

Emergency Medical Services Program Policies – Procedures – Protocols

Investigation-Regulatory-Discipline Procedures (1001.00)

I. POLICY

- A. This document establishes internal guidelines for conducting administrative investigations within the EMS System. The policy is applicable to the investigation of any individual or provider agency that provides any EMS service in the purview and jurisdiction of the local EMS agency (LEMSA).
- B. This document establishes internal guidelines for conducting regulatory functions due to violations of Kern County policies, procedures, and/or protocols.
- C. This policy identifies guidelines for disciplinary action against individuals holding Public Safety First Aid, Emergency Medical Technician, Advanced Emergency Medical Technician, Paramedic, Mobile Intensive Care Nurse, and Emergency Medical Dispatch local accreditations in Kern County.
- D. Investigations and regulatory proceedings shall be fair, thorough, and impartial.

II. APPLICABILITY

This policy applies to any and all Emergency Medical Services Division (hereinafter "Division") employees involved in the investigative and regulatory processes.

III. AUTHORITY

- 1. California Code of Regulations, Title 22, Division 9, Chapters 4 & 6, Sections 1000061, 1000064, 100142, 100166, 100169, 100170, 100175, 100176, 100201-100217, 100404
- B. Health and Safety Code Division 2.5, 1797.200, 1797.202, 1797.210, 1797.220 1797.204, 1798, 1798.200-1798.211
- C. Kern County Ordinance Code, Chapter 8.12, Sections 8.12.140, 160, 170, and 180
- D. Kern County Ordinance Code, Chapter 2.23
- E. California Government Code, Sections 11370 et seq. (Administrative Procedure Act), CCR Title 1, Sections 1000-1050, and 11500 et seq

- F. The Firefighter Procedural Bill of Rights Act, California Government Code 3250-3262
- G. The Public Safety Officers Procedural Bill of Rights Act, California Government Code 3300-3313

IV. DEFINITIONS

- A. "Paramedic" means a person who is educated and trained in all elements of prehospital advanced life support; whose scope of practice to provide advanced life support is in accordance with the standards prescribed by Title 22, Division 9, Chapter 4, and who has a valid license issued pursuant to same.
- B. "Emergency Medical Technician (EMT)" means a person who has successfully completed a basic EMT course which meets the requirements of the California Code of Regulations, Title 22, Division 9, Chapter 2, and has passed all required tests and who has been certified by an EMT Certifying Authority.
- C. "Emergency Medical Dispatcher (EMD)" means a person who has successfully completed a basic EMD course which meets the requirements of the National Academies of Emergency Dispatch, who has passed all required tests and who has been certified by an EMD Certifying Authority.
- D. "Mobile Intensive Care Nurse (MICN)" A currently licensed Registered Nurse in the State of California who has completed an EMS Division MICN Training Class, 16 hours of ambulance ride-a-long time, and completed 4 Advanced Life Support radio calls under the supervision of a certified MICN and has a current accreditation.
- E. "Medical Director" means the Kern County EMS Division Medical Director.
- F. "Accreditation" is a document that attests a currently licensed or certified individual meets local criteria to operate within the County of Kern. This authorization is provided under the direction of the EMS Division Medical Director in accordance with local scope of practice, standard of care, policies, procedures, and protocols.
- G. "Due Process" A course of formal proceedings carried out regularly, fairly, and in accordance with established rules and principles.
- H. "Appeal" is a process of requesting a formal change to an official decision.
- I. "Gross Negligence" is an extreme departure from the standard of care which, under similar circumstances would have ordinarily been exercised by a reasonable and prudent person trained and acting in a similar capacity while engaged in the performance of his or her duties if confronted with a similar circumstance.
- J. "Repeated Negligent Acts" is a repeated failure to use such care as a reasonable and prudent person trained and acting in a similar capacity while engaged in the

performance of his or her duties would use if confronted with a similar circumstance.

- K. "Incompetence" is the lack of possession of that degree of knowledge, skill, and ability ordinarily possessed and exercised by a certified or licensed professional of the same level.

V. POLICY STATEMENT

- A. The Division is committed to delivering high quality care and professional emergency medical services to the people we serve.
- B. Fair, thorough and impartial investigations of all complaints or alleged rule violations build public trust and confidence. Further, this promotes the highest professional standards for all emergency medical service providers and organizations.
- C. The authority and duties of the Division necessitate prompt and thorough completion of administrative investigations. Division employees must approach all investigations with a sense of urgency, recognizing the potential negative impact that protracted investigations have on complainants, applicants, person(s) subject to a complaint and associated agencies. Applicable provisions of the Health and Safety Code shall be followed with timely adherence to all applicable notices and statutorily imposed deadlines. When possible, personnel shall strive to complete the investigation and fact gathering within 30 days of the filing of the complaint.
- D. The authority and duties of the Division, at times, necessitate prompt action for violations of policies, procedures, and/or protocols. This is considered a regulatory function of the Division, which may or may not be subject to investigation procedures.
- E. All licensure, certification, and local accreditation applicants are required to inform the EMS Division of the following:
 - 1. If convicted of any crime other than a minor traffic violation.
 - 2. Any action against a Public Safety First Aid Optional Scope, EMT certificate, Paramedic license, MICN accreditation, or EMD accreditation including active investigations by a LEMSA or in the case of a Paramedic, licensure action or investigation by the State EMS Authority.
 - 3. Any action against any EMS-related certification or license of another state or other issuing entity, including active investigations.
 - 4. Any action against any health related license.
- F. If any of the above are indicated on the EMS Division application, applicant must include an explanation letter regarding the investigation and/or conviction(s) in

detail, and must provide copies of verifying documentation from the court upon request.

- G. Failure to report such convictions may result in certification and/or accreditation denial, suspension or revocation.

VI. INVESTIGATIVE PROCESS

1. Complaint

1. All complaints from an EMS service provider must be in writing.
2. Complaints from the public or patients are encouraged to be in writing. However, an EMS Coordinator, Senior EMS Coordinator, or EMS Director may take public/patient complaints over the phone provided that phone number, mailing address, and email address contact information are obtained from the reporting party.
3. No anonymous complaints will be accepted.
4. A complaint form is available on the Division's website and at Appendix A. (<http://www.co.kern.ca.us/ems/complaintform.pdf>).
5. The EMS Director shall review all complaints.
6. When an allegation involving a Public Safety First Aid Optional Scope accreditation, EMT certification or accreditation, paramedic accreditation, MICN accreditation, or EMD accreditation is made, the following shall be conducted according to the California Code of Regulations, the California Health and Safety Code, Recommended Guidelines for Disciplinary Orders and Conditions of Probation, The Firefighter Procedural Bill of Rights Act, and the Public Safety Officers Procedural Bill of Rights Act:
7. The EMS Division may conduct an investigation, determine cause for disciplinary action and make a recommendation to the EMS Division Director and/or Medical Director about certification and/or accreditation action.
8. Certification/accreditation action may include denial, revocation, suspension, or probation.
9. When an EMT/Paramedic/MICN/EMD is employed by a public safety fire agency, disciplinary proceedings shall be conducted in accordance with The Firefighter Procedural Bill of Rights Act.
10. When an EMT/Paramedic/MICN/EMD is employed by a public safety law enforcement agency, disciplinary proceedings shall be conducted in accordance with The Public Safety Officers Procedural Bill of Rights Act.

