

Report on Emergency Medical Services Complaints and Investigations

As Required by
Health and Safety Code, Section
773.0605



Texas Department of State Health Services December 2019

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Executive Summary

This report is provided by the Department of State Health Services (DSHS) in accordance with the requirements of Texas Health and Safety Code, <u>Section 773.0605</u>. The legislation requires that DSHS annually report statistical information regarding each complaint received.

Emergency Medical Services (EMS) is an essential component of health care in Texas, one used by visitors and Texans alike. DSHS licensing and oversight of EMS personnel and providers helps ensure that EMS care provided in Texas is safe and meets expected standards. Oversight activities include addressing complaints and conducting investigations, both of which are important measures of quality assurance in the ongoing assessment of emergency medical services. These services are important because it is crucial for the public to have confidence in EMS.

For fiscal year 2019, DSHS licensed 67,610 EMS personnel and 748 EMS providers who have 5,002 licensed vehicles. DSHS opened a total of 1,621 complaint investigations divided among the following license types: 158 on EMS providers, one on an EMS Administrator, 1,445 on EMS personnel, eight on EMS education programs, five on EMS educators, and four on EMS first responder organizations. There are more than five million EMS responses in Texas annually.

As of August 31, 2019, a total of 103 disciplinary actions were taken, 10 on EMS providers, 91 on EMS personnel and two on EMS educators.

At the close of the fiscal year on August 31, 2019, a total of 201 complaint investigations remained open for all EMS license categories. The average age of open cases initiated in fiscal year 2019 was 126 days, and the range was 1 to 360 days.

Texas maintains an active system to receive and investigate complaints regarding EMS providers, personnel, and related functions. Overall, the number of complaints received and the number for which disciplinary action is necessary are relatively low.

DSHS will continue to manage this system to ensure that EMS providers and personnel are appropriately licensed and certified and that complaints are investigated and addressed in a manner that instills public confidence in EMS.

1. Introduction

Texas Health and Safety Code, <u>Section 773.0605</u> requires the Department of State Health Services (DSHS) to track and record any complaints received regarding emergency medical services (EMS) providers and EMS personnel, as well as the investigations and disciplinary actions initiated by DSHS under the Emergency Health Care Act. DSHS must track and refer complaints outside its jurisdiction to other agencies. Statute also requires DSHS to annually report specific information related to complaints, investigations, and disciplinary actions.

This report includes data on complaints received, investigations concluded, and disciplinary actions taken between September 1, 2018, and August 31, 2019. Complaints are reports received in writing or verbally or initiated by DSHS staff that allege a licensee has violated one or more of the statutes and/or rules governing the practice of EMS. A complaint determined to be jurisdictional is investigated. If the investigation shows that a violation occurred, disciplinary action may be initiated. This disciplinary action can range from a letter of reprimand to revocation of a license and may include assessment of an administrative penalty.

This report is divided into sections by each of the five license types: EMS provider; EMS personnel; EMS education programs; EMS educators; and EMS first responder organizations. If a complaint about an EMS provider (agency) includes a complaint about their personnel, the portion of the complaint dealing with personnel is detailed as a separate complaint under the EMS personnel license.

Each section presents data as of August 31, 2019. The data include: the number of complaints received during the fiscal year, source of the complaint, primary reason and basis alleged for each complaint, number of cases left open at the end of the fiscal year, reason cases were closed including those closed with no action taken, and the number of disciplinary actions taken during the fiscal year. For purposes of this report, complaints are organized into general categories based on the primary allegation identified in the complaint. When a single complaint includes several allegations, it is categorized by the most significant or serious alleged violation. A complaint may be closed with no action taken for a variety of reasons, including such things as an allegation that is non-jurisdictional for DSHS under Chapter 773, a complaint that is withdrawn by the complainant, or if the evidence from the investigation determined that no violation occurred.

2. Background

The Emergency Medical Services (EMS) system is an essential component of health care in Texas, one used by visitors and Texans alike. The Department of State Health Services (DSHS) licenses and oversees EMS personnel and providers, which helps ensure that EMS care in Texas is safe and meets expected standards. Oversight activities include addressing complaints and conducting investigations, both important measures of quality assurance in the ongoing assessment of emergency medical services.

<u>Health and Safety Code Chapter 773.041</u> requires that an entity must hold a license issued by DSHS as an EMS provider to operate, conduct, or advertise EMS in Texas. This section also requires that any person practicing as EMS personnel be certified or licensed.

