

1 **16 DEPARTMENT OF PUBLIC SAFETY**2 **163 EMERGENCY MEDICAL SERVICES BOARD (MAINE EMS)**3 **CHAPTER 11: STANDARDS AND PROCEDURES FOR EMERGENCY MEDICAL SERVICES**
4 **LICENSING BOARD ACTION**

5 **PURPOSE:**

6 EMS professionals are tasked with entering people's lives during what may be their worst and most
7 vulnerable times. The public grants EMS professionals near limitless access to their homes, businesses, and
8 personal spaces, all within close proximities to their families, friends, and loved ones. This level of access
9 is essential for EMS professionals to carry out their duties of delivering emergency medical care. The
10 public, therefore, places EMS professionals in the highest level of trust and demands that EMS professionals
11 abide by a strong ethical code and enforce the highest standard of personal and professional conduct. For
12 the Maine EMS system to function properly and serve the public interest in protecting public health, safety,
13 and welfare, it must hold the members of its profession, including Ambulance Services, Non-Transporting
14 Emergency Medical Services, Training Centers, and Emergency Medical Dispatch Centers, accountable to
15 their commitments and duties and ensure that its decisions affecting licensure are based upon evidence and
16 rooted in a foundation of transparency and justice. To this end, it is therefore necessary to set forth the
17 procedures, standards, and grounds for disciplinary and non-disciplinary action involving Maine
18 Emergency Medical Services' licensees.

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20 Because EMS professionals have specialized medical training that their patients may not fully
21 understand, EMS professionals have a duty to always use that knowledge to act in the best interest of the
22 patient. It is the duty of the EMS professional to not only treat each patient with the most appropriate and
23 competent medical care according to their illness or injury, but also treat each patient, family member,
24 friend, loved one, and caregiver with compassion, respect, and dignity. To make sound ethical and moral
25 decisions, an EMS professional needs to understand and be held accountable to the ethical principles that
26 guide choices made and actions taken, not just at a patient-centric level, but also at a level of professionalism
27 toward fellow EMS professionals, and other healthcare professionals. In the interest of ensuring that an
28 EMS professional has a sufficient understanding of the expectations related to the ethical principles present
29 within the Maine EMS system, it is necessary to set forth a Code of Ethics that represents the values of the
30 Maine EMS system.

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32 **SECTION 1. DEFINITIONS**

33 1. These terms have the following meanings as used within this chapter:

34 A. **Ambulance Operator** means an Emergency Medical Services Ambulance Operator licensed
35 by the Emergency Medical Services Licensing Board pursuant to 32 M.R.S. § 85-B.36 B. **Ambulance Service** has the same meaning as in 32 M.R.S. § 83(5).37 C. **Board Staff** means those employed by the Office of Maine Emergency Medical Services
38 within the Maine Department of Public Safety, assigned by the Director to the Licensing
39 Board.40 D. **Community Paramedic**, as used in this chapter, means a person licensed or conditionally
41 licensed under Chapter 19 of these rules engaged in Community Paramedicine as defined in
42 Chapter 19 of these rules.43 E. **Emergency Action** means action taken against a license under 5 M.R.S. § 10004.

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- 45 F. **EMS Clinician** means an Emergency Medical Services Person licensed by the Emergency
 46 Medical Services Licensing Board pursuant to 32 M.R.S. § 85.
- 47 G. **Emergency Medical Dispatcher** means an Emergency Medical Dispatch Person licensed by
 48 the Emergency Medical Services Licensing Board pursuant to 32 M.R.S. § 85-A.
- 49 H. **Emergency Medical Services** means the services provided under licensure granted by the
 50 Maine Emergency Medical Services Licensing Board or the Maine Emergency Medical
 51 Services' Board, including, but not limited to: emergency medical treatment, interfacility
 52 transfer operations, ambulance operation, community paramedicine, and EMS-licensure
 53 education.
- 54 I. **EMS Professional** means an EMS Clinician, Ambulance Operator, Emergency Medical
 55 Dispatcher, Instructor/Coordinator, or Community Paramedic
- 56 J. **First Responder** means a Law Enforcement Officer as defined by 25 M.R.S. § 2801-A(5), a
 57 Municipal Firefighter as defined by 30-A M.R.S. § 3151(2), or any person licensed under
 58 Title 32, Chapter 2-B.
- 59 K. **Instructor/Coordinator** means a person licensed under Chapter 9 of these rules acting as the
 60 lead instructor in course(s) leading to licensure at the level of licensure held.
- 61 L. **Licensing Board** has the same meaning as in 32 M.R.S. § 83(13-B).
- 62 M. **Licensed Medical Practitioner** means physicians and all others certified, registered, or
 63 licensed in the healing arts, including, but not limited to: nurses, podiatrists, pharmacists,
 64 optometrists, chiropractors, physical therapists, dentists, psychologists, physician assistants,
 65 respiratory therapists, massage therapists, midwives, and veterinarians.
- 66 N. **Non-Disciplinary Action** means a Letter of Guidance/Concern issued pursuant to 32 M.R.S.
 67 § 90-A(8).
- 68 O. **Non-transporting Emergency Medical Service ("NTEMS")** has the same meaning as in 32
 69 M.R.S. § 83(14).
- 70 P. **Sexual Misconduct** means a behavior that exploits an EMS Clinician-Patient relationship, an
 71 Ambulance Operator-patient relationship, an Emergency Medical Dispatcher-caller
 72 relationship, an Inter-Licensee relationship, an Educator-student relationship, or a Mentor-
 73 mentee relationship in a sexual way. This behavior is non-diagnostic and/or non-therapeutic,
 74 may be verbal or physical, and may include expressions or gestures that have a sexual
 75 connotation or that a reasonable person may construe as such. There are two levels of sexual
 76 misconduct: gross misconduct and impropriety, which are described under the applicable
 77 grounds for licensing action in Section 3 of this rule. Behavior listed in either category may
 78 be the basis for disciplinary action.
- 79 Q. **Work Environment** means any location where an EMS licensee is engaged in activities
 80 requiring licensure under Title 32, Chapter 2-B, or a location where an EMS licensee is
 81 reasonably expected to adhere to the standards of the profession, including but not limited to:
 82 an ambulance service or NTEMS base location, a hospital or other health-care facility, a fire-
 83 department, an emergency medical dispatch center, an emergency medical services training
 84 center, any location where EMS-related education is occurring, an ambulance or emergency
 85 medical services vehicle, or the scene of an emergency medical call.

87 SECTION 2. MAINE EMS CODE OF ETHICS

- 88 1. As an EMS Professional and by acceptance of licensure in the State of Maine by the Maine
 89 Emergency Medical Services Licensing Board or the Emergency Medical Services' Board, a
 90 licensee solemnly pledges to meet the following code of professional ethics:

- 91 A. To do no harm, alleviate suffering, and promote the health and welfare of the citizens and
 92 visitors of the State of Maine;
- 93 B. To safeguard a patient's dignity and right to privacy in providing services regardless of race,
 94 nationality, creed, disability, color, sexual orientation, gender, religion, genetic information,
 95 or socio-economic status;
- 96 C. To not prejudice the merits of a patient's request for service;
- 97 D. To respect and hold in confidence all information of a confidential nature obtained in the
 98 course of professional service, unless required by law to divulge such information;
- 99 E. To demonstrate the highest standards of professional conduct in the practice of the profession
 100 by:
- 101 (1) Not using professional knowledge and skills in any enterprise that is detrimental to the
 102 public well-being;
- 103 (2) Caring for all patients with compassion and respect for human dignity, taking care with
 104 the demeanor presented;
- 105 (3) Assuming responsibility for individual professional actions and judgment;
- 106 (4) Knowing and upholding the laws and rules that affect the practice of EMS;
- 107 (5) Working cooperatively with EMS associates and other healthcare and public safety
 108 professionals in the best interest of patients and the general public;
- 109 (6) Refusing to participate in unethical procedures or practices;
- 110 (7) Exposing the incompetence or unethical conduct of others to the appropriate authority in
 111 a proper, timely, and professional manner; and
- 112 (8) Using technology, including social media, in a way that does not violate client or patient
 113 confidentiality, undermine trust in the EMS profession, or suggest that a licensee may be
 114 unfit to practice.
- 115 F. To protect the health, safety, and well-being of themselves, their co-workers, patients, and the
 116 community by following safety guidelines, principles, and practices.
- 117 G. To continually seek to maintain and improve their professional knowledge, skill, and
 118 competence by seeking to update their practice by engaging in life-long learning, including
 119 engaging in continuing education whenever available

120 SECTION 3. GROUNDS FOR LICENSURE ACTIONS

121 1. **Grounds for Licensure Actions Against Applicants for new or change in licensure as an** 122 **EMS Clinician, Ambulance Operator, Instructor/Coordinator, Community Paramedic, or** 123 **Emergency Medical Dispatcher**

124 (1) Criminal History

125 (a) Subject to the limitations of Title 5, Chapter 341, the Licensing Board may take
 126 Disciplinary Action or Non-Disciplinary Action against an applicant who:

- 127 (i) Was convicted of a crime that involves dishonesty or false statement;
- 128 (ii) Was convicted of a crime that relates directly to the practice of Emergency
 129 Medical Services;
- 130 (iii) Was convicted of a crime for which incarceration for one year or more may be
 131 imposed, whether or not such sanction was imposed;
- 132 (iv) Was convicted of a crime defined in Title 17-A, Chapter 11, 12, or 45; or
- 133 (v) Was convicted of a crime for which incarceration for less than one year may be
 134 imposed that involves sexual misconduct.

135 (2) Fraud/Deceit:

- 136 (a) The Licensing Board may take Disciplinary or Non-Disciplinary Action against an
 137 applicant who engages in or attempts to engage in fraud or deceit, including, but not
 138 limited to:
- 139 (i) Fraud, deceit, or misrepresentation in the application submitted or in any activity
 140 or document intended to be used to satisfy a requirement for licensure.
 - 141 (ii) Impersonation of another licensed medical practitioner.
 - 142 (iii) Impersonation of an applicant or licensee or acting as a proxy for an applicant or
 143 licensee in any licensing exam.
 - 144 (iv) Uses or attempts to use as a valid certificate or license, one that has been
 145 purchased, counterfeited, or materially altered.
- 146 (3) Legal Incompetence or Impairment:
- 147 (a) The Licensing Board may take Disciplinary Action or Non-Disciplinary Action
 148 against an applicant who:
 - 149 (i) Has a declaration or claim of legal incompetence that has not been legally
 150 terminated.
 - 151 (ii) Has any condition or impairment within the preceding 3 years, including, but not
 152 limited to, substance use disorder or a mental, emotional or nervous disorder or
 153 condition, that in any way affects, or if untreated could impair, the applicant's
 154 ability to provide emergency medical services
- 155 (4) Violation of Board Statute:
- 156 (a) The Licensing Board may take Disciplinary or Non-Disciplinary Action against an
 157 applicant who engages in, or attempts to engage in, a violation of the Board's statute,
 158 including, but not limited to:
 - 159 (i) A failure to notify the Licensing Board in writing within 10 days of a:
 - 160 a. Change of name or address;
 - 161 b. Criminal conviction
 - 162 c. Revocation, suspension, or other disciplinary action taken in this or any
 163 other jurisdiction against any occupational or professional license held
 164 by the applicant; or
 - 165 d. Material change in the conditions or qualifications set forth in the
 166 original application for licensure submitted to the Licensing Board.
 - 167 (ii) Activities that require licensure pursuant to 32 M.R.S. § 82(1) when such
 168 licensure has not been granted or is not valid.
- 169 (5) Disqualifying Conduct:
- 170 (a) The Licensing Board may take Disciplinary or Non-Disciplinary Action against an
 171 applicant who engages in or attempts to engage in disqualifying conduct, including,
 172 but not limited to:
 - 173 (i) Sexual Misconduct as described in Section 3(2).
 - 174 (ii) Has disciplinary action against any professional medical licensure by another
 175 authority or jurisdiction, or has disciplinary action pending, which constitutes
 176 evidence of an inability to respond appropriately to a client, patient, or the
 177 general public.
 - 178 (b) The Licensing Board may take Disciplinary or Non-Disciplinary Action against an
 179 applicant when the applicant was previously licensed by the Emergency Medical
 180 Services' Board and the applicant engaged, or attempted to engage in, conduct that
 181 would have been a violation of the Board's Rules or Statutes.

