



CONTRA COSTA  
**HEALTH**

777 Arnold Drive, Suite 110 | Martinez, CA 94553 | Phone: (925) 608-5454 | Fax: (925) 228-2492  
cchealth.org

November 13, 2023

**VIA ELECTRONIC & U.S. CERTIFIED MAIL**

*(email: [ablakeley@losmedanos.edu](mailto:ablakeley@losmedanos.edu))*

Anthony Blakeley  
EMT Program Director  
Los Medanos College  
2700 East Leland Road  
Pittsburg, CA 94565

**Re: Notice of Decision to Suspend EMT Program Approval**

Dear Mr. Blakeley:

This letter is to inform you of the Contra Costa County Emergency Medical Services Agency's ("CCCEMSA") decision to suspend the Los Medanos EMT Training Program ("Program") approval effective January 12, 2024.

**BACKGROUND**

The CCCEMSA Notice of Non-Compliance ("Notice") dated October 19, 2023, informed the Los Medanos College EMT Training Program ("Program") that it was at risk of probation, suspension, or revocation pursuant to Section 100162, subdivision (a), of the California Code of Regulations<sup>1</sup>, for its non-compliance with the California EMT training regulations. CCCEMSA requested that the Program provide a written corrective action plan (hereinafter referred to as "Plan") to the CCCEMSA within 15 days as required by Section 100162, subdivision (b)(2). The Plan was received by CCCEMSA on November 3, 2023.

The specific provisions and the reasons the Program is found to be noncompliant with the regulations, include, but are not limited to, the following:

---

<sup>1</sup> All references are to Title 22, Division 9, Chapter 2, of the California Code of Regulations, unless otherwise indicated.

### **1. Program Director Requirement [22 CCR § 100070, subd. (b).]**

The Program did not provide evidence of compliance with the regulations, nor did its Plan detail how the Program would prevent future non-compliance with the regulations that require that it always have a Program Director, or how the Program would audit or track that its Program Director will fulfill the responsibilities proscribed the regulations.

The Plan discussed that the College has a start-date for full-time faculty in late August, however, the Program must always have a full-time director to maintain approval. Additionally, the regulations do not provide for “interim” directors. Finally, documentation of a process does not describe how the Program will implement the Plan to ensure continued compliance. Most importantly, the Plan did not describe how the Program will ensure that its Program Director will fulfill the responsibilities proscribed by the regulations to maintain future compliance.

### **2. Clinical Coordinator Requirement [22 CCR § 100070, subd. (b).]**

The Program did not provide evidence of compliance with the regulations, nor did its Plan detail how the Program would prevent future non-compliance with the regulations that require the Program always have a Clinical Coordinator. The Plan also did not describe how the Program would oversee and ensure that its Clinical Coordinator fulfill the responsibilities proscribed the regulations.

Additionally, the Program did not submit evidence that the past Clinical Coordinator had reviewed or monitored the overall quality of the medical content of the Program, or that Clinical Coordinator was approving the qualifications of the Principal Instructors or Teaching Assistants.

Moreover, the Plan indicates that you, as the current Clinical Coordinator, has “rewritten the entire curriculum for the Basic EMT and added said curriculum to the EMT SharePoint for auditing purposes.” As discussed in the Notice, any changes to the EMT curriculum must be pre-approved by CCCEMSA.

Additionally, the Plan does not explain whether the rewritten curriculum is being implemented for the current EMT cohort, or how the Program’s current curriculum is compliant with the regulations.<sup>2</sup> Indeed, the Plan acknowledges that the Program is not compliant with the regulations as it awaits approval of its application for adding Principal Instructors and Teaching Assistants. In that regard, the Plan states that the “Program *expects* to be in compliance with this regulation by the end of the sixty-day window to achieve compliance.” (Emphasis added.)

---

<sup>2</sup> The Plan states that the Program is now using Emergency Care, 14<sup>th</sup> Edition, by Daniel Limmer. However, on August 31, 2023, the Program notified CCCEMSA that it was using Emergency Care 13<sup>th</sup> Edition and provided a copy of the textbook to CCCEMSA via SharePoint.

