

**RESTRICTED DELIVERY CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

Before the Iowa Department of Public Health

IN THE MATTER OF: Niki Jones PO Box 153 Dickens, Iowa 51333 Certification: F-08-217-64	Case Number: 11-03-08 NOTICE OF PROPOSED ACTION REVOCATION
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Pursuant to the provisions of Iowa Code Sections 17A.18, 147A.7, and Iowa Administrative Code (I.A.C.) 641—131.7, the Iowa Department of Public Health is proposing to **REVOKE** your EMS certification identified above.

The department may revoke an EMS certification when it finds that the certificate holder has committed any of the following acts or offenses:

Failure to comply with a subpoena issued by the department or failure to cooperate with an investigation of the department.

IAC 641—131.7(2)h

Violating a statute of this state, another state, or the United States, without regard to its designation as either a felony or misdemeanor, which relates to the provision of emergency medical care, including but not limited to a crime involving dishonesty, fraud, theft, embezzlement, controlled substances, substance abuse, assault, sexual abuse, sexual misconduct, or homicide. A copy of the record of conviction or plea of guilty is conclusive evidence of the violation.

Iowa Code Section 147A.7(1)j and IAC 641—131.7(2)t

Failure to respond within 30 days of receipt, unless otherwise specified, of communication from the department which was sent by registered or certified mail.

IAC 641—131.7(2)ab

The following incidents resulted in issuance of this proposed action:

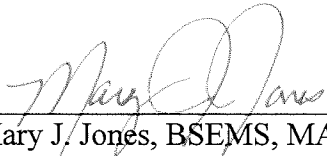
You received a deferred conviction for First Degree Theft on March 29, 2010.

On September 8, 2010, you completed a renewal application for your First Responder certification. On the renewal, you indicated that, during the certification period, you were convicted of a misdemeanor or felony crime.

On November 4, 2010, a letter was delivered to your residence requesting information concerning the reported conviction. The letter instructed you to provide information concerning your conviction to the Department within 30 days. As of the date of this notice, you have failed to provide the requested information.

You have the right to request a hearing concerning this notice of disciplinary action. A request for a hearing must be submitted in writing to the Department by certified mail, return receipt requested, within twenty (20) days of receipt of this Notice of Proposed Action. The written request must be submitted to the Iowa Department of Public Health, Bureau of Emergency Medical Services, Lucas State Office Building, 321 E 12th St, Des Moines, Iowa 50319. If the request is made within the twenty (20) day time limit, the proposed action is suspended pending the outcome of the hearing. Prior to or at the hearing, the Department may rescind the notice upon satisfaction that the reason for the action has been or will be removed.

If no request for a hearing is received within the twenty (20) day time period, the disciplinary action proposed herein shall become effective and shall be final agency action.



Mary J. Jones, BSEMS, MA
Deputy Director
Iowa Department of Public Health
Division Director
Acute Disease Prevention and Emergency Response

4-12-11

Date