

## State of New Jersey

**DEPARTMENT OF HEALTH**OFFICE OF EMERGENCY MEDICAL SERVICES

PO BOX 360 TRENTON, N.J. 08625-0360

www.nj.gov/health

JUDITH M. PERSICHILLI, RN, BSN, MA
Acting Commissioner

PHILIP D. MURPHY Governor SHEILA Y. OLIVER

November 18, 2019

**Duncan Williams** 

Contract to the Land of

Re:

Notice of Proposed Suspension and Probationary Period: Emergency Medical Technician (EMT) Certification # 505309 Investigation Control # 2019-0148V

Dear Mr. Williams:

The New Jersey Department of Health (the Department) is vested with the responsibility of carrying out the provisions of the Health Care Facilities Planning Act, N.J.S.A. 26:2H-1 to -26, which was enacted, in part, to ensure that all hospital and related health care services rendered in the State of New Jersey are of the highest quality. As defined at N.J.S.A. 26:2H-2(b), health care services include any pre-hospital care rendered by basic life support personnel. In addition, the Emergency Medical Services Act, N.J.S.A. 26:2K-7 to -69, authorizes the Department to certify Emergency Medical Technicians (EMTs). In furtherance of the objectives set forth in the statutes, the Department has adopted regulations that govern the training, certification and professional conduct of EMTs and EMT candidates. See N.J.A.C. 8:40A, Emergency Medical Technicians: Training and Certification.

On September 23, 2019, the Department's Office of Emergency Medical Services (OEMS) received a notification that you had been suspended from your employment with Lawrence Township Emergency Medical Services for failure to complete multiple patient care reports, failure to accurately document patient contacts and falsification of patient care reports. Consistent with regulatory authority and OEMS policy, OEMS opened an investigation in response to this notification.

Upon opening the investigation, the OEMS investigator confirmed that you are currently certified as an EMT in New Jersey. A review of police reports, hospital admission records, dispatch logs and transfer sheets indicate that you had contact with

at least ten patients, possibly assessed said patients and, in some cases transported them to the hospital without documenting any of the interactions. In fact, a review of the body camera footage of the assignment on February 24, 2019 clearly shows you speaking with the patient and reaching down to assess her radial pulse. This clearly identifies patient contact and must be documented properly. Below is a list of assignments referenced where you failed to complete PCRs.

| <b>Date of Service</b> | <b>Patient Initials</b> | Outcome                  | Nature         |
|------------------------|-------------------------|--------------------------|----------------|
| 9/26/2018              | GT                      | Transport to ED          | Cardiac        |
| 9/26/2018              | SC                      | Transport to ED          | MVA            |
| 9/29/2018              | GS                      | Transport to ED          | Crisis         |
| 11/21/2018             | Unknown                 | Unknown                  | CO Alarm       |
| 2/19/2019              | MM                      | Transport to ED          | GI Bleed       |
| 2/24/2019              | Unknown                 | Refuse medical treatment | Overdose       |
| 3/14/2019              | Unknown                 | Unknown                  | Patient assist |
| 3/14/2019              | Unknown                 | Unknown                  | Patient assist |
| 3/25/2019              | JC                      | Transport to ED          | Chest pain     |
| 4/5/2019               | SM                      | Transport to ED          | MVA            |

The purpose of a pre-hospital patient care report (PCR) is to provide an accurate record of the patient complaint, presentation, assessment, treatment and outcome prior to reaching the hospital. This record becomes part of the patient's hospital medical record and contains valuable information to assist other practitioners within the healthcare continuum determine the most appropriate management of the patient's illness or injury. Pursuant to N.J.A.C. 8:40-3.6(a) and 6.4(a)(13), crewmembers staffing BLS ambulances are required to complete a patient care report each time a crewmember makes physical or verbal contact with a patient. Failure to complete patient care reports demonstrates a complete disregard for the duties and responsibilities of an EMT as well as the importance of continuity of care. Your actions evidence an inability to document adequate services and negligent practice. You failed to copy with the patient care charting requirements set forth in N.J.A.C. 8:40-3.6 in that you falsely stated on the care report that you were cancelled and did not have patient contact.

Therefore, as a result of this investigation, it is the intention of this Department to suspend your EMT certification for a period of ninety (90) days. Once completed, the Department will place you on Probation for two (2) years. N.J.A.C. 8:40A-10.2(e) states that "[a]n EMT who has been placed on probation may be monitored for performance by the Department" and sets forth the requirements for probation. Consistent with N.J.A.C. 8:40A-10.2(e), the terms of your probation are as follows:

a. You shall operate only when under the direct supervision of an EMT or EMT-Paramedic. Under no circumstances may you act independently or in conjunction with, or on the same MAV, BLS ambulance or SCTU as, another

## probationary EMT;

- b. You must be monitored for performance. This monitoring shall include complete supervision of all calls in which you provide Basic Life Support services (including 100% chart reviews) by your employer, Lawrence Township Emergency Medical Services or any other EMS program by which you are employed. Your employers are required to provide a written quarterly report to the Department signed by the employer's medical director as to your progress and any remediation that needed to be performed during that quarter:
- c. You shall provide the Department within 14 days of your probation with the name(s) of all of the EMS programs you are employed by or volunteer with. You are required to notify the Department within one (1) business day of any changes in your status with these agencies;
- d. You are to successfully complete the Parts A, B, and C of the EMT refresher within three (3) months of the date of this letter, which can count towards your recertification requirements as an EMT in the State of New Jersey;
- e. You are to successfully complete the Advanced Medical Life Support Course within three (3) months of the date of this letter, which can count towards your recertification requirements as an EMT in the State of New Jersey; and
- f. You are to successfully complete an EMS Documentation class within three (3) months of the date of this letter, which can count towards your recertification requirements as an EMT in the State of New Jersey.

Pursuant to N.J.S.A. 52:14B-11 and N.J.A.C. 8:40A-10.3(b), you are entitled to a hearing before the Office of Administrative Law to contest this Department's decision to suspend your certification and thereafter place you on probation. Your request for a hearing on this matter must be submitted in writing and must be accompanied by a response to the charges contained herein. In the event that you request a hearing, the proposed suspension and probation will be held in abeyance and you shall retain your EMT certification until such time as the hearing has been concluded and a final decision has been rendered. Your request for a hearing must be submitted within 30 days from the date of this Notice and should be forwarded to:

New Jersey Department of Health Office of Legal & Regulatory Compliance P.O. Box 360, Room 805 Trenton, NJ 08625-0360 Attn: Tamara Roach Please include the control number **2019-0148V** on all your correspondence. Finally, please note that your failure to submit a request for a hearing within 30 days shall be interpreted as an acceptance of this Department's decision, thereby negating any further appeal rights. If you have any questions concerning this matter, please contact Dr. Jo-Bea Sciarrotta, OEMS Compliance Officer, at (609) 633-7777.

Sincerely,

Christopher Neuwirth, MA, MEP, CBCP, CEM Assistant Commissioner

**PHILEP Division** 

CC: Scot Phelps, JD, MPH, Paramedic, Director, OEMS Eric Hicken, OEMS James Sweeney, OEMS

Tami Roach, OLRC

SENT VIA REGULAR U.S. MAIL AND CERTIFIED MAIL # RETURN RECEIPT REQUESTED