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2. Grounds for Licensing Action Against Currently Licensed EMS Clinicians, Ambulance Operators, Instructor/Coordinators, Community Paramedics, or Emergency Medical Dispatchers

A. The Licensing Board may take Disciplinary Action or Non-Disciplinary Action against any licensee whose conduct gives rise to a ground for licensing action. Grounds for licensing action include, but are not limited to, engaging in, or attempting to engage in: fraud or deceit, unprofessional conduct, incompetent professional practice, sexual misconduct, or having legal incompetence or impairment, as defined in the applicable part below.

B. Grounds for Licensing Action Applicable to All Licensees

(1) Fraud or Deceit

- (a) Engaging in, or attempting to engage in, fraud or deceit in obtaining a license or in connection with service rendered within the scope of the license issued, which includes but is not limited to:
 - (i) Obtaining a license or certification by fraud or deceit
 - (ii) Willfully making a false statement in an application for a license or renewal of a license, or in any activity or documents intended to be used to satisfy a requirement for licensure;
 - (iii) Falsifying or improperly altering a patient or healthcare provider record.
 - (iv) Impersonating another licensed practitioner.
 - (v) Impersonating any applicant or licensee or acting as a proxy for an applicant or licensee in any licensing exam.
 - (vi) Altering or falsifying documents used or intended to be used to obtain a course card or certificate.
 - (vii) Using or attempting to use as a valid license or certificate, one that has been purchased, counterfeited, materially altered, or obtained by fraud, deceit, or misrepresentation.

(2) Legal Incompetence or Impairment

- (a) Engaging in, the use of any drug, narcotic or substance that is illegal under state or federal law, or to the extent that the licensee's ability to provide emergency medical services would be impaired, which includes, but is not limited to:
 - (i) The misuse of drugs, including alcohol or other substances, the use of which has resulted or may result in the licensee performing their duties in a manner that endangers the health or safety of their patients, other first responders, or the general public.
 - (b) A declaration of or claim pertaining to the licensee of legal incompetence that has not been legally terminated;

(3) Unprofessional Conduct

- (a) Unprofessional conduct includes, but is not limited to, engaging in or attempting to engage in the following:
 - (i) Obtaining a license by misrepresentation or by concealing material facts;
 - (ii) Failure to comply with a Consent Agreement or Board Order;
 - (iii) Acting in ways that are dangerous or injurious to the licensee or other persons;
 - (iv) Any criminal conviction, subject to the limitations of Maine Statute;
 - (v) Renting, selling, bartering, or lending a license to another person;

- 227 (vi) Violation of the Maine EMS's Code of Ethics;
- 228 (vii) Disclosing or causing to be disclosed confidential information to an
- 229 unauthorized person or using confidential information for personal or
- 230 unauthorized financial benefit;
- 231 (viii) Failing to participate in Maine EMS-approved quality assurance activities;
- 232 C. Additional Grounds for Licensing Action Applicable for an EMS Clinician
- 233 (1) Fraud or Deceit
- 234 (a) Engaging in, or attempting to engage in, fraud or deceit in obtaining a license or in
- 235 connection with service rendered within the scope of the license issued, includes but
- 236 is not limited to:
- 237 (i) Initiating the transport of a person, knowing that the person does not need to be
- 238 transported, or treating a person knowing the person does not need to be treated,
- 239 when the primary purpose of the action is to collect a fee or charge.
- 240 (2) Legal Incompetence or Impairment
- 241 (a) Engaging in, or attempting to engage in, the use of any drug, narcotic or substance
- 242 that is illegal under state or federal law, or to the extent that the licensee's ability to
- 243 provide emergency medical services would be impaired, which includes, but is not
- 244 limited to:
- 245 (i) Responding to the scene of a call while under the influence of drugs or alcohol,
- 246 whether or not the use of such substances is habitual;
- 247 (b) Any condition or impairment within the preceding 3 years, including, but not limited
- 248 to, substance use disorder or a mental, emotional or nervous disorder or condition,
- 249 that in any way affects, or if untreated could impair, the licensee's ability to provide
- 250 emergency medical services;
- 251 (3) Incompetent Professional Practice
- 252 (a) Engaging in, or attempting to engage in, the following shall be considered
- 253 Incompetent Professional Practice, which includes, but is not limited to:
- 254 (i) The demonstration of an inability to respond appropriately to a client, patient or
- 255 the general public as evidenced by:
- 256 1. Causing a physical or emotional injury to a patient because of a violation of
- 257 the applicable standard of care;
- 258 (ii) An inability to apply principles, skills or knowledge necessary to successfully
- 259 carry out the practice for which the licensee is licensed as evidenced by:
- 260 1. A deviation from the applicable standard of care or failure to perform
- 261 emergency medical treatment in accordance with the most recent version of
- 262 Maine EMS's protocols, after quality assurance/improvement and/or
- 263 remediative efforts;
- 264 2. A failure to demonstrate entry-level competency with sufficient breadth and
- 265 depth as outlined in the 2021 National Emergency Medical Services
- 266 Education Standards as published by the National Highway Traffic Safety
- 267 Administration, which is incorporated into this rule by reference and a copy
- 268 of which is available at the Office of Maine Emergency Medical Services,
- 269 Department of Public Safety, 45 Commerce Dr, Suite 1, Augusta, ME 04333-
- 270 0152;
- 271 (4) Unprofessional Conduct

- 272 (a) Unprofessional conduct includes, but is not limited to, engaging in or attempting to
 273 engage in the following:
- 274 (i) Responding to the scene of an accident or incident to which the licensee has not
 275 been dispatched, when there is reason to believe that another licensee has been or
 276 will be called to that scene, and refusing to turn over care of the patient to the
 277 responsible service when it arrives;
 - 278 (ii) Failing to provide patient information to a hospital or other health care facility in
 279 response to an authorized request;
 - 280 (iii) Inaccurate recording of material information in a patient or healthcare provider
 281 record;
 - 282 (iv) Exploiting the provider-patient relationship for the purpose of personal or
 283 financial gain by the licensee or by a third party including, but not limited to,
 284 promoting or selling services, goods, appliances or drugs;
 - 285 (v) Diverting drugs, supplies or property of patients, patient's families, services or
 286 healthcare providers;
 - 287 (vi) Possessing, obtaining, furnishing, or administering prescription drugs,
 288 equipment or supplies to any person, including one's self, except as directed by a
 289 person authorized by law to prescribe such items;
 - 290 (vii) Acting negligently or neglectfully when caring for or treating a patient;
 - 291 (viii) Operating a vehicle as an Ambulance or Emergency Medical Services Vehicle
 292 when it is not licensed or authorized by the Board;
 - 293 (ix) Providing treatment at a level for which a person is not licensed, except:
 294 1. When the person is a student currently enrolled in a course leading to
 295 licensure and is practicing procedures learned in that course; and
 296 2. The person has received permission to practice those procedures from the
 297 Maine EMS-licensed Training Center conducting the course; and
 298 3. The person is participating in a scheduled field-internship session approved
 299 by the course's clinical coordinator; and
 300 4. The person is practicing those procedures with a Maine EMS-licensed
 301 service that complies with guidelines developed by Maine EMS for
 302 conducting field internship sessions; and
 303 5. The person is supervised by a preceptor licensed to perform those procedures
 304 and who is acting in accordance with any requirements or guidelines
 305 approved by the Emergency Medical Services Board.
 - 306 (x) Misrepresentation or concealment of material facts in connection with service(s)
 307 rendered, by commission or omission;
 - 308 (xi) Delegation of practice, skills, or treatment to a person who is not licensed and
 309 qualified to perform said practice, skills, or treatment contrary to the Rules and
 310 Regulations of the Maine Emergency Medical Services' Board.
 - 311 (xii) Abandonment or neglect of a patient;
 - 312 (xiii) Failing to comply with continuing education requirements for license renewal.
- 313 (5) Sexual Misconduct
- 314 (a) Gross misconduct
 - 315 (i) Gross misconduct is any conduct by an EMS Clinician in the Work Environment
 316 that is sexual or may be reasonably interpreted as sexual, even when consented to
 317 between an EMS Clinician and a patient, between licensees, between an educator

- 318 and a student, or between a mentor and a mentee. This includes, but is not limited
 319 to:
 320 1. Sexual intercourse, genital to genital contact;
 321 2. Oral to genital contact;
 322 3. Oral to anal contact or genital to anal contact;
 323 4. Kissing;
 324 5. Any touching or examination of a body part for any purpose other than
 325 appropriate examination or treatment during an established EMS clinician-
 326 patient interaction without a reported, suspected, or obvious injury or
 327 medical condition;
 328 6. Encouraging an individual to masturbate in the presence of the EMS
 329 Clinician or masturbation by an EMS Clinician in the presence of anyone
 330 else;
 331 7. Offering to provide practice-related services or supplies, such as medications,
 332 in exchange for sexual favors.

333 (b) Impropriety

- 334 (i) Impropriety is behaviors, gestures, or expressions by an EMS Clinician in the
 335 Work Environment that are seductive, sexually suggestive, or sexually
 336 demeaning, including but not limited to:
 337 1. Disrobing, draping practices, or touching of a patient's clothing that reflect a
 338 lack of respect for a patient's privacy; deliberately watching a patient dress or
 339 undress, instead of affording a patient privacy for disrobing to the extent
 340 dictated by circumstances on scene;
 341 2. Inappropriate comments about or to a third party, including but not limited to
 342 making sexual comments about their body or underclothing, making
 343 sexualized or sexually demeaning comments, criticizing sexual orientation,
 344 making comments about potential sexual performance of a patient during an
 345 examination or consultation, unnecessarily requesting details of sexual
 346 history or requesting information on sexual likes or dislikes;
 347 3. Using the EMS Clinician-patient relationship to solicit a date or initiate a
 348 romantic relationship;
 349 4. Initiation by an EMS Clinician of conversation regarding sexual problems,
 350 preferences, or fantasies of the EMS Clinician, the sexual preferences or
 351 fantasies of a patient, or sexual problems of a patient that are not relevant to
 352 emergency medical treatment.

