

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2011	2012	2013	2014	2015
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	_____	_____	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	<u>~0~</u> <i>see below</i>	_____	_____	_____	_____
 # ADDITIONAL FTE POSITIONS (Cumulative)	_____	_____	_____	_____	_____

Is Item Included in Current Budget? Yes _____ No _____

Budget Account No.: Fund _____ Dept _____ Unit _____ Object _____

B. Recommended Sources of Funds/Summary of Fiscal Impact:

* There is no fiscal impact associated with the approval of this Agreement.

C. Departmental Fiscal Review: *in-kind match*

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Dev. and Control Comments:

[Signature] 6/2/11
OFMB VA 6/2/11

[Signature] 6/3/11
Contract Dev. and Control

B. Legal Sufficiency

This Contract complies with our contract review requirements.

[Signature] 6/6/11
Assistant County Attorney

C. Other Department Review:

Department Director

THIS SUMMARY IS NOT TO BE USED AS A BASIS FOR PAYMENT.

**AGREEMENT BY AND BETWEEN PALM BEACH COUNTY
AND FLORIDA MEDICAL TRAINING INSTITUTE, INC.
FOR CLINICAL FIELD EXPERIENCE**

This AGREEMENT entered into this ____ day of _____, 2011, by and between Florida Medical Training Institute, Inc. (Federal ID#59-3549963), a Florida for Profit corporation (hereinafter referred to as the "INSTITUTE") and Palm Beach County, Florida, a political subdivision of the State of Florida, by and through its Board of County Commissioners (hereinafter referred to as "COUNTY").

WITNESSETH

WHEREAS, the COUNTY and the INSTITUTE desire that the public interest be served by insuring a continuing source of competent health care professionals; and

WHEREAS, the INSTITUTE offers duly approved paramedic and emergency medical technician ("EMT") training programs; and

WHEREAS, Section 401.2701, Florida Statutes, requires that paramedic and EMT training programs contract with a Florida-licensed emergency medical services provider to conduct the field experience portion of the education program; and

WHEREAS, the INSTITUTE desires that students enrolled in its paramedic and EMT training programs obtain clinical field experience with the COUNTY; and

WHEREAS, the COUNTY desires to provide the necessary facilities and personnel, through its Fire-Rescue Department, for said clinical field experience and hereby determines that doing so furthers the public health, safety and welfare.

NOW, THEREFORE, for and in consideration of the promises and mutual covenants and agreements herein contained, the parties hereto agree as follows:

Section 1. CONTRACT MONITORS

The COUNTY's representative and contract monitor during the performance of this Agreement is the Fire Rescue Administrator, whose telephone number is 561-616-7000. The INSTITUTE's representative and contract monitor during the performance of this Agreement is Scott A. Schein, whose telephone number is 954-752-1414.

Section 2. CLINICAL FIELD EXPERIENCE PROVIDED BY COUNTY

A. COUNTY agrees to make available, as practical, its ALS responder units and other units used by COUNTY in the emergency care of the sick or injured in order to provide clinical field experience for students enrolled in the INSTITUTE's duly approved paramedic and EMT training programs. Under the supervision of Palm Beach County Fire-Rescue paramedic personnel designated by the COUNTY, clinical field experiences will consist, as practical, of those activities and/or procedures outlined in section 401.23(1), Florida Statutes, for paramedic students or section 401.23(7), Florida Statutes, for EMT students, and other procedures required as part of the field experience by the DOT EMT-Paramedic National Standard Curriculum for paramedic students or the DOT EMT-Basic National Standard Curriculum for EMT students, as applicable. Clinical field experiences shall be limited to those identified activities and

procedures. At all times during the clinical field experience with the COUNTY, the students will act under the direction of the designated COUNTY personnel, who shall always be primary care givers. Students shall follow all applicable laws, rules and regulations, and all COUNTY policies, procedures and protocols, relating to such training programs, emergency medical services and patient care.

B. COUNTY reserves the right to refuse its facilities and services to any student, faculty member or instructor who, in the COUNTY's sole discretion, does not meet the professional or other requirements of the COUNTY, or any other appropriate authority controlling, directing or affecting the COUNTY in its delivery of emergency medical services. COUNTY further reserves the right to refuse its facilities and services to any student, faculty member or instructor, which it, in its sole discretion, believes has engaged in any conduct which is unprofessional or contrary to or inconsistent with the terms and conditions of this Agreement or any applicable COUNTY rules, regulations or policies.

Section 3. PROVISIONS FOR INSTRUCTION AND SUPERVISION OF STUDENTS

A. The INSTITUTE has undertaken to educate and train students in its duly approved Paramedic and EMT Programs (hereinafter "students"). The control of this program shall reside with the INSTITUTE.

