



Report on Emergency Medical Services Complaints and Investigations

**As Required by
Health and Safety Code, Section
773.0605**



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Health and Human
Services

Texas Department of
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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, [Section 773.0605](#). 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 2020, DSHS licensed 68,858 EMS personnel and 744 EMS providers who have 5107 licensed vehicles. DSHS opened a total of 1,458 complaint investigations divided among the following license types: 119 on EMS providers, 1,322 on EMS personnel, 10 on EMS education programs, 5 on EMS educators, and 2 on EMS first responder organizations. There are more than five million EMS responses in Texas annually.

As of August 31, 2020, a total of 27 disciplinary actions were taken, 5 on EMS providers and 22 on EMS personnel.

At the close of the fiscal year on August 31, 2020, a total of 164 complaint investigations remained open for all EMS license categories. The average age of open cases initiated in fiscal year 2020 was 127 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, [Section 773.0605](#) 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, 2019, and August 31, 2020. 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, 2020. 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.

[Health and Safety Code Chapter 773.041](#) 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 68,858 licensed personnel, 744 EMS providers and 5107 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 119 complaints regarding EMS providers between September 1, 2019 and August 31, 2020, each resulting in DSHS investigations. Of these complaints, 68 were brought by a consumer, 33 were brought by another source, 5 self-reported a potential violation and 13 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
Billing Inappropriateness	1
Confidentiality	2
EMS Drug Diversion	1
EMS Missing/Broken/Inoperable Equipment	5
Failure to Provide Standard Care	86
Falsification/App/Renewal	1
No Medical Director	1
Order Non-Compliance	1

Reason and Basis	Count
Practice without Medical Direction	3
Unlicensed Person/Facility	15
Unprofessional Conduct	3
Total	119

Of the 119 complaint investigations initiated on EMS providers, 55 remained open as of August 31, 2020. Of those, 48 were under investigation and 7 remained open with discipline proposed but not finalized as of August 31, 2020. The reason and basis along with the number of days the investigation has been open may be found in Appendix A.

As of August 31, 2020, DSHS closed 59 complaint investigations that were initiated in the fiscal year without taking any disciplinary action. Reasons for closure were: 1 complainant withdrew complaint, 1 plans-of-correction accepted, 2 inconclusive, 1 closed with no action, 17 no violation, 10 were not substantiated, 17 letters of concern, 3 withdrawn by board, and 7 where DSHS did not have jurisdiction.

Of the 7 complaints determined to be outside DSHS' jurisdiction and closed, 2 were referred to other agencies, which were believed to have jurisdiction. The remaining 5 were closed as they were not within jurisdiction of DSHS or any other state agency.

Of the 119 complaint investigations initiated on EMS providers in fiscal year 2020, 5 cases were closed because of: 4 emergency suspensions and 1 revocation.

DSHS received 1 complaint concerning EMS administrators in fiscal year 2020. As of August 31, 2020, this case is still open.

DSHS closed 13 additional complaint investigations on EMS providers from previous fiscal years because of disciplinary action: 1 probated suspension, 3 combinations of an administrative fine with probated suspension and 9 payments of administrative fines.

4. Complaints Related to EMS Personnel

Emergency Medical Services (EMS) personnel provide emergency and non-emergency 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. [Health and Safety Code, Section 773.003](#) 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 1,322 complaints regarding EMS personnel between September 1, 2019 and August 31, 2020. Of these complaints, 121 were brought by a consumer, 933 were initiated by DSHS in the absence of a complaint, 182 self-reported a potential violation, and 86 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
Confidentiality	5
Criminal History	1,181
EMS Drug Diversion	4
Unlicensed Person/Facility	9
Advertising/Wrongful/Mislead	2
Continuing Education Violations	28

Reason and Basis	Count
Deception/Fraud/Bribery	1
Failure to Provide Standard Care	65
False Report Filed/Made/Signed	10
Improper Record Keeping	9
Practice without Medical Direction	1
Unprofessional Conduct	3
Use of Alcohol/Drugs on the Job	4
Total	1,322

Of the 1,322 complaint investigations involving EMS personnel initiated in fiscal year 2020: 97 remain open with 77 cases still under investigation and 20 with disciplinary action proposed but not finalized as of August 31, 2020. The reason and basis including the number of days investigations have been open may be found in Appendix B.

As of August 31, 2020, DSHS closed 1,203 complaints initiated in fiscal year 2020 without taking any disciplinary action. Reasons for closure were: 610 applications approved, 5 applications withdrawn, 5 licenses expired, 371 no action was taken, 14 no violation found, 63 pre-screens eligible for certification, 2 pre-screens not eligible for certification, 72 were unsubstantiated, 1 violation found and corrected, 49 concern letters, 1 withdrawn by complainant, 1 withdrawn by the department, 1 license surrendered during investigation and 8 non-jurisdictional. Of the 8 complaints determined non-jurisdictional, 3 were referred to other agencies for review and handling, the remaining 5 were closed with no action.

