RESTRICTED DELIVERY CERTIFIED MAIL RETURN RECEIPT REQUESTED

Before the Iowa Department of Public Health

IN THE MATTER OF:

Case Number: 12-10-15

Eric Hansen
18 Dartmouth Street SW
Cedar Rapids, Iowa 52404-5201

Certification: B-21-218-06

Case Number: 12-10-15

NOTICE OF PROPOSED ACTION

SUSPENSION

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** the emergency medical care provider certification identified above.

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

Knowingly making misleading, deceptive, untrue or fraudulent representations in the practice of the profession or engaging in unethical conduct or practice harmful or detrimental to the public. Proof of actual injury need not be established. Acts which may constitute unethical conduct include, but are not limited to:

Iowa Code Section 147A.1i; IAC 641—131.732)f

Failure to comply with the terms of a department order or the terms of a settlement agreement or consent order. IAC 641—131.7(3)i

Fraud in representation as to skill, ability or certification. $IAC\ 641-131.7(2)r$

Willful or repeated violation of Iowa Code chapter 147A or these rules. IAC 641—131.7(3)s

Practicing emergency medical services at a certain level of certification when the EMS provider is not certified at such level. IAC 641—131.7(2)aa

The following events have resulted in issuance of this proposed action:

In June of 2011, the Department suspended your emergency medical care provider certification for a period of six months. At the completion of the suspension, your certification was then placed on probation until January 1, 2014.

The following events led to the 2011 action:

You were the Administrator for Helping Hands Activity Volunteer Program. Helping Hands Activity Volunteer Program was not an authorized EMS program in the State of Iowa.

On January 5 and February 25, 2011, you and volunteers with Helping Hands Activity Volunteer Program, requested an EMS response for an individual with a medical condition. The individual requesting the response identified himself as a Helping Hands Paramedic. Upon the arrival of EMS, you and the volunteers were noted to be wearing coats and hats marked with the letters EMS. The two volunteers are not certified as EMS providers in the State if Iowa. A vehicle present at the scene on February 25th had a magnet that read "Helping Hands AVP Volunteer EMS."

In addition:

On January 5, 2011, you provided glucose to a patient independently and not as a member of an authorized service.

On February 25, 2011, you identified yourself to a law enforcement official as a paramedic.

On February 25, 2011, you identified the volunteers with you as First Responders. On February 25, 2011, you administered glucose, utilized a glucometer and administered oxygen to a patient independently and not as a member of an authorized service.

The terms and conditions of the probation required you to obey all federal, state, and local statutes and rules governing the provision of emergency medical service.

Subsequently, the Department has become aware that you have continued to provide onsite medical care at events through Helping Hands AVP. Helping Hands AVP is not an authorized EMS service but you have continued to represent yourself as and EMT at events by wearing a hat that has the letters EMT on it.

Iowa Code section 147A.16 does allow for the delivery of on-site emergency medical care by an individual with a non-authorized system, provided that the individual does not claim to be a certified emergency medical care provider or use any terms to indicate or imply that the person is a certified medical care provider.

Your certification shall be suspended until:

- 1) You provide written verification of employment by an authorized EMS service from a service director or from the supervising physician of a hospital or other entity where health care is ordinarily provided as described in IAC 641—131.3(1).
- 2) The service director and medical director, or direct supervisor and supervising physician, shall report to the bureau, in writing, acknowledging that the service director and medical director, or direct supervisor and supervising physician, have read this document and understands it.
- 3) The department receives, reviews and approves the information provided.

Your suspension shall be subject to the following terms and conditions.

- 1) You shall continue to meet all renewal requirements each certification period.
- 2) You shall submit a renewal application within 90 days of your expiration date.
- 3) You shall not present yourself as an emergency medical care provider in any way.

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.

Gerd W. Clabaugh

Deputy Director and

Director, Division of Acute Disease Prevention and Emergency Response