C. Case Set-up and Internal Processing

1. Receive and date stamp complaint – submit to Director

2. Director or Sr. Coordinator will log complaint, and assign to a Coordinator
3. Coordinator begins to collect initial background data/facts, evidence
4. If the complaint appears to involve circumstances where certification or licensure disciplinary action is likely to occur under Health and Safety Code 1798.200 et seq, the complaint will be assigned to the EMS Coordinator who is primarily responsible for personnel investigations (*enforcement coordinator*).
 1. The enforcement coordinator shall log the complaint into the personnel investigation database and begin the investigation.
 2. If the certificate holder is a firefighter who is alleged to have engaged in violation or omissions while on duty, investigation shall be conducted in accordance with the Firefighters Procedural Bill of Rights Act (California Government Code Section 3250 et. Seq.)
 - c. If the certificate holder is a public safety officer who is alleged to have engaged in violations or omission while on duty, investigation shall be conducted in accordance with Public Safety Officers Procedural Bill of Rights Act (California Government Code Section 3300-3313)

D. Investigation Guidelines

1. Complaint Evaluation - Understand the allegation; identify the specific code section(s) that may be at issue. Determine the party or parties involved, including all organizations and individuals.
2. Serve allegation notice to the party under investigation, the reporting party, and request submission of evidence. The form letter (Appendix B) may be used for this purpose, or the notification and request for information may be made using email. Such notifications and requests shall always be in writing.
3. The request for information should be comprehensive. Request official incident reports, patient care records, dispatch logs, dispatch recordings, and other relevant documentation from the organizations and individuals involved in the incident. Request written statements from witnesses involved in the incident. Request other official records, if necessary, from ambulance providers, clinics, hospitals, fire departments, police departments, dispatch centers, other relevant organizations, and the public.
4. Establish a deadline for submission of the requested information of ten (10) business days; state a specific due date.
5. If no response to the allegation notice or due date has passed with no requested information received, the investigator will send a second request. If the party under investigation fails to respond, the investigator will continue the investigation without his/her input or evidence. The investigator will no longer be required to attempt contact. This may result in a Default Decision as described in section XV. below.

6. The Investigator shall attempt to identify all personnel involved. All personnel that may be interviewed shall be sent a Notice of Investigation (Appendix H). The Notice of Investigation shall include the Rules for Interview.
7. Review Documentation – Determine if the documentation/evidence submitted from parties is sufficient to proceed with analysis and making conclusions. Determine if any further witnesses, individuals, agencies or facilities have been identified that require document requests, and if so request the documentation.
8. Interview – Based on documentation, schedule and conduct interviews as necessary to answer any questions, obtain statements, and further assist in evidence gathering. Interviews may be conducted in person or via telephone, as necessary. Attempts should be made to record the interview for the investigation file. If an interview is to be recorded, the interviewee must be notified prior to initiating an interview and permission must be obtained from the interviewee.
 1. Prior to an interview of an accused certificate or accreditation holder (Public Safety First Aid Optional Scope, EMT-1, Paramedic, MICN, or EMD), Division staff shall notify the individual, in writing, of the following Standards of Conduct for Interviewing EMS Personnel:
 - i. The interview shall be conducted at a reasonable hour, at a time when the person is on duty, unless an imminent threat to the safety of the public requires otherwise.
 - ii. The person under investigation shall be informed, prior to the interview, of the rank, name, and command of the officer or other person in charge of the interview, and all other persons to be present during the interview. All questions directed to the individual during the interview shall be asked by and through no more than two interviewers at one time.
 - iii. The person under investigation shall be informed of the nature of the investigation prior to any interview.
 - iv. The interview session shall be for a reasonable period taking into consideration the gravity and complexity of the issue being investigated. The person being interviewed shall be allowed reasonable breaks to attend to his or her own personal physical necessities.
 - v. The person being interviewed shall not be subjected to offensive language or threatened with punitive action. A promise of reward shall not be made as an inducement to answering any question.
 - vi. A statement made during the interview by a person under duress, coercion, or threat of punitive action may not be admissible in subsequent judicial proceedings.

- vii. The complete interview may be recorded. If a recording is made of the interview, the person being interviewed shall have access to the recording if any further proceedings are contemplated or prior to any further interviews at a subsequent time. The person shall be entitled to a transcribed copy of any notes made by a stenographer or to any reports or complaints made by investigators or other persons, except those portions that are otherwise required by law to be kept confidential. Notes or reports that are deemed to be confidential shall not be entered in the person's certification and/or accreditation file. The person being interviewed shall have the right to bring his or her own recording device and record any and all aspects of the interview.
 - viii. Upon the filing of a formal written statement of charges, or whenever an interview focuses on matters that may result in punitive action against any person, that person, at his or her request, shall have the right to be represented by a representative of his or her choice who may be present at all times during the interview. The representative shall not be a person subject to the same investigation. The representative shall not be required to disclose, or be subject to any punitive action for refusing to disclose, any information received from the person under investigation for noncriminal matters.
9. Review Evidence – Compile and review all evidence collected to date. Document the factual findings of your investigation.
 10. Determine if the evidence supports accreditation, certification or licensure disciplinary action, in accordance with Health and Safety Code 1798.200. If so, consult with Senior EMS Coordinator and enforcement coordinator, before continuing with the investigation. If the formal certification/licensure disciplinary process is to be initiated by the enforcement coordinator, the scope of the original investigation may be modified.
 11. Summarize – Write an investigation summary of the case based on the evidence collected. The investigative summary shall be free from opinion of the investigator and shall document the facts of the investigation.
 1. Identify any and all policy, procedure, mandate, directive or protocol violations that have occurred.
 2. Identify and list each regulation, code section, protocol, etc. that appears to have been violated, if any.
 3. Identify how the rule is violated, as demonstrated by the evidence.
 4. Identify disciplinary action you recommend based on Section 6) c) iii), below of this policy.
 5. If no violation has occurred, explain how the evidence or lack thereof fails to support the initial complaint.

VII. INVESTIGATIVE INTERNAL REVIEW PANEL (IIRP)

1. Role of the IIRP

1. An Investigative Internal Review Panel is an impartial advisory body whose members are knowledgeable in the provision of prehospital emergency medical care and EMS system policies and procedures. IIRP is responsible for:
 1. Hearing the investigator's presentation;
 - b. Reviewing the investigation summary and evidence;
 - c. Rendering a recommendation as to the determination of the matter, ; and
 - d. Rendering a recommendation as to the determination of appropriate action.
2. Recommendations shall be made to the EMS Director or EMS Medical Director, as appropriate to the issue and authority.
3. The IIRP reviews and discusses the evidence to formulate as a group of trained, experienced, and knowledgeable EMS professionals a broad-based opinion to submit to the EMS Director for final decision.

B. IIRP Members - The IIRP shall consist of at least three persons. The IIRP shall consist of EMS Coordinators, including Senior EMS Coordinator, employed by the EMS Division. The EMS Director or the EMS Medical Director may be members of the IIRP, provided that the individual participating as a member of the IIRP will not be the final decision authority on the incident/matter. EMS Director or the EMS Medical Director who is serving as the final decision authority may observe the IIRP process, but not engage in deliberation of the matter. The EMS Division staff member directly responsible for the investigation shall not be a member of the IIRP and shall not vote on the outcome of the matter.