Additionally, Chapter 773 authorizes DSHS to investigate a violation, and revoke, suspend, reprimand, or refuse to renew a license or certificate of the following license types:

- EMS provider;
- EMS personnel;
- EMS education program;
- EMS educators (program instructor, examiner, or course coordinator); or
- EMS first responder organizations.

Currently in Texas, there are 67,610 licensed personnel, 748 EMS providers and 5,002 licensed vehicles.

3. Complaints Related to EMS Providers

Health and Safety Code, Section 773.003 defines an emergency medical service (EMS) provider as a person who uses or maintains EMS vehicles and medical equipment, and personnel to provide emergency medical services. A "person", for purposes of this chapter, is defined in Health and Safety Code, Section 773.041 as an individual, corporation, organization, government, governmental subdivision or agency, business, trust, partnership, association, or any other legal entity licensed to do business as an ambulance service transporting sick or injured persons that ride on a stretcher. Entities that are EMS providers employ an EMS administrator, who is not considered to be EMS personnel.

The Department of State Health Services (DSHS) received 158 complaints regarding EMS providers between September 1, 2018 and August 31, 2019, each resulting in DSHS investigations. Of these complaints, 78 were brought by a consumer, 59 were brought by another source, nine self-reported a potential violation and 12 were initiated by DSHS in the absence of an external complaint.

Table 1 lists the primary reason and basis for each complaint and investigation related to EMS providers.

Table 1: Primary reason and Basis for Each Complaint and Investigation Related to EMS Providers

Reason and Basis	Count
Abuse/Neglect/Exploitation	1
Confidentiality	5
EMS Drug Diversion	2
Financial	4
Fraud/Deceit/Bribery	5

HSC 773.05713 ¹	5
Reportable Event ²	1
Standard of Care/Service/Product	105
Unauthorized Activity	2
Unlicensed Person/Facility	24
Unprofessional Conduct	4

As of August 31, 2019, DSHS closed 89 complaint investigations that were initiated in the fiscal year without taking any disciplinary action. Reasons for closure were: one cease and desist letter, 17 concern letters, three plans-of-correction accepted, two inconclusive, 46 no violation occurred, two closed with no action, two withdrawn by board, one license expired and 15 where DSHS did not have jurisdiction. Of the 15 complaints determined to be outside DSHS' jurisdiction and closed, 13 were referred to other agencies, which were believed to have jurisdiction. The remaining two were closed as they were not within jurisdiction of DSHS or any other state agency.

Of the 158 complaint investigations initiated on EMS providers in fiscal year 2019, two cases were closed because of: one findings with no discipline, and one payment of an administrative fine.

¹ - Related to administrator of record and no medical director.

² - Related to an injury.

A total of 67 complaint investigations initiated on EMS providers remained open as of August 31, 2019. Of those, 59 were under investigation and eight remained open with discipline proposed but not finalized as of August 31, 2019. The reason and basis along with the number of days the investigation has been open may be found in Appendix A.

In addition to the complaints against providers, DSHS received one complaint concerning an EMS administrator in fiscal year 2019. The reason and basis for the complaint investigation was an allegation of falsification of reports. DSHS closed the case as no violation occurred.

DSHS closed eight additional complaint investigations from previous fiscal years regarding EMS providers because of: two voluntary license surrenders, two suspensions, one probated suspension and three payments of administrative fines.

4. Complaints Related to EMS Personnel

Emergency Medical Services (EMS) personnel provide emergency and nonemergency care to the sick or injured before and/or during transport to a medical facility, between facilities, or home. This includes any necessary stabilization of sick or injured persons in connection with transportation. <u>Health and Safety Code</u>, <u>Section 773.003</u> defines five levels of EMS personnel:

- Emergency Care Attendant,
- Emergency Medical Technician,
- Advanced Emergency Medical Technician,
- Emergency Medical Technician-Paramedic, and
- Licensed Paramedic.

The Department of State Health Services (DSHS) received 1,445 complaints regarding EMS personnel between September 1, 2018 and August 31, 2019. Of these complaints, 44 were brought by a consumer, 1,047 were initiated by DSHS in the absence of a complaint, 212 self-reported a potential violation, and 142 were brought by another source. Many of these complaints were related to the licensees' criminal history.

Table 2 lists the primary reason and basis for each complaint and investigation related to EMS personnel.

Table 2: Primary Reason and Basis for Each Complaint and Investigation Related to EMS Personnel

Reason and Basis	Count
Abuse/Neglect/Exploitation	1
Advertising/Mislabeling	1
Confidentiality	6
Criminal History	1,257

EMS Drug Diversion	14
Fraud/Deceit/Bribery	18
Standard of Care/Service/Pro	duct 108
Unlicensed Person/Facility	16
Unprofessional Conduct	24

Of the 1,445 complaint investigations involving EMS personnel initiated in fiscal year 2019: 130 remain open with 99 cases still under investigation and 31 with disciplinary action proposed but not finalized as of August 31, 2019. The reason and basis including the number of days investigations have been open may be found in Appendix B.

