



**STATE OF RHODE ISLAND
DEPARTMENT OF HEALTH
DIVISION OF HEALTHCARE QUALITY AND SAFETY
CENTER FOR EMERGENCY MEDICAL SERVICES**

In the Matter of:

JAMES H. WILLIAMS, JR.

COMPLAINT NO. C24-0567

Emergency Medical Technician License Number EMT05998.

CONSENT ORDER

Pursuant to R. I. Gen. Laws §§ 23-4.1-1 *et seq.*, Emergency Medical Transportation Services, and 216-RICR-20-10-2, Emergency Medical Services, the Rhode Island Department of Health, Division of Healthcare Quality and Safety, Center for Emergency Medical Services (“RIDOH”) has reviewed a complaint filed against **JAMES H. WILLIAMS, JR.**, (“Respondent”). After review and consideration by RIDOH the following are and shall constitute:

FINDINGS OF FACT

1. Respondent is an emergency medical technician licensed to practice in the State of Rhode Island under Emergency Medical Technician License Number EMT05998.
2. On or about May 1, 2023, through May 28, 2024, while employed as a Pascoag Fire Department Firefighter/EMT-Cardiac:
 - a. Respondent failed to submit forty-seven (47) electronic patient care reports (ePCR) after making patient contact.
 - b. Respondent did not obtain signatures from designated refusal of care from patient(s) or patient representative.
 - c. Respondent had junior healthcare provider document twenty-four (24) patient care reports when he was the primary healthcare provider.
 - d. Respondent failed to adhere to the *Rhode Island Regulation* 216-RICR-20-10-2.7(D)(3)(a) (c) and (d):
 - i. 216-RICR-20-10-2.7(D)(3)(a) states: “RIDOH-approved electronic patient care reports for all ambulances must be completed.”

- ii. 216-RICR-20-10-2.7(D)(3)(c) states: “Electronic patient care reports must be posted to RIEMIS within two (2) hours of completion of the incident, i.e., transportation to the destination, by the responding EMS personnel.
- e. Respondent failed to adhere to *Rhode Island Statewide Emergency Medical Services Protocols*, Protocol 1.02 Documentation.
 - i. Protocol 1.02 Documentation states:
 - 1. “Documentation is the highest level of EMS professional accountability.”
 - 2. “The EMS patient care report (PCR) is part of the patient’s permanent medical record and is often examined by other medical providers for important and valuable information.”
 - 3. “The detail and accuracy of a patient’s PCR is reflective of the quality and credibility of the EMS practitioner(s) completing the documentation.”
 - 4. “EMS documentation establishes compliance with or deviation from the established standard of care.”
 - ii. Protocol 1.02 Documentation states: “All patient contacts with a RI licensed ambulance service must be documented.”
 - iii. Protocol 1.02 Documentation states: “All documentation must be performed electronically utilizing a National Emergency Medical Services Information System (NEMIS) complaint software platform. The version will be determined by the Center for EMS.”
 - iv. Protocol 1.02 Documentation states: “The use of paper documentation is only acceptable in the event of electronic documentation failure. Paper documentation may not be used as a “placeholder” for electronic documentation.”
 - v. Protocol 1.02 Documentation states: “PCR data shall be transmitted or otherwise provided to the Center of Emergency Medical Services (CEMS) in the timeframe specified in the Rhode Island Code of Regulations, Emergency Medical Services [216-RICR-20-10-2]”.
 - vi. Protocol 1.02 Documentation states: “In addition to required patient demographics, the following shall be documented in the narrative section of

the PCR for each patient contact (if a particular data point is not applicable or is unobtainable, it should be documented as such): chief complaint, mechanism of injury, source of information, history of present illness or injury, past medical history, family and social history, medication, physical examination findings, ECG interpretation, assessment, all interventions and an evaluation of effect or response.

Protocol 6.04 Refusal of Patient Care or Transport.

- i. Protocol 6.04 Refusal of Patient Care or Transport states: “Perform an assessment of the patient’s medical/traumatic condition, and, to the extent permitted by the patient, a physical examination including vital signs. This assessment, or the patient’s refusal of assessment must be fully documented on the PCR.”
- ii. Protocol 6.04 Refusal of Patient Care or Transport states: “Document the refusal of care/transportation by having the patient sign (or, in the case of a minor patient, the minor patient’s parent, legal guardian, or authorized representative) a refusal of care statement on the PCR or a standalone, service specific refusal of care form. Documentation should also include, when possible, a signature by a witness, preferably a competent relative, friend, police officer, or impartial third party.”
- iii. Protocol 6.04 Refusal of Patient Care or Transport states: “Provide documentation on the PCR supporting the presence of mental capacity and specific information provided to the patient/guardian regarding their condition and risks associated with the refusal of evaluation, treatment and/or transportation by EMS.”
- iv. Protocol 6.04 Refusal of Patient Care or Transport states: “If a patient refuses to sign a refusal of care statement, provide documentation on the PCR regarding the situation under which the patient refused to sign.”