353 D. Additional Grounds for Licensing Action Applicable for an Ambulance Operator

354 (1) Fraud or Deceit

- 355 (a) Engaging in, or attempting to engage in, fraud or deceit in obtaining a license or in
 356 connection with service rendered within the scope of the license issued, includes but
 357 is not limited to:
 358 (i) Initiating the transport of a person, knowing that the person does not need to be
 359 transported, or treating a person knowing the person does not need to be treated,
 360 when the primary purpose of the action is to collect a fee or charge.

361 (2) Legal Incompetence or Impairment

- 362 (a) Engaging in, or attempting to engage in, the use of any drug, narcotic or substance
 363 that is illegal under state or federal law, or to the extent that the licensee's ability to

- 364 provide emergency medical services would be impaired, which includes, but is not
365 limited to;
- 366 (i) Responding to the scene of a call while under the influence of drugs or alcohol,
367 whether or not the use of such substances is habitual;
- 368 (b) Any condition or impairment within the preceding 3 years, including, but not limited
369 to, substance use disorder or a mental, emotional or nervous disorder or condition,
370 that in any way affects, or if untreated could impair, the licensee's ability to operate
371 an ambulance;
- 372 (3) Unprofessional Conduct
- 373 (a) Unprofessional conduct includes, but is not limited to, engaging in or attempting to
374 engage in the following:
- 375 (i) Responding to the scene of an accident or incident to which the licensee has not
376 been dispatched, when there is reason to believe that another licensee has been or
377 will be called to that scene, and refusing to turn over care of the patient to the
378 responsible service when it arrives;
- 379 (ii) Exploiting the provider-patient relationship for the purpose of personal or
380 financial gain by the licensee or by a third party, including, but not limited to,
381 promoting or selling services, goods, appliances, or drugs;
- 382 (iii) Diverting drugs, supplies or property of patients, patient's families, services or
383 healthcare providers;
- 384 (iv) Possessing, obtaining, furnishing, or administering prescription drugs,
385 equipment or supplies to any person, including one's self, except as directed by a
386 person authorized by law to prescribe such items;
- 387 (v) Operating a vehicle as an Ambulance or Emergency Medical Services Vehicle
388 when it is not licensed or authorized by the Board;
- 389 (vi) Providing emergency medical treatment without a clinical license, except:
- 390 1. When the person is a student currently enrolled in a course leading to
391 licensure and is practicing procedures learned in that course; and
- 392 2. The person has received permission to practice those procedures from the
393 Maine EMS-licensed Training Center conducting the course; and
- 394 3. The person is participating in a scheduled field-internship session approved
395 by the course's clinical coordinator; and
- 396 4. The person is practicing those procedures with a Maine EMS-licensed
397 service that complies with guidelines developed by Maine EMS for
398 conducting field internship sessions; and
- 399 5. The person is supervised by a preceptor licensed to perform those procedures
400 and who is acting in accordance with any requirements or guidelines
401 approved by the Emergency Medical Services Board.
- 402 (vii) Misrepresentation or concealment of material facts in connection with
403 service(s) rendered, by commission or omission;
- 404 (4) Sexual Misconduct
- 405 (a) Gross misconduct
- 406 (i) Gross misconduct is any conduct by an Ambulance Operator in the Work
407 Environment that is sexual or may be reasonably interpreted as sexual, even
408 when consented to between an Ambulance Operator and a patient, between

409 licensees, between an educator and a student or between a mentor and a mentee.

410 This includes, but is not limited to:

- 411 1. Sexual intercourse, genital to genital contact;
- 412 2. Oral to genital contact;
- 413 3. Oral to anal contact or genital to anal contact;
- 414 4. Kissing;
- 415 5. Examination or touching of the genitals of a patient without a reported,
- 416 suspected or obvious injury or medical condition;
- 417 6. Encouraging an individual to masturbate in the presence of the Ambulance
- 418 Operator or masturbation by an Ambulance Operator in the presence of a
- 419 third-party;
- 420 7. Offering to provide practice-related services or supplies, such as drugs, in
- 421 exchange for sexual favors.

422 (b) Impropriety

423 (i) Impropriety is behaviors, gestures, or expressions by an Ambulance Operator in

424 the Work Environment that are seductive, sexually suggestive, or sexually

425 demeaning, including but not limited to:

- 426 1. Disrobing, draping practices, or touching of a patient's clothing that reflect a
- 427 lack of respect for a patient's privacy; deliberately watching a patient dress or
- 428 undress, instead of affording a patient privacy for disrobing to the extent
- 429 dictated by circumstances on scene;
- 430 2. Any touching of a body part for any purpose other than appropriate
- 431 examination or treatment of a patient;
- 432 3. Inappropriate comments about or to a third party, including but not limited to
- 433 making sexual comments about their body or underclothing, making
- 434 sexualized or sexually demeaning comments, criticizing sexual orientation,
- 435 making comments about potential sexual performance of a patient during an
- 436 examination or consultation, unnecessarily requesting details of sexual
- 437 history or requesting information on sexual likes or dislikes;
- 438 4. Using the Ambulance Operator-patient relationship to solicit a date or initiate
- 439 a romantic relationship;
- 440 5. Initiation by an Ambulance Operator of conversation regarding sexual
- 441 problems, preferences, or fantasies of the Ambulance Operator, the sexual
- 442 preferences or fantasies of a patient, or sexual problems of a patient that are
- 443 not relevant to emergency medical treatment.

444 E. Additional Grounds for Licensing Actions Applicable for an Emergency Medical Dispatcher

445 (1) Legal Incompetence or Impairment

446 (a) Engaging in, or attempting to engage in, the use of any drug, narcotic or substance

447 that is illegal under state or federal law, or to the extent that the licensee's ability to

448 provide emergency medical dispatch services would be impaired, which includes, but

449 is not limited to;

450 (i) Providing emergency medical dispatch services while under the influence of drugs

451 or alcohol, whether or not the use of such substances is habitual;

452 (b) Any condition or impairment within the preceding 3 years, including, but not limited

453 to, substance use disorder or a mental, emotional, or nervous disorder or condition,

454 that in any way affects, or if untreated could impair, the licensee's ability to provide

455 emergency medical dispatch services;

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(2) Incompetent Professional Practice

- (a) Engaging in, or attempting to engage in, the following shall be considered Incompetent Professional Practice, which includes, but is not limited to:
- (i) The demonstration of an inability to respond appropriately to a client, patient or the general public as evidenced by:
 - 1. Causing a physical or emotional injury to a patient because of a violation of the applicable standard of care;
 - (ii) An inability to apply principles, skills or knowledge necessary to successfully carry out the practice for which the licensee is licensed as evidenced by:
 - 1. A deviation from the applicable standard of care or failure to perform emergency medical dispatch services in accordance with the most recent version of Emergency Medical Dispatch protocols, after quality assurance/improvement and/or remediative efforts;

(3) Unprofessional Conduct

- (a) Unprofessional conduct includes, but is not limited to, engaging in or attempting to engage in the following:
- (i) Inaccurate recording of material information in a patient or healthcare provider record;
 - (ii) Exploiting the Emergency Medical Dispatcher-caller relationship for the purpose of personal or financial gain by the licensee or by a third party including, but not limited to, promoting or selling services, goods, appliances or drugs;
 - (iii) Acting negligently or neglectfully when caring for or treating a patient;
 - (iv) Providing services at a level for which a person is not licensed, except:
 - 1. When the person is a dispatcher-in-training, under direct supervision of a Maine EMS licensed emergency medical dispatcher designated by the EMD Center director; and
 - a. For purposes of this paragraph, direct supervision means that the designated licensed emergency medical dispatcher is contemporaneously listening to the call for medical assistance being processed by the dispatcher-in-training and is able to assume control of the call and provide emergency medical dispatch, if the dispatcher-in training is unable to process the call in accordance with protocol.
 - 2. Processes calls using the emergency medical dispatch protocol after the dispatcher-in-training has attended the Maine EMS-approved certification course for emergency medical dispatch.
 - (v) Misrepresentation or concealment of material facts in connection with service(s) rendered, by commission or omission;
 - (vi) Delegation of practice, skills, or treatment to a person who is not licensed and qualified to perform said practice, skills, or treatment;
 - (vii) Abandonment or neglect of a patient;
 - (viii) Failing to comply with continuing education requirements for license renewal.

(4) Sexual Misconduct

- (a) Gross misconduct
- (i) Gross misconduct is any conduct by an Emergency Medical Dispatcher in the Work Environment that is sexual or may be reasonably interpreted as sexual, even when consented to between an Emergency Medical Dispatcher and a patient

- 502 or caller, between licensees, between an educator and a student, or between a
 503 mentor and a mentee. This includes, but is not limited to:
- 504 1. Sexual intercourse, genital to genital contact;
 - 505 2. Oral to genital contact;
 - 506 3. Oral to anal contact or genital to anal contact;
 - 507 4. Kissing;
 - 508 5. Any examination of a body part for any purpose other than appropriate
 509 examination or treatment during an established Emergency Medical
 510 Dispatcher-patient/caller interaction without a reported, suspected, or
 511 obvious injury or medical condition;
 - 512 6. Encouraging an individual to masturbate in the presence of the Emergency
 513 Medical Dispatcher or masturbation by an Emergency Medical Dispatcher in
 514 the presence of anyone else;
 - 515 7. Offering to provide practice-related services or supplies, such as medications,
 516 in exchange for sexual favors.

517 (b) Impropriety

- 518 (i) Impropriety is behaviors, gestures, or expressions by an Emergency Medical
 519 Dispatcher in the Work Environment that are seductive, sexually suggestive, or
 520 sexually demeaning, including but not limited to:
- 521 1. Disrobing that reflects a lack of respect for a patient or caller's privacy;
 522 deliberately watching a patient or caller dress or undress, instead of affording
 523 a patient or caller privacy for disrobing to the extent dictated by
 524 circumstances on scene;
 - 525 2. Inappropriate comments about or to a third party, including but not limited to
 526 making sexual comments about their body or underclothing, making
 527 sexualized or sexually demeaning comments, criticizing sexual orientation,
 528 making comments about potential sexual performance of a patient or caller,
 529 unnecessarily requesting details of sexual history or requesting information
 530 on sexual likes or dislikes;
 - 531 3. Using the Emergency Medical Dispatcher-patient or caller relationship to
 532 solicit a date or initiate a romantic relationship;
 - 533 4. Initiation by an Emergency Medical Dispatcher of conversation regarding
 534 sexual problems, preferences, or fantasies of the Emergency Medical
 535 Dispatcher, the sexual preferences or fantasies of a patient or caller, or sexual
 536 problems of a patient or caller that are not relevant to emergency medical
 537 dispatcher services.

