

## RESTRICTED DELIVERY CERTIFIED MAIL RETURN RECEIPT REQUESTED

## Before the Iowa Department of Public Health

IN THE MATTER OF:

Case Number: 13-07-15

Little Sioux Grant Township, Inc. PO Box 53 Smithland, Iowa 51056-0053

NOTICE OF PROPOSED ACTION

Service #: 9978500

CITATION AND WARNING

Pursuant to the provisions of Iowa Code Sections 17A.18, 147A.5 and Iowa Administrative Code (I.A.C.) 641—132.10(3), the Iowa Department of Public Health is proposing to issue a Citation and Warning to the service program identified above.

The Department may issue a citation and warning when a service program has committed any of the following acts or offenses:

Failure or repeated failure of the applicant or alleged violator to meet the requirements or standards established pursuant to Iowa Code chapter 147A or the rules adopted pursuant to that chapter.

*IAC 641—132.10(3)f* 

Failure to correct a deficiency within the time frame required by the department. IAC 641-132.10(3)i

Service program operational requirements. Ambulance and nontransport service programs shall: IAC 641-132.8(3)

Maintain current personnel rosters and personnel files. The files shall include the names and addresses of all personnel and documentation that verifies EMS provider credentials including, but not limited to:

(1) Current provider level certification. *IAC 641—132.8(3)d* 

Ensure that the appropriate service program personnel respond as required in this rule and that they respond in a reasonable amount of time. *IAC 641—132.8(3)g* 

Medical director's duties include, but need not be limited to: IAC 641—132.9(2)

Monitoring and evaluating the activities of the service program and individual personnel performance, including establishment of measurable outcomes that reflect the goals and standards of the EMS system. IAC 641—132.9(2)c

The following events have led to this action:

The Bureau of EMS performed an on-site inspection of Little Sioux Grant Township, Inc. on April 24, 2013. At the time of the inspection, deficiencies were identified and the service was given 30 days to resolve the deficiencies. The service failed to correct the deficiencies identified above within 30 days.

The service is hereby **CITED** for failing to correct service program deficiencies within 30 days. The service is hereby **WARNED** that failing to correct deficiencies or violating the Department's rules in the future may result in further disciplinary action, including suspension or revocation of Respondent's service program authorization.

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 12<sup>th</sup> 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.

Rebecca Curtiss

Bureau Chief

Iowa Department of Public Health

Center for Disaster Operations and Response

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