



County of Santa Cruz

HEALTH SERVICES AGENCY

POST OFFICE BOX 962, 1080 EMELINE AVENUE SANTA CRUZ, CA 95061-0962

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EMERGENCY MEDICAL
SERVICES PROGRAM

Policy No. 8000

April 1, 2012

Emergency Medical Services Program

Approved

Medical Director

Subject: CONTINUING EDUCATION PROVIDER APPROVAL

I. Purpose

To establish standards for continuing education providers (CEP's) in the County of Santa Cruz.

II. Provider Approval

1. Any person or agency headquartered in Santa Cruz County wishing to become CEP must submit for approval, a written request to the Agency. An applicant may apply for approval as either a BLS level, ALS level, or both.
2. The request for CEP approval must be complete and contain all appropriate information including, resume for both the Program Director and Clinical Director, and the applicable fee. Refer to the CE Provider guide for specific requirements.
3. Applications must be received at least sixty (60) days before the first scheduled course of instruction.
4. The Agency will notify the applicant within fourteen (14) days that the application was received; and shall notify the applicant within sixty (60) days of receipt of the application of its decision to approve or deny.
5. The Agency may approve CE Providers for a period of four (4) years. The expiration date shall be no more than four (4) years from the last day of the month in which the application was approved.
6. In order to renew CEP approval, revised CE Provider materials must be received no less than sixty (60) days prior to the expiration date of the current approval. Refer to the CE Provider Guide for specific requirements.

III. CEP Requirements

Refer to the current version of the Continuing Education Providers Guide.

IV. Negative Action

Any negative action taken in relation to a CEP shall be in accordance with Santa Cruz County Prehospital Care Policy 8010, Procedure for Suspension or Revocation of EMT, CEP, or Paramedic Training Program Approval.



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Medical Director

Subject: PROCEDURE FOR SUSPENSION OR REVOCATION OF EMT, PARAMEDIC TRAINING, OR CE PROVIDER PROGRAM APPROVAL

I. Purpose

To provide a procedure for suspending or revoking EMT or paramedic training program approval for failure to comply with Division 2.5 of the California Health & Safety Code or any rules or regulations adopted pursuant thereto.

II. Procedure

A. Establish Need to Review

The Agency shall evaluate information received from credible sources, including information obtained from an audit or complaint, indicating the possibility of a failure of an EMT or paramedic training program (Program) to comply with Division 2.5 of the California Health and Safety Code or any rules of regulations adopted pursuant thereto.

B. Investigation

An investigation will be conducted by the EMS Agency if warranted. An investigation may consist of, but is not limited to, further collection and review of documents, evidence collection, interviews, etc.

C. Submission to Medical Director

If the EMS Agency's investigation determines that facts support suspension or revocation of a Program's approval, the allegations may be submitted to the EMS Agency's Medical Director, or his or her designee.

D. Issue Formal Accusation and Inform Program of Rights

1. Prior to or concurrent with submission of the allegations to the Medical Director, the EMS Agency shall notify the Program of the allegations in writing. The notice along with a copy of this policy and the Professional Standards Investigation and Enforcement Guide shall be sent by certified mail to the Program. The notice shall state the following:
 - a. The acts or omissions with which the Program is charged;
 - b. The statutes, rules or regulations that the Program is alleged to have violated;
 - c. The potential actions that the Agency may take as a result of an adverse determination;
 - d. The Program's right to respond to the allegations orally or in writing, or both; and
 - e. The deadline for responding to the allegations.

E. Response to Allegations

1. The Program may, within fifteen (15) calendar days of the date that the notice is received, request in writing that a hearing (Independent Review Panel) be convened. Within thirty (30) days of receipt of such a request, the Medical Director shall convene a hearing.
2. The Program may submit a written response to the allegations to the Medical Director, without a hearing by an IRP.
3. The Program shall have thirty (30) days from the receipt of the notice, or up to five (5) days before the date of the hearing, whichever is earlier, to submit a written response to the allegations and supporting documentation to the Medical Director.
4. The failure of the Program to respond orally, or in writing, to the allegations by the above deadlines may result in the Program losing the opportunity to be heard concerning the allegations.

