

	5102	Investigative Review Panel
Nor-Cal EMS Policy & Procedure Manual	Administration	
Effective Date: 06/01/2021	Next Revision: 06/021/2024	
Approval: Jeffrey Kepple MD – MEDICAL DIRECTOR	SIGNATURE ON FILE	

Authority

California Health and Safety Code, Division 2.5, Section 1797.202 (c); 1798.200 - 1798.211. California Code of Regulations, Title 22, Division 9, Chapter 2, Section 100079; Chapter 4, Section 100166 and Chapter 6. California Government Code, Sections 11370 et seq. (Administrative Procedure Act), Title 1, Sections 1000-1050.

Definitions

Certificate

A document issued to an EMR, a licensed paramedic or a registered nurse who meets local criteria for Nor-Cal EMS EMR certification, paramedic and CFRN accreditation or MICN authorization.

Investigative Review Panel (IRP)

An impartial advisory body, the members of which are knowledgeable in the provision of prehospital emergency medical care and local EMS system policies and procedures, which may be convened to review allegations against an applicant for, or the holder of, a certificate, assist in establishing the facts of the case, and provide its findings and recommendation to the Medical Director of a local EMS agency.

Policy

1. An IRP may be convened to review a certificate action and make a recommendation to the EMS Agency Medical Director on upholding or modifying the decision of suspension, revocation or denial.
 - A. The IRP hearing is the certificate holder or applicant's chance to be heard and The IRP role is to listen to what the certificate holder or applicant has to say, and then render a decision.
 - B. The IRP does not have the authority to amend or revoke the action but does have the authority to make a recommendation to the ultimate decision-maker, which is the EMS Agency Medical Director.
2. If the Medical Director does not convene an IRP prior to making a final decision to revoke or suspend an EMR's certification, paramedic's or CFN's accreditation or a MICN's authorization, the EMR, paramedic, CFN or MICN may submit a written request for an IRP within 15 calendar days of written notification from the Medical Director's decision.
3. The IRP will consist of a least three (3) persons. One member of the IRP will be mutually agreed upon by the certificate holder and the EMS Agency Medical Director, if the certificate holder so requests. The IRP must not include the EMS Agency Medical Director, any staff of the EMS Agency, or any current or former fellow employee of the certificate holder/applicant or anyone who submitted allegations against the certificate holder/applicant or was directly involved in any incident, which is included in the investigation.
4. An IRP member must voluntarily disqualify her/himself and withdraw from any case in which he/she cannot accord a fair and impartial view. A certificate holder/applicant may request in writing within seven (7) days of receipt of notice of the date of the IRP, the disqualification of any IRP member. The request must state the reasons upon which it is claimed that a fair and impartial review cannot be accorded. The EMS Agency Medical Director will determine within three (3) days of receipt of the request whether evidence warrants approval of the request to disqualify the specified IRP member and notify the certificate holder/applicant of the to disqualify the specified IRP member and notify the certificate holder/applicant of the decision prior to the date of the IRP.
5. A certificate holder/applicant and all representatives of that person are prohibited from contacting any member of the IRP. Conversely, IRP members are prohibited from contacting the certificate holder/applicant or any representative of that person.
6. The IRP will provide their recommendations based on a preponderance of the evidence presented in the hearing. The burden of proof in an IRP hearing rests with the applicant for, or the holder of, a certificate.
7. IRP hearings need not be conducted according to technical rules relating to evidence and witnesses. Any relevant evidence, including hearsay, may be admitted as long as the evidence is the type that a reasonable person would rely on in conducting serious affairs.
8. IRP members will meet prior to the hearing to review the hearing guidelines and select a chairperson to preside over the hearing.
9. The IRP Chairperson will preside over the hearing and rule on the admission and exclusion of evidence.

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- A. Each party has the right to call and examine witnesses;
 - B. Each party has the right to cross-examine witnesses;
 - C. Each party has the right to impeach any witness regardless of which party first called the witness to testify;
 - D. Each party has the right to rebut evidence; and
 - E. Each party has the right to introduce exhibits.
10. Each party has the right to representation at the IRP hearing.
 11. The IRP is closed to the public
 12. A hearing secretary assigned by the EMS Agency will electronically record IRP hearings.
 13. The certificate holder/applicant must sign a consent form to have the hearing electronically recorded.
 14. The IRP must issue its findings and recommendation to the EMS Agency Medical Director within five (5) days of the last hearing date.
 15. All findings and recommendations reported to the EMS Agency Medical Director must have the concurrence of a majority of the panel members. In the event that a majority of panel members cannot reach agreement on a recommendation then the IRP must issue a report to the EMS Agency Medical Director stating that the IRP is unable to reach a recommendation in the matter.

PROCEDURE

IRP Hearing Procedures

1. Hearing called to order by Chairperson.
 2. Opening statement of the EMS Agency Medical Director or designee.
 3. Opening statement by certificate holder or applicant.
 4. Presentation of evidence by the certificate holder or applicant.
 5. Presentation of evidence by EMS Agency Medical Director or designee.
 6. Final comments by the EMS Agency Medical Director or designee.
 7. Final comments by the certificate holder or applicant.
 8. IRP enters closed session to consider evidence and testimony.
 9. Report of findings and recommendation by the IRP to the EMS Agency Medical Director.
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