



~~HSHS St. Mary's~~ *EMS* System

# SYSTEM PARTICIPATION

## EMS Agency Roles and Responsibilities

### I. PURPOSE

The purpose of this policy is to outline the expectations of EMS agencies serving in the ~~HSHS St. Mary's~~ EMS System.

### II. DEFINITION – None.

### III. POLICY

Each agency that joins the ~~HSHS St. Mary's~~ EMS System must do the following: A.

Appoint a representative of the agency to attend any scheduled coordinator meetings with the EMS System Coordinator.

B. Maintain all Prehospital Care Records on paper or electronically for a minimum of seven years.

C. Provide updated personnel rosters annually with IDPH inspection or self- inspection. Only EMS providers on the agency roster are permitted to provide patient care for that agency and only at the level of the agency licensure unless an In-Field Service Level Upgrade (see Section 515.833 of the IDPH Administrative Rules) has been approved for the agency.

1. Rosters should include the following:

- a. provider name
- b. current license level
- c. license number
- d. expiration date

D. Maintain the proper equipment and supplies required by IDPH and the ~~HSHS St. Mary's~~ EMS System.

E. Assist in monitoring quality indicators as established by the ~~HSHS St. Mary's~~ EMS System office.

F. Use the EMS Risk Screen form to communicate all quality concerns to the ~~HSHS St. Mary's~~ EMS System office.

G. Provide agency members with information presented at coordinator meetings and/or obtained from the ~~HSHS St. Mary's~~ EMS System website. Agencies are expected to



## ~~HSHS St. Mary's~~ EMS System

maintain records indicating transfer of information. These records must be provided on request to the ~~HSHS St. Mary's~~ EMS System office for review.

- H. Assure that all agency providers:
1. Submit all CE records necessary for relicensure to the ~~HSHS St. Mary's~~ EMS System office at least 60 days prior to date of license expiration.
  2. Complete all required forms for individual license application and renewal as mandated by IDPH.
  3. Be knowledgeable of all policies, care guidelines and protocols appropriate to licensure.

**RESOURCES** – None.

## EMS Providers Joining the System – Initial Credentialing

### I. PURPOSE

The purpose of this policy is to establish a process for joining the ~~HSHS St. Mary's~~ EMS System as an EMS Provider and to establish requirements for credentialing of new providers within our EMS System.

### II. DEFINITION – None.

### III. POLICY

- A. All applicants for credentialing in the ~~HSHS St. Mary's~~ EMS System shall complete an application. Providing false, inaccurate, or misleading information on the credentialing application shall be immediate grounds for termination and/or suspension from the EMS System.
- B. EMS providers requesting to function in the ~~HSHS St. Mary's~~ EMS System must meet the system entry requirements.

To obtain BLS privileges, the EMS Provider must:

1. Be a member/employee of an ~~HSHS St. Mary's~~ EMS System agency.
2. Have a valid Illinois EMS license.
3. Have current certification in CPR for Healthcare Providers that covers didactic and psychomotor skills that meet or exceed American Heart Association guidelines.
4. Complete the System Entry Application.
5. Submit a letter of good standing from the provider's current/previous EMS system.

To obtain ILS, ALS or PHRN privileges, the EMS Provider must:

1. Be a member/employee of an ~~HSHS St. Mary's~~ EMS System agency.
2. Have a valid Illinois EMS license.
3. Have current certification in CPR for Healthcare Providers that covers didactic and psychomotor skills that meet or exceed American Heart Association guidelines.
4. Have current certifications in AHA ACLS, AHA PALS or PEPP, and ITLS or PHTLS (PHRN may substitute TNS or TNCC certification). If certifications are not current, the provider must obtain certification within six (6) months of entry into the system.

5. Validation of skills competency by attending an ~~HSHS St. Mary's~~ EMS System Annual Skills Review within three (3) months of system entry.
  6. Successful completion of a written protocol exam within three (3) months of system entry with a score of 80% or higher.
    - a. No more than three (3) attempts, with at least 24 hours between each attempt.
    - b. Third attempt failures are handled on a case-by-case basis. A conference will be convened with the EMS Medical Director/designee and the EMS Provider to establish a corrective action plan.
  7. Complete the System Entry Application.
  8. Submit a letter of good standing from the provider's current/previous EMS System.
- C. The EMS Medical Director and EMS System Coordinator will review this information prior to giving permission for the provider to function within the system. The provider and the EMS agency director/coordinator will receive confirmation from the ~~HSHS St. Mary's~~ EMS System office once the process is complete and he/she has been approved to participate in patient care.
- D. The System Entry Application will be kept on file in the ~~HSHS St. Mary's~~ EMS System office.
- E. The EMS Medical Director reserves the right to deny System provider status or to place internship & field, skill evaluation requirements on any candidate requesting System certification at any level.