Lastly, the Plan states that the Program's Director/Clinical Coordinator has created a new approach to reviewing the medical content and overall quality of the Program including reviewing student success outcomes with all instructors and teaching assistants, evaluation sheets for students to rate their instruction and training, regular evaluations of Program faculty, review of deficits of student performance for future programmatic changes, regular review of curriculum in comparison to national, state, and local standards among other areas which will put us in compliance within the sixty day timeframe. However, the Plan does not provide specific details of these processes or how they will be implemented by the Program.

**3. Principal Instructors** [22 CCR §§ 100070, subd. (d)(2)(e); 100070, subd. (c).]

The Program did not provide evidence of compliance with the regulations, nor did its Plan detail how the Program would prevent future non-compliance with the regulations that require that it always have a Principal Instructor, or how the Program would ensure that its Principal Instructor(s) will fulfill the responsibilities proscribed the regulations. Additionally, the Plan did not detail how the Program would ensure that non-qualified, non-approved individuals do not act in the capacity of a Principal Instructor. Moreover, the Plan did not describe how the Program intends to cure its past non-compliance for having unapproved Principal Instructors provide instruction.

This part of the Plan also discusses an EMT checklist, however, as mentioned previously, the checklist was not provided to CCCEMSA for review.

**4. Teaching Assistants** [22 CCR §§ 100070, subd. (f).]

The Program did not provide evidence of compliance with the regulations, nor did its Plan detail how the Program would prevent non-compliance with the regulations that require that the Clinical Coordinator approve the Program's Teaching Assistants, and that CCCEMSA be notified of changes to its roster of Teaching Assistants.<sup>3</sup> Additionally, the Plan did not identify how the Program would ensure that the credentials for its Teaching Assistants meet the requirements of the regulations, or how the Program oversees its Teaching Assistants.

Notably, the Plan indicates that the Program was not aware of the issue that it had an outdated roster of Teaching Assistants and was utilizing Teaching Assistants that were not on the Program's roster, until it received the Notice. Indeed, the Plan acknowledges that the Program is not compliant with the regulations as it awaits approval of its application for adding approved teaching assistants to its roster. In that regard, the Plan states that the "Program *expects* to be in compliance with this regulation by the end of the sixty-day window to achieve compliance." (Emphasis added.) The Program does not

---

<sup>3</sup> The Plan references a Teaching Assistant form but the was not included with the Plan the Program submitted to CCCEMSA.

describe how it will remedy any non-compliance that occurred during instruction of the current EMT cohort.

The Plan also states that the Program is *currently* working on hiring additional Teaching Assistants to ensure that when we are working with students, the Program maintains the proper 10:1 ratio. (Emphasis added.) Implicit in this statement is that the Program is not in compliance with regulations because it does not currently meet the student to instructor ratio proscribed by Section 100067. The Plan also does not describe how the Program will remedy any non-compliance for the cohorts for years 2019 through 2023.

**5. Intermittent and Final Written & Skills Examinations [22 CCR §§ 100075, 100076].]**

The Program did not provide evidence of compliance with the regulations, nor did its Plan detail how the Program would prevent future non-compliance with the regulations that require that the Program not use unapproved final examinations.

Additionally, implicit in the Plan is that the Program is not in compliance because it is not using CCCEMSA approved intermittent and final examinations for its current EMT cohort. Nor does the Plan present a solution to correct and come into compliance for the exams missing for its cohorts for years 2019 through 2023.

**6. Unauthorized Change in Final Exam [22 CCR § 100066, subd. (b)(5).]**

The Program did not provide evidence of compliance with the regulations, nor did its Plan detail how the Program would prevent future non-compliance with the regulations that require that the Program obtain CCCEMSA approval before changing the method, type and questions used for its final exam.