As of August 31, 2019, DSHS closed 1,293 complaints initiated in fiscal year 2019 without taking any disciplinary action. Reasons for closure were: 224 applications approved, five applications withdrawn, one withdrawn by complainant, 572 no violations found, one cease-and-desist letter, 10 withdrawn by board, three inconclusive, six licenses expired, 346 no action taken, 31 pre-screen eligible, 77 concern letters, two voluntarily surrendered their license, and 15 non-jurisdictional. Of the 15 complaints determined non-jurisdictional, seven were referred to other agencies for review and handling, the remaining eight were closed with no action. DSHS closed 22 complaint investigations regarding EMS personnel initiated in fiscal year 2019 with disciplinary action taken. The disciplinary actions taken were: eight revocations, 12 suspensions and two probated suspensions.

As of August 31, 2019, DSHS closed 69 complaints regarding EMS personnel from previous fiscal years. The reasons for closure were: 34 revocations, 12 suspensions, eight probated suspensions, three reprimands, seven voluntarily surrendered their license, one application was denied and four with orders recording the violation without discipline.

5. Complaints Related to EMS Education Programs

An Emergency Medical Services (EMS) education program is an entity approved by the Department of State Health Services (DSHS) to offer education and training for EMS personnel to obtain or maintain a license. Education programs may include a privately-owned program, a college, university, or governmental body.

DSHS received eight complaints related to EMS education programs between September 1, 2018 to August 31, 2019. Of these complaints, seven were brought by a consumer and one was initiated by DSHS in the absence of a complaint.

Table 3 lists the primary reason and basis for each complaint and investigation related to EMS education programs.

Table 3: Primary Reason and Basis for Each Complaint and Investigation Related to EMS Education Programs

Reason and Basis	Count
Required Activity Not Performed ³	1
Standard of Care/Service/Product	7

Of the eight complaints received in fiscal year 2019 regarding EMS education programs, one remains open under investigation as of as of August 31, 2019.

As of August 31, 2019, DSHS has closed seven of the complaints on EMS education programs. The reasons for closure were: two concern letters were issued and five were found with no violations.

No disciplinary action was taken on EMS education programs in fiscal year 2019.

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³ - Related to issuance of completion documents.

6. Complaints Related to EMS Educators

Emergency Medical Services (EMS) educators are personnel that provide instruction or manage an education program. This includes: program instructors, examiners, and course coordinators.

The Department of State Health Services (DSHS) received five complaints related to EMS educators between September 1, 2018 to August 31, 2019. Of these complaints, one was brought to DSHS by a consumer, one by another source and three were opened by DSHS in absence of a complaint.

Table 4 lists the primary reason and basis for each complaint and investigation related to EMS educators.

Table 4: Primary Reason and Basis for Each Complaint and Investigation Related to EMS Educators

Reason and Basis	Count
Sexual Misconduct	1
Standard of Care/Service/Product	4

Of the five complaints received in fiscal year 2019 regarding EMS educators, two remained open with discipline action proposed and have not been finalized as of August 31, 2019.

As of August 31, 2019, DSHS has closed three of the complaints on EMS educators because no violations were found.

No disciplinary action was taken on EMS education programs in fiscal year 2019.

DSHS closed two complaint investigations regarding EMS educators from previous years with the payment of an administrative fine.

7. Complaints Related to EMS First Responder Organizations

An Emergency Medical Services (EMS) first responder organization is a group or association of certified emergency medical services personnel that works in cooperation with a licensed emergency medical services provider to:

- routinely respond to medical emergency situations;
- utilize personnel who are EMS certified by the Texas Department of State Health Services (DSHS); and
- provide on-scene patient care to the ill and injured and does not transport patients.

DSHS received four complaints related to EMS first responder organizations between September 1, 2018 to August 31, 2019. Of these complaints, two were brought to DSHS by consumers and two were brought by another source.

Table 5 lists the primary reasons and basis for each complaint and investigation related to EMS first responder organizations.

Table 5: Primary Reason and Basis for Each Complaint and Investigation Related to EMS First Responder Organizations

Reason and Basis	Count
Required Activity Not Performed	1
Standard of Care/Service/Product	3

Of the four complaints received in fiscal year 2019 regarding EMS first responder organizations, one has remained open for 146 days still under investigation as of August 31, 2019.