#### IV. RESOURCES

System Entry Application-- Appendix page 200

## Maintenance of Credentials

### I. PURPOSE

The purpose of this policy is to establish mandatory certification requirements for all participants of the ~~HSHS St. Mary's~~ EMS System as an EMS Provider.

### II. DEFINITION— None.

### III. POLICY

- A. All providers must maintain current certification in CPR for Healthcare Providers that covers didactic and psychomotor skills that meet or exceed American Heart Association guidelines. Providers may NOT function without current CPR certification.
- B. EMS providers must meet the following requirements in order to be active within the ~~HSHS St. Mary's~~ EMS System:

To maintain BLS privileges, the EMS Provider must:

- 1. Be a member/employee of an ~~HSHS St. Mary's~~ EMS System agency.
- 2. Have a valid Illinois EMS license.
- 3. Have current certification in CPR for Healthcare Providers that covers didactic and psychomotor skills that meet or exceed American Heart Association guidelines.

To maintain ILS, ALS or PHRN privileges, the EMS Provider must:

- 1. Be a member/employee of an ~~HSHS St. Mary's~~ EMS System agency.
- 2. Have a valid Illinois EMS license.
- 3. Have current certification in CPR for Healthcare Providers that covers didactic and psychomotor skills that meet or exceed American Heart Association guidelines.
- 4. Have current certifications in AHA ACLS, AHA PALS or PEPP, and ITLS or PHTLS (PHRN may substitute TNS or TNCC certification).
  - a. Providers may NOT function at the Advanced level without current certifications but may continue to function at a Basic level.
- 5. Attend an ~~HSHS St. Mary's~~ annual Skills Review session.
  - a. Advanced EMS providers who do not complete a Skills Review by December 31 each year may NOT function at the Advanced level but may continue to function at a Basic level until a Skills Review is completed.

6. Successful completion of an annual written protocol exam with a score of 80% or higher.
    - a. No more than three (3) attempts, with at least 24 hours between each attempt.
    - b. Third attempt failures are handled on a case-by-case basis. A conference will be convened with the EMS Medical Director/designee and the EMS Provider to establish a corrective action plan.
  7. An extension may be requested from the EMS Office for extenuating circumstances such as significant illness or injury, military deployment, etc. that would not permit course participation. Request for extension does NOT guarantee approval.
- C. The EMS Medical Director reserves the right to deny System provider status or to place internship & field, skill evaluation requirements on any candidate requesting System certification at any level.

IV. **RESOURCES** - None

## Personnel Records

### I. PURPOSE

The purpose of this policy is to establish that individual participants of the East Central Illinois EMS System are responsible to maintain and update individual continuing education records.

### II. DEFINITION – None.

### III. POLICY

- A. It is the sole responsibility of the individual First Responder/EMR, EMD, EMT, Paramedic, PHRN, and ECRN to:
  - a. Maintain and update their continuing education records.
  - b. Keep current in all required certifications, registrations and/or licensure.
  - c. Advise the ~~HSHS St. Mary's~~ EMS Office and IDPH, in writing, regarding changes in name, address and phone number.
- B. All First Responder/EMR, EMD, EMT-B initial student records will be kept by the Lead Instructor or Teaching Agency for seven years. All EMT-I, EMTP, PHRN, and ECRN initial student records will be kept by the Resource Hospital for seven years.
- C. All First Responder/EMR, EMD, EMT-B, EMT-I, EMT-P, PHRN and ECRN continuing education records submitted to the EMS Department will be kept for seven years.

### IV. RESOURCES – None



## Minimum Staffing Requirements

### I. PURPOSE

The purpose of this policy is to ensure that appropriate staffing levels are maintained by all ~~HSHS St. Mary's~~ EMS System agencies.

