

SECTION .0700 – ENFORCEMENT

10A NCAC 13P .0701 DENIAL, SUSPENSION, AMENDMENT OR REVOCATION

(a) The Department may deny, suspend, or revoke the permit of an ambulance or EMS nontransporting vehicle if the EMS Provider:

- (1) fails to comply with the requirements of Section .0200 of this Subchapter;
- (2) obtains or attempts to obtain a permit through fraud or misrepresentation; or
- (3) fails to provide emergency medical care within the defined EMS service area in a timely manner.

(b) In lieu of suspension or revocation, the Department may issue a temporary permit for an ambulance or EMS nontransporting vehicle whenever the Department finds that:

- (1) the EMS Provider to which that vehicle is assigned has failed to comply with the provisions of G.S. 131E, Article 7, and the rules adopted under that Article;
- (2) there is a reasonable probability that the EMS Provider can remedy the permit deficiencies within a length of time determined by the department; and
- (3) there is a reasonable probability that the EMS Provider will be willing and able to remain in compliance with the rules regarding vehicle permits for the foreseeable future.

(c) The Department shall give the EMS Provider written notice of the temporary permit. This notice shall be given personally or by certified mail and shall set forth:

- (1) the duration of the temporary permit not to exceed 60 days;
- (2) a copy of the vehicle inspection form;
- (3) the statutes or rules alleged to be violated; and
- (4) notice of the EMS Provider's right to a contested case hearing on the temporary permit.

(d) The temporary permit is effective immediately upon its receipt by the EMS Provider and remains in effect until the earlier of the expiration date of the permit or until the Department:

- (1) restores the vehicle to full permitted status; or
- (2) suspends or revokes the vehicle permit.

(e) The Department may amend, deny, suspend, or revoke the credentials of EMS personnel for any of the following reasons:

- (1) failure to comply with the applicable performance and credentialing requirements as found in this Subchapter;
- (2) making false statements or representations to the OEMS or willfully concealing information in connection with an application for credentials;
- (3) being unable to perform as credentialed EMS personnel with reasonable skill and safety to patients and the public by reason of illness, use of alcohol, drugs, chemicals, or any other type of material or by reason of any physical or mental abnormality;
- (4) unprofessional conduct, including a failure to comply with the rules relating to the proper function of credentialed EMS personnel contained in this Subchapter or the performance of or attempt to perform a procedure that is detrimental to the health and safety of any person or that is beyond the scope of practice of credentialed EMS personnel or EMS instructors;
- (5) conviction in any court of a crime involving moral turpitude, a conviction of a felony, or conviction of a crime involving the scope of practice of credentialed EMS personnel;
- (6) by false representations obtaining or attempting to obtain money or anything of value from a patient;
- (7) adjudication of mental incompetence;
- (8) lack of competence to practice with a reasonable degree of skill and safety for patients including a failure to perform a prescribed procedure, failure to perform a prescribed procedure competently or performance of a procedure that is not within the scope of practice of credentialed EMS personnel or EMS instructors;
- (9) making false statements or representations, willfully concealing information, or failing to respond within a reasonable period of time and in a reasonable manner to inquiries from the OEMS;
- (10) testing positive for any substance, legal or illegal, that is likely to impair the physical or psychological ability of the credentialed EMS personnel to perform all required or expected functions while on duty;
- (11) representing or allowing others to represent that the credentialed EMS personnel has a credential that the credentialed EMS personnel does not in fact have;
- (12) failure to comply with G.S. 143-518 regarding the use or disclosure of records or data associated with EMS Systems, Specialty Care Transport Programs, or patients;