B. The INSTITUTE shall inform its students, faculty members and instructors of all applicable rules, regulations, policies, procedures, and medical protocols of Palm Beach County Fire-Rescue. The INSTITUTE shall ensure that its students, faculty members and instructors are familiar with and that they comply with such rules, regulations, policies, procedures, and medical protocols at all times during the performance of this Agreement. Notwithstanding the oversight, supervision and/or direction of students by COUNTY personnel during the field experiences or any other provisions in this Agreement, the INSTITUTE shall have sole and ultimate responsibility and liability for the instruction, training, oversight, supervision, actions and omissions of its students while they are participating in the clinical experiences provided by the COUNTY under this Agreement. The INSTITUTE shall assure that its students, while obtaining the clinical field experience provided hereunder, act in the best interests of the patients and in accordance with the terms and conditions of this Agreement.

C. The schedule for the clinical field experiences provided for by this Agreement shall be established, and may be amended, by mutual agreement of the parties' contract monitors. The schedule may be altered from time to time by the COUNTY in its sole discretion if appropriate responder units or personnel are not available or for any other reason that might negatively impact the COUNTY's services, as determined solely by the COUNTY. The INSTITUTE shall provide the COUNTY with a list of participating students, including whether each student is participating as an Emergency Medical Technician (EMT) student or a Paramedic student.

D. Prior to scheduling students for clinical experiences with COUNTY, the INSTITUTE shall provide COUNTY with written documentation verifying that all students have been trained in and have demonstrated, through clinical skills labs, proficiency in all of the activities and procedures referenced in Section 2. The INSTITUTE shall be responsible for assuring that its students, while participating in the clinical field experiences with the COUNTY, conduct only those activities and procedures for which the INSTITUTE has verified the student's training and demonstrated proficiency. The INSTITUTE warrants that all students scheduled for clinical experiences with COUNTY shall be fully qualified and authorized or permitted under state and

local law to engage in the clinical experiences contemplated under this Agreement. All students while on COUNTY premises, in COUNTY vehicles, or otherwise participating in the clinical experiences hereunder, shall comply with all COUNTY requirements and policies governing conduct, safety and security.

E. Prior to scheduling students for clinical experiences, the INSTITUTE shall provide COUNTY with written verification that all students have been trained and demonstrated proficiency in body substance isolation and infection control procedures, including but not limited to the use of gloves, masks, and eye and respiratory protection.

F. For use during the clinical field experiences, the INSTITUTE shall provide each student with a stethoscope to obtain patient vital signs and with the appropriate eye protection to protect the student from blood borne pathogens. The INSTITUTE shall also provide each student with the appropriate respiratory protection equipment, properly fit-tested by the INSTITUTE, in accordance with 29 CFR 1910.134, Occupational Safety & Health Administration, to protect against airborne pathogens. The INSTITUTE assumes full responsibility for assuring that its students have and use the appropriate, properly fitted, protection equipment. COUNTY assumes no responsibility relating to the equipment, including for assessing or assuring that the equipment is properly fitted and used.

G. The INSTITUTE shall provide the forms and methodologies to be utilized by COUNTY personnel to evaluate student performances during the clinical field experiences. However, the INSTITUTE shall be fully responsible for evaluating its students' progress and determining grades of the students. The INSTITUTE's program supervisor will make regular calls to COUNTY in order to assess the effectiveness of the field experience program. While on COUNTY premises, the program supervisor shall comply with all COUNTY requirements and policies governing conduct, safety and security.

H. Prior to scheduling students for clinical experiences, the INSTITUTE shall provide COUNTY with written verification that all students have been determined to be fit to engage in the clinical experiences and activities contemplated under this Agreement, including that all students are current on all necessary immunizations and otherwise in compliance with any applicable regulations and INSTITUTE and COUNTY policies.

I. Prior to scheduling students for clinical experiences, the INSTITUTE shall provide COUNTY with a duly executed written release, attached hereto as **Exhibit A**, from each student.

J. All students' meals and all transportation to and from the designated clinical location shall be provided by the students or the INSTITUTE. The COUNTY shall have no responsibility for meals and/or transportation.

K. COUNTY and the INSTITUTE will comply with any applicable provisions of Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, and Section 504 of the Rehabilitation Act of 1973, and any other applicable laws and regulations. Each party warrants and represents that it does not, and agrees that it will not, discriminate against any student, employee, or applicant for employment or registration in the course of study because of race, sex, sexual orientation, gender identity and expression, color, religion, disability, age, marital status, familial status, national origin, or ancestry.

