(c) probation of the licensed EMS personnel's license with specific terms and conditions for a period;

(d) suspension of the licensed EMS personnel's license for a defined period;

(e) permanent revocation of the licensed EMS personnel's license; or

(f) a combination of any of these actions.

(8) If the department's office director modifies the recommended action of the EMS personnel peer review board, the department's office director shall attach a written letter of dissent noting the reasoning for the decision. The department's office director shall then notify the EMS personnel peer review board of the dissent and action taken.

(9) The department shall notify the licensed EMS personnel of any action taken within 15 days of the decision by mail.

(10) An action to restrict, place on probation, suspend, or revoke the licensed EMS personnel's license shall be done in accordance with Title 63G, Chapter 4, Administrative Procedures Act.

**R426-5-3500. EMS Rules Task Force.**

(1) The EMS rules task force is created under Title 26B, Chapter 4, Part 1, Utah EMS System.

(2) The EMS rules task force shall be composed of the following members appointed by the executive director of the Department of Health and Human Services:

(a) a representative from the Utah Fire Chiefs' Association;

(b) a representative from the Utah Rural EMS Directors' Association;

(c) an EMS medical director;

(d) a representative from a privately owned EMS agency;

(e) a rural EMS medical dispatch representative;

(f) a paramedic licensed representative;

(g) an urban EMS medical dispatch representative;

(h) an Emergency Nurses Association representative;

(i) a course coordinator from an accredited EMS training program;

(j) an endorsed EMS training officer;

(k) a representative from the state EMS committee;

(l) a designated trauma center representative;

(m) a designated patient receiving facility representative; and

(n) a designated nonemergency secured behavioral patient transport representative.

(3) The EMS rules task force member's terms of office will comply with the following criteria.

(a) Except as provided in Subsection (2)(b), members shall be appointed for a three-year term.

(b) The department shall adjust the length of terms to ensure the terms of members of the EMS rules task force are staggered so about one-third of the EMS rules task force is appointed every two years.

(c) Members may serve two consecutive full terms.

(d) When a vacancy occurs in the membership for any reason, the department shall solicit applications for replacement for the balance of the unexpired term. If the balance of the term is greater than 50% of the initial term, then the term shall be considered a full term.

(e) The EMS rules task force shall organize and select one of its members as chair and one of its members as vice chair to serve no more than two years in each position.

(f) If an EMS rules task force member becomes ineligible for the EMS rules task force membership position through promotion, an increase in level of license, or transfer out of the employment position that qualified them for the appointment, they shall be replaced at the next two-year interval.

(g) An equitable mix of urban and rural members is preferred.

(4) Regular meetings of the EMS rules task force shall be scheduled as determined by the membership and the department.

**KEY: emergency medical services**

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