As of August 31, 2020, DSHS closed 22 complaints regarding EMS personnel in fiscal year 2020. The reasons for closure were: 6 emergency suspensions, 1 reprimand, 6 revocations, 1 with a combination of suspension and probation, 8 suspensions.

DSHS closed 53 complaint investigations regarding EMS personnel initiated in previous fiscal years with disciplinary action taken. The disciplinary actions taken were: 17 probated suspensions, 6 reprimands, 14 revocations, 1 voluntary license surrender, 6 with a combination of suspension and probated suspension, 5 suspensions, and 4 findings 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 10 complaints related to EMS education programs between September 1, 2019 to August 31, 2020. Of these complaints, 4 were brought by a consumer and 4 were initiated by DSHS in the absence of a complaint and 2 were brought by another source.

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
EMS Course Deficiencies	8
Improper Record Keeping	1
Unlicensed Facility	1
Total	10

Of the 10 complaints received in fiscal year 2020 regarding EMS education programs, 8 remain open under investigation as of as of August 31, 2020. The reason and basis including the number of days investigations have been open may be found in Appendix C.

As of August 31, 2020, DSHS closed 2 complaints with a letter of concern.

No disciplinary action was taken on EMS education programs in fiscal year 2020.

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 5 complaints related to EMS educators between September 1, 2019 to August 31, 2020. Of these complaints, 2 were brought to DSHS by a consumer, 1 by another source and 2 was 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
EMS Course Deficiencies	3
Failure to Provide Standard Care	1
Unlicensed Person	1
Total	5

Of the 5 complaints received in fiscal year 2020 regarding EMS educators, 4 remain open under investigation as of as of August 31, 2020. The reason and basis including the number of days investigations have been open may be found in Appendix D.

As of August 31, 2020, DSHS closed 1 complaint with a letter of concern.

No disciplinary action was taken on EMS education programs in fiscal year 2020.

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 2 complaints related to EMS first responder organizations between September 1, 2019 to August 31, 2020. Both complaints were brought by a consumer. The reason and basis for both complaints was failure to provide the standard of care. These complaints were closed, no violation found.

No disciplinary action was taken on EMS first responder organizations in fiscal year 2020.

8. Complaint Resolution Data

At the close of the fiscal year on August 31, 2020, there were 164 open complaints among the five Emergency Medical Services (EMS) license categories. Of these complaints, 137 were under investigation and 27 had a proposed disciplinary action that had not been finalized. The average age of open cases initiated in fiscal year 2020 was 127 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 2020, the average time to resolve each complaint from the date received was 19 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 11 days, and those not related to criminal history are resolved in an average of 81 days.

9. Conclusion

At the close of fiscal year 2020, a total of 27 disciplinary actions had been taken among the five license groups.

Of the 68,858 certified and/or licensed Emergency Medical Services (EMS) personnel and 744 licensed EMS service providers, only 0.04% received disciplinary action by the Department of State Health Services (DSHS) between September 1, 2019 and August 31, 2020.

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, 2020.

Appendix A Table 1

Reason and Basis	Days Open
EMS Missing/Broken/Inoperable Equipment	359
Failure to Provide Standard Care	334
Failure to Provide Standard Care	334
Failure to Provide Standard Care	328
Failure to Provide Standard Care	302
Unlicensed Person/Facility	299
Unprofessional Conduct	295
Failure to Provide Standard Care	275
Unlicensed Person/Facility	271
Failure to Provide Standard Care	271
Failure to Provide Standard Care	265
Failure to Provide Standard Care	262
Failure to Provide Standard Care	262
Failure to Provide Standard Care	260
Failure to Provide Standard Care	258
EMS Missing/Broken/Inoperable Equipment	237
Failure to Provide Standard Care	229
Failure to Provide Standard Care	225
Failure to Provide Standard Care	214
Failure to Provide Standard Care	209
Failure to Provide Standard Care	205
Unlicensed Person/Facility	204
Failure to Provide Standard Care	196

Reason and Basis	Days Open
Failure to Provide Standard Care	182
EMS Missing/Broken/Inoperable Equipment	182
Unlicensed Person/Facility	180
Unlicensed Person/Facility	177
Failure to Provide Standard Care	177
Failure to Provide Standard Care	174
Failure to Provide Standard Care	169
Failure to Provide Standard Care	168
Failure to Provide Standard Care	161
Failure to Provide Standard Care	161
Failure to Provide Standard Care	159
No Medical Director	153
Unlicensed Person/Facility	134
Failure to Provide Standard Care	133
Failure to Provide Standard Care	130
Failure to Provide Standard Care	127
Failure to Provide Standard Care	126
Failure to Provide Standard Care	121
Failure to Provide Standard Care	120
Failure to Provide Standard Care	114
Failure to Provide Standard Care	114
Failure to Provide Standard Care	107
Failure to Provide Standard Care	106
Failure to Provide Standard Care	103
Failure to Provide Standard Care	101
Unlicensed Person/Facility	99