1. An IIRP member shall voluntarily disqualify her/himself and withdraw from any case in which she/he cannot accord a fair and impartial view.
2. An IIRP member must recuse himself:
 - a. If she/he has a personal bias or prejudice toward a matter or its participants;
 - b. If she/he has personal knowledge of the facts that are disputed in the proceeding;
 - c. If she/he is related to any of the participants has a familial relationship with a party defined as an immediate or distant relationship by blood, adoption or marriage; or

- d. If she/he has a financial interest in the outcome of the matter defined as a personal or familial financial monetary gain or loss associated with the outcome of the investigation. This includes, but is not limited to, a previous, current, or prospective personal business relationship with any party involved, such as outside employment relationships, contracted services, and business partnerships.
3. A person under investigation and all representatives of the person under investigation are prohibited from contacting any member of the IIRP. Conversely, IIRP members are prohibited from contacting the person under investigation or any representative of the person under investigation.

C. IIRP Protocol

1. Investigator compiles packet with all documentation, notes, interview recordings, and investigation summary. In coordination with the EMS Director, convene an IIRP.
2. Present the case and make recommendations to the IIRP.
3. Determination of Appropriate Action - An Investigative Internal Review Panel (IIRP) will be convened to review the case, hear the evidence, and make a determination on the case, as follows: compliant with regulation(s), or non-compliant with regulation(s), and recommend penalties or actions for finding(s) of non-compliant. An IIRP will be convened for every formal investigation.
4. The recommended penalty or action should be proportionate to and related to the severity of the non-compliance. It will also be proportionate to the risk to the public health and safety caused by the actions of the holder of, or applicant for, a Division accreditation or certificate/license.
5. Resolution may be one or more of the following:
 1. No action – After a complete investigation, no action is necessary to resolve the issue.
 - b. Policy/Procedure Revision – Issue is resolved yet the investigation brings to attention the need for revising a Division policy, procedure, mandate, directive, protocol, or regulation.
 - c. Review Meeting – A meeting will take place with involved individuals and EMS Division officials to review the issues and identify strategies or actions to resolve the issue and prevent reoccurrences.
 - d. Remedial Education – Complete education or training prescribed by the Medical Director to correct deficiencies. This may include reading or writing reports, giving a continuing education class, reviewing policy, procedures, directives, and/or protocol, attending lectures and/or additional clinical or field evaluations (up to 40 hours clinical or 240 hours field).

- e. Verbal/Written Reprimand – This action will be documented and placed in the individual’s Division certification file. The information may be used as part of future investigations.
- f. EMS Provider Agency Sanction – Non-compliance by an individual may often reflect a failure by the EMS provider agency employing the individual. It is appropriate to hold the employer responsible for its agents’ actions in addition to individual discipline. If the violation also constitutes a failure to meet performance standards or breach of contract, the appropriate action against an EMS provider agency shall be taken.
- g. Ordinance Violation and/or Criminal Act - If the action constitutes a violation of the Kern County Ordinance Code, the act may be subject to fines and/or criminal proceedings.
- h. Referral for Formal Accreditation, Certification or Licensure Disciplinary Action – Any incident which is a serious threat to public health and safety and/or may require disciplinary/ licensure action against EMS personnel as outlined in Health and Safety Code Division 2.5, Section 1798.200 and Title 22, Division 9 of the California Code of Regulations (Emergency Medical Personnel Certification Review Process Guidelines) will be referred to the enforcement coordinator. Ultimate actions may include:
 - 1. Placement of a license holder on probation
 - ii. Suspension of license/certification
 - iii. Revocation of license/certification
 - iv. Denial of license/certification
 - v. Denial of renewal of license/certification, or
 - vi. Referral to EMSA for formal State-level review of paramedic misconduct/malpractice. The enforcement coordinator will forward appropriate information to EMSA.

VIII. EXIT CONFERENCE/PRELIMINARY RESULTS

After the completion of the IIRP, in those instances where the determination has been made that a violation occurred, an appointment will attempt to be made with the accused to discuss potential findings and actions. During the exit conference, the accused may discuss any part of the investigation and present any evidence on findings that he/she believes should be considered or that he/she believes was overlooked. After the exit conference, the final report will be prepared taking into consideration any new information. If the accused refuses an Exit Conference, the investigation will result in a default decision

IX. FINAL DECISION

- A. The EMS Director, Medical Director or designee will review the IIRP recommendations to and make a final determination for the imposition of appropriate action. The EMS Director, Medical Director or designee may refer the case back to the investigating coordinator for additional considerations. The investigator will then consider any additional findings and re-convene an IIRP. The IIRP will review the additional information and follow the procedures as described above.
- B. The following factors shall be considered for determination of the certification/accreditation action to be imposed. Specifically whether the accreditation action warranted is probation, suspension, or revocation:
1. Nature and severity of the act(s), offense(s), or crime(s) under consideration
 2. Actual or potential harm to the public
 3. Actual or potential harm to any patient
 4. Prior disciplinary record
 5. Prior warnings on record or prior remediation
 6. Number and/or variety of current violations
 7. Aggravating evidence
 8. Mitigating evidence
 9. Rehabilitation evidence
 10. Compliance with terms of prior certification/accreditation actions, remedial education mandates, or terms of probation or suspension. In case of criminal conviction, compliance with terms of the sentence and/or court ordered probation
 11. Overall criminal record
 12. Time that has elapsed since the act(s) or offense(s) occurred
 13. If applicable, evidence of expungement proceedings pursuant to Penal Code 1203.4
 1. Credit may be given for prior disciplinary action imposed by the certificate/accreditation holder's employer.
- C. The Medical Director may revoke, deny, suspend or place on probation a Public Safety First Aid Optional Scope accreditation, EMT certificate or accreditation, Paramedic accreditation, MICN accreditation, or EMD accreditation for any of the following:
1. Demonstrated inability and/or failure to perform appropriate duties through predetermined policies, procedures, and protocols.

2. The commission of fraud, intentional deceit, incompetence, patient abuse, theft, or dishonesty in the performance of duties and practice as an EMS professional.
 3. Involvement in the unauthorized removal of narcotics, drugs, supplies or equipment from any emergency vehicle, agency, or health care facility.
 4. Performing procedures or skills or instructing someone to perform procedures or skills beyond the level of certification/accreditation or not allowed by rules, or violation of laws pertaining to medical practice and/or drugs.
 5. Mental incompetence as deemed by a court of appropriate jurisdiction.
 6. For good cause, including conduct that is unethical, immoral, or dishonorable, as determined by the Medical Director.
 7. Any violation listed in Health and Safety Code, Division 2.5, Section 1798.200(c).
 8. Repeated violations of Division policies, procedures, and/or protocols, or failure to abide by Division directions provided to certificate/accreditation holder or agency, or disregard for Division policies, procedures, and/or protocols.
- F. Negative certification action by the Medical Director shall be valid statewide and honored by all certifying entities for a period of at least twelve (12) months from the effective date of the certification action. An EMT whose application was denied or an EMT whose certification was revoked by the Medical Director shall not be eligible for certification by any other certifying entity for a period of at least twelve (12) months from the effective date of the certification action.
- G. As a result of an investigation, or any other means, if at any time during a certification or accreditation period the EMS Director, Medical Director or his/her designee determines that a need for additional training, observation, or testing exists, the EMS Director or his/her designee may create a specific and targeted program of remediation based upon the identified need of the individual. If there is a disagreement between the individual, the employer, and/or the EMS Director, the decision of the EMS Medical Director shall prevail. (Title 22, Division 9, Chapter 4, Section 100166 (i)).
- H. If the individual fails to successfully complete any remediation the EMS Medical Director may suspend or revoke the certification or accreditation.
- I. Investigations and disciplinary actions relating to paramedic licensure shall be conducted in accordance with the California Code of Regulations, the California Health and Safety Code, Recommended Guidelines for Disciplinary Orders and Conditions of Probation, and The Firefighter Bill of Rights Act/Public Safety Officers Procedural Bill of Rights, and forwarded to the Emergency Medical Services Authority at the completion of the local investigation.