L. The INSTITUTE acknowledges and agrees that the COUNTY's provision of emergency medical services is subject to the Health Insurance Portability and Accountability Act of 1996, as amended by the Health Information Technology for Economic and Clinical Health Act ("HITECH"), and the regulations promulgated thereunder (including privacy and security rules) (collectively herein referred to as "HIPAA"), all as may be amended from time to time; and that the INSTITUTE's students who participate in the clinical experiences provided by the COUNTY hereunder may receive and have access to protected health information, including electronic protected health information, that is protected by HIPAA. Accordingly, the parties agree that no student shall participate in the clinical experiences provided by COUNTY hereunder unless and until the student completes a HIPAA training program approved by Palm Beach County Fire-Rescue and executes a HIPAA confidentiality and training acknowledgment agreement as attached hereto as **Exhibit B**. Prior to scheduling any students for clinical experiences, the INSTITUTE shall provide COUNTY with a duly executed confidentiality and training acknowledgment agreement from each student.

Furthermore, the INSTITUTE specifically acknowledges and agrees that students participating in the clinical experiences hereunder shall not be authorized to disclose any protected health information to the INSTITUTE, including its program supervisors, faculty members and instructors, for any purpose whatsoever, except to the extent necessary for the INSTITUTE to assess and confirm the skills practiced by its students during their clinical field experiences hereunder, or as required by law. Any protected health information provided to the INSTITUTE from its students shall be strictly limited to the minimum necessary to accomplish the limited purpose of assessing and confirming the students' skills. The INSTITUTE shall instruct its students, faculty members, instructors and program supervisors as to this limitation and assure their compliance with such, including redaction of all individually identifiable patient information that is not required to accomplish the limited purpose of assessing and confirming the students' skills. The INSTITUTE agrees that any faculty member, instructor or program supervisor who may need to receive or review any protected health information for the limited purpose of assessing and confirming students' skills shall execute a HIPAA confidentiality and training acknowledgment agreement as attached hereto as **Exhibit C**, and provide the executed agreement to the COUNTY. The INSTITUTE, including its faculty members, instructors and program supervisors, shall not request or receive protected health information from COUNTY personnel.

The INSTITUTE recognizes that any protected health information disclosed to the INSTITUTE or its students under this Agreement is disclosed as part of the COUNTY's health care operations in its role of providing paramedic and EMT students with field experience, as required by Section 401.2701, Florida Statutes. The INSTITUTE and its students shall maintain the confidentiality of any protected health information provided to them hereunder, and shall not use or disclose such protected health information, except as part of the students' clinical experiences hereunder and the INSTITUTE's assessment and confirmation of the skills practiced by its students during said clinical experiences, or as required by law. The INSTITUTE shall develop and maintain appropriate safeguards to protect the confidentiality and security of such protected health information and to prevent its use or disclosure except as permitted herein. Should any unauthorized protected health information be disclosed to the INSTITUTE or any student, the INSTITUTE and student shall not use or further disclose said information and shall immediately notify the Palm Beach County Fire Rescue HIPAA Compliance Officer and return the protected health information to said Compliance Officer without maintaining any copies thereof. The provisions of this paragraph shall survive the expiration or earlier termination of this Agreement.

Section 4. RELATIONSHIP OF EMPLOYEES AND STUDENTS

This Agreement does not, and shall not be construed to, make any officer, employee or agent of the COUNTY an officer, employee or agent of the INSTITUTE for any purpose whatsoever; nor to make any officer, employee, agent, faculty member, instructor, or student of the INSTITUTE an officer, employee, agent, faculty member, instructor, or student of the COUNTY for any purpose whatsoever. Should the COUNTY report to the INSTITUTE any violation of its rules and regulations or other inappropriate conduct by an INSTITUTE student during a clinical experience, the INSTITUTE shall be responsible for determining any disciplinary action to be taken with respect to the student's participation in the INSTITUTE's program. However, the COUNTY maintains the right to prohibit any student from participating in the clinical experiences offered by COUNTY as set forth in Section 2B of this Agreement, and such shall not be deemed to be discipline of non-County employees by the COUNTY.

Neither party is authorized to make or enter into any contract, agreement, promise, representation or warranty on behalf of the other, unless the parties to this Agreement have entered into a written agreement expressly authorizing such.

Section 5. INSURANCE

A. The INSTITUTE shall not allow students to engage in any clinical field experience with COUNTY until evidence of required insurance for both the INSTITUTE and its students has been provided to COUNTY.