Reason and Basis	Days Open
Failure to Provide Standard Care	98
Failure to Provide Standard Care	95
Failure to Provide Standard Care	94
Failure to Provide Standard Care	92
Failure to Provide Standard Care	92
Failure to Provide Standard Care	92
EMS Drug Diversion	91
Failure to Provide Standard Care	90
Failure to Provide Standard Care	89
Falsification/App/Renewal	81
Failure to Provide Standard Care	81
Failure to Provide Standard Care	78
Failure to Provide Standard Care	75
Order Non-Compliance	72
Failure to Provide Standard Care	72
Failure to Provide Standard Care	68
Failure to Provide Standard Care	68
Failure to Provide Standard Care	66
Failure to Provide Standard Care	65
Failure to Provide Standard Care	65
Failure to Provide Standard Care	60
Failure to Provide Standard Care	59
Failure to Provide Standard Care	59
Unlicensed Person/Facility	57
Failure to Provide Standard Care	54
Unlicensed Person/Facility	52

Reason and Basis	Days Open
Failure to Provide Standard Care	51
Failure to Provide Standard Care	51
Unprofessional Conduct	50
Failure to Provide Standard Care	49
Failure to Provide Standard Care	46
Failure to Provide Standard Care	44
Unlicensed Person/Facility	43
Unlicensed Person/Facility	38
Unlicensed Person/Facility	38
EMS Missing/Broken/Inoperable Equipment	36
Failure to Provide Standard Care	35
Failure to Provide Standard Care	35
Failure to Provide Standard Care	34
Failure to Provide Standard Care	30
Failure to Provide Standard Care	30
Unlicensed Person/Facility	29
Unlicensed Person/Facility	29
Failure to Provide Standard Care	29
EMS Missing/Broken/Inoperable Equipment	27
Failure to Provide Standard Care	26
Failure to Provide Standard Care	25
Unlicensed Person/Facility	24
Failure to Provide Standard Care	20
Failure to Provide Standard Care	20
Failure to Provide Standard Care	20
Failure to Provide Standard Care	19

Reason and Basis	Days Open
Unprofessional Conduct	18
Failure to Provide Standard Care	16
Failure to Provide Standard Care	15
Failure to Provide Standard Care	13
Confidentiality	11
Failure to Provide Standard Care	7
Failure to Provide Standard Care	6
Confidentiality	6
Failure to Provide Standard Care	5
Failure to Provide Standard Care	4
Practice without Medical Direction	3
Practice without Medical Direction	3
Practice without Medical Direction	3
Billing Inappropriateness	3
Failure to Provide Standard Care	2
Failure to Provide Standard Care	1
Failure to Provide Standard Care	1
Failure to Provide Standard Care	1

Appendix B. Age of each open complaint regarding EMS personnel as of August 31, 2020.

Appendix B Table 1

Reason and Basis	Days Open
Criminal History	356
Criminal History	335
False Report Filed/Made/Signed	334
Failure to Provide Standard Care	334
Failure to Provide Standard Care	317
Criminal History	314
False Report Filed/Made/Signed	313
Criminal History	306
Continuing Education Violations	302
Criminal History	302
Use of Alcohol/Drugs on the Job	295
Failure to Provide Standard Care	289
Failure to Provide Standard Care	289
Failure to Provide Standard Care	277
Unlicensed Person/Facility	271
Unlicensed Person/Facility	271
Criminal History	267
Failure to Provide Standard Care	258
Continuing Education Violations	248
Failure to Provide Standard Care	239
Failure to Provide Standard Care	237
Continuing Education Violations	232

Reason and Basis	Days Open
EMS Drug Diversion	229
Failure to Provide Standard Care	225
Criminal History	216
Failure to Provide Standard Care	215
Failure to Provide Standard Care	214
Failure to Provide Standard Care	214
Criminal History	209
Failure to Provide Standard Care	205
Criminal History	202
Failure to Provide Standard Care	189
Continuing Education Violations	183
Unlicensed Person/Facility	180
Failure to Provide Standard Care	179
Failure to Provide Standard Care	179
Failure to Provide Standard Care	179
Criminal History	177
Unlicensed Person/Facility	177
Failure to Provide Standard Care	175
Continuing Education Violations	173
Failure to Provide Standard Care	169
Continuing Education Violations	161
Advertising/Wrongful/Mislead	161
Criminal History	161
Failure to Provide Standard Care	160
Failure to Provide Standard Care	160

