



Pat Quinn, Governor  
LaMar Hasbrouck, MD, MPH, Director

422 South Fifth Street, Fourth Floor • Springfield, Illinois 62701-1824 • [www.idph.state.il.us](http://www.idph.state.il.us)

August 14, 2012

Wayne Sobczak  
Antioch Rescue Squad  
825 Holbeck Drive  
Post Office Box 604  
Antioch, Illinois 60002

**VIA Certified US MAIL**

Dear Mr. Sobczak:

As you are aware, the Illinois Department of Public Health (IDPH), Division of Emergency Medical Services (EMS) and Highway Safety, has been engaged in an investigation regarding allegations made against Antioch Rescue Squad (ARS). The allegations include breaches of confidentiality of medical records, improper use of medications, improper use of IV solutions, improper administration of IV fluids to staff, breach of EMS System Protocols, unprofessional treatment of patients, improper restraint use, and failure to report occurrences of improper activities to the EMS System.

IDPH staff conducted interviews on May 9, 2012 with nine Antioch Rescue Squad employees with legal counsel present from ARS and Metro Paramedic Services, Inc. Through its investigation, IDPH has uncovered evidence that tends to validate several of the allegations. Additional concerns have also been identified. Before IDPH makes a decision of whether or not to undertake formal action against ARS, the Department is informally recommending that a plan of correction be developed within 30 days of receipt of this letter in cooperation with North Lake County EMS System. The Plan of Correction should clearly address and resolve the following issues.

- 1) **Finding:** Investigational findings supported improper use of medications, including the unauthorized and improper placement of medications into the food and beverages of ARS members. The Department was not able to identify any clear process to track and identify missing, misused or absent medications. The site visit revealed the lack of a medication inventory, a medication cache with little or no security, and the absence of a medication tracking system for the purpose of quality control. Medications are provided to ARS through hospital exchange and through approval of direct purchase with the Medical Directors authorization.

***Improving public health, one community at a time***

*printed on recycled paper*

Recommended Plan of Correction (POC):

A formal system needs to be established to track acquisition and utilization of all medications received by staff or purchased by management either through hospital exchange or direct purchase from a pharmaceutical supply company. This system should identify how medications are purchased, inventoried, secured, restocked, and needs to identify the individual patient medical record number to whom medication was administered. Additionally, medication utilization should have regular and frequent audits to determine if medications administered were given to a patient, wasted, used improperly or replaced due to expiration. A procedure should be in place advising the EMS Medical Director and/or his designee of the amounts of direct purchased medications and if any irregularities exist.

- 2) Finding: Investigational findings supported allegations that staff members at ARS had improperly initiated and infused IV solutions to ARS staff for the purpose of rehydration. This administration of IV fluids did not include a request for an emergency services response and did not result in the transport of the individual (receiving the IV solutions) to the hospital. Additionally, these incidents did not result in documentation of the care delivered by pre-hospital personnel resulting in procedures that were outside of the Scope of Practice of the personnel who performed these services. Investigational findings also support that this was somewhat of a routine practice and was not addressed by either management or supervisory staff, nor was it reported to the EMS System. Due to the lack of an inventory tracking system, the improper use of IV solutions, IV tubing, and IV catheters was apparently not identified by ARS management. Investigational findings also revealed that some of the improper utilization of IV fluids was for the purpose of treating staff members who had presumably consumed excessive amounts of alcohol.

Recommended POC:

A system needs to be established that tracks the utilization of IV fluids and IV catheters and assures that these medications are only utilized for the purpose of patient treatment that falls within the Scope of Practice of the staff functioning under the proper guidance of the EMS Medical Director or for the purpose of training. Training exercises should be formally authorized by the lead EMS Instructor in advance and must be part of a current IDPH-approved course.

- 3) Finding: Investigative findings support that ARS members were encouraged by management to not report improper utilization of medications to the EMS System but to keep that information confined within the ARS Agency.

Recommended POC: Procedures and education need to be implemented that provide the ability for supervisors/staff members to be able to report any improper use of any medications or IV solutions directly to the EMS System Coordinator and ARS Management/Contracted Service Agency without fear of any negative repercussions to individual reporting the incident. All ARS members should be encouraged to report incidences of misconduct and management should clearly convey such a philosophy.