1. Respondent admits to, and hereby agrees to remain under, the jurisdiction of RIDOH.
2. Respondent has read this Consent Order and understands that the purpose of this Consent Order is to resolve the complaint of unprofessional conduct alleged against the Respondent and to reissue his EMT license.
3. This Consent Order is an agreement between RIDOH and Respondent; and any failure to adhere to the terms and conditions of this Consent Order may constitute unprofessional conduct and may subject Respondent to further disciplinary action at the discretion of RIDOH, including but not limited to Suspension or Revocation.
4. Respondent hereby acknowledges and waives:
 - (a) The right to have an administrative hearing on this matter;
 - (b) The right to represent himself or be represented by an attorney of their own choosing at said hearing;
 - (c) The right to present testimony, evidence and witnesses on his behalf;
 - (d) The right to cross-examine witnesses presented by RIDOH;
 - (e) The right to further procedural steps except for those specifically contained herein;
 - (f) The right to take an appeal from this Consent Order; and
 - (g) Any objection that this Consent Order may be reported to the National Practitioner Data Bank, become a permanent part of Respondent's record maintained by RIDOH and a part of a public record of this proceeding, or posted on RIDOH's public website.

ACCORDINGLY, AND BASED ON THE FOREGOING

RIDOH and Respondent hereby agree as follows:

- (1) Respondent's EMT License shall be SUSPENDED for fourteen (14) days as of the Effective Date of this Consent Order. The Effective Date is the date on which this Consent Order is approved by RIDOH. During the period of Suspension, Respondent shall not provide emergency medical services in his capacity as a licensed emergency medical technician. Following successful completion of the 14-day suspension, Respondent agrees to a period of Probation for twelve (12) months, during which time Respondent shall:
 - (a) Complete a comprehensive review of the *Rhode Island Emergency Medical Services Rules and Regulations [216-RICR-20-10-2]*, conducted by a Rhode Island licensed EMS Instructor/Coordinator selected or approved by the Department, within thirty (30) days of the start of this probationary period. The refresher education will be separate from the State required refresher course for provider's tri-annual license renewal and may not be used as education credits for said refresher.
 - (b) Complete the National Academy of Ambulance Compliance online documentation course, which must be completed within fifteen (15) days of the start of this probationary period. A certificate of completion must be provided to the RIDOH Compliance Officer. This

education course will be separate from the State required refresher course for provider's tri-annual license renewal and may not be used as education credits for said refresher.

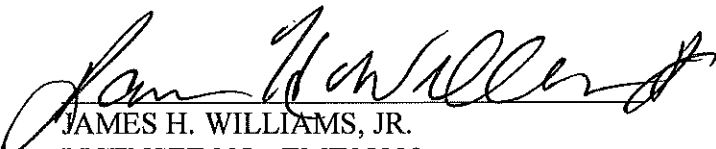
- (c) Complete a minimum eight (8) hour refresher course on documentation and report writing, conducted by an Instructor/Coordinator selected/approved by RIDOH, within thirty (30) days of the start of this probationary period. The refresher education will be separate from the State required refresher course for provider's tri-annual license renewal and may not be used as education credits for said refresher.
- (d) During the period of probation, if Respondent changes employment and/or volunteer service, Respondent shall notify the Department forthwith of said change including the name and address of the new employer(s) and/or licensed ambulance service, as well as the reason for change in ambulance service affiliation.

- (2) A copy of this Consent Order shall be forwarded by the Department to Respondent's current employer(s) and/or volunteer service and all future employer(s) and/or volunteer service during the period of probation.

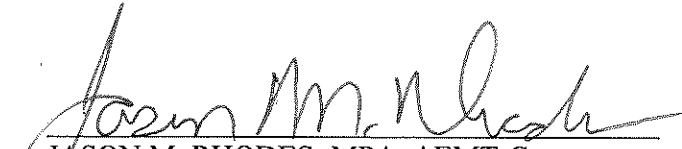
Failure to adhere to the terms of this Consent Order may constitute unprofessional conduct and may subject Respondent to further disciplinary action at the discretion of RIDOH, including but not limited to Suspension or Revocation of Respondent's EMT license.

This Consent Order is a public record.

Signed this 05 day of DECEMBER 2024.


JAMES H. WILLIAMS, JR.
LICENSEE NO.: EMT05998

Ratified this 6th day of December 2024.



JASON M. RHODES, MPA, AEMT-C
Chief, Center for Emergency Medical Services
Division of Healthcare Quality and Safety
Rhode Island Department of Health