X. EXIT CONFERENCE/PRELIMINARY RESULTS

Investigation-Regulatory-Discipline Procedures (1001.00)
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Kristopher Lyon, M.D.
(Signature on File)

After the completion of the IIRP, in those instances where the determination has been made that a violation occurred, an appointment will be made with the accused to discuss potential findings and actions. During the exit conference, the accused may discuss any part of the investigation and present any evidence on findings that it believes should be considered or that it believes was overlooked. After the exit conference, the final report will be prepared taking into consideration any new information.

XI. REPORTING THE RESULTS

- A. If required by law, the Division shall prepare a final report letter to the complaining party regarding the disposition of the case. A template disposition letter to reporting party is found at Appendix C.
- B. The complaining party and all organizations involved in the incident shall receive a copy of this letter. The following facts shall be included in the letter:
 - 1. The allegation(s);
 - 2. If IIRP/Director found accused to be non-compliant, then list the specific codes and section numbers found to have been violated. If disciplinary action is to be taken, then the letter will state “disciplinary action has been imposed”; specific details regarding the type or nature of the disciplinary action will not be included in this letter.
 - 3. If the IIRP/Director found that the allegations are without basis and the accused is found to be in compliance, then the letter shall state: “the allegations are found to be without basis and the accused is found to be in compliance”.
- C. Prepare a second letter of disposition. The second letter is for the accused individual/organization(s) explaining disposition of the case. The following facts shall be included in the letter:
 - 1. The allegation(s);
 - 2. If the IIRP/Director found the allegations are unfounded and the accused is found to be compliant, then such shall be stated in the letter.
 - 3. If the IIRP/Director found the accused to be non-compliant, list the specific codes and section numbers found to have been violated. Provide sufficient detail based upon the evidence to describe the actions taken by the accused that constituted each violation.
 - 4. State the specific penalty/consequence for each violation.
 - 5. If the particular violation is subject to Chapter 8.12 of the Ordinance Code, then advise the accused of rights, deadlines, and appeal procedures as dictated by Sections 8.12.160, 170, 180, 200, and 210. Further, if the

violation constitutes a breach of contract, the specific procedures stated in the contract shall be referenced and followed.

- D. Both letters shall be submitted in draft form to the EMS Director for review, prior to release to anyone.
- E. The EMS Director or his/her designee shall submit the draft letters to County Counsel for review, prior to release to anyone.
- F. Once County Counsel has reviewed and approved the letters for release, the documents shall be mailed, notifying the appropriate parties of the results of the investigation.
- G. The employer and appropriate state authority will be notified of any disciplinary action taken against a certification or local accreditation.
- H. A "Notice of Appeal" (Appendix G) shall be sent along with the disposition letter to the accused for any finding that results in accreditation actions. Due process will be afforded as outlined below.

XII. REGULATORY PROCEDURES

1. There may be instances in which the Division may need to address a policy, procedure, and/or protocol violations in a swift and efficient manner. Complaints and/or allegations received from agencies other than the Division shall be subject to investigation procedures and cannot be included in regulatory procedures. The Division Director shall make the decision as to whether investigation or regulatory procedures are initiated.
2. When the Division is in possession of evidence of a violation(s), the Division may impose disciplinary action as a duty of the Division's regulatory authority. Evidence shall be clear, and convincing that indicates without a doubt that such violations occurred. In the absence of such evidence, the Division will follow investigation procedures.
3. A Notice of Violation will be sent to agency, certificate, or accreditation holder. The Notice will be mailed, return receipt requested. The notice will set forth, with reasonable specificity the nature of the apparent violations of policies, procedures, and/or protocols, the action the Division is taking, and the effective dates and/or duration of such actions. Instances of probation, suspension, or revocation will be allotted Due Process as provided below.
4. Within ten (10) calendar day of receipt of notice, the agency, certificate, or accreditation holder must deliver to the Division, in writing, a plan to cure the deficiency, or a statement of reasons why the agency, certificate or accreditation holder disagrees with the Division.
5. The agency, certificate or accreditation holder shall cure the deficiency within thirty (30) calendar days of receipt of the notice.

6. Failure on part of the agency, certificate or accreditation holder to respond to the Division within the allowed period, or disputes the validity of the alleged deficiency, the Division will move forward with the imposed discipline.
7. A "Notice of Appeal" (Appendix G) shall be sent along with the Notice of Violation to the certificate and/or accreditation holder for instances of probation, suspension or revocation.
8. All regulatory actions must be approved by the Division Director, Medical Director or his/her designee.
9. All documents relating to the regulatory actions (including evidence) shall be included in personnel files, or if an agency, in specific program file for the agency. Regulatory actions taken against agencies may be included on performance reports published by the Division, if applicable.

XIII. DUE PROCESS – ACCREDITATION ACTION:

In an effort to assure that all accreditation actions are handled in a fair and impartial manner, the following "Due Process" procedures shall be followed;

- A. Notification of potential suspension, revocation, or probationary action taken by the Division shall be sent to Respondent fifteen (15) days prior to effective action.
- B. No later than ten (10) days following receipt of the official notification of accreditation action Respondent may file an "Appeal" to the Medical Director. The "Appeal" must contain all of the following to be considered:
 1. Case number
 2. Specific grounds for appeal
 3. Specific relief requested
 4. Appellant's reasons in support of the relief requested including any and all supporting documentation or evidence
 5. Appeals must be formal letters written and signed by the respondent. Appeals are not accepted verbally.
- C. The following are examples of evidence the certificate/accreditation holder may present to the Medical Director during an appeal:
 1. Dated written statements from persons in positions of authority who have on-the-job knowledge of the respondent's current competence. Each statement should include the period of time and capacity in which the person worked with the certificate/accreditation holder and should contain the following sentence at the end: **"I declare, under penalty of perjury, under the laws of the State of California, that the foregoing is true and correct to the best of my knowledge."** The statement should be signed and dated by the person making the statement.

2. Dated letters from counselors regarding the certificate/accreditation holder's participation in a rehabilitation or recovery program, where appropriate. The letters should include a description of the program, the number of sessions that the certificate/accreditation holder has attended, the counselor's diagnosis of the certificate/accreditation holder's condition, prognosis for recovery, and the current state of rehabilitation (or improvement), the counselor's basis for determining improvement and the credentials of the counselor.
 3. Dated letters describing the certificate/accreditation holder's participation in support groups.
 4. Dated laboratory analyses or drug screen reports, where appropriate.
 5. Dated performance evaluation(s) from the certificate/accreditation holder's employer.
 6. Dated physical examination or assessment report by a licensed physician.
 7. Certificates or transcripts of courses related to the certificate/accreditation holder's respective duties that the certificate/accreditation holder might have completed since the date of the violation. **An EMT, AEMT, paramedic, RN, or EMD whose certification or license has been revoked does not possess an EMT, AEMT, paramedic, RN, or EMD certification or license. Therefore, the individual cannot use his/her former certification or license number to obtain continuing education credit/hours or for any other purpose. However, he or she may take continuing education courses so long as an EMT, AEMT, paramedic, RN, or EMD certificate or license is not used.**
 8. Evidence of community service or other educational experience.
- D. The effective date of any accreditation action will be held in abeyance automatically until the Medical Director reaches a decision on any appeal filed. However, the Medical Director retains all rights provided under Health and Safety Code 1798.200.
- E. The Medical Director will review the appeal and may, at his/her discretion, conduct interviews with parties involved in the matter (e.g. EMS investigator, appellant, original complainant, and witnesses).
- F. The Medical Director, upon review, may:
1. Affirm the action, at which time the matter will be considered final and binding upon all involved.
 2. Reverse the action taken and dismiss the case.
 3. Increase or decrease the imposed action if deemed appropriate based on information obtained during the appeal process.