The Program requested CCCEMSA approval to change the method of administering its final examination to the Platinum Education platform on September 29, 2023. As mentioned in the Plan, the Program was given a window of thirty to sixty days for CCCEMSA to approve Platinum Education. The Plan indicates that the Program expects to be in compliance with the regulations by the end of the sixty-day window. However, the Program does not explain how it is administering its tests or what tests that it is using for the current EMT cohort.

Moreover, the excerpt from the EMT Compliance Checklist states that “CCCEMSA *should* be notified prior to using the new change whenever possible.” (Emphasis added.) This language contradicts the requirements of the regulations that require that the course final examination be approved by CCCEMSA prior to its use.

**7. Failure to Administer Intermittent Skills Examinations [22 CCR §§ 100075, 100076.]**

The Program did not provide evidence of compliance with the regulations, nor did its Plan detail how the Program would prevent non-compliance with the regulations that require that the Program administer intermittent skills examinations.

Indeed, the Program admits that it has not brought itself into compliance because *it is in the process* of purchasing iPads along with Apple Pencils so that the Principal Instructor and Teaching Assistants can administer and grade intermittent as well as final skills examinations electronically. Moreover, the Plan states, “Intermittent skills practices are done weekly, and intermittent skills examinations are also being conducted and *will be in compliance by the end of the sixty-day window* for meeting compliance.” (Emphasis added.)

The Program does not describe how the Program will remedy its non-compliance with this requirement for its current EMT cohort. Nor does the Plan present a solution to correct and come into compliance for the exams missing for its cohorts in years 2019 through 2023.

**8. Unauthorized Changes to Program [22 CCR §§ 100066, subd. (b)(10) 100071, subd. (c)-(d).]**

The Program did not provide evidence of compliance with the regulations that it had notified CCEMSA in writing, in advance when possible, and in all cases within thirty (30) calendar days of any change in program director, program clinical coordinator, principal instructor, change of address, phone number, and contact person for the EMT cohorts in years 2019 through 2023, of that it had remedied its past non-compliance by providing the required information for any changes that occurred for its prior cohorts before you were appointed Program Director.

Additionally, the Plan did not identify how it would come into compliance for its missing examinations and student records for prior EMT cohorts (22 CCR § 100071, subd. (d)) or how it would come into compliance for the changes it made to its intermittent and final examinations. (See Sections 5, 6 & 7, *supra*.)

**9. Failure to Provide Evidence of Student Attendance Records for Required Course Hours [22 CCR § 100074 subd. (a).]**

The Program did not provide evidence of compliance with the regulations that require that it has an attendance system that verifies its students have fulfilled the minimum course hours. Additionally, the Plan does not describe how the Program will bring itself into

compliance for its EMT cohorts in years 2019 through 2023 for which the Program has no method to verify that the students completed the minimum course hours.

The Plan does, however, indicate that the current Principal Instructor and Program Director now takes roll each class period on an Excel spreadsheet to electronically document student training hours. The Plan attaches an exemplar of its Excel spreadsheet labeled Attachment H. The Excel spreadsheet does not appear to have a mechanism to document a students' hours, e.g., late arrival or early departure from class. Rather, the Excel spreadsheet appears to simply document whether a student was or was not present for a class.

Although the Plan discusses the implementation of a SARS computer for attendance tracking, technical details about the SARS system were omitted from the Plan. Accordingly, CCCEMSA is unable to evaluate whether implementation of the SARS computer would evidence the Program's compliance with the regulations.

**10. Failure to Provide Course Completion Rosters** [22 CCR § 100070, subd. (d).]

The Program did not provide evidence of compliance with the regulations, nor did its Plan detail how the Program would bring itself into compliance with the regulations where it is unable to produce attendance records and verification of completion of required course hours for the EMT cohorts for years 2019 through 2023. In this regard, the Program states in its Plan that "*Moving forward*, the Program will, at the completion of the semester, merge the final course roster into an Excel spreadsheet." (Emphasis added.)

Additionally, the Plan indicates that the Program will be in compliance with the regulations by the end of the sixty-day window to achieve compliance. However, the Plan does not describe how the Program intends to remedy any non-compliance that occurred during its current EMT cohort.