B. The INSTITUTE shall, at no cost to COUNTY, maintain, and require and assure that each student maintains, in effect at all times during the life of this Agreement EMT/Paramedic Errors & Omissions Liability insurance coverage, or similar Medical Malpractice Liability insurance coverage, at a limit of liability not less than \$1,000,000 per occurrence \$2,000,000 annual aggregate. This coverage shall be provided on a primary basis. The student coverage may be maintained by the INSTITUTE on behalf of each student.

C. The INSTITUTE shall, at its sole expense, maintain in effect at all times during the life of this Agreement Commercial General Liability insurance coverage at a limit of liability not less than \$1,000,000 Per Occurrence. The INSTITUTE warrants said coverage does not include any endorsement excluding Contractual Liability nor Cross Liability; and the coverage shall be endorsed with a 2026 Additional Insured - Designated Person or Organization, or similar Additional Insured endorsement, in favor of Palm Beach County, Board of County Commissioners, a Political Subdivision of the State of Florida, its Officers, Agents, and Employees. This coverage shall be provided on a primary basis.

D. The INSTITUTE hereby waives any and all rights of Subrogation against the COUNTY, its officers, employees and agents for each required policy. When required by the insurer, or should a policy condition not permit an insured to enter into a pre-loss agreement to waive subrogation without an endorsement, then INSTITUTE shall agree to notify the insurer and request the policy be endorsed with a Waiver of Transfer of rights of Recovery Against Others, or its equivalent. This Waiver of Subrogation requirement shall not apply to any policy, which a condition to the policy specifically prohibits such an endorsement, or voids coverage should INSTITUTE enter into such an agreement on a pre-loss basis.

E. The INSTITUTE shall agree to maintain Workers' Compensation Insurance & Employers' Liability in accordance with Florida Statute Chapter 440. The INSTITUTE agrees this coverage shall be provided on a primary basis.

F. The INSTITUTE shall deliver to COUNTY Certificate(s) of Insurance evidencing the required coverage for both the INSTITUTE and its students. The Certificate(s) of Insurance shall provide a minimum of ten (10) day endeavor to notify due to cancellation or non-renewal of coverage. The Certificate Holder address shall be: Palm Beach County, Fire Rescue Department, 405 Pike Road, West Palm Beach, Florida 33411.

G. COUNTY, by and through its Risk Management Department, in cooperation with the contracting/monitoring department, reserves the right to review, modify, reject or accept any required policies of insurance, including limits, coverages, or endorsements, herein from time to time throughout the term of this Agreement. COUNTY reserves the right, but not the obligation, to review and reject any insurer providing coverage because of its poor financial condition or failure to operate legally.

Section 6. INDEMNIFICATION

The INSTITUTE shall protect, defend, reimburse, indemnify, release, and hold harmless COUNTY, its agents, employees and elected officers from and against all claims, liability, expense, loss, cost, damages or causes of action of every kind or character, including attorney's fees and costs whether at trial or appellate levels or otherwise, arising during and as a result of the performance of the terms of this Agreement by the INSTITUTE, its agents, employees, officers, faculty members, instructors, and/or students, including but not limited to claims relating to patient care or treatment and claims relating to the use or disclosure of protected health information; or otherwise arising from the acts or omissions of the INSTITUTE, its agents, employees, officers, faculty members, instructors, and/or students; and/or arising from any and all negligent acts or omissions of the COUNTY, its officers, employees, and agents, relating in any way to the direction, supervision or instruction of any student during the performance of this Agreement.

Section 7. NOTICE OF SUIT

The INSTITUTE shall promptly notify COUNTY of any actual or threatened claim, suit, action, or proceeding at law or in equity arising out of any activities of the INSTITUTE or its officers, employees, agents, faculty members, instructors, or students within the scope of this Agreement.

Section 8. PREPARATION OF REPORTS

Should the COUNTY be required by the State of Florida or any other governmental agency to submit any certificate, document or report related in any manner to the activities covered by this Agreement, the INSTITUTE will cooperate and assist the COUNTY with the preparation of such.

Section 9. RECORDS

To the extent allowed by Chapter 119, Florida Statutes (Florida's Public Records Law), all written and oral information not in the public domain or not previously known, and all

information and data obtained, developed, or supplied by the COUNTY or at its expense will be kept confidential by the INSTITUTE and will not be disclosed to any other party, directly or indirectly, without the COUNTY's prior written consent unless required by a lawful court order or otherwise required by law.

The INSTITUTE shall maintain all records developed pursuant to this Agreement in accordance with Florida's Public Records Law and for a minimum of three years. The INSTITUTE shall provide COUNTY with access to all such records for the purpose of inspection or audit during normal business hours. Both parties shall comply with the Public Records Law.