### II. DEFINITION - None III.

#### POLICY

- A. It is mandatory that all levels of ~~HSHS St. Mary's~~ EMS System agencies follow the standards for minimum staffing of EMS vehicles set by the IDPH Administrative Rules.
- B. A staffing waiver may be applied for in cases of hardship.
- C. All ~~HSHS St. Mary's~~ EMS System ambulances shall provide staffing at the following levels at a minimum\*:
  - 1. Advanced Life Support -- All in-service ALS vehicles must be staffed with at least:
    - a. One Paramedic or Prehospital RN
    - b. One additional provider at a minimum EMT Basic level
  - 2. Intermediate Life Support – All in-service ILS vehicles must be staffed with at least:
    - a. One Intermediate, Paramedic or PHRN\*\*
    - b. One additional provider at a minimum EMT Basic level
  - 3. Basic Life Support – All in-service BLS vehicles must be staffed with at least:
    - a. Two EMT-Basics or providers licensed at a higher level of care functioning as EMT-Basics
- D. Ambulance assistance vehicles are dispatched simultaneously with an ambulance and assist with patient care prior to the arrival of the ambulance.
- E. All ~~HSHS St. Mary's~~ EMS System ambulance assist vehicles shall provide staffing at the following levels:
  - 1. Advanced ambulance assist vehicles: a minimum of one Paramedic and shall have all of the required equipment
  - 2. Intermediate ambulance assist vehicles: a minimum of one Intermediate and shall have all of the required equipment
  - 3. Basic ambulance assist vehicles: a minimum of one EMT Basic and shall have all

- of the required equipment
4. First Responder/Emergency Medical Responder assist vehicles: a minimum of one First Responder and shall have all of the required equipment.

**\*If IDPH staffing waiver is current, the staffing requirements outlined on the waiver MUST be met.\* (See Section 515.830 of the IDPH Administrative Rules)**

**\*\*An EMS provider licensed at a level higher than that of the EMS agency may only perform at the level of the agency licensure unless an In-Field Service Level Upgrade (see Section 515.833 of the IDPH Administrative Rules) has been approved for the agency**

#### IV. RESOURCES

IDPH Administrative Rules Section 515.830

## In-Field Service Level Upgrade

### I. PURPOSE

The purpose of this policy is to provide guidelines for an In-Field Service Level Upgrade.

### II. DEFINITION

- A. Rural Ambulance Service Provider – an ambulance service provider licensed under the EMS Act that serves a rural population of 7,500 or fewer inhabitants. (Section 3.87(a) of the EMS Act)
- B. Rural In-Field Service Level Upgrade – a practice that allows the delivery of advanced care for a lower level service provider that serves a rural population of 7,500 or fewer inhabitants, through use of EMS System approved EMS personnel.
- C. Rural Vehicle Service Provider – an entity that serves a rural population of 7,500 or fewer inhabitants and is licensed by the Department to provide emergency or non-emergency medical services in compliance with the EMS Act, IDPH Administrative Code (Section 515.833) and an operational plan approved by the entity's EMS System, utilizing at least an ambulance, alternate response vehicle as defined by IDPH in Section 515.833 of the Administrative Code, or specialized emergency medical services vehicle. (Section 3.87(a) of the EMS Act)

### III. POLICY

- A. In order for an In-Field Service Level Upgrade to be considered by the ~~HSHS St. Mary's~~ EMS System office, the requesting agency must complete and submit a ~~HSHS St. Mary's~~ EMS System In Field Service Level Upgrade Application to the EMS System Coordinator addressing the requirements listed in the IDPH Administrative Code, Section 515.833 In-Field Service Level Upgrade – Rural Population.
- B. Any appropriately licensed individual requesting to provide advanced level care (ILS or ALS) must properly test into the ~~HSHS St. Mary's~~ EMS System per policy (refer to “EMS Providers Joining the System”). The test in process will include, but not be limited to, the following:
  - 1. Passing Region 6 Protocol Examination with an 80% or higher
  - 2. Successful completion of an Advanced Skills review

- C. All EMS personnel serve at the discretion of the EMS Medical Director. He/She has the authority to initially decline, or revoke the ability to function under their license per the IDPH EMS Act. The EMS Medical Director also retains the right to revoke an agency's In-Field Service Level Upgrade status if indicated.
  
- D. Upon approval of In-Field Service Level Upgrade by the EMS Medical Director, an IDPH EMS System Modification form will be completed and submitted to IDPH for approval. An inspection of the vehicle and/or equipment will also be completed to finalize the process.