As of August 31, 2019, DSHS has closed three of the complaints on EMS first responder organizations. The reasons for closure were: one with no violation, one concern letter, and one plan of correction accepted.

No disciplinary action was taken on EMS first responder organizations in fiscal year 2019.

8. Complaint Resolution Data

At the close of the fiscal year on August 31, 2019, there were 201 open complaints among the five Emergency Medical Services (EMS) license categories. Of these complaints, 163 were under investigation and 38 had a proposed disciplinary action that had not been finalized. The average age of open cases initiated in fiscal year 2019 was 126 days, and the range was 1 to 360 days. The age of all open complaints by license category is provided in Appendixes.

For fiscal year 2019, the average time to resolve each complaint from the date received was 30 days. Typically, criminal history complaints can be resolved more quickly because they are often based on legal documentation related to prior convictions. Those related to criminal history are resolved in an average of 19 days, and those not related to criminal history are resolved in an average of 93 days.

9. Conclusion

At the close of fiscal year 2019, a total of 103 disciplinary actions had been taken among the five license groups.

Of the 67,610 certified and/or licensed Emergency Medical Services (EMS) personnel and 748 licensed EMS service providers, only 0.1 percent received disciplinary action by the Department of State Health Services (DSHS) between September 1, 2018 and August 31, 2019.

The importance of EMS is immeasurable. Nationally, dedicated EMS personnel save countless lives each year. In Texas, EMS personnel respond to an EMS call on an average of every seven seconds. Qualified Texas EMS professionals are ready to respond to Texans' calls for help, despite time of day or weather conditions.

These services are important because it is crucial for the public to have confidence in EMS. Texas maintains an active system to receive and investigate complaints regarding EMS providers, personnel, and related functions. Overall, the number of complaints and the number for which disciplinary action is necessary are relatively low. DSHS will continue to manage this system to help ensure that EMS providers and personnel are appropriately licensed and certified and that complaints are investigated and addressed in a manner that instills public confidence in EMS.

List of Acronyms

Acronym	Full Name
DSHS	Texas Department of State Health Services
EMS	Emergency Medical Services

Appendix A. Age of each open complaint regarding EMS providers as of August 31, 2019.

Appendix A Table 1

Reason and Basis	Days Open
EMS Drug Diversion	223
Fraud/Deceit/Bribery	12
Fraud/Deceit/Bribery	222
Reportable Event	229
Required Activity Not Performed	103
Required Activity Not Performed	27
Required Activity Not Performed	345
Required Activity Not Performed	61
Required Activity Not Performed	86
Standard of Care/Service/Product	10
Standard of Care/Service/Product	101
Standard of Care/Service/Product	11
Standard of Care/Service/Product	11
Standard of Care/Service/Product	113
Standard of Care/Service/Product	115
Standard of Care/Service/Product	116
Standard of Care/Service/Product	117
Standard of Care/Service/Product	123
Standard of Care/Service/Product	123
Standard of Care/Service/Product	132
Standard of Care/Service/Product	133
Standard of Care/Service/Product	136

Reason and Basis	Days Open
Standard of Care/Service/Product	137
Standard of Care/Service/Product	143
Standard of Care/Service/Product	146
Standard of Care/Service/Product	151
Standard of Care/Service/Product	152
Standard of Care/Service/Product	17
Standard of Care/Service/Product	191
Standard of Care/Service/Product	199
Standard of Care/Service/Product	199
Standard of Care/Service/Product	213
Standard of Care/Service/Product	24
Standard of Care/Service/Product	241
Standard of Care/Service/Product	264
Standard of Care/Service/Product	28
Standard of Care/Service/Product	280
Standard of Care/Service/Product	29
Standard of Care/Service/Product	30
Standard of Care/Service/Product	314
Standard of Care/Service/Product	328
Standard of Care/Service/Product	348
Standard of Care/Service/Product	39
Standard of Care/Service/Product	46
Standard of Care/Service/Product	48
Standard of Care/Service/Product	48
Standard of Care/Service/Product	48

Reason and Basis	Days Open
Standard of Care/Service/Product	48
Standard of Care/Service/Product	59
Standard of Care/Service/Product	74
Standard of Care/Service/Product	83
Unauthorized Activity	35
Unlicensed Person/Facility	103
Unlicensed Person/Facility	117
Unlicensed Person/Facility	125
Unlicensed Person/Facility	216
Unlicensed Person/Facility	216
Unlicensed Person/Facility	222
Unlicensed Person/Facility	236
Unlicensed Person/Facility	263
Unlicensed Person/Facility	263
Unlicensed Person/Facility	3
Unlicensed Person/Facility	307
Unlicensed Person/Facility	334
Unlicensed Person/Facility	346
Unlicensed Person/Facility	9
Unlicensed Person/Facility	95

Appendix B. Age of each open complaint regarding EMS personnel as of August 31, 2019.