Section 10. NONDISCRIMINATION

The INSTITUTE warrants and represents that all of its employees, students and applicants are treated equally without regard to race, sex, sexual orientation, gender identity and expression, color, religion, disability, age, marital status, familial status, national origin, or ancestry; and that no person shall, based on any of these grounds, be excluded from the benefits of, or be subjected to any form of discrimination under, any activity carried out by the performance of this Agreement.

Section 11. CONFLICT OF INTEREST

The INSTITUTE represents that it presently has no interest and shall acquire no interest, either direct or indirect, which would conflict in any manner with the performance of this Agreement, as provided for in Chapter 112, Part III, Florida Statutes. The INSTITUTE further represents that no person having any such conflict of interest shall be employed for the performance of this Agreement.

The INSTITUTE shall promptly notify the COUNTY's representative, in writing, by certified mail, of all potential conflicts of interest of any prospective business association, interest or other circumstance, which may influence or appear to influence the INSTITUTE's judgment or quality of performance under this Agreement. Such written notification shall identify the prospective business association, interest or circumstance, the nature of work that the INSTITUTE may undertake and request an opinion of the COUNTY as to whether the association, interest or circumstance would, in the opinion of the COUNTY, constitute a conflict of interest if entered into by the INSTITUTE. The COUNTY agrees to notify the INSTITUTE of its opinion by certified mail within thirty (30) days of receipt of notification by the INSTITUTE. If, in the opinion of the COUNTY, the prospective business association, interest or circumstance would not constitute a conflict of interest by the INSTITUTE, the COUNTY shall so state in the notification and the INSTITUTE shall, at its option, enter into said association, interest or circumstance and it shall be deemed not in conflict of interest with respect to the INSTITUTE's performance under the terms of this Agreement.

Section 12. SUCCESSORS AND ASSIGNS

The COUNTY and the INSTITUTE each binds itself and its partners, successors, executors, administrators, and assigns to the other party to this Agreement and to the partners, successors, executors, administrators, and assigns of such party in respect to all covenants of this Agreement. The INSTITUTE shall not assign, sublet, subcontract, convey or transfer its interest in the Agreement, in whole or in part, without the prior written consent of the COUNTY. Nothing in this Agreement shall be construed as creating any personal liability on the part of any officer,

employee or agent of COUNTY, nor shall it be construed as giving any rights or benefits hereunder to anyone other than COUNTY and the INSTITUTE.

Section 13. LICENSES AND APPROVALS

The INSTITUTE represents and warrants that it has and will continue to maintain all licenses and approvals required to conduct its business, and in particular its paramedic and EMT training programs, and that it will at all times conduct its activities in a responsible and reputable manner. Proof of such licenses and approvals shall be submitted to COUNTY prior to scheduling any students for clinical experiences hereunder and at any other time upon request.

Section 14. REMEDIES

This Agreement shall be governed by the laws of the State of Florida. Any legal action necessary to enforce this Agreement will be held in Palm Beach County. No remedy herein conferred upon any party is intended to be exclusive of any other remedy, and each and every such remedy shall be cumulative and shall be in addition to every other remedy given hereunder or now or hereafter existing at law or in equity, by statute or otherwise. No single or partial exercise by any party of any right, power, or remedy hereunder shall preclude any other or further exercise thereof.

Section 15. ENFORCEMENT COSTS

In any action brought by either party for the enforcement of the obligations of the other party, each party shall bear its own attorney's fees and costs.

Section 16. NOTICES

All written notices required by this Agreement shall be sent by certified mail, return receipt requested. If sent to the COUNTY, the notice shall be mailed to:

Palm Beach County Fire Rescue
405 Pike Road
West Palm Beach, Florida 33411
Attn: Fire-Rescue Administrator

If sent to the INSTITUTE, the notice shall be mailed to:

Florida Medical Training Institute, Inc.
7451 Wiles Road, Suite 105
Coral Springs, Florida 33067
Attn: Scott A. Schein, President, CEO

Each party may change its address upon written notice to the other.

Section 17. NO WAIVER

No waiver of any provision of this Agreement shall be effective unless it is in writing, signed by the party against whom it is asserted, and any such written waiver shall only be applicable to the specific instance to which it relates and shall not be deemed a continuing waiver.

Section 18. AVAILABILITY OF FUNDS

The COUNTY's performance under this Agreement is contingent upon an annual appropriation for its purpose by the Board of County Commissioners for each fiscal year.

Section 19. ARREARS

The INSTITUTE shall not pledge the COUNTY'S credit or make it a guarantor of payment or surety for any contract, debt, obligation, judgment, lien, or any form of indebtedness. The INSTITUTE further warrants and represents that it has no obligation or indebtedness that would impair its ability to fulfill the terms of this Agreement.