### Quality Assurance

- A. The provider agency will submit run reports for all In-Field Service Level Upgrade responses to the HSHS St. Mary's EMS System office for review for a minimum of 6 months. Reports may be submitted on a monthly basis. Reports will be reviewed for adherence to the protocols for the upgraded level.

## IV. RESOURCES

In Field Service Level Upgrade Application

Administrative Code Section 515.833-In-Field Service Level Upgrade-Rural Population Emergency  
Medical Services Systems Act ( 210 ILCS 50)

## Substance Abuse by EMS Provider

### I. PURPOSE

The purpose of this policy is to ensure patient and coworker safety by rapidly identifying prehospital personnel with substance abuse problems and providing them with treatment and/or removing them from the patient care environment.

### II. DEFINITION – None.

### III. POLICY

- A. The HSHS St. Mary's EMS System recognizes that drug dependency and alcoholism are health problems and will assist any pre-hospital care provider who becomes dependent on alcohol and/or drugs. However, the HSHS St. Mary's EMS System and its patients may suffer adverse effects if there are prehospital providers whose work performance is below acceptable standards due to drug and/or alcohol use. Therefore, any prehospital provider under the influence of drugs and/or alcohol shall be deemed unfit to work.
- B. This policy does not prohibit prehospital providers from possessing, using or being under the influence of medication that a physician has prescribed for them as long as the medications are used for prescribed purposes, in prescribed dosages, and do not compromise the prehospital provider's fitness for duty.
- C. Suspected substance abuse by an EMS provider shall be handled using the following criteria:
1. Whenever an EMS provider is suspected to be under the influence of drugs -and/or alcohol, this is immediately reported to the HSHS St. Mary's EMS System office as well as the provider's supervisor. Concerns of this nature are confidential.
  2. Any reports regarding individual providers or agencies will be reported to the agency coordinator and EMS Medical Director. Repeated complaints regarding the same individual or agency will be referred to the HSHS St. Mary's EMS System office for corrective action in conjunction with EMS Medical Director.
  3. An EMS provider suspected of providing care under the influence of drugs and/or alcohol is relieved of duty until the concern is investigated.
  4. When a reasonable suspicion is raised to the HSHS St. Mary's EMS

System office and/or a drug dependency or alcohol problem is identified, the system will offer help in the form of referral to counseling, rehabilitative assistance and/other available resources.

5. If the suspected EMS provider refuses treatment or does not attempt to correct problems related to drug and/or alcohol use, he or she will be subject to disciplinary action up to and including suspension according to IDPH EMS Rules and Regulations and the ~~HSHS St. Mary's~~ EMS System policies for corrective action and suspension. Findings will be forwarded to the IDPH EMS Division.
6. Unauthorized drug and alcohol use, sale, or distribution while representing the ~~HSHS St. Mary's~~ EMS System, or reporting to work under the influence of drugs and/or alcohol, is grounds for disciplinary action up to and including suspension according to IDPH EMS Rules and Regulations and the ~~HSHS St. Mary's~~ EMS System policies for corrective action and suspension.
7. The use, sale, purchase, transfer, theft, or possession of an illegal drug is a violation of the law. This includes, but not limited to, illegal drugs or prescription medications not being used for the prescribed purpose, by the correct person, or using the correct dose.
8. Anyone in violation of illegal drug activities while on or off duty will be referred to law enforcement, licensing and credentialing agencies as appropriate.
9. Despite recreational marijuana becoming legalized in Illinois as of 1/1/2020, it is still recognized as an impairing substance, and as such, is punishable under this policy, if a provider is found to be impaired while working as a EMS responder. The ~~HSHS Illinois division, of which the HSHS St. Mary's EMS System is a part of,~~ has a ZERO TOLERANCE POLICY regarding its use

#### IV. RESOURCES - None

## System Corrective Action and Suspension

### I. PURPOSE

This policy is to provide the HSHS St. Mary's EMS System, and the HSHS St. Mary's EMS System Medical Director with a consistent means to assure a high standard of prehospital care through the ability to discipline and/or suspend EMS providers and/or agencies who fail to follow the System policies, protocols and care guidelines.