- 4) Finding: Allegations to the Department included HIPAA violations based on the password of the medical records system supervisor being shared with other staff. The investigation supported the finding that the password had been shared. Through the

investigation it was determined that the supervisor did not have knowledge that others might have been using the supervisor's password to access the system.

Recommended POC: IDPH recommends regular changing of the password so the system cannot be breached through the individual's sign-on. Additional procedures should be implemented so that all supervisory staff with access to all records can maintain and protect the privacy of patients' records maintained on the system in full compliance with all State and Federal laws, including HIPAA.

- 5) Finding: Allegations to the Department included that staff were allowed to start their shift within a few hours of excessive consumption of alcohol. IDPH heard supporting testimony that supported these allegations.

Recommended POC: Procedures need to be implemented that assure employees who are reporting for duty are not under the influence of alcohol or drugs consistent with an alcohol-free and drug-free policy, which if exists, does not appear to be enforced. The procedures should outline appropriate steps for staff and/or supervisors to report individuals suspected of reporting to work under the influence of alcohol or drugs and preventing such individuals from working.

- 6) Finding: Investigational findings support that staff had reported multiple allegations of mis-conduct to ARS management and Board Members. Several of the allegations named board members as being aware of, and/or having participated in, the alleged misconduct. It is IDPH's opinion, as a result of these findings, that ARS became a self-regulated agency through a Board comprised of only members of the agency. This contributed to the lack of corrective action being implemented to avoid or curtail some of the alleged activities.

Recommended POC: The current structure of the Board at Antioch Rescue Squad should be re-organized to establish a situation of independence and objectivity. This may be achieved by restructuring the Board at ARS to include multiple individuals with a professional medical and business background and who are not employed by, not affiliated with and who are not personal or professional friends/associates with/of any ARS Board member or manager, but have the authority to insist on changes and/or actions related to service operations.

- 7) Finding: Allegations to the Department indicated that some patients were intentionally agitated or mistreated by ARS ambulance personnel on the call in order to justify the use of restraint devices. Investigational findings support that some patients were subjected to unprofessional conduct by ARS staff and this conduct was witnessed by other ARS staff but not reported, and/or that no adequate disciplinary action was taken.

Recommended POC: A policy regarding professional and ethical treatment of patients needs to be established and enforced. Staff should be educated that inappropriate treatment of patients by co-workers is intolerable and must be reported to supervisors, ARS management, and the EMS System immediately. The policy should outline corrective measures to ensure professional and ethical treatment of patients.

- 8) Findings: Currently ARS has not put into place adequate and independent administrative and managerial systems. ARS apparently has no personnel files, no formal rules of conduct, no formal disciplinary procedures, and some of its members appear to lack adequate professional standards. The prevailing management philosophy appears to be "If I did not see it, it did not happen and I'm not going to adequately investigate or take meaningful corrective action."

Recommended POC: 1) ARS should create, maintain and update: a) complete personnel files; b) formal rules of conduct such as a "member handbook"; and 2) avail itself of additional EMS management expertise. The necessity of multiple, truly independent outside professional directors cannot be over-emphasized.

The Department wishes to stress that the forgoing are its **informal** findings and **informal** recommendations based upon its investigation and its collective experience and expertise. The Department believes that dramatic changes are necessary and should be undertaken immediately. While the Department has not made any final decision on whether to bring any **formal** action against ARS based upon violations of 210 ILCS 50 and/or 77 Ill Adm. Code 515, you should know that such actions are presently being contemplated. If you have any questions, please feel free to contact Jack Fleeharty at 217-785-2080.

Sincerely,



Jack Fleeharty, RN, EMT-P  
Division Chief  
EMS and Highway Safety

JF:lh

Cc: Elizabeth Houston, RN, BSN, MBA, Regional EMS Coordinator  
Brian Kieninger, RN, BSN, Regional EMS Coordinator  
Brock Franklin, MD, EMS Medical Director  
Amy Ludford, RN, EMT-P, EMS System Coordinator  
✓ Jonathan Gunn, JD, MICT, IDPH Assistant General Counsel