- (13) refusing to consent to any criminal history check required by G.S. 131E-159;
 - (14) abandoning or neglecting a patient who is in need of care, without making reasonable arrangements for the continuation of such care;
 - (15) harassing, abusing, or intimidating a patient either physically or verbally;
 - (16) falsifying a patient's record or any controlled substance records;
 - (17) falsifying any record used in the process of obtaining an initial EMS credential or in the renewal of an EMS credential;
 - (18) engaging in any activities of a sexual nature with a patient including kissing, fondling or touching while responsible for the care of that individual;
 - (19) any criminal arrests that involve charges which have been determined by the Department to indicate a necessity to seek action in order to further protect the public pending adjudication by a court; or
 - (20) altering an EMS credential, using an EMS credential that has been altered or permitting or allowing another person to use his or her EMS credential for the purpose of alteration. Altering includes changing the name, expiration date or any other information appearing on the EMS credential.
- (f) The Department may amend any EMS Provider license by reducing it from a full license to a provisional license whenever the Department finds that:
- (1) the licensee has failed to comply with the provisions of G.S. 131E, Article 7, and the rules adopted under that article;
 - (2) there is a reasonable probability that the licensee can remedy the licensure deficiencies within a reasonable length of time; and
 - (3) there is a reasonable probability that the licensee will be able thereafter to remain in compliance with the licensure rules for the foreseeable future.
- (g) The Department shall give the licensee written notice of the amendment of the EMS Provider license. This notice shall be given personally or by certified mail and shall set forth:
- (1) the length of the provisional EMS Provider license;
 - (2) the factual allegations;
 - (3) the statutes or rules alleged to be violated; and
 - (4) notice to the EMS provider's right to a contested case hearing on the amendment of the EMS Provider license.
- (h) The provisional EMS Provider license is effective immediately upon its receipt by the licensee and shall be posted in a prominent location at the primary business location of the EMS Provider, accessible to public view, in lieu of the full license. The provisional license remains in effect until the Department:
- (1) restores the licensee to full licensure status; or
 - (2) revokes the licensee's license.
- (i) The Department may revoke or suspend an EMS Provider license whenever the Department finds that the licensee:
- (1) has failed to comply with the provisions of G.S. 131E, Article 7, and the rules adopted under that article and it is not reasonably probable that the licensee can remedy the licensure deficiencies within a reasonable length of time;
 - (2) has failed to comply with the provisions of G.S. 131E, Article 7, and the rules adopted under that article and, although the licensee may be able to remedy the deficiencies within a reasonable period of time, it is not reasonably probable that the licensee will be able to remain in compliance with licensure rules for the foreseeable future;
 - (3) has failed to comply with the provision of G.S. 131E, Article 7, and the rules adopted under that article that endanger the health, safety or welfare of the patients cared for or transported by the licensee;
 - (4) obtained or attempted to obtain an ambulance permit, EMS nontransporting vehicle permit, or EMS Provider license through fraud or misrepresentation; or
 - (5) is continuing to operate within an EMS System after a Board of County Commissioners has terminated its affiliation with the licensee.
- (j) The issuance of a provisional EMS Provider license is not a procedural prerequisite to the revocation or suspension of a license pursuant to Paragraph (i) of this Rule.
- (k) The Department may amend, deny, suspend, or revoke the credential of an EMS educational institution for any of the following reasons:
- (1) failure to comply with the requirements of Section .0600 of this Subchapter; or
 - (2) obtaining or attempting to obtain a credential through fraud or misrepresentation.

- (l) The Department may amend, deny, suspend, or revoke the approval of an EMS System or designation of a Model EMS System for any of the following reasons:
- (1) failure to comply with the requirements of Section .0200 of this Subchapter; or
 - (2) obtaining or attempting to obtain designation through fraud or misrepresentation.
- (m) The Department may amend, deny, suspend, or revoke the designation of a Specialty Care Transport Program for any of the following reasons:
- (1) failure to comply with the requirements of Section .0300 of this Subchapter; or
 - (2) obtaining or attempting to obtain designation through fraud or misrepresentation.
- (n) The OEMS may deny the initial or renewal designation, without first allowing a focused review, of a trauma center for any of the following reasons:
- (1) failure to comply with G.S. 131E-162 and the rules adopted under that Statute;
 - (2) attempting to obtain a trauma center designation through fraud or misrepresentation;
 - (3) endangerment to the health, safety, or welfare of patients cared for in the hospital; or
 - (4) repetition of contingencies placed on the trauma center in previous site visits.
- (o) When a trauma center is required to have a focused review, it must demonstrate compliance with the provisions of G.S.131E-162 and the rules adopted under that Statute within one year or less.
- (p) The OEMS may revoke a trauma center designation at any time or deny a request for renewal of designation, whenever the OEMS finds that the trauma center has failed to comply with the provisions of G.S. 131E-162 and the rules adopted under that Statute; and
- (1) it is not probable that the trauma center can remedy the deficiencies within one year or less;
 - (2) although the trauma center may be able to remedy the deficiencies within a reasonable period of time, it is not probable that the trauma center shall be able to remain in compliance with designation rules for the foreseeable future;
 - (3) the trauma center fails to meet the requirements of a focused review; or
 - (4) failure to comply endangers the health, safety, or welfare of patients cared for in the trauma center.
- (q) The OEMS shall give the trauma center written notice of revocation. This notice shall be given personally or by certified mail and shall set forth:
- (1) the factual allegations;
 - (2) the statutes or rules alleged to be violated; and
 - (3) notice of the hospital's right to a contested case hearing on the amendment of the designation.
- (r) Focused review is not a procedural prerequisite to the revocation of a designation pursuant to Paragraph (p) of this Rule.
- (s) With the OEMS' approval, a trauma center may voluntarily withdraw its designation for a maximum of one year by submitting a written request. This request shall include the reasons for withdrawal and a plan for resolution of the issues. To reactivate the designation, the facility shall provide written documentation of compliance. Voluntary withdrawal shall not affect the original expiration date of the trauma center's designation.
- (t) If the trauma center fails to resolve the issues which resulted in a voluntary withdrawal within the specified time period for resolution, the OEMS may revoke the trauma center designation.
- (u) In the event of a revocation or voluntary withdrawal, the OEMS shall provide written notification to all hospitals and emergency medical services providers within the trauma center's defined trauma primary catchment area. The OEMS shall provide written notification to all hospitals and emergency medical services providers within the trauma center's defined trauma primary catchment area if, and when, the voluntary withdrawal reactivates to full designation.

*History Note: Authority G.S. 131E-155.1(d); 131E-157(c); 131E-159(a),(f); 131E-162; 143-508(d)(10);
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