### II. DEFINITIONS—None

### III. POLICY

- A. The HSHS St. Mary's EMS System Medical Director or designee may discipline and/or suspend from the HSHS St. Mary's EMS System any EMS provider or agency considered to not be meeting the standards of the HSHS St. Mary's EMS System and/or the Illinois EMS Act. Suspensions are handled in accordance with the Illinois EMS Act and Illinois Department of Public Health (IDPH) Rules and Regulations.
- B. When issues and behaviors are identified that are contrary to the policies and procedures of the HSHS St. Mary's EMS System, these issues and behaviors require corrective action. The corrective action process provides for a series of progressively stronger measures if previous corrective actions do not produce acceptable results, the severity of the issue or behavior may warrant beginning the corrective action at any step in the process outlined in this policy, including immediate suspension from the system.
- C. Written documentation of all corrective action is placed in the EMS agency and/or the provider's file.
- D. The HSHS St. Mary's EMS System Medical Director and/or the EMS Coordinator may become aware of the potential need for corrective action through verbal reports of deviation from policy or protocol, EMS Risk Screen and/or quality review of patient records.

#### Verbal Warnings:

- A. Upon identification of an issue or behavior which needs correction, the HSHS St. Mary's EMS System Medical Director (or designee) informs the agency coordinator with whom the provider is associated, or the reported misconduct.
- B. An HSHS St. Mary's EMS System representative and the agency coordinator jointly discuss the reported misconduct, the means of correction, and the consequences if the misconduct is not corrected. The details of the misconduct are communicated to the provider in a face-to-face meeting and in writing. The EMS Provider signs the Verbal

Warning indicating that it has been received. If the EMS provider refuses to sign the Verbal Warning, that is recorded in the documentation of the conference. Documentation of the meeting with the EMS provider and the signed Verbal Warning are placed in the provider's file. The EMS provider may also have a copy of the Verbal Warning.

- C. In situations when an EMS agency is to receive corrective action, the ~~HSHS St Mary's~~ EMS System Medical Director or designee meet with the agency coordinator to discuss the reported misconduct, the means of correction and the consequences if the misconduct is not corrected. The ~~HSHS St Mary's~~ EMS System Coordinator signs the Verbal Warning indicating that it has been received. If the EMS agency coordinator refuses to sign the Verbal Warning, that is recorded in the documentation of the conference. Documentation of this meeting and the signed Verbal Warning are placed in the EMS agency's file in the ~~HSHS St Mary's~~ EMS System office. The EMS agency may have a copy of the Verbal Warning.

### Written Warnings:

- A. Written Warnings are initiated when incidents addressed in a Verbal Warning are not corrected and/or for incidents deemed to be of a more serious nature.
- B. In situations where an EMS provider requires corrective action in a Written Warning format, the ~~HSHS St Mary's~~ EMS System Medical Director (or designee) meets with the EMS provider Requiring corrective action.
- C. At this conference the reported misconduct is explained, the means of correction discussed and the consequences of continued misconduct outlined. The details of the misconduct are communicated in writing to the provider and the agency coordinator with whom the EMS provider is associated. The EMS provider signs the Written Warning indicating that it has been received. If the EMS provider refuses to sign the Written Warning, that is recorded in the documentation of the conference. Documentation of the Written Warning conference and the signed warning is placed in the EMS provider's file. The provider may also have a copy of the Written Warning.
- D. If an EMS agency is to receive corrective action, the ~~HSHS St Mary's~~ EMS System Medical Director or designee meet with the agency coordinator to discuss the reported misconduct, the Means of correction, and the consequences if the misconduct is not corrected. The agency coordinator signs the Written Warning indicating that it has been received. If the agency coordinator refuses to sign the Written Warning that is recorded in the documentation of the conference. Documentation of the Writing Warning and the signed warning is placed in the agency's file. The agency may have a copy of the Written Warning.



