



CENTRAL DUPAGE HOSPITAL  
EMERGENCY MEDICAL SERVICES SYSTEM  
POLICY & PROCEDURES

TITLE: EMS AGENCY SUSPENSIONS / SYSTEM REMOVAL

SECTION: SYSTEM PARTICIPATION

POLICY NUMBER: I-3

APPROVED BY: DR. STEVE GRAHAM EMS MEDICAL DIRECTOR

EFFECTIVE DATE: 01 JULY 2018

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**PURPOSE:**

To define the process of EMS Agency suspensions within the Central DuPage Hospital Emergency Medical Services System (CDHEMSS).

**POLICY:**

The CDHEMSS Medical Director (MD) may suspend from participation within the CDHEMSS, any EMS licensed provider who does not maintain the standards of the CDHEMSS policies and procedures, Region 8 EMS Standard Operating Procedures, or the Illinois Department of Public Health (IDPH) EMS act. The suspension order shall contain the length, terms and reasons for the suspension. The reasons must include at least one of the following:

1. Failure to meet the education and training requirements prescribed by the Department in Section 515.520, 515.500, 515.560, 515.580 of the Rules and Regulations of the Illinois Department of Public Health, or by the CDHEMSS MD. The education and training requirements of the CDHEMSS MD are contained in the System policy and procedure manual, the Standard Operating Protocols and the System continuing education programs;
2. Violation of the IDPH EMS Act, and/or Rules and Regulations
3. Failure to maintain proficiency at the level licensed
4. Failure to comply with the provisions of the System's Program Plan approved by the Department;
5. Intoxication or personal misuse of any drugs or the use of intoxicating liquors, narcotics, controlled substances, or other drugs or stimulants in such manner as to adversely affect the delivery, performance or activities in the care of patients requiring medical care (for the purposes of this subsection, adversely affect means anything which could harm the patient or treatment that is administered improperly);
6. Intentional falsification of any medical reports or orders, or making misrepresentations involving patient care;
7. Abandoning or neglecting a patient requiring emergency care.
8. Unauthorized use or removal of narcotics, drugs, supplies or equipment from any ambulance, health care facility, institution or other workplace location.
9. Performing or attempting emergency care, techniques or procedures without proper permission, licensure, education or supervision;
10. Discrimination in rendering emergency care because of race, sex, creed, religion, national origin, sexual orientation, sexual identity, medical status, or ability to pay;
11. Medical misconduct or incompetence, or a pattern of continued or repeated medical misconduct or incompetence in the provision of emergency care.
12. Violation of System's standards of care;

13. Physical impairment of a pre-hospital provider to the extent that he or she cannot physically perform the emergency care and life support functions for which he or she is licensed, as verified by a physician, unless the pre-hospital provider is on inactive status pursuant to the Part; or
14. Mental impairment of a pre-hospital provider to the extent that he or she cannot exercise the appropriate judgment, skill and safety for performing the emergency care and life support functions for which he or she is licensed, as verified by a physician, unless the pre-hospital provider is on inactive status to this Part.
15. IDPH investigations or fraud / malpractice
16. Failing to report a serious injury or death that may have been preventable

### **Suspension Process**

1. An EMS Medical Director may suspend from participation within the System any individual, individual provider or other participant considered not to be meeting the requirements of the Program Plan of that approved EMS System. (Section 3.40(a) of the Act)
2. Except as allowed in section 12, the EMS Medical Director shall provide the individual, individual provider or other participant with a written explanation of the reason for the suspension; the terms, length, and condition of the suspension; and the date the suspension will commence, unless a hearing is requested. The procedure for requesting a hearing within 15 days through the Local System Review Board shall be provided.
3. Failure to request a hearing within 15 days shall constitute a waiver of the right to a Local System Review Board hearing.
4. The Resource Hospital shall designate the Local System Review Board as required by IDPH (Section 3.40 (e) of the Act). The EMS Medical Director shall prepare and post, in a 24-hour accessible location at the Resource Hospital, the System Review Board List.
  - a. The CDHEMSS local review board is listed in the EMS workroom at Central DuPage Hospital. Should a review board be needed, no member of the same agency shall sit, rather the alternate shall take his or her place as needed.
5. The hearing shall commence as soon as possible but at least within 21 days after receipt of a written request. The EMS Medical Director shall arrange for a certified shorthand reporter to make a stenographic record of that hearing and thereafter prepare a transcript of the proceedings. The transcript, all documents or materials received, as evidence during the hearing and the Local System Review Board's written decision shall be retained in the custody of the EMS System. The System shall implement a decision of the Local System Review Board unless that decision has been appealed to the State Emergency Medical Services Disciplinary Review Board in accordance with the Act and this Part. (Section 3.40(e) of the Act)
6. The Local System Review Board shall state in writing its decision to affirm, modify or reverse the suspension order. Such decision shall be sent via certified mail or personal service to the EMS Medical Director and the individual, individual provider or other participant who requested the hearing within five business days after the conclusion of the hearing.
7. The transcripts, all documents or materials received, as evidence during the hearing and the Local System Review Board's written decision shall be retained in the custody of the EMS System.

8. The EMS Medical Director shall notify the Department, in writing, within five business days after the Board's decision to uphold, modify or reverse the EMS Medical Director's suspension of an individual, individual provider or participant. The notice shall include a statement detailing the duration and grounds for the suspension.
9. If the Local System Review Board affirms or modifies the EMS Medical Director's suspension order, the individual provider or other participant shall have the opportunity for a review of the Local Board's decision of the State EMS Disciplinary Review Board. (Section 3.40(b)(1) of the Act)
10. If the Local System Review Board reverses or modifies the EMS Medical Director's suspension order, the EMS Medical Director shall have the opportunity for review of the Local Board's decision by the State EMS Disciplinary Review Board. (Section 3.40(b)(2) of the Act)
11. Requests for review by the State EMS Disciplinary Review Board shall be submitted in writing to the Chief of the Department's Division of Emergency Medical Services and Highway Safety, within 10 days after receiving the Local Board's decision or the EMS Medical Director's suspension order, whichever is applicable. A copy of the Board's decision or the suspension order shall be enclosed. (Section 3.45(h) of the Act)
12. An EMS Medical Director may immediately suspend an individual, individual provider or other participant if he or she finds that the information in his or her possession indicates that the continuation in practice by an EMS provider would constitute an imminent danger to the public. The suspended EMS provider shall be issued an immediate verbal notification followed by a written suspension order to the EMS provider by the EMS Medical Director which states the length, terms and basis for the suspension. (Section 3.40(c) of the Act)
  - a. Within 24 hours following the commencement of the suspension, the EMS Medical Director shall deliver to the Department, by messenger, email or telefax, a copy of the suspension order and copies of any written materials which relate to the EMS Medical Director's decision to suspend the provider.
  - b. Within 24 hours following the commencement of the suspension, the suspended EMS provider may deliver to the Department, by messenger, email, or telefax, a written response to the suspension order and copies of any written materials which the EMS provider feels relate to that response.
  - c. Within 24 hours following the receipt of the EMS Medical Director's suspension order or the EMS provider written response, whichever is later, the Director or the Director's designee shall determine whether the suspension should be stayed pending the EMS provider's opportunity for hearing or review in accordance with the Act, or whether the suspension should continue during the course of that hearing or review. The Director or the Director's designee shall issue this determination to the EMS Medical Director, who shall immediately notify the suspended EMS provider. The suspension shall remain in effect during this period of review by the Director or Director's designee. (Section 3.40(c) of the Act)

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