G. Notification of the decision by the Medical Director will be sent to the appellant within thirty (30) days of the conclusion of the Medical Director's review of the case.

XIV. DUE PROCESS - LICENSURE/CERTIFICATION ACTION:

Due process for any Licensure or Certification action shall follow California Government Code, Sections 11370-11370.5 (Administrative Procedure Act) and 11500-11522 et seq.

XV. DEFAULT DECISION

Any failure on the part of a person under investigation to contact the Division as requested, may result in a default decision. Effort will be made by the investigating coordinator to make contact with the accused using the contact information contained on the most recent "All purpose form" submitted by the accreditation/certification/licensure holder.

The Division may proceed with the investigation without the input of the accused in any instance of refusal by the person under investigation (or his/her representative) or any failure to make contact.

In instances where the Division has successfully made contact with the accused, and the accused does not respond to Division requests within the allotted timeframe, a second attempt at contact will be made. Failure to respond to either attempt or request of the Division may result in a default decision being rendered. Any preliminary results may be considered final in circumstances such as this.

Revision Log:

10/04/2012 – approval and implementation of formal process

11/08/2012 – grammar and typo corrections only

05/09/2013 – EMCAB approved revisions to include exit conference and addition of Appendix E, letter to the accused regarding advisory of FFBR.

07/10/2014 – Changed language in interview process.

08/12/2016 - Added disciplinary procedures. Added due process for accreditation action. Added public safety officer considerations. Added default decision procedures. Add regulatory enforcement considerations. Approved by EMCAB.

Investigation-Regulatory-Discipline Procedures (1001.00)

Effective Date: 10/4/2012

Revision Date: 8/12/2016

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Kristopher Lyon, M.D.
(Signature on File)

Appendix A – Investigation Request Form

1. Person Requesting Investigation (include contact information and mailing address):	
2. Incident Date and Time:	
3. Incident Location:	
4. Patient(s) Name:	
5. PCR Number (if available):	
6. Hospital Medical Record Number (if available):	
7. Individuals and Agency Involved in Incident:	
8. Complaint/allegation (attach additional sheets if necessary):	
9. Section Number of ordinance, policy, or procedure that was violated:	

10. Please attach the following if applicable:
<input type="checkbox"/> Copy of PCR <input type="checkbox"/> Patient Outcome <input type="checkbox"/> Dispatch Tape <input type="checkbox"/> Other Investigation

I believe that the above is accurate and true, and I hereby request that the Kern County EMS Division investigate the incident.

Signature

Date

Appendix B – Allegation Letter

date

Addressee

RE: Notice of Investigation, Case No. ____

On DATE this Division received notice from NAME/ORGANIZATION that a violation of the ordinance, adopted standards/procedures or protocols may have occurred. Pursuant to Section 8.12.180 of the Kern County Ordinance Code, the Division has initiated an investigation.

Information available to the Division regarding the incident:

Incident Date & Time: _____

Provide brief description of the incident and violation.

Summary of allegation:

Cite Policy(ies) and Section(s) that have been allegedly violated.

Please provide the following information for this incident: Patient Care Record, Statement(s) from on-scene personnel; and any other information you believe may help in the investigation. Return the information by _____give specific date_____ to me at 1800 Mount Vernon Ave., Bakersfield CA 93306, attention _____name of EMS Coordinator____.

Thank you for your cooperation, and please feel free to contact me with any questions.

Sincerely,

Name of EMS Coordinator
Title

Appendix C – Disposition Letter to Reporting Party

date

Addressee

RE: Investigation Results, Case No. ____

In the matter of Case No. _____, it was alleged that _____
_____. After a complete and thorough investigation,
it is concluded that:

the allegations are found to be without basis and the accused if found to be in compliance.

or

the allegations have merit. The evidence indicates that the accused, _____, has
violated the following specific sections of policies, regulations, rules, etc...

As a result of this violation, disciplinary action has been imposed.
As a result of these violations, disciplinary action has been imposed.

Thank you for bringing this matter to our attention.

Sincerely,

Name of EMS Coordinator
Title

(cc to all organizations involved in the incident)

Appendix D – Disposition Letter to the Accused

date

Addressee

RE: Investigation Results, Case No. ____

In the matter of Case No. _____, it was alleged that _____
_____. After a complete and thorough investigation,
it is concluded that:

the allegations are unfounded. The evidence indicates your organization is compliant with _____.

or

the allegations have merit. The evidence indicates that your organization (or named individual) has violated the following specific sections of policies, regulations, rules, etc... *(Provide sufficient detail based upon the evidence to describe the actions taken by the accused that constituted each violation)*

As a result of this violation, the following disciplinary action is being taken:

- List specifics

As a result of these violations, the following disciplinary actions are being taken.

- List specifics
- List specifics
- List specifics

(If the particular violation is subject to Chapter 8.12 of the Ordinance Code, then advise the accused of rights, deadlines, and appeal procedures as dictated by Sections 8.12.160, 170, 180, 200, and 210. Further, if the violation constitutes a breach of contract, the specific procedures stated in the contract shall be referenced and followed.)

Sincerely,

Name of EMS Coordinator
Title

(no cc's of any kind)

Appendix E – Individual Notification of Investigation

Date

Addressee (*Name of Paramedic and/or EMT-1 potentially under investigation*)

Address

City, State, ZIP

RE: Notice of Investigation, Case No. _____

Dear Mr/Ms.:

On DATE this Division received notice from NAME/ORGANIZATION that a violation of the ordinance, adopted standards/procedures, or adopted protocols may have occurred. Pursuant to Section 8.12.180 of the Kern County Ordinance Code, the Division has initiated an investigation.

Information available to the Division regarding the incident:

Incident Date & Time: _____

Provide brief description of the incident. If patient permission to share information, include patient name, location of incident, run number, and disposition. If no permission, include run number only (in addition to the above date and time).

Summary of allegation:

Brief description of the complaint and violation (Do not include medical information unless the patient has allowed us to do so).

Cite Policy(ies) and Section(s) that have been allegedly violated.

Investigating Coordinator: *Name of EMS Coordinator*

During the investigation you may be called upon for an interview regarding the events surrounding the complaint. In the event that you are interviewed, the *Standards of Conduct for Interviewing EMS Personnel* will be observed; see the attached list.

At this time please provide the following information: A detailed statement describing your participation in the above incident; and any other information you believe may be helpful in the investigation. Return the information by (*give specific date*) to me at 1800 Mount Vernon Ave., Bakersfield CA 93306, attention (*name of EMS Coordinator*).

Thank you for your cooperation, and please feel free to contact me at (*EMS Coordinators phone number and email address*) with questions.