## Suspensions:

- A. The HSHS St. Mary's EMS System Medical Director may suspend from participation the HSHS St. Mary's EMS System a provider and/or an agency considered to be not meeting the requirements of the EMS System Plan. Suspension must be based on one or more of the following:
1. Failure to meet the education and training requirements prescribed by the Illinois Department of Public Health and HSHS St. Mary's EMS System.
  2. Violation of the EMS Systems Act
  3. Failure to maintain proficiency in the licensed level of care.
  4. 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.
  5. Intentional falsification of any medical reports or orders, or making misrepresentations involving patient care.
  6. Abandoning or neglecting patient requiring care.
  7. Unauthorized use or removal of narcotics, drugs, supplies or equipment from any ambulance, health care facility, institution or other work place location.
  8. Performing or attempting emergency care, techniques or procedures without proper permission training or supervision.
  9. Medical misconduct or incompetence, or a pattern of continued or repeated medical misconduct or incompetence in the provision of emergency care.
  10. Discrimination in rendering emergency care because of race, sex, creed, religion, national origin or ability to pay.
  11. Violation of the EMS Standards of Care.
  12. Physical Impairment to the extent that the provider cannot physically perform the emergency care and life support functions for which he/she is licensed.
  13. Mental impairment to the extent that the provider cannot exercise the appropriate judgment, skill and safety required for performing emergency care and life support functions.
  14. Conviction of a felony
  15. Engaging in dishonorable, unethical, or unprofessional conduct of a character likely to deceive, defraud or harm the public.
- B. Suspensions may or may not be immediate, based on the seriousness of the incident.

## Non-Immediate Suspensions:

- A. For suspensions which do not include a finding by the HSHS St. Mary's EMS System Medical Director of an immediate danger to the public, the HSHS St. Mary's EMS System Medical Director issues a written Notice of Suspension to the EMS provider and/or EMS agency. The Notice will include a statement describing the reasons for the suspension and the terms of the suspension. There will be an opportunity for a hearing before the System Review Board prior to the commencement of the suspension.

(See System Policy System Review Board)

- B. Upon receipt of a Notice of Suspension from the ~~HSHS St. Mary's~~ EMS System Medical Director, the EMS provider and/or agency has fifteen (15) days to request a hearing before the System Review Board by submitting a written request to the ~~HSHS St. Mary's~~ EMS System Medical Director via certified mail. Failure to request a hearing within fifteen (15) days constitutes a waiver of the right to a System Review Board hearing.
- C. Upon timely request for a System Review Board hearing the ~~HSHS St. Mary's~~ EMS System Medical Director notifies the standing review board members that a hearing has been requested. In the event a standing review board member is not available, their alternate will be notified. The EMS provider and/or agency requesting the hearing shall be responsible for consulting the posted list of providers and selecting one member from the provider's licensure level. The ~~HSHS St. Mary's~~ EMS System Medical Director provides additional names as needed if the EMS provider and/or agency are unable to select names from the initial list.
- D. The ~~HSHS St. Mary's~~ EMS System Medical Director schedules the Systems Review Board to meet within three (3) business days after the provider has selected the remaining member of the Board. The Board must meet as soon as possible but within in at least twenty-one (21) days of the written request.
- E. The ~~HSHS St. Mary's~~ EMS System Medical Director arranges for a certified shorthand reporter to make a stenographic record and prepare a transcript of the proceedings. The transcripts are retained by the ~~HSHS St. Mary's~~ EMS System. Any fees incurred will be the responsibility of the EMS provider who requests the hearing.
- F. The System Review Board reviews and considers any testimony and documentation related to the suspension offered by the ~~HSHS St. Mary's~~ EMS System Medical Director and the EMS provider and/or agency. The ~~HSHS St. Mary's~~ EMS System Medical Director and the EMS provider and/or agency may be represented by legal counsel.
- G. The System Review Board notifies the ~~HSHS~~ System EMS System Medical Director and the EMS provider and/or agency in writing, via certified mail or personal service, within five (5) business days of its decision. If the suspension is upheld, this notice contains details of the duration of and grounds for the suspension.
- H. If the System Review Board affirms or modifies the ~~HSHS St. Mary's~~ EMS System Medical Director's suspension order, the EMS provider and/or agency has the opportunity for a review of the decision by the State EMS Disciplinary Review Board.
- I. If the System Review Board reverses or modifies the ~~HSHS St. Mary's~~ EMS System Medical Director's suspension order, the ~~HSHS St. Mary's~~ EMS System Medical Director has the opportunity for a review by the State EMS Disciplinary Review Board.
- J. The suspension commences only when one of the following have occurred:
  - 1. The EMS provider and/or agency waive the opportunity for a hearing before the System Review Board.
  - 2. The suspension order has been affirmed or modified by the System Review Board and the EMS provider and/or agency has waived the opportunity for review by the State EMS Disciplinary Board.
  - 3. The suspension order has been affirmed or modified by the System Review Board and that board's decision has been affirmed or modified by the State EMS Disciplinary Review Board.

