## CERTIFIED MAIL RETURN RECEIPT REQUESTED

## Before the Iowa Department of Public Health

IN THE MATTER OF:

Case Number: 08-12-04

Rembrandt Fire and Rescue

NOTICE OF PROPOSED ACTION

PO Box 140

Rembrandt, IA 50576

CITATION AND WARNING

Service #: 9116200

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

General requirements for authorization and renewal of authorization: IAC 641-132.7(1)

To renew service program authorization, the service program shall continue to meet the requirements of Iowa Code chapter 147A and these rules. The renewal application shall be completed and submitted to the department at least 30 days before the current authorization expires.

IAC 641-132.7(1)b

A service program seeking ambulance authorization shall: IAC 641-132.8(1)

Seek approval from the department to provide nontransport coverage in addition to or in lieu of ambulance authorization

IAC 641-132.8(1)f

A service program seeking nontransport authorization shall: IAC 641-132.8(2)

For staffing purposes provide, as a minimum, a transport agreement. IAC 641-132.8(2)b

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

Complete and maintain a patient care report concerning the care provided to each patient.

Ambulance services shall provide, at a minimum, a PCR verbal report upon delivery of a patient to a receiving facility and shall provide a complete PCR within 24 hours to the receiving facility. IAC 641-132.8(3)a

Utilize department protocols as the standard of care. The service program medical director may make changes to the department protocols provided the changes are within the EMS provider's scope of practice and within acceptable medical practice. A copy of the changes shall be filed with the department.

IAC 641-132.8(3)b

Ensure that personnel duties are consistent with the level of certification and the service program's level of authorization.

IAC 641-132.8(3)c

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

Implement a continuous quality improvement program that provides a policy to include as a minimum:

- (1) Medical audits.
- (2) Skills competency.
- (3) Follow-up (loop closure/resolution).

IAC 641-132.8(3)m

Equipment and vehicle standards. The following standards shall apply: IAC 641-132.8(4)

All EMS service programs shall carry equipment and supplies in quantities as determined by the medical director and appropriate to the service program's level of care and available certified EMS personnel and as established in the service program's approved protocols.

IAC 641-132.8(4)b

*Equipment and vehicle standards. The following standards shall apply:* 

Pharmaceutical drugs and over-the-counter drugs may be carried and administered upon completion of training and pursuant to the service program's established protocols approved by the medical director.

IAC 641-132.8(4)c

Preventative maintenance. Each ambulance service program shall document a preventative maintenance program to make certain that:

IAC 641-132.8(5)

The exterior and interior of the vehicles are kept clean. The interior and equipment shall be cleaned after each use as necessary. When a patient with a communicable disease has been transported or treated, the interior and any equipment or nondisposable supplies coming in contact with the patient shall be thoroughly disinfected.

IAC 641-132.8(5)b

All equipment stored in a patient compartment is secured so that, in the event of a sudden stop or movement of the vehicle, the patient and service program personnel are not injured by moving equipment.

IAC 641-132.8(5)c

All airway, electrical and mechanical equipment is kept clean and in proper operating condition. IAC 641-132.8(5)d

Compartments provided within the vehicles and the medical and other supplies stored therein are kept in a clean and sanitary condition.

IAC 641-132.8(5)e

The 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

Developing and approving an applicable continuous quality improvement policy demonstrating type and frequency of review, including an action plan and follow-up.

IAC 641-132.9(2)g

Supervising physicians, physician designees, or other appointees as defined in the continuous quality improvement policy referenced in 132.9(2) "g" may assist the medical director by:

- a. Providing medical direction.
- b. Reviewing the emergency medical care provided.
- c. Reviewing and updating protocols.
- d. Providing and assessing continuing education needs for service program personnel.
- e. Helping to resolve operational problems.

IAC 641—132.9(3)

The medical director or other qualified designees shall randomly audit (at least quarterly) documentation of calls where emergency medical care was provided. The medical director shall randomly review audits performed by the qualified appointee. The audit shall be in writing and shall include, but need not be limited to:

- a. Reviewing the patient care provided by service program personnel and remedying any deficiencies or potential deficiencies that may be identified regarding medical knowledge or skill performance.
- b. Response time and time spent at the scene.
- c. Overall EMS system response to ensure that the patient's needs were matched to available resources including, but not limited to, mutual aid and tiered response.
- d. Completeness of documentation.

IAC 641—132.9(4)

The following events have led to this action:

The Bureau of EMS performed an on-site inspection of Rembrandt Fire and Rescue on October 20, 2008. At the time of the inspection, deficiencies were identified and the service was given 30 days to resolve the deficiencies. A follow-up letter dated November 21, 2008, issued after communications with Rembrandt Fire and Rescue, extended the deadline to December 3, 2008. On the date of this action, the above deficiencies remain unresolved.

The service is hereby **CITED** for identified uncorrected service program deficiencies. The service is hereby **WARNED** that continued violation of the Department's rules 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.

Kirk E. Schmitt, Bureau Chief

**Emergency Medical Services** 

-17-2008

Date