Section 20. REGULATIONS; LICENSING REQUIREMENTS

The INSTITUTE shall comply with all laws, ordinances and regulations applicable to the services contemplated herein, to include those applicable to conflict of interest and collusion. The INSTITUTE is presumed to be familiar with all federal, state and local laws, ordinances, codes and regulations that may in any way affect the services offered.

Section 21. CAPTIONS

The caption and section designations herein set forth are for convenience only and shall have no substantive meaning.

Section 22. JOINT PREPARATION

The preparation of this Agreement has been a joint effort of the parties, and the resulting document shall not, solely as a matter of judicial construction, be construed more severely against one of the parties than the other.

Section 23. SEVERABILITY

If any term or provision of this Agreement, or the application thereof to any person or circumstance, shall be held invalid or unenforceable by a court of competent jurisdiction, the remainder of this Agreement, or the application of such term or provision to persons or circumstances other than those as to which it is held invalid or unenforceable, shall not be affected; and every other term and provision of this Agreement shall be deemed valid and enforceable to the extent permitted by law.

Section 24. EFFECTIVE DATE, TERM AND TERMINATION

This Agreement shall take effect upon approval by both parties, and shall remain in effect through September 30, 2013. This Agreement may be terminated by either party for cause upon written notice to the other party. This Agreement may be terminated by either party without cause, and without penalty or recourse to either party for such termination, upon thirty (30) days written notice to the other party.

Section 25. SURVIVABILITY

Any provision of this Agreement which by its language or its nature imposes an obligation of a continuing nature or extending beyond the term of this Agreement, including warranties and representations, and obligations relating to records, protected health information, claims, indemnification and legal proceedings, shall survive the expiration or earlier termination of this Agreement.

Section 26. INSPECTOR GENERAL

Palm Beach County has established the Office of the Inspector General in Ordinance 2009-049, as may be amended, which is authorized and empowered to review past, present and proposed County contracts, transactions, accounts and records. The Inspector General has the power to subpoena witnesses, administer oaths and require the production of records, and audit, investigate, monitor, and inspect the activities of the INSTITUTE, its officers, agents, employees, and lobbyists in order to ensure compliance with contract requirements and detect corruption and fraud. Violations of Ordinance 2009-049 are punishable as provided for therein.

Section 27. INCORPORATION OF FACTS

The facts set forth above in the preamble to this Agreement are true and correct, and are hereby incorporated into this Agreement.

Section 28. ENTIRETY OF CONTRACTUAL AGREEMENT

The COUNTY and the INSTITUTE agree that this Agreement sets forth the entire agreement between the parties, and that there are no promises or understandings other than those stated herein. None of the provisions, terms and conditions contained in this Agreement may be added to, modified, superseded or otherwise altered, except by written instrument executed by the parties hereto.

Section 29. CONFLICT RESOLUTION

Any dispute or conflict between the parties that arises from the provision of services under this Agreement shall be presented in writing to the respective Contract Monitors. The Contract Monitors shall then meet to discuss the disputed issues and attempt in good faith to resolve the dispute or conflict.

[remainder of page left blank intentionally]

IN WITNESS WHEREOF, the undersigned parties made and executed this Agreement on the day and year first written above.

ATTEST:
SHARON R. BOCK, CLERK &
COMPTROLLER

PALM BEACH COUNTY, FLORIDA,
BY ITS BOARD OF COUNTY
COMMISSIONERS

By: _____
Deputy Clerk

By: _____
Karen T. Marcus, Chair

APPROVED AS TO FORM AND
LEGAL SUFFICIENCY

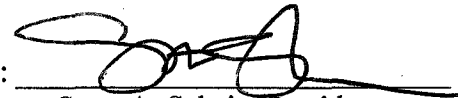
APPROVED AS TO TERMS AND
CONDITIONS

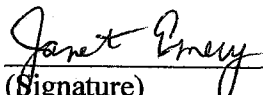
By: _____
County Attorney

By:  _____
Fire-Rescue

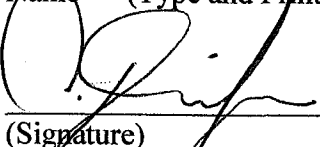
FLORIDA MEDICAL TRAINING
INSTITUTE, INC.