(Refer to the Illinois Administrative Code for the mechanism for state review)

**Immediate Suspensions:**

- A. The ~~HSHS St. Mary's~~ EMS System Medical Director may immediately suspend an EMS provider and/or agency, if he/she has information indicating that the continued practice the by the EMS provider and/or agency would constitute an imminent danger to the public. The suspended EMS provider and/or agency is issued and immediate verbal notification followed by a written basis for the suspension.
- B. The suspension order includes a notice that the EMS provider and/or agency have an opportunity for a hearing before the System Review Board. The EMS provider and/or agency may elect to bypass the System Review Board and see direct review of the suspension by the State Disciplinary Board.
- D. If the EMS provider and/or agency requests a System Review Board hearing, the following process is followed:
  - 1. Within twenty-four (24) hours following the commencement of the suspension, the ~~HSHS St. Mary's~~ EMS System Medical Director delivers to IDPH, by messenger or FAX, a copy of the suspension order and copies of any written materials related to the decision to suspend the EMS provider and/or agency.
  - 2. Within twenty-four (24) hours following receipt of the ~~HSHS St. Mary's~~ System Medical Director's suspension order or the EMS provider and/or agency's response, (whichever is later), the Director of the IDPH shall determine:
    - a. Whether the suspension should be stayed pending the EMS provider and/or agency's opportunity for a hearing or review.
    - b. Whether the suspension should continue during the course of the hearing or review.
  - 3. The Director of the IDPH communicates this determination to the ~~HSHS St. Mary's~~ EMS System Medical Director, who immediately notifies the suspended EMS provider and/or agency

**IV. RESOURCES--None**

## System Review Board

### I. PURPOSE

This policy is to provide a means within the ~~HSHS St. Mary's~~ EMS System to review disciplinary suspensions.

### II DEFINITIONS—None

### III. POLICY

- A. As pursuant to the Illinois EMS Act, Section 515.420—System Participation Suspensions: The Resource Hospital shall designate the Local system Review Board, consisting of at least three members, one of whom is an emergency department physician with knowledge of EMS, one of whom is an EMT and one of whom is of the same professional category as the individual, individual provider or other participant requesting the hearing.
- B. The Resource Hospital, through the ~~HSHS St. Mary's~~ EMS System Office designates the members of the System Review Board (see attached). An invitation to participate is sent in writing or via email to the potential candidates. Upon acceptance in writing or via email, the candidate will be placed on the System Review Board list for a two year period.

### IV. REFERENCES--None



# HSHS St. Mary's EMS System

## HSHS St. Mary's EMS System

### System Review Board

September 1, 2020 to August 31, 2022

#### Standing Review Board Members

|                               |                      |                                  |
|-------------------------------|----------------------|----------------------------------|
| Physician with EMS Experience | Charles Pennix, MD   | HSHS St. Mary's Hospital Sisters |
| Alternate Physician           | Terry Balagna, MD    | Decatur Memorial Hospital        |
| EMT                           | James C Clark, EMT P | HSHS Decatur Ambulance           |
| Alternate EMT                 | Larry Edwards, EMT P | Sullivan Fire Department         |

#### License Level of Provider

|                               |                           |                             |
|-------------------------------|---------------------------|-----------------------------|
| Emergency Medical Responder   | Stacey Kay, EMR           | Tower Hill Fire Department  |
|                               | Mark Nixon, EMR           | Harristown Fire Department  |
|                               | Lloyd Buckley, EMR        | Warrensburg Fire Department |
| EMT-Basic                     | Debra Axe, EMT B          | Mt Auburn Fire Department   |
|                               | Jessica Stapleton, EMT B  | Niantic Fire Department     |
|                               | Brian Marshall, EMT B     | Argenta-Oreana Fire Dept.   |
| Advanced EMT/EMT-Intermediate | Edward Hunter, EMT I      | Long Creek Fire Department  |
|                               | Steve Fleming, EMT I      | Lovington Ambulance         |
|                               | Jodi Clayton              | Arthur Ambulance            |
| PHRN                          | Bevila Coon, PHRN         | Sullivan Fire Department    |
|                               | Alyson Webb, PHRN         | Long Creek Fire Department  |
|                               | Zachary Briggs, PHRN      | ARCH Air Medical            |
| EMT-Paramedic                 | Kaleb Randol, EMT P       | Sullivan Fire Department    |
|                               | Brandon Mandernach, EMT P | Decatur Fire Department     |
|                               | James E Yutzzy, EMT P     | HSHS Decatur Ambulance      |
| ECRN                          | Michelle Bovyn, RN ECRN   | HSHS St. Mary's Hospital    |
|                               | Shawn Stahulak, RN, ECRN  | Decatur Memorial Hospital   |