Sincerely,

NAME (EMS Coordinator investigating the incident)
Title

Document2

EMS Investigation Standards of Conduct for Interviewing EMS Personnel

Prior to an interview of a certificate holder (EMT-1, Paramedic, MICN, or EMD), Division staff shall notify the individual, in writing, of the following:

- The interview shall be conducted at a reasonable hour, at a time when the person is on duty, unless an imminent threat to the safety of the public requires otherwise.
- The person under investigation shall be informed, prior to the interview, of the rank, name, and command of the officer or other person in charge of the interview, and all other persons to be present during the interview. All questions directed to the individual during the interview shall be asked by and through no more than two interrogators at one time.
- The person under investigation shall be informed of the nature of the investigation prior to any interview.
- The interview session shall be for a reasonable period taking into consideration the gravity and complexity of the issue being investigated. The person being interviewed shall be allowed reasonable breaks to attend to his or her own personal physical necessities.
- The person being interviewed shall not be subjected to offensive language or threatened with punitive action. A promise of reward shall not be made as an inducement to answering any question.
- A statement made during the interview by a person under duress, coercion, or threat of punitive action may not be admissible in subsequent judicial proceedings.
- The complete interview may be recorded. If a recording is made of the interview, the person interviewed shall have access to the recording if any further proceedings are contemplated or prior to any further interviews at a subsequent time. The person shall be entitled to a transcribed copy of any notes made by a stenographer or to any reports or complaints made by investigators or other persons, except those portions that are otherwise required by law to be kept confidential. Notes or reports that are deemed to be confidential shall not be entered in the person's certification file. The person being interviewed shall have the right to bring his or her own recording device and record any and all aspects of the interview.
- Upon the filing of a formal written statement of charges, or whenever an interview focuses on matters that may result in punitive action against any person, that person, at his or her request, shall have the right to be represented by a representative of his or her choice who may be present at all times during the interrogation. The representative shall not be a person subject to the same investigation. The representative shall not be required to disclose, or be subject to any punitive action for refusing to disclose, any information received from the person under investigation for noncriminal matters.

Appendix F- Conditions of Probation

- A. The following list outlines standard terms and conditions of probation that must be adhered to by the certification/accreditation holder:
1. Probation Compliance: The certification/accreditation holder shall fully comply with all terms and conditions of the probationary order. The certification/accreditation holder shall fully cooperate with the Division in its monitoring, investigation, and evaluation of compliance with the terms and conditions of his/her probationary order. The certification/accreditation holder shall immediately execute and submit to the Division all Release of Information forms that the Division may require, as appropriate.
 2. Personal Appearances: As directed by the Division, the certificate/accreditation holder shall appear in person for interviews, meetings, and/or evaluations of compliance with the terms and conditions of the probationary order. The certificate/accreditation holder shall be responsible for all his/her costs associated with this requirement.
 3. Quarterly Report Requirements: During the probationary period, the certificate/accreditation holder shall submit quarterly reports covering each calendar quarter which shall certify under penalty of perjury, and document compliance with all the terms and conditions of his/her probation. If the certificate/accreditation holder submits his/her quarterly reports by mail, it shall be sent as registered mail.
 4. Employment Notification: During the probationary period, the certificate/accreditation holder shall notify the Division in writing of any EMS employment. The certificate/accreditation holder shall inform the Division in writing of the name and address of any prospective EMS employer prior to accepting employment. Additionally, the certificate/accreditation holder shall submit proof in writing to the Division of disclosure, by the certificate/accreditation holder, to the current and any prospective EMS employer of the reasons for and any terms and conditions of probation. The certificate/accreditation holder authorizes any EMS employer to submit performance evaluations and other reports which the Division may request that relate to the qualifications, function, and duties of his/her respective discipline. Any and all notifications to the Division shall be by registered mail.
 5. Functioning as a Public Safety First Aid Optional Scope, EMT, AEMT, paramedic, MICN or EMD: The period of probation shall not run anytime that the certificate/accreditation holder is not practicing as a Public Safety First Aid Optional Scope, EMT, AEMT, paramedic, MICN, or EMD within Kern County. If the certificate/accreditation holder, during his/her probationary period, leaves Kern County to practice as a Public Safety First Aid Optional Scope, EMT, AEMT, paramedic, MICN, or EMD, he/she must immediately notify the Division, in writing, of the date of such departure and the date of return to Kern County, if he/she returns. Any and all notifications to the Division shall be by registered mail.

6. Obey all related laws: The certificate/accreditation holder shall obey all federal, state and local laws, statutes, regulations, and local written policies, procedures, protocols, and rules governing the practice of medical care as a Public Safety First Aid Optional Scope, EMT, AEMT, paramedic, MICN, or EMD. The certificate/accreditation holder shall not engage in any conduct that is grounds for disciplinary action pursuant to Health and Safety Code 1798.200. To permit monitoring of compliance with this term, if the certificate/accreditation holder has not submitted fingerprints to the Division in the past as a condition of certification, then the certificate/accreditation holder shall submit his/her fingerprints by Live Scan and pay the appropriate fees within forty-five (45) days of the effective date of the decision, Within seventy-two (72) hours of being arrested, cited or criminally charges for any offense, the certificate/accreditation holder shall submit to the Division a full and detailed account of the circumstances thereof. The Division shall determine the applicability of the offense(s) as to whether he/she violated any federal, state and local laws, statutes, regulation, and local written policies, protocols and rules governing the practice of medical care as a Public Safety First Aid Optional Scope, EMT, AEMT, paramedic, MICN, or EMD. Any and all notifications to the Division shall be by registered mail.
 7. Completion of probation: The certificate/accreditation shall be fully restored upon successful completion of probation.
 8. Violation of probation: If during the period of probation the certificate/accreditation holder fails to comply with any term of probation, the Division may initiate action to terminate probation and implement actual certificate/accreditation suspension or revocation. Upon the initiation of such an action, or the giving of a notice of the intent to initiate such an action, the period of probation shall remain in effect until such a time as a decision on the matter has been adopted by the Division. An action to terminate probation and implement actual suspension or revocation shall be initiated and conducted following applicable State guidelines. The issues to be resolved shall be limited to whether the certificate/accreditation holder has violated any term of his/her probation sufficient to warrant termination of probation and implementation of actual suspension or revocation. The certificate/accreditation holder and the Division shall be bound by the admissions contained in the terms of probation and neither party shall have a right to litigate the validity or invalidity of such admissions.
- B. The following list outlines optional terms and conditions of probation that may be implemented by the Division as additional terms of probation to the certification/accreditation holder:
1. Abstinance from drug possession or use: The certificate/accreditation holder shall abstain from the possession, injection, or consumption by any route of all controlled substances, dangerous drugs, or any drugs requiring a prescription unless prescribed under federal or state law as part of a documented medical treatment. Within fourteen (14) days of obtaining such a prescription, the certificate/accreditation holder shall ensure that the prescribing professional provides the Division a written report identifying the