538 F. Additional Grounds for Licensing Actions Applicable for an Instructor/Coordinator

539 (1) Fraud or Deceit

- 540 (a) Engaging in, or attempting to engage in, fraud or deceit in obtaining a license or in
 541 connection with service rendered within the scope of the license issued, includes but
 542 is not limited to:

- 543 (i) Falsification of any educational record.

544 (2) Legal Incompetence or Impairment

- 545 (a) Engaging in, or attempting to engage in, the use of any drug, narcotic or substance
 546 that is illegal under state or federal law, or to the extent that the licensee's ability to

547 provide emergency medical dispatch services would be impaired, which includes, but
548 is not limited to;

- 549 (i) Providing licensure course instruction while under the influence of drugs or
550 alcohol, whether or not the use of such substances is habitual;
- 551 (b) Any condition or impairment within the preceding 3 years, including, but not limited
552 to, substance use disorder or a mental, emotional or nervous disorder or condition,
553 that in any way affects, or if untreated could impair, the licensee's ability to provide
554 emergency medical services;

555 (3) Incompetent Professional Practice

556 (a) Engaging in, or attempting to engage in, the following shall be considered
557 Incompetent Professional Practice, which includes, but is not limited to:

- 558 (i) An inability to apply principles, skills or knowledge necessary to successfully
559 carry out the practice for which the licensee is licensed, evidence of which
560 includes, but is not limited to:
- 561 1. A deviation by the licensee, from the applicable educational standards for
562 entry-level instruction as outlined in the 2021 National Emergency Medical
563 Services Education Standards as published by the National Highway Traffic
564 Safety Administration, which is incorporated into this rule by reference and a
565 copy of which is available at the Office of Maine Emergency Medical
566 Services, Department of Public Safety, 45 Commerce Dr, Suite 1, Augusta,
567 ME 04333-0152;
 - 568 2. A deviation by the licensee, from the applicable educational standards for
569 entry-level instruction as outlined in the June 30, 2024, Maine Community
570 Paramedicine Education Standards, as published by the Office of Maine
571 Emergency Medical Services, which is incorporated into this rule by
572 reference and a copy of which is available at the Office of Maine Emergency
573 Medical Services, Department of Public Safety, 45 Commerce Dr, Suite 1,
574 Augusta, Me 04333-0152;
 - 575 3. A deviation by the licensee from the applicable guidelines for educating EMS
576 Instructors as outlined in the 2002 National Guidelines for Educating EMS
577 Instructors, as published by the National Highway Traffic Safety
578 Administration, which is incorporated into this rule by reference and a copy
579 of which is available at the Office of Maine Emergency Medical Services,
580 Department of Public Safety, 45 Commerce Dr, Suite 1, Augusta, ME 04333-
581 0152.

582 (4) Unprofessional Conduct

583 (a) Unprofessional conduct includes, but is not limited to, engaging in or attempting to
584 engage in the following:

- 585 (i) Diverting drugs, supplies or property of healthcare institutions or Maine EMS
586 Training Centers;
- 587 (ii) Possessing, obtaining, furnishing, or administering prescription drugs, equipment
588 or supplies to any person, including one's self, except as directed by a person
589 authorized by law to prescribe such items;
- 590 (iii) Providing instruction at a level for which a person is not licensed;
- 591 (iv) Providing instruction at a level for which a Training Center is not authorized or
592 licensed to provide.

- 593 (v) Delegation of educational instruction to a person who is not licensed and
 594 qualified to perform said educational instruction;
 595 (vi) Failure to provide program or course documentation when required or requested
 596 by Maine EMS.
 597 (vii) Failing to comply with continuing education requirements for license renewal.

598 (5) Sexual Misconduct

599 (a) Gross misconduct

- 600 (i) Gross misconduct is any conduct by an Instructor/Coordinator in the Work
 601 Environment that is sexual or may be reasonably interpreted as sexual, even
 602 when consented to between an Instructor/Coordinator and a student, between
 603 Training Center Staff, or between licensees. This includes, but is not limited to:
 604 1. Sexual intercourse, genital to genital contact;
 605 2. Oral to genital contact;
 606 3. Oral to anal contact or genital to anal contact;
 607 4. Kissing;
 608 5. Any touching or examination of a body part for any purpose other than
 609 appropriate examination or treatment during an established educational
 610 interaction.
 611 6. Encouraging an individual to masturbate in the presence of the
 612 Instructor/Coordinator or masturbation by an Instructor/Coordinator in the
 613 presence of anyone else;
 614 7. Offering to provide practice-related services or supplies, such as medications,
 615 in exchange for sexual favors.

616 (b) Impropriety

- 617 (i) Impropriety is behaviors, gestures, or expressions by an Instructor/Coordinator in
 618 the Work Environment that are seductive, sexually suggestive, or sexually
 619 demeaning, including but not limited to:
 620 1. Disrobing, draping practices, or touching of a student's clothing that reflect a
 621 lack of respect for a student's privacy or deliberately watching a student
 622 dress or undress;
 623 2. Inappropriate comments about or to a third party, including but not limited to
 624 making sexual comments about their body or underclothing, making
 625 sexualized or sexually demeaning comments, criticizing sexual orientation,
 626 inappropriately requesting details of sexual history, or requesting information
 627 on sexual likes or dislikes;
 628 3. Using the Instructor/Coordinator-student relationship to solicit a date or
 629 initiate a romantic relationship;
 630 4. Initiation by an Instructor/Coordinator of conversation regarding sexual
 631 problems, preferences, or fantasies of the Instructor/Coordinator, the sexual
 632 preferences or fantasies of a student, or sexual problems of a student.

633 G. Additional Grounds for Licensing Actions Applicable for a Community Paramedicine
 634 Licensee

- 635 (1) Any of the grounds separately identified in Section 3(2)(B) of this rule are also grounds
 636 for licensing actions against Community Paramedicine licensees, with the addition of the
 637 following:

638 (a) Incompetent professional practice

- 639 (i) Engaging in, or attempting to engage in, the following shall be considered
 640 Incompetent Professional Practice, which includes, but is not limited to:
 641 1. An inability to apply principles, skills or knowledge necessary to
 642 successfully carry out the practice for which the licensee is licensed as
 643 evidenced by:
 644 a. A failure to demonstrate entry-level competency with sufficient breadth
 645 and depth as outlined in the June 30, 2024, Maine Community
 646 Paramedicine Education Standards, which is incorporated into this rule
 647 by reference and a copy of which is available at the Office of Maine
 648 Emergency Medical Services, Department of Public Safety, 45
 649 Commerce Dr, Suite 1, Augusta, ME 04333-0152;

650 **3. Grounds for Licensure Action Against Ambulance Services, NTEMS, Emergency Medical**
 651 **Dispatch Centers, and Training Centers.**

652 A. The Licensing Board may take Disciplinary or Non-Disciplinary Action against any licensee
 653 whose conduct gives rise to a ground for licensing action. Grounds for Licensing Action
 654 include, but are not limited to, engaging in, or attempting to engage in: Fraud or Deceit,
 655 Unprofessional Conduct, or Incompetent Professional Practice, as defined in the applicable
 656 part below.

657 B. Grounds for Licensing Action Against All Licensees

658 (1) Fraud or Deceit

659 (a) Engaging in, or attempting to engage in, fraud or deceit in obtaining a license or in
 660 connection with service rendered within the scope of the license issued, includes but
 661 is not limited to:

- 662 (i) Obtaining a license or certification by fraud or deceit
 663 (ii) Willfully making a false statement in an application for a license or renewal of a
 664 license, or in any activity or documents intended to be used to satisfy a
 665 requirement for licensure;
 666 (iii) Obtaining a fee by fraud or deceit.
 667 (iv) Using or attempting to use as a valid license one that has been purchased,
 668 counterfeited, materially altered, or obtained by fraud, deceit, or
 669 misrepresentation.

670 (2) Unprofessional Conduct

671 (a) Unprofessional conduct includes, but is not limited to, engaging in or attempting to
 672 engage in the following:

- 673 (i) Obtaining a license by misrepresentation or by concealing material facts;
 674 (ii) Failure to comply with a Consent Agreement or Board Order;
 675 (iii) Acting in ways that are dangerous or injurious to the licensee or other persons;
 676 (iv) Renting, selling, bartering, or lending a license to another person;
 677 (v) Obtaining a fee by misrepresentation, including negligent misrepresentation;
 678 (vi) Disclosing or causing to be disclosed confidential information to an
 679 unauthorized person or using confidential information for personal or
 680 unauthorized financial benefit;
 681 (vii) Misrepresentation or concealment of material facts in connection with service(s)
 682 rendered, by commission or omission;
 683 (viii) Failure to participate in Maine EMS-approved quality assurance activities.

- 684 (ix) Failure to report a termination, separation, or resignation from an agency or
685 training center, related to the following grounds for licensure action:
686 1. Sexual Misconduct
687 2. Criminal Charge, Conviction, or Arrest
688 3. Incompetent Professional Practice
- 689 C. Additional Grounds for Licensing Action Against Ambulance Services and Non-Transporting
690 Emergency Medical Services
691 (1) Fraud or Deceit
692 (a) Engaging in, or attempting to engage in, fraud or deceit in obtaining a license or in
693 connection with service rendered within the scope of the license issued, includes but
694 is not limited to:
695 (i) Initiating the transport of a person, knowing that the person does not need to be
696 transported, or treating a person knowing the person does not need to be treated,
697 when the primary purpose of the action is to collect a fee or charge.
698 (ii) Aiding or abetting the practice of emergency care by a person not duly licensed
699 under this chapter who purports to be so.
- 700 (2) Incompetent Professional Practice
701 (a) Engaging in, or attempting to engage in, the following shall be considered
702 Incompetent Professional Practice, which includes, but is not limited to:
703 (i) A demonstration of an inability to respond appropriately to a client, patient or the
704 general public as evidenced by:
705 1. A failure to effect, or have effected, a response to an emergency medical call
706 when the emergency medical call is in the service's primary 9-1-1 response
707 area, as required within Chapter 3 of these rules;
- 708 (3) Unprofessional Conduct
709 (a) Unprofessional conduct includes, but is not limited to, engaging in or attempting to
710 engage in the following:
711 (i) Failing to provide patient information to a hospital or other health care facility in
712 response to an authorized request;
713 (ii) Acting negligently or neglectfully in conducting an ambulance or non-
714 transporting emergency medical service;
715 (iii) Possessing, obtaining, or furnishing prescription drugs, equipment, or supplies to
716 any person, except as directed by a person authorized by law to prescribe such
717 items;
718 (iv) Permitting the operation of a vehicle as an Ambulance or Emergency Medical
719 Services Vehicle when it is not licensed or authorized by the Board;
720 (v) Transferring a license from one vehicle to another without the consent of the
721 Board;
722 (vi) Providing emergency medical services at a level for which the service does not
723 have a valid license or permit for;
724 (vii) Permitting the practice of emergency medical treatment by a person not duly
725 licensed as an EMS Clinician, except those exempted from licensure as defined
726 within Chapter 2 of these rules;
727 (viii) Permitting, by a Ground Ambulance Service, the operation of an ambulance in
728 emergency mode or during the transport of a patient by an individual associated
729 with that service, who does not hold valid licensure as an EMS Clinician or

730 Ambulance Operator. This provision is not applicable to an individual operating
 731 while engaged in initial training consistent with the training requirements as set
 732 forth in Chapter 3 of these rules.

