

RESTRICTED DELIVERY CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Before the Iowa Department of Public Health

<p>IN THE MATTER OF:</p> <p>Donna Wulfekuhle 2365 Eastlawn Dr. Marion, IA 52302</p> <p>Certification: PM-21-005-11</p>	<p>Case Number: 16-07-11</p> <p>NOTICE OF PROPOSED ACTION</p> <p>SUSPENSION</p>
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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 indefinitely **SUSPEND** your emergency medical care provider certification identified above.

The department may suspend 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(3)h

Willful or repeated violations of Iowa Code Chapter 147A or these rules.
IAC 641—131.7(3)s
Specifically:

A group of individual certificate holders will be audited for each certification period. Certificate holders to be audited will be chosen in a random manner or at the discretion of the bureau of EMS. Falsifying reports or failure to comply with the audit request may result in formal disciplinary action. Certificate holders who are audited will be required to submit verification of continuing education compliance within 45 days of the request.
IAC 641—131.4(5)i

Falsifying certification renewal reports or failure to comply with the renewal audit request.
IAC 641—131.7(3)v

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(3)ab

The following incidents resulted in issuance of this proposed action:

On January 2, 2016, the department received an Affirmative Renewal Application for your emergency medical care provider certification. During the renewal process, you indicated that you had completed 60 hours of continuing education during the current certification period, that at least 30 of those hours were designated as formal education, and that you had a current course completion card in cardiopulmonary resuscitation, AED and obstructed airway procedures for all age groups according to recognized national standards.


Your certification was audited pursuant to IAC 641—131.4(5)“i”. On May 18, 2016, an audit request was delivered to your residence instructing you to submit audit information within 45 days. As of the date of this notice, you have failed to submit the requested information.

Your certification shall be suspended until the Department receives, reviews and approves the documentation of:

- 1) 60 hours of continuing education completed between April 1, 2014 and March 31, 2016 and that at least 30 of those hours were designated as formal education.
- 2) current course completion card in cardiopulmonary resuscitation, AED and obstructed airway procedures for all age groups according to recognized national standards.

You have the right to request a hearing concerning this notice or proposed 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 and Trauma Services, Lucas State Office Building, 321 East 12th Street, 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.



Rebecca Curtiss, Bureau Chief
Iowa Department of Public Health
Bureau of Emergency and Trauma Services

7-11-2016
Date