WITNESSES:

By:  _____
Scott A. Schein, President

 _____
(Signature)

JANET EMERY
Name (Type and Print)

 _____
(Signature)

Caitlin Dinkmeyer
Name (Type and Print)

CORPORATE SEAL

**RELEASE FROM LIABILITY,
COVENANT NOT TO SUE AND INDEMNIFICATION AGREEMENT**
(hereinafter referred to as "Release")

KNOWN TO ALL INDIVIDUALS BY THESE PRESENTS:

That _____ (hereinafter referred to as the "Student/Observer"), or his or her legal guardian on behalf of the Student/Observer if the Student/Observer is an unemancipated minor, hereby stipulates and agrees as follows:

I. RELEASE FROM LIABILITY

For and in consideration of being permitted participate in ride time experience(s) on County Fire Rescue Vehicles (hereinafter referred to singularly and collectively as "Ride Time Experiences"), the Student/Observer does hereby, and for his or her heirs, executors, administrators, successors, assigns and representatives, unconditionally release and forever discharge, to the extent permitted by law, Palm Beach County of and from any and all claims, damages, injuries, liabilities, expenses, losses, costs and/or causes of action of any nature whatsoever and consequences flowing therefrom including medical expenses and/or death, and including attorney's fees and costs whether at trial or appellate levels or otherwise, arising directly or indirectly from the Student/Observer's Ride Time Experiences or presence on County premises or at an emergency scene, whether caused by any negligent, wrongful or other act or omission of the County, the Student/Observer, a third party, or otherwise, whether such injuries or damages are known or unknown, permanent or otherwise, now existing or which may hereafter accrue.

II. COVENANT NOT TO SUE

For and in consideration of being permitted to participate in Ride Time Experiences, the Student/Observer does hereby, and for his or her heirs, executors, administrators, successors, assigns and representatives, further stipulate and agree, to the extent permitted by law, not to initiate, file or pursue against the County any compensation claim, law suit, contribution claim, or other legal claim or action at law or in equity for any injuries or damages of any kind or nature and the consequences flowing therefrom including medical expenses and/or death, arising directly or indirectly from the Student/Observer's Ride Time Experiences or presence on County premises or at an emergency scene, whether caused by any negligent, wrongful or other act or omission of the County, the Student/Observer, a third party, or otherwise, whether such injuries or damages are known or unknown, permanent or otherwise, now existing or which may hereafter accrue.

III. INDEMNIFICATION AGREEMENT

For and in consideration of being permitted to participate in Ride Time Experiences, the Student/Observer does hereby, and for his or her heirs, executors, administrators, successors, assigns and representatives, further stipulate and agree to indemnify and hold harmless, to the extent permitted by law, the County from any and all claims, damages, injuries, liabilities, expenses, losses, costs and/or causes of action of any nature whatsoever and consequences flowing therefrom including medical expenses and/or death, and including attorney's fees and costs whether at trial or appellate levels or otherwise, arising directly or indirectly from or caused by any act or omission of the Student/Observer, whether such injuries or damages are known or unknown, permanent or otherwise, now existing or which may hereafter accrue.

IV. DEFINITIONS; REPRESENTATIONS; AND SEVERABILITY

As used in this Release, "Palm Beach County" or "County" shall mean Palm Beach County, Florida, including its officers, agents, representatives and employees in both their official and personal capacities, and their heirs, successors and assigns; and "County Fire Rescue Vehicles" shall mean, singularly and collectively, any medical rescue unit(s), fire response unit(s), or other vehicle(s) owned or operated by Palm Beach County.

The Student/Observer represents and warrants that no promise or inducement has been offered, except as set forth above, for this Release; and that this Release is executed freely and voluntarily without reliance upon any statement or representation of legal rights by the County. The Student/Observer, or his or her legal guardian on behalf of the Student/Observer if the Student/Observer is an unemancipated minor, represents and warrants that he or she is legally competent to execute this Release and accept full responsibility for it. The Student/Observer acknowledges and agrees that the nature of emergency medical and fire protection services may expose the Student/Observer to risk of injury, including exposure to harmful or hazardous substances or materials. The Student/Observer understands and agrees that, to the extent permitted by law, this Release shall apply to any and all injuries or damages whether known or unknown, anticipated or unanticipated, permanent or otherwise, and the consequences flowing therefrom, arising out of any accidents, exposures, casualties or any other incidents or events which may occur while the Student/Observer is participating in Ride Time Experiences or present on County premises or at an emergency scene, whether caused by the County, the Student/Observer, a third party, or otherwise. In the event any portion of this Release shall be declared invalid or unenforceable, such determination shall not affect the remaining provisions hereof, which shall remain in full force and effect.