733 D. Additional Grounds for Licensing Action Against Emergency Medical Dispatch Centers

734 (1) Fraud or Deceit

735 (a) Engaging in, or attempting to engage in, fraud or deceit in obtaining a license or in
 736 connection with service rendered within the scope of the license issued, includes but
 737 is not limited to:

738 (i) Aiding or abetting the practice of emergency medical dispatch by a person not
 739 duly licensed under this chapter who purports to be so.

740 (2) Incompetent Professional Practice

741 (a) Engaging in, or attempting to engage in, the following shall be considered
 742 Incompetent Professional Practice, which includes, but is not limited to:

743 (i) A demonstration of an inability to respond appropriately to a client, patient or the
 744 general public as evidenced by:

- 745 1. A failure to provide emergency medical dispatch services on every
 746 emergency medical call;
- 747 2. A failure to provide emergency medical dispatch services in compliance with
 748 the Emergency Medical Dispatch Priority Reference System, as defined in 32
 749 M.R.S. § 85-A(1)(B).

750 (3) Unprofessional Conduct

751 (a) Engaging in, or attempting to engage in, the following is considered unprofessional
 752 conduct:

753 (i) Acting negligently or neglectfully in conducting an emergency medical dispatch
 754 center;

755 (ii) Providing emergency medical dispatch services without valid licensure;

756 (iii) Permitting the practice of emergency medical dispatch services by a person not
 757 licensed to provide those services, except;

- 758 1. When the person is a dispatcher-in-training, under direct supervision of a
 759 Maine EMS licensed emergency medical dispatcher designated by the EMD
 760 Center director; and

761 a. For purposes of this paragraph, direct supervision means that the
 762 designated licensed emergency medical dispatcher is contemporaneously
 763 listening to the call for medical assistance being processed by the
 764 dispatcher-in-training and is able to assume control of the call and
 765 provide emergency medical dispatch, if the dispatcher-in training is
 766 unable to process the call in accordance with protocol.

767 E. Additional Grounds for Licensing Action Against Training Centers

768 (1) Unprofessional Conduct

769 (a) Engaging in, or attempting to engage in, the following is considered unprofessional
 770 conduct:

771 (i) Providing instruction at a level for which a Training Center is not authorized or
 772 licensed to provide.

773 (ii) Violating any of the requirements of the Training Center Standards.

774 (iii) Failure to provide program or course documentation when required or requested
 775 by Maine EMS.

776 **SECTION 4. LICENSING ACTIONS FOR AN APPLICANT FOR EMS CLINICIAN,**
 777 **AMBULANCE OPERATOR, INSTRUCTOR/COORDINATOR, COMMUNITY**
 778 **PARAMEDIC, OR EMERGENCY MEDICAL DISPATCHER LICENSURE.**

779 **1. Applications for Initial Licensure**

780 **A. Application Review**

- 781 (1) Upon the receipt of a complete application for licensure for which there is no cause for
 782 concern related to a potential violation of Maine EMS's Rules and/or Statutes, Board
 783 Staff may issue the licensure application.
- 784 (2) Upon the receipt of a complete application for licensure that raises any concern related to
 785 a potential violation of Maine EMS's Rules and/or Maine State Statutes, Board Staff shall
 786 investigate.
- 787 (3) After such investigation that Board Staff deems appropriate, a complete application with
 788 concerns will either:
- 789 (a) Be scheduled for review by the Licensing Board; or
- 790 (b) Have the matter resolved by Board Staff, in accordance with these rules. Board Staff
 791 will prepare a report for the Licensing Board on matters it has resolved for their
 792 awareness.

793 **B. Notice to Applicant of Investigation**

- 794 (1) Upon the initiation of an investigation into an application, Board Staff shall send Notice
 795 of that Investigation to the applicant. This Notice should include a description of the
 796 concern investigated and an opportunity to provide additional information in writing.

797 **C. Review and Preliminary Finding(s) of Ground(s) for Licensing Action(s)**

- 798 (1) Notice of Scheduling shall be sent to the applicant that their application has been
 799 scheduled for review by the Licensing Board at least ten (10) business days prior to the
 800 date of the review. This notice shall include a statement reflecting the ability of an
 801 applicant to request a copy of the investigative file. Additional case information may be
 802 accepted from an applicant up to five (5) business days prior to the date the case is
 803 scheduled for review. A case scheduled for review may be rescheduled or postponed at
 804 the discretion of Board Staff.
- 805 (2) At the meeting during which an application has been scheduled for review, the Licensing
 806 Board shall consider the application, the concern, and additional information presented,
 807 and, based upon the information presented, determine by majority vote, if there are
 808 preliminary grounds for licensing action as outlined in this rule, Section 3(1), or under 32
 809 M.R.S. § 90-A(5). The Licensing Board shall identify the specific preliminary grounds
 810 for licensing action in its motion.
- 811 (3) The Licensing Board may table any application to a future meeting and request that
 812 Board Staff obtain additional information.
- 813 (4) If the Licensing Board, by majority vote, does not see any preliminary grounds for
 814 licensing action, the Licensing Board shall issue the license.
- 815 (5) After review, if the Licensing Board, by majority vote, sees preliminary grounds for a
 816 licensing action pursuant to Section 3(1) of this rule, or 32 M.R.S. § 90-A(5), the
 817 Licensing Board may issue licensure with Non-Disciplinary or Disciplinary Action,
 818 and/or refuse to issue licensure.

819 **D. Delegation of Authority to Board Staff**

- 820 (1) Upon the receipt of a complete application for licensure, Board Staff may issue licensure
 821 with a Non-Disciplinary Action in the following circumstances:

- 822 (a) Limited Delegation Order:
- 823 (i) The Licensing Board has issued an Order of Limited Delegation of Authority for
- 824 Board Staff to take Non-Disciplinary Action according to that order, provided
- 825 that the delegation has not expired.
- 826 (ii) A Limited Delegation of Authority issued by the Licensing Board must be
- 827 reviewed and renewed at least every three (3) years.
- 828 (iii) Board Staff cannot take Non-Disciplinary Action when:
- 829 1. The ground(s) for licensing action include Sexual Misconduct;
- 830 2. The ground(s) for licensing action include a declaration of or claim
- 831 pertaining to the EMS Clinician, Ambulance Operator,
- 832 Instructor/Coordinator, Community Paramedic, or Emergency Medical
- 833 Dispatcher, of legal incompetence that has not been legally terminated;
- 834 3. There is a related Non-Disciplinary Action on file with the Licensing Board;
- 835 4. There is a related Disciplinary Action on file with the Licensing Board.
- 836 (2) Upon receipt of a complete application for licensure, Board Staff may preliminarily deny
- 837 EMS Clinician, Emergency Medical Dispatcher, Instructor/Coordinator, Community
- 838 Paramedic, or Ambulance Operator licensure in the following circumstances:
- 839 (a) Revocation of EMS professional licensure in a foreign Jurisdiction or another U.S.
- 840 State;
- 841 (b) Surrender in lieu of disciplinary action and/or investigation of EMS professional
- 842 licensure in a foreign Jurisdiction or another U.S. State;
- 843 (3) If Board Staff deny licensure, they must provide a written decision that reflects the
- 844 grounds for the denial and that informs the applicant of the right to appeal the decision to
- 845 the Licensing Board in accordance with 32 M.R.S. § 90-A(10) (hereafter called a
- 846 "Preliminary Notice of Denial").
- 847 (4) A person wishing to appeal the decision of Board Staff to deny licensure may appeal this
- 848 decision to the Licensing Board. If no appeal is requested within twenty-one (21)
- 849 business days of the date of service of the Preliminary Notice Denial, the Board Staff's
- 850 decision becomes final agency action appealable to the Superior Court in accordance with
- 851 the Maine Administrative Procedure Act, Title 5 Chapter 375 Subchapter 7. For an appeal
- 852 to the Board to be considered, the person must:
- 853 (a) Be the applicant or their authorized representative;
- 854 (b) Submit a written request for a hearing before the board;
- 855 (c) This written request for hearing must be received by the Office of Maine Emergency
- 856 Medical Services within twenty-one (21) business days of the date the Preliminary
- 857 Notice Denial is sent to the applicant.
- 858 (d) Service of the request for hearing is complete when received by Maine EMS by mail,
- 859 in-hand delivery, or electronic mail. A request for hearing may be accepted at the
- 860 discretion of the Licensing Board after this timeframe if the petitioner later provides
- 861 satisfactory justification as to why a timely submission was not made.
- 862 (5) The Board Staff's decision to refuse to issue licensure stands until the Licensing Board
- 863 issues a decision to uphold, modify, or overrule the staff's decision.
- 864 E. Non-Disciplinary Action
- 865 (1) Non-Disciplinary Action constitutes a Letter of Guidance, and is used when the Board
- 866 does not see evidence of potential violations of Board law or rule, or the matter does not

867 rise to a level requiring Disciplinary Action. A Letter of Guidance may be placed on file
868 for a period of time not to exceed ten (10) years.

869 (2) The Licensing Board may resolve a complaint with Non-Disciplinary Action **except**
870 **when:**

871 (a) The ground(s) for licensing action include Sexual Misconduct;

872 (b) The ground(s) for licensing action include a declaration of or claim pertaining to the
873 EMS Clinician, Ambulance Operator, Instructor/Coordinator, Community Paramedic,
874 or Emergency Medical Dispatcher, of legal incompetence that has not been legally
875 terminated;

876 (c) There is a related Non-Disciplinary Action on file with the Licensing Board;

877 (d) There is a related Disciplinary Action on file with the Licensing Board.

878 F. Disciplinary Action

879 (1) Any of the following sanctions may be taken with the issuance of the licensure
880 application:

881 (a) Execution of a Consent Agreement that includes any or all of the following:

882 (i) The Issuance of a Warning, Censure, or Reprimand;

883 1. Each warning, censure, or reprimand must be based upon violations of
884 different applicable laws, rules, or conditions of licensure, or upon separate
885 instances of actionable conduct or activity.

886 (ii) Conditions of Probation;

887 1. Probation may be for a time period that the Licensing Board determines
888 appropriate.

889 2. Probation may include conditions such as: additional continuing education;
890 medical, psychiatric or mental health consultations or evaluations; mandatory
891 professional or occupational supervision; and other conditions as the
892 Licensing Board determines appropriate.

893 3. Costs incurred in the performance of terms of probation are borne by the
894 licensee.

895 (iii) Any other remedy, penalty, fine, or cost recovery that is otherwise available by
896 law, even if only in the jurisdiction of the District Court.

