

IC 10-19-7

Chapter 7. Division of Fire and Building Safety

IC 10-19-7-1

Division established

Sec 1. The division of fire and building safety is established within the department.

As added by P.L.22-2005, SEC.17.

IC 10-19-7-2

Duties

Sec. 2. The division shall administer the following:

- (1) IC 16-31.
- (2) IC 22-11.
- (3) IC 22-12.
- (4) IC 22-13.
- (5) IC 22-14.
- (6) IC 22-15.

As added by P.L.22-2005, SEC.17.

IC 10-19-7-3

State fire marshal as deputy executive director; duties

Sec. 3. (a) The state fire marshal appointed under IC 22-14-2-2 shall do the following:

- (1) Serve as a deputy executive director to manage the division.
- (2) Administer the division.
- (3) Provide staff to support the fire prevention and building safety commission established by IC 22-12-2-1.

(b) The state fire marshal may not exercise any powers or perform any duties specifically assigned to either of the following:

- (1) The fire prevention and building safety commission.
- (2) The state building commissioner.

(c) The state fire marshal may delegate the state fire marshal's authority to the appropriate division staff.

As added by P.L.22-2005, SEC.17. Amended by P.L.1-2006, SEC.180; P.L.218-2014, SEC.2.

IC 10-19-7-4

Repealed

(As added by P.L.22-2005, SEC.17. Repealed by P.L.218-2014, SEC.3.)

IC 10-19-7-5

State emergency medical services director; qualifications; appointment; duties

Sec. 5. (a) For purposes of this section, "EMS" means emergency medical services.

(b) For purposes of this section, "state EMS medical director" refers to the state emergency medical services medical director

appointed under subsection (c).

(c) The executive director shall appoint an individual to serve as the state emergency medical services medical director. The individual must have the following qualifications:

- (1) Thorough knowledge of state EMS laws and administrative rules and regulations.
- (2) At least five (5) years experience in the following:
 - (A) Medical direction of out of hospital EMS.
 - (B) Emergency department treatment of acutely ill and injured patients.
- (3) Significant experience and familiarity with the following:
 - (A) The design and operation of statewide EMS systems.
 - (B) Working with national and other state EMS committees.
- (4) At the time of the individual's appointment, has a valid and unrestricted license to practice medicine in Indiana.
- (5) Be certified by the American Board of Emergency Medicine.
- (6) Other areas of knowledge and expertise that the executive director determines essential.

The state EMS medical director shall be an employee of the department.

(d) The executive director shall submit the name of the individual whom the executive director would like to appoint as state EMS medical director to the Indiana emergency medical services commission created by IC 16-31-2-1. The commission may, by a majority of the members, vote not later than thirty (30) days after the submission on whether to approve the appointment. If the commission:

- (1) does not take any action; or
- (2) by a majority of the commission votes to approve the appointment of the individual;

not later than thirty (30) days after, the appointment shall become effective. If a majority of the commission votes not later than thirty (30) days after the submission of the appointment to not approve the appointment, the executive director shall restart the appointment process and submit an alternative individual for appointment.

(e) The state EMS medical director shall oversee all pre-hospital aspects of the statewide EMS system, including the following:

- (1) Medical components for systems of care that interface or integrate with the statewide EMS system, including the following:
 - (A) Statewide planning for trauma, burn, cardiac, and stroke care.
 - (B) Domestic preparedness.
 - (C) EMS for children.
- (2) For all levels of emergency responders, establishment of the following:
 - (A) Statewide model guidelines and best practices for all patient care activities to ensure delivery of medical care consistent with professionally recognized standards.

- (B) A statewide EMS continuous quality improvement program.
- (C) A statewide EMS advocacy program.
- (3) In cooperation with appropriate state and local agencies, training and certification of all EMS providers.
- (f) The state EMS medical director shall assist the executive director on all issues related to statewide EMS, including the following:
 - (1) Consulting with EMS medical directors.
 - (2) In consultation with the Indiana emergency medical services commission created by IC 16-31-2-1, providing guidance and assistance on the following matters:
 - (A) Scope of practice for EMS providers.
 - (B) Restrictions placed on EMS certifications.
 - (C) Appropriate corrective and disciplinary actions for EMS personnel.
 - (D) Education and training on emerging issues in EMS.
 - (3) EMS system research.
 - (4) Coordination of all medical activities for disaster planning and response.
 - (5) Improving quality of care, research, and injury prevention programs.

As added by P.L.188-2014, SEC.1.