- medication, dosage, the date the medication was prescribed, the diagnosis, and the date the medication will no longer be required. This report must be provided to the Division directly by the prescribing professional. If the certificate/accreditation holder has a lawful prescription when initially placed on probation, this same report must be provided within fourteen (14) days of the commencement of probation. Any and all notification to the Division shall be by registered mail.
2. Abstinence from the use of alcoholic beverages: The certificate/accreditation holder shall abstain from the use of alcoholic beverages.
 3. Biological fluid testing: The certificate/accreditation holder shall submit to the routine and random biological fluid testing or drug/alcohol screening as directed by the Division. Certificate/accreditation holder may use a lab pre-approved by the Division or may provide the Division the name and location of an independent laboratory or drug/alcohol testing facility for approval by the Division; Lab approval shall be based on criteria regulating professional laboratories and drug/alcohol testing facilities as set forth in Chapter 3, Division 2, of the Business and Professions Code and Division 1 of Title 17 of the California Code of Regulations. When the Division requests a random test, the certificate/accreditation holder shall provide the required blood/urine sample by the time specified or within twelve (12) hours of the request if no time is specified. When the Division requests a random test, the certificate/accreditation holder shall ensure that any positive test results are conveyed telephonically by the lab to the Division within forty-eight (48) hours, and all written positive or negative results are provided directly by the lab to the Division within ten (10) days. The certificate/accreditation holder shall be responsible for all costs associated with the drug/alcohol screening. The Division may allow the random drug testing to be conducted by a laboratory under contract with the certificate/accreditation holder's employer to meet the requirement of random drug testing as set forth in this section. The results of the employer's random drug testing shall be made available to the Division in the time frames described above.
 4. Drug/detoxification/diversion program: Within a specified number of days of the effective date of this decision, the certificate/accreditation holder shall enroll and participate in a drug/detoxification/diversion program approved by the Division. The certificate/accreditation holder shall participate in the program until appropriate medical supervision determines that further treatment and rehabilitation is no longer necessary. If the certificate/accreditation holder voluntarily withdraws from the drug/detoxification/diversion program or he/she is expelled from the program, such a withdrawal or expulsion shall constitute a violation of probation. The certificate/accreditation holder shall be responsible for all costs associated with such a program.
 5. Educational course work: Within a specified number of days of the effective date of this decision, the certificate/accreditation holder shall submit to the Division proof of completion of a specified number of hours of education in areas substantially related to the offense as stated in the accusation and to

- the satisfaction of the Division. Any educational program may include community service to reinforce the learning objectives of the educational program. All courses must be approved by the Division. Within thirty-five (35) days after completing the course work, the certificate/accreditation holder shall submit evidence of competency in the required education. Submittal of a certificate or letter from the instructor attesting to competency shall suffice. Any and all notifications to the Division shall be by registered mail.
6. Ethical practice of EMS: Within a specified number of days of the effective date of this decision, the certificate/accreditation holder shall submit to the Division, for its prior approval, a course in Ethics. The course shall be completed within the probationary period or as specified by the Division. Upon completion of the Ethics course, the certificate/accreditation holder shall submit proof to the Division he/she has fulfilled all course requirements. Any and all notifications to the Division shall be by registered mail.
 7. Stress/Anger Management: Within a specified number of days of the effective date of the decision, the certificate/accreditation holder shall enroll and participate in a local, court approved, stress/anger management program, which he/she shall complete during his/her probation. Upon completion of the approved program, the certificate/accreditation holder shall submit proof to the Division that he/she has fulfilled all course requirements. Any and all notifications to the Division shall be by registered mail.
 8. Practical skills examination: Within a specified number of days of the effective date of this decision, the certificate/accreditation holder shall submit to and pass a skills examination in subjects substantially related to the accusation based upon the U.S. Department of Transportation (DOT) and/or National Registry of Emergency Medical Technicians (NREMT) skills examination, when applicable. If not addresses in the DOT or the NREMT, and approved local standard shall be identified and used. The skills examination shall be administered by a board selected by the Division using the pre-established criteria below. The certificate/accreditation holder shall not be allowed to function as an EMT, AEMT, paramedic, MICN, or EMD until he/she passes the examination. He/she has the option and right to repeat the examination. No more than three (3) attempts to pass the examination will be allowed. If he/she fails to pass the exam after three (3) attempts, or chooses to not retake the examination, his/her certificate/accreditation will be revoked.
 9. Oral skills examination: Within a specified number of days of the effective date of this decision, the certificate/accreditation holder shall submit to and pass an oral exam in subjects substantially related to the accusation. The oral exam shall be administered by an examination board selected by the Division using pre-established criteria below. The certificate/accreditation holder shall not be allowed to function as an EMT, AEMT, paramedic, MICN, or EMD until he/she passes the examination. The certificate/accreditation holder has the option and right to repeat the examination. There shall be at least a two (2) week period between examinations. No more than three (3) attempts to pass the examination will be allowed. If he/she fails to pass the

exam after three (3) attempts, or chooses not to retake the examination, the certification/accreditation will be revoked.

10. **Psychiatric Evaluation:** Within a specified number of days of the effective date of this decision, and on a periodic basis as specified by a psychiatrist certified by the American Board of Psychiatry and Neurology, or other specialist as determined by the Division Medical Director, the certificate/accreditation holder shall submit to a psychiatric evaluation. The psychiatrist must be approved by the Division prior to the evaluation. The Division may allow the psychiatric evaluation to be conducted by his/her employer's employee assistance program that meets the qualifications as set forth above. The certificate/accreditation holder shall be responsible for all costs associated with the evaluation. The Division shall have the sole discretion to determine if the certificate/accreditation holder may continue to practice as an EMT, AEMT, paramedic, MICN, or EMD in Kern County until such time that the psychiatrist evaluations and determines that he/she is mentally fit to practice safely as an EMT, AEMT, paramedic, MICN, or EMD.
11. **Medical Evaluation:** Within a specified number of days of the effective date of this decision, and on a periodic basis as specified by a licensed physician, or other specialist as determined by the Division Medical Director the certificate/accreditation holder shall submit to a medical evaluation. The physician must be approved by the Division prior to the evaluation. The Division may allow the medical evaluation to be conducted by his/her employer's contract physician that meets the qualifications as set forth above. The certificate/accreditation holder shall be responsible for all costs associated with the evaluation. The Division shall have the sole discretion to determine if the certificate/accreditation holder may continue to practice as a Public Safety First Aid Optional Scope, EMT, AEMT, paramedic, MICN, or EMD in Kern County until such time that the psychiatrist evaluations and determines that he/she is mentally fit to practice safely as an EMT, AEMT, paramedic, MICN, or EMD.
12. **Performance Improvement Plan:** The certificate/accreditation holder shall function as a practicing Public Safety First Aid Optional Scope, EMT, AEMT, paramedic, MICN, or EMD while on probation, except during the time when the certification/accreditation is suspended by a term or condition of the disciplinary order. The certificate/accreditation holder shall submit to the Division periodic Performance Improvement Plan reports compiled by his/her employer, Division, or approved education provider. These reports shall document improvement as desired in the plan in order to satisfy this condition. The Performance Improvement Plan shall be developed by the Division in conjunction with his/her employer(s). Performance Improvement Plan reports shall be submitted to the Division every # days for a period of #. Any and all notification to the Division shall be by registered mail. A Performance Improvement Plan may include, but not be limited to, education and /or evaluation of the certificate/accreditation holder in areas substantially related to the accusation as follows:
 1. Remedial training by a preceptor in a field or clinical setting.

