

**RESTRICTED DELIVERY CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

Before the Iowa Department of Public Health

IN THE MATTER OF Joshua Stanley 228 South Maple Street Paullina, Iowa 51406-1026 Certification: B-04-319-26	Case: 09-08-10 NOTICE OF PROPOSED ACTION SUSPENSION
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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 EMS certification identified above.

The Department may place an EMS provider on probation when it finds that the applicant or certificate holder has committed any of the following acts or offenses:

*Failure to comply with the terms of a department order or the terms of a settlement agreement or settlement order.
IAC 641—131.7(2)d*

The following events have lead to this notice:

On May 1, 2009, the Department placed your certification on probation for a period of one year. As a condition of your probation, you are required to provide notification to your service's medical director, of the terms, conditions and restrictions imposed by this probation within fifteen days of effective date of the probation, or of undertaking new employment. Your medical director must acknowledge, in writing, reading and understanding the probation notice.


On the probation report you provided, dated June 17, 2009, you indicated that you volunteer for an Iowa authorized EMS service. On August 14, 2009, you received a letter from the department instructing you to provide acknowledgement from your medical director that he or she read and understood the probation notice within 10 days. As of the date of this notice, you have failed to provide acknowledgement from your medical director.

Your certification shall be suspended until:


You provide documentations from your medical director, in writing, that the medical director has read and understands the probation notice and the Department has approved such documentation.

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 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.



Kirk E. Schmitt, Bureau Chief
Emergency Medical Services



Date