F. Proceedings of an Independent Review Panel (IRP)

The following procedures will be observed if a hearing by an IRP is requested by the Program.

1. The Medical Director shall set the hearing date.
2. Any written materials submitted by the EMS Agency or the Program (the Parties) to the IRP shall also be provided by the Parties to the other.
3. The Parties may call witnesses and present relevant testimony.
4. The EMS Agency shall present testimony first, after which the Program may present testimony. The Parties shall also have the opportunity to rebut the testimony of the other. Thereafter, the Parties may each make closing arguments. The IRP may call and examine witnesses, may determine the number and order of witnesses, may limit the time for each witness or for argument, and may conclude the hearing at any time after both parties have presented testimony and argument.

5. The IRP may permit cross-examination of witnesses at their discretion.
6. Witnesses shall not be required to testify under oath.
7. A record of the hearing shall be prepared by electronic recording or stenographic reporter.
8. The hearing will only be held open to the public if the Program so requests, however, the IRP may close all or part of the hearing to the public to the extent that it is necessary, taking into account the rights of all persons. The IRP may also exclude witnesses from the hearing when they are not testifying, except that neither of the Parties may be excluded.
9. The program may be represented by a person of his or her choice.
10. The IRP shall not have “ex parte” communications with the Parties concerning the allegations before a determination of the case is made.

G. IRP Decision

1. After the hearing the IRP shall assess all the information in the record in order to resolve the case. The IRP may not consider evidence that is outside of the record. The IRP may consider hearsay evidence for the purpose of explaining or supplementing other evidence, but such evidence shall not be sufficient by itself as a basis for a finding unless it would be admissible over objections in civil actions.
2. The EMS Agency has the burden of proof by a preponderance of the evidence. This burden must be met even in the event the Program fails to respond to the allegations.
3. The IRP shall issue a written decision, no later than 30 days after the hearing that includes findings of facts, a determination of the issues, and any proposed disciplinary action (i.e. probation, suspension or revocation of Program approval) that shall occur as a result. The written decision shall also include the proposed effective date of any proposed disciplinary action.

H. Final Review

The Medical Director shall issue a final written decision in every case. The Medical Director shall issue the decision, no later than 30 days after a decision of the IRP, or no later than 30 days after deadline for a written response if no IRP is requested. Unless the decision of the IRP is adopted, the Medical Director’s determination shall include findings of facts, a determination of the issues, and any disciplinary action (i.e. probation, suspension or revocation of Program approval) that shall occur as a result. The written decision shall also include the effective date of any disciplinary action.

If an IRP has issued a decision on the matter:

1. The Medical Director may adopt the recommendations of the IRP in whole.
2. The Medical Director may adopt the recommendations of the IRP in part, or with modifications.
3. The Medical Director may reject the recommendations of the IRP and issue a separate decision.

I. Probation or Suspension of Program Approval

1. The term of any probation or suspension and any conditions for reinstatement (i.e. plan of correction) shall be determined based on the facts of the case.
2. Upon expiration of the term of any suspension, probation or combination of suspension and probation, the Program's approval may be reinstated by the Medical Director if all of the conditions of reinstatement have been met. If the conditions of reinstatement have not been met, the Medical Director may continue the suspension or probation until all conditions for reinstatement have been met.
3. If, during a probationary period, a Program fails to meet the conditions for reinstatement, the Medical Director may suspend the Program's approval until all the conditions for reinstatement have been met.

J. Immediate Suspension

The Medical Director may immediately suspend a Program's approval, pending a decision made under this policy if, in the opinion of the Medical Director, immediate suspension is necessary to ensure the public health and safety.