897 (2) Denial of Licensure Issuance

898 (a) A refusal to issue licensure may only be predicated upon the grounds cited in Section
899 3 of this rule or upon grounds found in 32 M.R.S. § 90-A(5).

900 G. Appeal of Non-Disciplinary Action with Issuance of Licensure

901 (1) A person wishing to appeal the decision of Board Staff to issue licensure with Non-
902 Disciplinary Action may appeal this decision to the Licensing Board. If a petition for
903 appeal does not meet the criteria for consideration below, or if no petition is submitted,
904 the Board Staff's decision becomes final agency action appealable to the Superior Court
905 in accordance with the Maine Administrative Procedure Act, 5 M.R.S. Chapter 375
906 Subchapter 7. For an appeal to the Board to be considered, the person must:

907 (a) Be the same individual or their authorized representative, against whom the Non-
908 Disciplinary action was taken;

909 (b) Submit a written petition; such petition should have sufficient information to explain
910 the rationale for the appeal, including, but not limited to:

911 (i) The name of the individual against whom the action was taken;

- 912 (ii) The specific nature of the appeal (e.g., an appeal to reduce the time frame of the
913 action, or an appeal against the action in its entirety); and
914 (iii) The rationale supporting the grant of the appeal by the Licensing Board.
915 (c) This written petition must be received by the Office of Maine Emergency Medical
916 Services within twenty-one (21) business days of the date the action was taken.
917 Service of the petition is complete when received by Maine EMS by mail, in-hand
918 delivery, or electronic mail. A petition may be accepted at the discretion of the
919 Licensing Board after this timeframe if the petitioner later provides satisfactory
920 justification as to why a timely submission was not made.
- 921 (2) The Board Staff's decision to take Non-Disciplinary Action stands until the Licensing
922 Board issues a decision to uphold, modify, or revoke the staff's decision.
- 923 (3) The Licensing Board will review the action and information provided to determine if the
924 Non-Disciplinary Action will be upheld, modified, or revoked.
- 925 (4) The Licensing Board, at its discretion, may entertain additional information or argument
926 from the parties.
- 927 (5) The decision of the Board shall be in writing or stated on the record and contain or reflect
928 the Board's reasoning in a manner sufficient to inform the parties and the public of the
929 basis for the Board's decision.
- 930 (6) The decision of the Board is considered Final Agency Action, appealable to the Superior
931 Court in accordance with the Maine Administrative Procedure Act, 5 M.R.S. Chapter 375
932 Subchapter 7.

933 2. Applications for Renewal of Licensure

- 934 A. Upon the receipt of a complete application for licensure renewal where there is a pending
935 complaint or that raises any concern related to a potential violation of Maine EMS's Rules
936 and/or Statutes, Board Staff shall proceed in accordance with Section 4 of this rule.
- 937 B. The application will remain pending until the pending complaint or concern is resolved.
- 938 C. An applicant who has submitted a complete application for licensure renewal prior to the
939 expiration date of their licensure, and whose application is pending due to a pending
940 complaint or a concern related to a potential violation of Maine EMS's Rules and/or Statutes,
941 shall not have their existing licensure expire until the application has been finally determined
942 by the Licensing Board or Board Staff pursuant to Title 5, Chapter 375.
- 943 D. Delegation of Authority to Board Staff
- 944 (1) Upon the receipt of a complete application for licensure, Board Staff may issue licensure
945 with a Non-Disciplinary Action in the following circumstances:
- 946 (a) Limited Delegation Order:
- 947 (i) The Licensing Board has issued an Order of Limited Delegation of Authority for
948 Board Staff to take Non-Disciplinary Action according to that order, provided
949 that the delegation has not expired.

950 SECTION 5. Licensing Actions for EMS Clinician, Emergency Medical Dispatcher,

951 Instructor/Coordinator, Community Paramedicine, and Ambulance Operator Licensees

952 1. Investigation

- 953 A. A complaint against an EMS Clinician's, Emergency Medical Dispatcher's,
954 Instructor/Coordinator, Community Paramedicine, or Ambulance Operator's licensure shall
955 be investigated by the Licensing Board or Board Staff in accordance with 32 M.R.S. § 90-
956 A(1).

957 2. Notice of Complaint

- 958 A. Board Staff shall notify an EMS Clinician, Emergency Medical Dispatcher,
959 Instructor/Coordinator, Community Paramedicine, or Ambulance Operator licensee in
960 accordance with 32 M.R.S. § 90-A(2).
961 (1) Initial Pertinent Information Necessary to send a Notice is:
962 (a) A copy of the concern expressed or the information underlying the concern.
963 B. Notice shall be in writing. Service of the Notice shall be complete upon the licensee upon
964 mailing to the licensee or the licensee's attorney or by in-hand delivery to the licensee.
965 3. Response to Complaint
966 A. If the licensee wishes to contest the complaint or dispute the information that forms the basis
967 of the complaint, the licensee must respond in writing to the Licensing Board within thirty
968 (30) calendar days of service of Notice of Complaint. Service of the licensee's response is
969 complete when received by Maine EMS by mail, in-hand delivery, or electronic mail.
970 B. If the licensee does not wish to contest the complaint or dispute the information that forms
971 the basis of the complaint but does wish to provide additional information or context for
972 consideration, the licensee must respond in writing to the Licensing Board within thirty (30)
973 calendar days of service of Notice of Complaint. Service of the licensee's response is
974 complete when received by Maine EMS by mail, in-hand delivery, or electronic mail. If a
975 licensee responds in this manner, the provisions of paragraph C, below, do not apply.
976 C. If no response to the complaint from the licensee is received in writing within thirty (30)
977 calendar days, the matter will be presented to the Licensing Board without the licensee's
978 response.
979 4. Preliminary Review of a Concern of Physical or Mental Impairment by the Licensing Board
980 A. Any investigation involving a complaint where there is a concern, or where information
981 generates a concern during the investigation of a complaint, of a mental illness that may be
982 interfering with the competent practice of emergency medical services or emergency medical
983 dispatcher services, or from the use of intoxicants or drugs to an extent that they are
984 preventing the licensee from practicing competently and with safety to patients shall, after
985 appropriate investigation by Board Staff, be brought before the Licensing Board for
986 consideration of an order for the licensee to submit to an examination pursuant to 32 M.R.S. §
987 90-A(9).
988 B. Any investigation involving a complaint where there is a concern, or where information
989 generates a concern during the investigation of a complaint, that a licensee may have
990 diminished physical capability to an extent that it is preventing the licensee from practicing
991 competently and with safety to patients, after appropriate investigation by Board Staff, shall
992 be brought before the Licensing Board for consideration of an order for the licensee to submit
993 to an examination pursuant to 32 M.R.S. § 90-A(9).
994 C. The ability to order a licensee to submit to an examination under this section may not be
995 delegated by the Licensing Board.
996 D. The Licensing Board, or as delegated Board Staff, shall select the evaluator as appropriate for
997 the examination ordered.
998 E. All costs of any examination are the responsibility of the licensee; a licensee may petition the
999 Licensing Board to waive the expense on the affirmative demonstration of hardship.
1000 5. Review and Preliminary Finding(s) of Ground(s) for Licensing Action(s)
1001 A. After Board Staff has determined that sufficient information have been obtained, a complaint
1002 shall be scheduled for review by the Licensing Board.

- 1003 B. Notice of Scheduling shall be sent to the licensee under investigation that their case has been
 1004 scheduled for review by the Licensing Board at least ten (10) business days prior to the date
 1005 of the review. This notice shall include a statement reflecting the ability of a licensee to
 1006 request a copy of the investigative file. Additional case information may be accepted from a
 1007 licensee up to five (5) business days prior to the date the case is scheduled for review. A case
 1008 scheduled for review may be rescheduled or postponed at the discretion of Board Staff.
- 1009 C. At the meeting during which a complaint has been scheduled for review, the Licensing Board
 1010 shall consider the complaint and, based upon the information presented, determine by
 1011 majority vote, if there are preliminary grounds for licensing action as outlined in this rule,
 1012 Section 3, or under 32 M.R.S. §90-A(5). The Licensing Board shall identify the specific
 1013 preliminary grounds for licensing action in its motion.
- 1014 (1) The Licensing Board may table any complaint to a future meeting and request that Board
 1015 Staff obtain additional information.
- 1016 D. If the Licensing Board, by majority vote, sees there are no preliminary grounds for licensing
 1017 action, the complaint shall be dismissed, and a Notice of Dismissal shall be sent to the
 1018 complainant, if any.
- 1019 E. If the Licensing Board sees that there are preliminary grounds for licensing action, the
 1020 complaint shall be scheduled for review at the Licensing Board's next meeting for
 1021 determination of appropriate disciplinary or non-disciplinary action. This provision may be
 1022 waived on the motion of any member present and voting, and the Licensing Board may
 1023 proceed directly into the preliminary determination of Disciplinary or Non-Disciplinary
 1024 Action.
- 1025 F. A motion to reconsider the preliminary grounds for licensing action may only be made during
 1026 the meeting in which the complaint is reviewed for preliminary grounds for licensing action
 1027 and may only be made by a member present and voting on the prevailing side of the initial
 1028 motion. The motion to reconsider must pass by majority vote, and there may be no
 1029 subsequent reconsideration of the same preliminary ground for licensing action.
- 1030 6. Preliminary Determination of Disciplinary or Non-Disciplinary Action
- 1031 A. At the meeting for which a complaint with preliminary ground(s) for licensing action is
 1032 scheduled for determination of appropriate Disciplinary or Non-Disciplinary Action, or upon
 1033 immediate consideration in accordance with these rules, the Licensing Board shall determine
 1034 by majority vote, appropriate action in accordance with 32 M.R.S. § 90-A (7) & (8), and these
 1035 rules. This action may consist of:
- 1036 (1) Non-Disciplinary Action
- 1037 (a) Non-Disciplinary Action constitutes a Letter of Guidance and is used when the Board
 1038 does not see evidence of potential violations of Board law or rule, or the matter does
 1039 not rise to a level requiring Disciplinary Action. A Letter of Guidance may be placed
 1040 on file for a period of time not to exceed ten (10) years.
- 1041 (b) The Licensing Board may resolve a complaint with Non-Disciplinary Action **except**
 1042 **when:**
- 1043 (i) The ground(s) for licensing action include Sexual Misconduct;
- 1044 (ii) The ground(s) for licensing action include a declaration of or claim pertaining to
 1045 the EMS Clinician of legal incompetence that has not been legally terminated;
- 1046 (iii) There is a related Non-Disciplinary Action on file with the Licensing Board;
- 1047 (iv) There is a related Disciplinary Action on file with the Licensing Board.
- 1048 (2) Disciplinary Action