Reason and Basis	Days Open
Criminal History	149
Failure to Provide Standard Care	138
Failure to Provide Standard Care	131
Failure to Provide Standard Care	129
Failure to Provide Standard Care	128
Criminal History	128
False Report Filed/Made/Signed	127
Continuing Education Violations	122
Continuing Education Violations	122
Continuing Education Violations	121
Failure to Provide Standard Care	121
Failure to Provide Standard Care	121
Failure to Provide Standard Care	121
Continuing Education Violations	119
False Report Filed/Made/Signed	115
Failure to Provide Standard Care	113
Criminal History	113
Continuing Education Violations	112
Continuing Education Violations	112
Failure to Provide Standard Care	110
Continuing Education Violations	107
Failure to Provide Standard Care	107
Continuing Education Violations	107
Criminal History	107
Improper Record Keeping	104

Reason and Basis	Days Open
Criminal History	104
Continuing Education Violations	102
Continuing Education Violations	98
Improper Record Keeping	96
False Report Filed/Made/Signed	94
Improper Record Keeping	92
Criminal History	89
Failure to Provide Standard Care	88
Failure to Provide Standard Care	88
Continuing Education Violations	85
Failure to Provide Standard Care	81
False Report Filed/Made/Signed	79
Failure to Provide Standard Care	79
Failure to Provide Standard Care	79
Confidentiality	79
Continuing Education Violations	78
Failure to Provide Standard Care	75
Criminal History	75
Failure to Provide Standard Care	72
Failure to Provide Standard Care	71
Continuing Education Violations	71
Failure to Provide Standard Care	65
Failure to Provide Standard Care	65
Failure to Provide Standard Care	65
Continuing Education Violations	65

Reason and Basis	Days Open
Failure to Provide Standard Care	64
Criminal History	63
Failure to Provide Standard Care	60
Failure to Provide Standard Care	59
Failure to Provide Standard Care	59
Failure to Provide Standard Care	59
Improper Record Keeping	58
Failure to Provide Standard Care	58
Criminal History	58
Failure to Provide Standard Care	57
Failure to Provide Standard Care	57
Improper Record Keeping	57
Use of Alcohol/Drugs on the Job	52
Failure to Provide Standard Care	51
Continuing Education Violations	51
Criminal History	51
Continuing Education Violations	50
Improper Record Keeping	49
Continuing Education Violations	48
Deception/Fraud/Bribery	48
Improper Record Keeping	43
Continuing Education Violations	39
Criminal History	35
Criminal History	35
Use of Alcohol/Drugs on the Job	33

Reason and Basis	Days Open
Use of Alcohol/Drugs on the Job	33
Failure to Provide Standard Care	30
Continuing Education Violations	30
Criminal History	30
Criminal History	30
Criminal History	30
Failure to Provide Standard Care	29
Continuing Education Violations	29
Improper Record Keeping	28
Criminal History	28
Criminal History	28
Failure to Provide Standard Care	27
False Report Filed/Made/Signed	24
Unprofessional Conduct	24
Failure to Provide Standard Care	22
Criminal History	22
Continuing Education Violations	20
Failure to Provide Standard Care	19
Failure to Provide Standard Care	19
Criminal History	19
False Report Filed/Made/Signed	16
False Report Filed/Made/Signed	16
EMS Drug Diversion	16
Advertising/Wrongful/Mislead	15
Continuing Education Violations	15

Reason and Basis	Days Open
Improper Record Keeping	14
Unprofessional Conduct	14
Criminal History	14
Failure to Provide Standard Care	13
Criminal History	13
Failure to Provide Standard Care	12
Failure to Provide Standard Care	12
Failure to Provide Standard Care	8
False Report Filed/Made/Signed	8
Criminal History	6
Practice without Medical Direction	5
Unprofessional Conduct	4
Failure to Provide Standard Care	4
Failure to Provide Standard Care	2
Failure to Provide Standard Care	2
Criminal History	2
Failure to Provide Standard Care	1

Appendix C. Age of each open complaint regarding EMS education programs as of August 31, 2020.

Appendix C Table 1

Reason and Basis	Days Open
EMS Course Deficiencies	107
EMS Course Deficiencies	104
EMS Course Deficiencies	104
EMS Course Deficiencies	104
Improper Record Keeping	57
EMS Course Deficiencies	22
EMS Course Deficiencies	22
EMS Course Deficiencies	22

Appendix D. Age of each open complaint regarding EMS educator as of August 31, 2020.

Appendix D Table 1

Reason and Basis	Days Open
EMS Course Deficiencies	104
EMS Course Deficiencies	104
Failure to Provide Standard Care	92
EMS Course Deficiencies	22