- b. Remedial training with performance demonstration by the certificate/accreditation holder.
 - c. Policy review by the certificate/accreditation holder.
 - d. Participation by the certificate/accreditation holder in Quality Assurance/Quality Improvement review audits.
- C. Review Board: The Division shall convene a review board to meet the requirements of Optional Conditions 8. and 9. above. The board will be responsible for testing the certificate/accreditation holder per the terms and conditions of probation. The board shall submit to the Division its recommendation as to whether he/she has successfully completed the exam. Each board shall consist of an EMS physician, a Public Safety First Aid Optional Scope, EMT, AEMT, paramedic, MICN or EMD as applicable to the level of training of the certificate/accreditation holder, and an EMS educator. All board members must be currently active in California in an EMS clinical or administrative capacity. Any individual that meets the minimum criteria to serve on the board may apply to the Division for a position on the board. The Division shall review the applications for eligibility and establish a list of qualified individuals. When it becomes necessary to convene a board, the Division shall select individuals from the list to serve on the board. The Division shall make reasonable attempts to convene a regional board based on the location of the certificate/accreditation holder. Each board member will be required to sign a document advising that he/she does not have a conflict with the certificate/accreditation holder (i.e. personal relationship, employer, EMS oversight, etc.). The term for any board member shall be two (2) years. At the conclusion of the term, a board member may reapply. In the event the Division does not have any board members that meet the qualifications for the training level of the certificate/license holder, the Division may solicit members from the EMS community to fill the role. The board member qualifications are as follows:
- 1. EMS Physician:
 - 1. Must be licensed by the California Medical Board
 - b. Must have five (5) years or more of experience in EMS.
 - c. Must not have had any discipline brought against him/her by the Medical Board of California
 - d. Must not have any criminal convictions
 - 2. Public Safety First Aid Optional Scope, EMT, AEMT, paramedic, MICN, or EMD:
 - 1. Must be currently licensed or certified in California or by the IAED for EMD
 - b. Must not have had certification actions for disciplinary cause as defined under Health and Safety Code, Division 2.5, Section 1798.200 (e).
 - c. Public Safety First Aid Optional Scope must be trained and accredited in the optional scope item in question.
 - d. Paramedics must qualify as a paramedic preceptor
 - e. Must not have any criminal convictions
 - f. Must have two (2) or more years' experience (with the exception of paramedic).
 - 3. Educator:

1. Must qualify as a course director or principal instructor for a Public Safety First Aid Optional Scope, EMT, AEMT, or paramedic training program as defined by applicable California Code of Regulations Title 22.
- b. Must have five (5) or more years of experience in EMS with at least two (2) years as an EMS educator in a Public Safety First Aid Optional Scope, EMT, AEMT, or paramedic training program.
- c. Must not have had any accreditation/certification/licensure actions by their Professional Licensing/Certification Board.
- d. Must not have any criminal convictions.

Appendix G. "Notice of Appeal"

Date (15 days prior to effective date of action)

Addressee

RE: Case (###) Notice of Appeal

In an effort to assure that all accreditation actions are handled in a fair and impartial manner, the following procedures outline your rights to Due Process of the imposed accreditation action taken by the Division.

(probation/suspension/revocation) of your accreditation shall be effective on (enter date 15 days after date on notice).

You have ten (10) days following receipt of this notice to file an appeal to the Medical Director. Your appeal must be submitted in writing, by certified mail to the Division. Verbal appeals will not be accepted. Requests for appeal received after the allotted timeframe will not be considered. Your written appeal must contain all of the following information in order to be considered:

- Case Number
- Specific grounds for appeal
- Specific relief requested
- Your reasons in support of the relief requested including any and all supporting documentation or evidence (See below for examples)
- Your signature

All of the following are examples of evidence you may present to the Medical Director during an appeal:

- Dated written statements from persons in positions of authority who have on-the-job knowledge of your current competence. Each statement should include the period of time and capacity in which the person worked with you and shall contain the following sentence at the end: "I declare, under penalty of perjury, under the laws of the State of California, that the foregoing is true and correct to the best of my knowledge." The statement shall be signed and dated by the person making the statement.
- Dated letters from counselors regarding your participation in a rehabilitation or recovery program, where appropriate. The letters should include a description of the program, the number of session that you attended, the counselor's diagnosis of your condition, prognosis for recovery, and the current state of rehabilitation (or improvement), the counselor's basis for determining the improvement and the credentials of the counselor.
- Dated letters describing your participation in support groups.
- Dated laboratory analyses or drug screen reports, where appropriate.
- Dated performance evaluation(s) from your employer.
- Dated physical examination or assessment report by a licensed physician.
- Certificated or transcripts of courses related to your duties that you may have completed since the date of the violation. If your certificate/accreditation/ license has been revoked you cannot use your former accreditation/certification/license

number to obtain continuing education credit/hours for any purpose. However, you may take continuing education courses so long as your accreditation/certificate/license number is not used.

- Evidence of community service or other educational experiences.

If you choose to submit an appeal, action against your accreditation will be held in abeyance until the Medical Director reaches a decision on any appeal filed. However, the Medical Director retains all rights provided under Health and Safety Code 1798.200.

Notification of the decision by the Medical Director will be sent to you within thirty (30) days of the conclusion of the Medical Director's review of the case.

Appendix H. NOTICE OF INVESTIGATION

Date

Addressee
Address
City, State, Zip

RE: Case (##) Notification of Investigation

Dear Mr. :

This letter serves to notify you the EMS Division is conducting an investigation pursuant to Kern County Ordinance xxx. While you may not be the subject of the investigation, information available to the Division indicates that you may have been present and/or involved in the incident under investigation.

At any time during the course of the investigation, the Division may call upon you for an interview. The Division will conduct interviews in accordance with the attached guidelines.

If you are contacted by a Division investigator, please familiarize yourself with incident information prior to the date and time of your scheduled interview.

Incident Information available to the Division:

- Date and Time of call:
- Location of Incident:

If you have any questions, please feel free to contact the Division. As the EMS Coordinator assigned to the investigation I can be reached at *phone* or by email at *email*. Thank you in advance for your cooperation with this investigation.

Sincerely,

NAME (EMS Coordinator investigating
the incident)
Title

EMS Investigation Standards of Conduct for Interviewing EMS Personnel

Prior to an interview of a certificate holder (EMT-1, Paramedic, MICN, or EMD), Division staff shall notify the individual, in writing, of the following:

- The interview shall be conducted at a reasonable hour, at a time when the person is on duty, unless an imminent threat to the safety of the public requires otherwise.
- The person under investigation shall be informed, prior to the interview, of the rank, name, and command of the officer or other person in charge of the interview, and all other persons to be present during the interview. All questions directed to the individual during the interview shall be asked by and through no more than two interrogators at one time.
- The person under investigation shall be informed of the nature of the investigation prior to any interview.
- The interview session shall be for a reasonable period taking into consideration the gravity and complexity of the issue being investigated. The person being interviewed shall be allowed reasonable breaks to attend to his or her own personal physical necessities.
- The person being interviewed shall not be subjected to offensive language or threatened with punitive action. A promise of reward shall not be made as an inducement to answering any question.
- A statement made during the interview by a person under duress, coercion, or threat of punitive action may not be admissible in subsequent judicial proceedings.
- The complete interview may be recorded. If a recording is made of the interview, the person interviewed shall have access to the recording if any further proceedings are contemplated or prior to any further interviews at a subsequent time. The person shall be entitled to a transcribed copy of any notes made by a stenographer or to any reports or complaints made by investigators or other persons, except those portions that are otherwise required by law to be kept confidential. Notes or reports that are deemed to be confidential shall not be entered in the person's certification file. The person being interviewed shall have the right to bring his or her own recording device and record any and all aspects of the interview.
- Upon the filing of a formal written statement of charges, or whenever an interview focuses on matters that may result in punitive action against any person, that person, at his or her request, shall have the right to be represented by a representative of his or her choice who may be present at all times during the interrogation. The representative shall not be a person subject to the same investigation. The representative shall not be required to disclose, or be subject to any punitive action for refusing to disclose, any information received from the person under investigation for noncriminal matters.