Appendix B Table 1

Reason and Basis	Days Open
Criminal History	342
Criminal History	339
Criminal History	333
Criminal History	296
Criminal History	290
Criminal History	272
Criminal History	264
Criminal History	254
Criminal History	237
Criminal History	221
Criminal History	216
Criminal History	206
Criminal History	194
Criminal History	192

Reason and Basis	Days Open
Criminal History	172
Criminal History	153
Criminal History	150
Criminal History	142
Criminal History	139
Criminal History	139
Criminal History	137
Criminal History	111
Criminal History	101
Criminal History	96
Criminal History	95
Criminal History	94
Criminal History	88
Criminal History	79
Criminal History	76
Criminal History	67
Criminal History	55

Reason and Basis	Days Open
Criminal History	47
Criminal History	34
Criminal History	33
Criminal History	31
Criminal History	30
Criminal History	26
Criminal History	20
Criminal History	17
Criminal History	17
Criminal History	17
Criminal History	13
Criminal History	6
Criminal History	4
EMS Drug Diversion	230

Reason and Basis	Days Open
EMS Drug Diversion	227
EMS Drug Diversion	221
EMS Drug Diversion	180
EMS Drug Diversion	53
EMS Drug Diversion	45
EMS Drug Diversion	41
Fraud/Deceit/Bribery	139
Fraud/Deceit/Bribery	54
Fraud/Deceit/Bribery	13
Fraud/Deceit/Bribery	2
Standard of Care/Service/Product	93
Standard of Care/Service/Product	26
Standard of Care/Service/Product	255
Standard of Care/Service/Product	160
Standard of Care/Service/Product	122
Standard of Care/Service/Product	67
Standard of Care/Service/Product	325

Reason and Basis	Days Open
Standard of Care/Service/Product	317
Standard of Care/Service/Product	286
Standard of Care/Service/Product	271
Standard of Care/Service/Product	241
Standard of Care/Service/Product	219
Standard of Care/Service/Product	206
Standard of Care/Service/Product	205
Standard of Care/Service/Product	198
Standard of Care/Service/Product	198
Standard of Care/Service/Product	188
Standard of Care/Service/Product	177
Standard of Care/Service/Product	172
Standard of Care/Service/Product	165
Standard of Care/Service/Product	159
Standard of Care/Service/Product	158
Standard of Care/Service/Product	150
Standard of Care/Service/Product	143

Reason and Basis	Days Open
Standard of Care/Service/Product	143
Standard of Care/Service/Product	137
Standard of Care/Service/Product	137
Standard of Care/Service/Product	117
Standard of Care/Service/Product	114
Standard of Care/Service/Product	115
Standard of Care/Service/Product	93
Standard of Care/Service/Product	78
Standard of Care/Service/Product	62
Standard of Care/Service/Product	73
Standard of Care/Service/Product	73
Standard of Care/Service/Product	60
Standard of Care/Service/Product	55
Standard of Care/Service/Product	48
Standard of Care/Service/Product	48
Standard of Care/Service/Product	48
Standard of Care/Service/Product	52

Reason and Basis	Days Open
Standard of Care/Service/Product	44
Standard of Care/Service/Product	44
Standard of Care/Service/Product	44
Standard of Care/Service/Product	30
Standard of Care/Service/Product	23
Standard of Care/Service/Product	16
Standard of Care/Service/Product	13
Standard of Care/Service/Product	10
Standard of Care/Service/Product	7
Standard of Care/Service/Product	7
Standard of Care/Service/Product	6
Standard of Care/Service/Product	6
Standard of Care/Service/Product	5
Standard of Care/Service/Product	5
Unlicensed Person/Facility	236
Unlicensed Person/Facility	216
Unlicensed Person/Facility	117

Reason and Basis	Days Open
Unlicensed Person/Facility	109
Unlicensed Person/Facility	95
Unlicensed Person/Facility	86
Unlicensed Person/Facility	9
Unlicensed Person/Facility	3
Unprofessional Conduct	360
Unprofessional Conduct	213
Unprofessional Conduct	213
Unprofessional Conduct	116
Unprofessional Conduct	116
Unprofessional Conduct	75
Unprofessional Conduct	74
Unprofessional Conduct	76
Unprofessional Conduct	76