## State EMS Disciplinary Review Board

### I. PURPOSE

This policy is to outline the process for review by the State EMS Disciplinary Review Board, any suspension of an EMS agency and/or provider in the ~~HSHS St. Mary's~~ EMS System.

### II. POLICY

A Any EMS **provider** and/or agency in the ~~HSHS St. Mary's~~ EMS System who has been suspended by the EMS Medical Director may have his or her case reviewed by the State EMS Disciplinary Review Board. The request for review is submitted in writing to the Chief of the IDPH Division of EMS and Highway Safety, within ten (10) working days after receiving the System Review Board's decision or the ~~HSHS St. Mary's~~ EMS System Medical Director's immediate Suspension (whichever is applicable).

*(See the policy entitled System Corrective Action and Suspension)*

- B. The Governor appoints the State Emergency Medical Review Board (Board). The Board meets regularly on the first Tuesday of every month, unless no requests for review have been submitted. Additional meetings of the Board are scheduled as necessary to ensure that a request for direct review of an immediate suspension order is schedule within fourteen (14) days after the IDPH receives the request or as soon thereafter as a quorum are available. The Board meets in Chicago or Springfield, whichever location is closer to the majority of the members or alternates attending the meeting.
- C. At its regular scheduled meetings, the Board reviews requests, which have been received by the scheduled meeting. Exceptions are requests for direct review of immediate suspension orders, which may be schedule up to three (3) working days prior to the Board's meeting date.
- D. A quorum is required by the Board to meet. A quorum consists of three members or alternates, including the ~~HSHS St. Mary's~~ EMS System Medical Director member, or alternate, and the member or alternate from the same professional category as the subject of the suspension order. At each meeting of the Board, the attending members or alternates select a chairperson to conduct the meeting.
- E. Meetings of the Board are conducted in closed session; Department staff may attend for the purpose of providing clerical assistance. No other persons may be in attendance except for the parties to the dispute being reviewed by the Board and their attorneys, unless by request of the Board.
- F. The Board reviews the transcript, evidence and written decision of the System Review Board or the written decision and supporting documentation of the ~~HSHS St. Mary's~~ EMS System Medical Director, whichever is applicable. Additional written or verbal testimony or argument offered by the parties to the dispute is considered.

- G At the conclusion of its review, the Board issues its decision and the basis for its decision on a form provided by the IDPH. The Board submits to the IDPH this form with its written decision along with the record of the System Review Board. The IDPH promptly issues a copy of the Board's decision to all affected parties. The Board's decision is binding on all parties.
- H. All information relating to the State Emergency Medical Services Disciplinary Review Board or the System Review Board, except for final decisions, is afforded the same status as information provided concerning medical studies. Disclosure of such information to the IDPH pursuant to the Act is not considered a violation of the law.

#### IV. **RESOURCES**

(Illinois EMS Act—210 ILCS 50/3.35)

## Staffing / Equipment Waiver Requests

### I. PURPOSE

This policy is to provide guidelines for the process to request a waiver for staffing or equipment in the event of hardship.

### II. DEFINITION—None

### III. POLICY

- A. If compliance with any of the Illinois Department of Public Health (IDPH) Rules and Regulations or the ~~HSHS St. Mary's~~ EMS System policies would result in unreasonable hardship, a provider agency may submit a request to the ~~HSHS St. Mary's~~ EMS System office for a temporary waiver.
- B. Any agency requesting a waiver must complete the appropriate waiver request form and return it to the ~~HSHS St. Mary's~~ EMS System office.
- C. The waiver request will be reviewed by the ~~HSHS St. Mary's~~ EMS System Medical Director.
- D. Upon Approval by the Medical Director, the waiver request will be forwarded to the IDPH.
- E. Waivers are only granted if there is no reduction in the standard of care.

### IV. RESOURCES--None