Student/Observer:

Name

Address

City, State, Zip Code

Witness: _____

Witness: _____

Signature of Student/Observer
(or Legal Guardian if Student/Observer is an unemancipated minor)

Name and Address of Legal Guardian if
Student/Observer is an unemancipated minor:

EXHIBIT B

**Palm Beach County Fire-Rescue
Health Insurance Portability and Accountability Act Policy on Confidentiality of Patient
Information**

Given the nature of our work, it is imperative that Palm Beach County Fire Rescue maintains the confidentiality of patient information that we receive during the course of our work.

As a Student/Observer, I understand that Palm Beach County Fire Rescue provides services to patients that are private and confidential and that I am to respect the privacy rights of the patients to which emergency medical services have been provided by Palm Beach County Fire Rescue. I understand that it is necessary, in the rendering of emergency medical services by Palm Beach County Fire Rescue, that patients provide personal information and that such information may exist in a variety of forms such as oral, written, electronic or photographic and that all such information is strictly confidential and protected by federal and state laws.

I agree that I will comply with all confidentiality procedures utilized by Palm Beach County Fire Rescue during and after my Student/Observer ride time with Palm Beach County Fire Rescue. I shall not use, retain, copy, or disclose any patient information for any purpose or to any person or entity except to Palm Beach County Fire Rescue for treatment or training purposes, as applicable, or to the EMT/Paramedic school that has scheduled my ride time as part of my EMT/Paramedic education, or otherwise as approved by the Palm Beach County Fire Rescue HIPAA Compliance Officer, or as required by law. Any patient information that I disclose to my EMT/Paramedic school shall be strictly limited to the minimum necessary for the school to assess and confirm the skills I have practiced during my ride time, and I will not include any identifying patient information that is not necessary for this limited purpose. If I, at any time, knowingly or inadvertently breach patient confidentiality, I shall not use or further disclose the information, and shall immediately notify the Palm Beach County Fire Rescue HIPAA Compliance Officer and return the information to the HIPAA Compliance Officer without retaining any copies. In addition, I understand that a breach of patient confidentiality may result in the immediate termination of my privileges to ride as a Student/Observer with Palm Beach County Fire Rescue.

I acknowledge that I have received training in, and I understand, the patient confidentiality requirements of Palm Beach County Fire Rescue and the Health Insurance Portability and Accountability Act. I agree to abide with all requirements and direction given to me regarding confidential patient information or be subject to having Student/Observer privileges or any other membership or association with Palm Beach County Fire Rescue revoked or permanently removed.

Signature: _____ **Date:** _____

Name (Printed): _____

Affiliation: _____

**Palm Beach County Fire-Rescue
Health Insurance Portability and Accountability Act
Policy on Confidentiality of Patient Information**

Given the nature of our work, it is imperative that Palm Beach County Fire Rescue maintains the confidentiality of patient information that we receive during the course of our work.

As an instructor, faculty member or program supervisor at the below named EMT/Paramedic school, whose students participate in clinical ride time with Palm Beach County Fire Rescue, I understand that I may receive protected health information relating to Palm Beach County Fire Rescue patients for the limited purpose of assessing and confirming the skills practiced by said students during their clinical ride time with Palm Beach County Fire Rescue. I understand that any patient information disclosed to me by any student must be strictly limited to the minimum necessary for the school to assess and confirm the skills practiced by the student during the clinical ride time, and must not include any identifying patient information that is not necessary for this limited purpose.

I understand that Palm Beach County Fire Rescue provides services to patients that are private and confidential and that I am to respect the privacy rights of the patients to which emergency medical services have been provided by Palm Beach County Fire Rescue. I understand that it is necessary, in the rendering of emergency medical services by Palm Beach County Fire Rescue, that patients provide personal information and that such information may exist in a variety of forms such as oral, written, electronic or photographic and that all such information is strictly confidential and protected by federal and state laws.

I shall not use, retain, copy, or disclose any Palm Beach County Fire Rescue patient information for any purpose or to any person or entity, except for the limited purpose of assessing and confirming the skills practiced by students during their clinical ride time with Palm Beach County Fire Rescue, or as required by law. If I, at any time, knowingly or inadvertently breach patient confidentiality, or if any unauthorized protected health information is disclosed to me, I shall not use or further disclose the information and shall immediately notify the Palm Beach County Fire Rescue HIPAA Compliance Officer and return the information to said Compliance Officer without retaining any copies.

I acknowledge that I have received training in, and I understand, the patient confidentiality requirements of the Health Insurance Portability and Accountability Act. I agree to abide with any requirements and direction given to me from Palm Beach County Fire Rescue regarding the confidential information of its patients.

Signature: _____ **Date:** _____

Name (Printed): _____

EMT/Paramedic School Affiliation: _____