- 1049 (a) The Licensing Board may resolve a complaint with Disciplinary Action if the Board
 1050 determines there are preliminary grounds for action pursuant to Section 3 of this rule,
 1051 or pursuant to 32 M.R.S. § 90-A(5).
 1052 (b) Any of the following sanctions may be taken pursuant to 32 M.R.S. § 90-A(7).
 1053 (i) Execution of a Consent Agreement that includes any or all of the following:
 1054 1. The issuance of a Warning, Censure, or Reprimand
 1055 a. Each warning, censure, or reprimand must be based upon violations of
 1056 different applicable laws, rules, or conditions of licensure, or upon
 1057 separate instances of actionable conduct or activity.
 1058 2. Conditions of probation
 1059 a. Probation may be imposed for a time period that the Licensing Board
 1060 determines appropriate.
 1061 b. Probation may include conditions such as: additional continuing
 1062 education; medical, psychiatric or mental health consultations or
 1063 evaluations; mandatory professional or occupational supervision; and
 1064 other conditions as the Licensing Board determines appropriate.
 1065 c. Costs incurred in the performance of terms of probation are borne by the
 1066 licensee.
 1067 3. Suspension of licensure
 1068 a. Suspensions may be set to run consecutively or concurrently.
 1069 b. The execution of all or any portion of a term of suspension may be
 1070 stayed pending successful completion of conditions of probation.
 1071 4. Surrender of Licensure
 1072 5. Revocation of Licensure
 1073 6. Any other remedy, penalty, fine, or cost recovery that is otherwise available
 1074 by law, even if only in the jurisdiction of the District Court.
 1075 (ii) Imposition of a suspension of licensure for up to 90 calendar days for each
 1076 violation or for each instance of actionable conduct or activity
 1077 1. Suspensions may be set to run consecutively or concurrently.
 1078 (iii) Imposition of a civil penalty of up to \$1,500.00 for each violation of applicable
 1079 laws, rules, and conditions of licensure or for each instance of actionable conduct
 1080 or activity.
 1081 (c) All sanctions must include notice to an EMS Clinician, Ambulance Operator,
 1082 Instructor/Coordinator, Community Paramedicine-licensee, or Emergency Medical
 1083 Dispatcher of their right to request an adjudicatory hearing.
 1084 7. Delegation
 1085 A. Board Staff may resolve a case with Non-Disciplinary Action in the following circumstances:
 1086 (1) Limited Delegation Order
 1087 (a) The Licensing Board has issued an Order of Limited Delegation of Authority for
 1088 Board Staff to take Non-Disciplinary Action according to that order, provided that the
 1089 delegation has not expired.
 1090 B. Board Staff may resolve a case with Disciplinary Action in the following circumstances:
 1091 (1) Voluntary Surrender of Licensure
 1092 (a) If a licensee seeks to voluntarily surrender licensure in lieu of further proceedings,
 1093 Board Staff are authorized to negotiate and enter into a Consent Agreement on behalf
 1094 of the Licensing Board, with stipulations as necessary to ensure the protection of the

1095 public health and safety and the rehabilitation or education of the licensee seeking
 1096 surrender.

1097 8. Appeal of Non-Disciplinary Action

1098 A. A person wishing to appeal the decision of Board Staff to take Non-Disciplinary Action may
 1099 appeal this decision to the Licensing Board. If a petition for appeal does not meet the criteria
 1100 for consideration below, or if no petition is submitted, the Board Staff's decision becomes
 1101 final agency action appealable to the Superior Court in accordance with the Maine
 1102 Administrative Procedure Act, 5 M.R.S. Chapter 375 Subchapter 7. For an appeal to the
 1103 Licensing Board to be considered, the person must:

- 1104 (1) Be the same individual or their authorized representative, against whom the Non-
 1105 Disciplinary Action was taken, or the original complainant in the matter, or their
 1106 authorized representative.
- 1107 (2) Submit a written petition; such petition should have sufficient information to explain the
 1108 rationale for the appeal, including but not limited to:
- 1109 (a) The name of the individual against whom the action was taken;
- 1110 (b) The specific nature of the appeal (e.g., an appeal to take disciplinary action, an appeal
 1111 to reduce the time frame of the action, or an appeal against the action in its entirety);
 1112 and
- 1113 (c) The rationale that supports the Licensing Boards' grant of the appeal.
- 1114 (3) This written petition must be received by the Office of Maine Emergency Medical
 1115 Services within twenty-one (21) business days of the date the action was taken. Service
 1116 of the petition is complete when received by Maine EMS by mail, in-hand delivery, or
 1117 electronic mail. A petition may be accepted at the discretion of the Licensing Board after
 1118 this timeframe if the petitioner later provides satisfactory justification as to why a timely
 1119 submission was not made.

1120 B. The Board Staff's decision to take Non-Disciplinary Action stands until the Licensing Board
 1121 issues a decision to uphold, modify, or overrule the staff's decision.

1122 C. The Licensing Board, at its discretion, may entertain additional information or argument from
 1123 the parties.

1124 D. The decision of the Licensing Board shall be in writing or stated on the record and contain or
 1125 reflect the Board's reasoning in a manner sufficient to inform the parties and the public of the
 1126 basis for the Licensing Board's decision.

1127 9. Adjudicatory Hearing

1128 A. In the case where the discipline involves nonrenewal of licensure, suspension, or the
 1129 imposition of a civil penalty, an EMS Clinician, Ambulance Operator, Instructor/Coordinator,
 1130 Community Paramedicine-licensee, or Emergency Medical Dispatcher who fails to make a
 1131 request for a hearing within thirty (30) calendar days from receipt of the Licensing Board's
 1132 Notice of Preliminary Action, waives their right to request a hearing, and the Disciplinary
 1133 Action sought by the Licensing Board is imposed and becomes final agency action,
 1134 appealable pursuant to 5 M.R.S. Ch. 375, Subchapter 7. A request for a hearing must be
 1135 made in writing and must be received by the Office of Maine EMS via electronic mail,
 1136 certified mail, or in-person delivery.

1137 B. If the Board seeks to impose discipline other than nonrenewal, suspension, or the imposition
 1138 of a civil penalty, and a Consent Agreement is not executed resolving the complaint, the
 1139 matter shall be scheduled for an adjudicatory hearing.

1140 10. Notification of Final Agency Action

- 1141 A. Upon Disciplinary Action becoming Final Agency Action, Board Staff shall send a notice
 1142 containing only publicly available information to the complainant, if any.
 1143 B. Upon Disciplinary Action becoming Final Agency Action, Board Staff shall send only
 1144 publicly available information to the National Practitioner Data Bank as required by federal
 1145 law.
 1146 C. Upon Disciplinary Action becoming Final Agency Action, Board Staff shall send publicly
 1147 available information to any State Jurisdiction, or National Certifying Body that the licensee
 1148 is reasonably believed to hold licensure or certification with.
 1149 D. Upon Disciplinary Action becoming Final Agency Action, Board Staff shall send only
 1150 publicly available information to any Maine-EMS licensed service, or Emergency Medical
 1151 Dispatch Center that the licensee is affiliated with.
 1152

1153 **SECTION 6. LICENSING ACTIONS FOR AMBULANCE SERVICES, NON-TRANSPORTING**
 1154 **EMERGENCY MEDICAL SERVICES, TRAINING CENTERS, OR EMERGENCY**
 1155 **MEDICAL DISPATCH CENTER.**

- 1156 1. Investigation
 1157 A. A complaint against an Ambulance Service, a Non-transporting Emergency Medical Service
 1158 (“NTEMS”), Training Center, or Emergency Medical Dispatcher Center’s licensure shall be
 1159 investigated by the Licensing Board or Board Staff in accordance with 32 M.R.S. § 90-A(1).
 1160 2. Notice of Complaint
 1161 A. Board Staff shall notify an Ambulance Service, NTEMS, Training Center, or Emergency
 1162 Medical Dispatch Center in accordance with 32 M.R.S. § 90-A(2).
 1163 (1) Initial Pertinent Information Necessary to send Notice is:
 1164 (a) A copy of the concern expressed or the information underlying the concern.
 1165 B. Notice shall be in writing. Service of the Notice shall be complete upon the licensee upon
 1166 mailing to the licensee or the licensee’s attorney, by in-hand delivery to the licensee, or by
 1167 delivery to the licensee’s principal office or place of business.
 1168 3. Response to Complaint
 1169 A. If the licensee wishes to contest the complaint or dispute the information that forms the basis
 1170 of the complaint, the licensee must respond in writing to the Licensing Board within thirty
 1171 (30) calendar days of service of Notice of Complaint. Service of the licensee’s response is
 1172 complete when received by Maine EMS by mail, in-hand delivery, or electronic mail.
 1173 B. If the licensee does not wish to contest the complaint or dispute the information that forms
 1174 the basis of the complaint but does wish to provide additional information or context for
 1175 consideration, the licensee must respond in writing to the Licensing Board within thirty (30)
 1176 calendar days of service of Notice of Complaint. Service of the licensee’s response is
 1177 complete when received by Maine EMS by mail, in-hand delivery, or electronic mail. If a
 1178 licensee responds in this manner, the provisions of paragraph C, below, do not apply.
 1179 C. If no response to the complaint from the licensee is received in writing within thirty (30)
 1180 calendar days, the matter will be presented to the Licensing Board without the licensee’s
 1181 response.
 1182 4. Review and Preliminary Finding(s) of Ground(s) for Licensing Action(s)
 1183 A. After Board Staff has determined that sufficient information has been obtained, a complaint
 1184 shall be scheduled for review by the Licensing Board.
 1185 B. Notice of Scheduling shall be sent to the licensee under investigation that their case has been
 1186 scheduled for review by the Licensing Board at least ten (10) business days prior to the date

1187 of the review. This notice shall include a statement reflecting the ability of a licensee to
 1188 request a copy of the investigative file. Additional case information may be accepted from a
 1189 licensee up to five (5) business days prior to the date the case is scheduled for review. A case
 1190 scheduled for review may be rescheduled or postponed at the discretion of Board Staff.

- 1191 C. At the meeting during which a complaint has been scheduled for review, the Licensing Board
 1192 shall consider the complaint and, based upon the information presented, determine by
 1193 majority vote of members present and voting, if there are preliminary grounds for licensing
 1194 action as outlined in this rule, Section 3, or under 32 M.R.S. §90-A(5). The Licensing Board
 1195 shall identify the specific preliminary grounds for licensing action in its motion.

1196 (1) The Licensing Board may table any complaint to a future meeting and request that Board
 1197 Staff obtain additional information.

- 1198 D. If the Licensing Board, by majority vote, sees that there are no preliminary grounds for
 1199 licensing action, the complaint shall be dismissed, and a Notice of Dismissal shall be sent to
 1200 the complainant, if any.

- 1201 E. If the Licensing Board sees that there are preliminary grounds for licensing action, the
 1202 complaint shall be scheduled for review at the Licensing Board's next meeting for
 1203 determination of appropriate Disciplinary or Non-Disciplinary Action. This provision may be
 1204 waived on the motion of any member present and voting, and the Licensing Board may
 1205 proceed directly into the preliminary determination of Disciplinary or Non-Disciplinary
 1206 Action.

- 1207 F. A motion to reconsider the preliminary grounds for licensing action may only be made during
 1208 the meeting in which the complaint is reviewed for preliminary grounds for licensing action
 1209 and may only be made by a member present and voting on the prevailing side of the initial
 1210 motion. The motion to reconsider must pass by majority vote of those present and voting, and
 1211 there may be no subsequent reconsideration of the same preliminary ground for licensing
 1212 action.

1213 5. Preliminary Determination of Disciplinary or Non-Disciplinary Action

- 1214 A. At the meeting for which a complaint with preliminary ground(s) for licensing action is
 1215 scheduled for determination of appropriate disciplinary or non-disciplinary action, or upon
 1216 immediate consideration in accordance with these rules, the Licensing Board shall determine
 1217 by majority vote of those present and voting, appropriate action in accordance with 32 M.R.S.
 1218 § 90-A (7) & (8), and these rules. This action may consist of:

1219 (1) Non-Disciplinary Action

- 1220 (a) Non-Disciplinary Action constitutes a Letter of Guidance and is used when the Board
 1221 does not see evidence of potential violations of Board law or rule or the matter does
 1222 not rise to a level requiring Disciplinary Action.. A Letter of Guidance may be placed
 1223 on file for a period of time not to exceed ten (10) years.

- 1224 (b) The Licensing Board may resolve a complaint with Non-Disciplinary Action **except**
 1225 **when:**

- 1226 (i) There is a related Non-Disciplinary Action on file with the Licensing Board;
 1227 (ii) There is a related Disciplinary Action on file with the Licensing Board.

1228 (2) Disciplinary Action

- 1229 (a) The Licensing Board may resolve a complaint with Disciplinary Action if grounds
 1230 for action are found pursuant to Section 3 of this Rule or pursuant to 32 M.R.S. § 90-
 1231 A(5).

- 1232 (b) Any of the following sanctions may be taken pursuant to 32 M.R.S. § 90-A(7):

- 1233 (i) Execution of a Consent Agreement that includes any or all of the following:
 1234 1. The issuance of a Warning, Censure, or Reprimand;
 1235 a. Each warning, censure, or reprimand must be based upon violations of
 1236 different applicable laws, rules, or conditions of licensure, or upon
 1237 separate instances of actionable conduct or activity.
 1238 2. Conditions of probation;
 1239 a. Probation may be imposed for a time period that the Licensing Board
 1240 determines appropriate.
 1241 b. Probation may include conditions such as: additional continuing
 1242 education; medical, psychiatric or mental health consultations or
 1243 evaluations; mandatory professional or occupational supervision; and
 1244 other conditions as the Licensing Board determines appropriate.
 1245 c. Costs incurred in the performance of terms of probation are borne by the
 1246 licensee.
 1247 3. Suspension of licensure
 1248 a. Suspensions may be set to run consecutively or concurrently.
 1249 b. The execution of all or any portion of a term of suspension may be
 1250 stayed pending successful completion of conditions of probation.
 1251 c. Prior to seeking to impose a suspension of licensure of an Emergency
 1252 Medical Dispatch Center, the Licensing Board shall table the matter and
 1253 contact the Emergency Services Communication Bureau within the
 1254 Public Utilities Commission for input on the effect of such an action on
 1255 the E-9-1-1 system.
 1256 d. Prior to seeking to impose a suspension of licensure of an Ambulance
 1257 Service or NTEMS, the Licensing Board shall table the matter and
 1258 contact the Emergency Medical Services Board for input on the effect of
 1259 such action on the Maine EMS system.
 1260 4. Surrender or Revocation of Licensure.
 1261 a. Prior to seeking to impose a surrender or revocation of licensure of an
 1262 Emergency Medical Dispatch Center, the Licensing Board shall table the
 1263 matter and contact the Emergency Services Communication Bureau
 1264 within the Public Utilities Commission for input on the effect of such an
 1265 action on the E-9-1-1 system.
 1266 b. Prior to seeking to impose a surrender or revocation of licensure of an
 1267 Ambulance Service, NTEMS, or Training Center, the Licensing Board
 1268 shall table the matter and contact the Emergency Medical Services Board
 1269 for input on the effect of such action on the Maine EMS system.
 1270 5. Any other remedy, penalty, fine, or cost recovery that is otherwise available
 1271 by law, even if only in the jurisdiction of the District Court.
 1272 (ii) Impose a suspension of licensure for up to 90 calendar days for each violation or
 1273 for each instance of actionable conduct or activity;
 1274 1. Suspensions may be set to run consecutively or concurrently.
 1275 2. Prior to seeking to impose a suspension of licensure of an Emergency
 1276 Medical Dispatch Center, the Licensing Board shall table the matter and
 1277 contact the Emergency Services Communication Bureau within the Public
 1278 Utilities Commission for input on the effect of such an action on the E-9-1-1
 1279 system.

- 1280 3. Prior to seeking to impose a suspension of licensure of an Ambulance
 1281 Service, NTEMS, or Training Center, the Licensing Board shall table the
 1282 matter and contact the Emergency Medical Services Board for input on the
 1283 effect of such action on the Maine EMS system.
- 1284 (iii) Impose a civil penalty of up to \$1,500.00 for each violation of applicable laws,
 1285 rules, and conditions of licensure or for each instance of actionable conduct or
 1286 activity;
- 1287 (c) All sanctions must include notice to an Ambulance Service, NTEMS, Training
 1288 Center, or Emergency Medical Dispatch Center of their right to request an
 1289 adjudicatory hearing.
- 1290 6. Delegation
- 1291 A. Board Staff may resolve a case with Non-Disciplinary Action in the following circumstances:
- 1292 (1) Limited Delegation Order:
- 1293 (a) The Licensing Board has issued an Order of Limited Delegation of Authority for
 1294 Board Staff to take Non-Disciplinary Action according to that order, provided that the
 1295 delegation has not expired.
- 1296 7. Appeal of Non-Disciplinary Action
- 1297 A. A person wishing to appeal the decision of Board Staff to take Non-Disciplinary Action may
 1298 appeal this decision to the Licensing Board. If a petition for appeal does not meet the criteria
 1299 for consideration below, or if no petition is submitted, the Board Staff's decision becomes
 1300 final agency action appealable to the Superior Court in accordance with the Maine
 1301 Administrative Procedure Act, 5 M.R.S. Chapter 375 Subchapter 7. For an appeal to the
 1302 Licensing Board to be considered, the person must:
- 1303 (1) Be the same Ambulance Service, NTEMS, Training Center, or Emergency Medical
 1304 Dispatch Center, or their authorized representative, against whom the Non-Disciplinary
 1305 Action was taken, or the original complainant in the matter, or their authorized
 1306 representative;
- 1307 (2) Submit a written petition; such petition should have sufficient information to explain the
 1308 rationale for the appeal, including but not limited to:
- 1309 (a) The name of the Ambulance Service, NTEMS, Training Center, or Emergency
 1310 Medical Dispatch Center, against whom the action was taken;
- 1311 (b) The specific nature of the appeal (e.g., an appeal to take disciplinary action, an appeal
 1312 to reduce the time frame of the action, or an appeal against the action in its entirety);
 1313 and
- 1314 (c) The rationale that supports the Licensing Boards' grant of the appeal.
- 1315 (3) This written petition must be received by the Office of Maine Emergency Medical
 1316 Services within twenty-one (21) business days of the date the action was taken. Service
 1317 of the petition is complete when received by Maine EMS by mail, in-hand delivery, or
 1318 electronic mail. A petition may be accepted at the discretion of the Licensing Board after
 1319 this timeframe if the petitioner later provides satisfactory justification as to why a timely
 1320 submission was not made.
- 1321 B. The Board Staff's decision to take Non-Disciplinary Action stands until the Licensing Board
 1322 issues a decision to uphold, modify, or overrule the staff's decision.
- 1323 C. The Licensing Board, at its discretion, may entertain additional information or argument from
 1324 the parties.

- 1325 D. The decision of the Licensing Board shall be in writing or stated on the record and contain or
 1326 reflect the Board’s reasoning in a manner sufficient to inform the parties and the public of the
 1327 basis for the Licensing Board’s decision.
- 1328 8. Adjudicatory Hearing
- 1329 A. In the case where the discipline involves nonrenewal of licensure, suspension, or the
 1330 imposition of a civil penalty, an Ambulance Service, NTEMS, or Emergency Medical
 1331 Dispatch Center who fails to make a request for a hearing within thirty (30) calendar days
 1332 from receipt of the Licensing Board’s Notice of Preliminary Action, waives their right to
 1333 request a hearing, and the Disciplinary Action sought by the Licensing Board is imposed and
 1334 becomes final agency action, appealable pursuant to 5 M.R.S. Ch. 375, Subchapter 7. A
 1335 request for a hearing must be made in writing and must be received by the Office of Maine
 1336 EMS via electronic mail, certified mail, or in-person delivery.
- 1337 B. If the Board seeks to impose discipline other than nonrenewal, suspension, or the imposition
 1338 of a civil penalty, and a Consent Agreement is not executed resolving the complaint, the
 1339 matter shall be scheduled for an adjudicatory hearing.
- 1340 9. Notification of Final Agency Action
- 1341 A. Upon Disciplinary Action becoming Final Agency Action, Board Staff shall send a notice
 1342 containing only publicly available information to the complainant, if any.
- 1343 B. Upon Disciplinary Action becoming Final Agency Action, Board Staff shall send only
 1344 publicly available information to the National Practitioners Data Bank as required by federal
 1345 law.
- 1346 C. Upon Disciplinary Action becoming Final Agency Action, Board Staff shall send notice in
 1347 writing the town manager or city manager and the municipal officers of the municipality that
 1348 owns and operates or contracts with the ambulance service within 5 business days of taking
 1349 the action.

1350		
1351	AUTHORITY:	32 M.R.S. § 84(1) (A), (G), & (H); 32 M.R.S. § 88(2); 32 M.R.S. § 90-A (7), (8),
1352		& (9).
1353	EFFECTIVE DATE:	July 3, 1978 (EMERGENCY)
1354	AMENDED:	April 1, 1982
1355		December 25, 1982 – Sec. 2.31, 3131, 6.311, 6.63, and 6.73
1356		January 1, 1984 – Sec. 1, 2, 3, 4, 5, 6, 8.32, 10.2, 10.3, 11.1066, and 11.1067
1357		April 30, 1985 – Sec 1, 2.846.222, 6.332, 9.313, 8.3216, and 9.11
1358		January 1, 1986 – Sec. 1, 6, 8.15, 8.2, 8.3, 8.4, and 11.103
1359		September 1, 1986
1360		August 25, 1987 – Sec 5, 6.011 and 12 (added)
1361		July 1, 1988
1362		March 4, 1992
1363		September 1, 1996

1364 EFFECTIVE DATE (ELECTRONIC CONVERSION):

1365 July 1, 2000

1366 REPEALED AND REPLACED:

1367 July 1, 2000

1368 July 1, 2003

1369 May 1, 2013

1370 January 10, 2021

1371 (TBD)

PROPOSED FOR ADOPTION