**11. EMT Refresher Curriculum** [22 CCR §§ 100066, subd. (b)(9); 100069, subd. (d); 100073, subd. (a)(4).]

The Program did not provide evidence of compliance with the regulations, nor did its Plan describe how the Program would bring itself into compliance with the regulations for past EMT refresher courses.

As discussed in the Notice, any changes to the EMT curriculum, including its refresher curriculum, must be approved by CCCEMSA. CCCEMSA has not received any request to review the rewritten EMT refresher course curriculum. Additionally, the Plan does not describe how the Program will remedy its past non-compliance where it is unable to

produce the curriculum that was used for its EMT refresher courses for years 2019 through 2022.

### **12. Clinical Experience for EMT [22 CCR § 100068.]**

The Program did not provide evidence of compliance with the regulations, nor did its Plan describe how the Program would bring the Program into compliance with the regulations for the EMT cohorts in years 2019-2023.

The Plan explains that the burden of verifying EMT preceptor experience and qualifications will be placed upon the EMT student and the preceptor by requiring the preceptors to sign a Clinical Experience Verification form stating that the preceptor meets the requirements of the regulations; the form asks the preceptors to report on the form how long they have worked in the field in addition to providing their license/certification number. The Plan does not describe how the Program pre-approves its preceptors or how it verifies the preceptor's qualifications and experience prior to the EMT students' clinical experience.

The Plan describes the Program's update to its existing contracts with its ambulance company partners to reflect the six-month experience requirement. However, this approach improperly delegates the Program's responsibility upon the ambulance provider to ensure the Program's preceptors meet the requisite qualifications and experience requirements.<sup>4</sup>

The Plan also fails to establish how the Program will monitor the performance of its preceptors and its students during their clinical experience.

### **13. Improper Issuance of Course Completion Certificates [22 CCR § 100077, subd. (a).]**

The Program did not provide evidence of compliance with the regulations, nor did its Plan detail how the Program would bring the Program into compliance with the regulations regarding its improper issuance of course completion records to its students from the EMT cohorts in years 2019 through 2023.

---

<sup>4</sup> The exemplar Affiliation Agreement for Falcon Critical Care Transport (attached to the Plan labeled "Attachment J" and) directs the reader to the Code of Conduct for ambulance company Falck, not Falcon (pg. 5 at § 11.1.) The Affiliation Agreement also requires that official notices be sent to the prior dean, Nikki Moultrie who to our knowledge is no longer the Dean for the College. The Affiliation Agreement also recites that it was entered into in May 2022, but the Affiliation Agreement was signed by the parties in October 2023 and November 2023, respectively.



The following information is being provided to the Program pursuant to Title 22 of the California Code of Regulations, section 100072, subdivision (3):

**DECISION:**

The Los Medanos EMT Training Program Approval is **SUSPENDED**.

**DATE OF DECISION:**

November 13, 2023.

**SUMMARY OF SPECIFIC REGULATIONS APPLICABLE TO NON-COMPLIANCE:**

CCCEMSA found the Program to be non-compliant with the following regulations:

- (a) 22 CCR § 100070, subd. (d)(2)(e) – Operating and EMT program without an approved Program Director.
- (b) 22 CCR § 100070, subd. (d) – Clinical Coordinator Oversight of Medical Content.
- (c) 22 CCR § 100071, subd. (c) – Failure to notify CCCEMSA of change to principal instructor(s).
- (d) 22 CCR § 100075 – Failure to Administer Periodic and Final Written Skills Competency Exams.
- (e) 22 CCR § 100076 – Failure to Present Evidence of Administering Final Written Exam.
- (f) 22 CCR § 100066, subd. (b)(5) – Administering Unauthorized Examination.
- (g) 22 CCR § 100160(c) – Failure to notify the CCCEMSA of teaching staff changes.
- (h) 22 CCR § 100066(b)(10) – Failure to notify and obtain approval from CCCEMSA for changes to its curriculum or program.
- (i) 22 CCR 100074, subd. (a) – Failure to Maintain Evidence of Student Attendance/Proof of Required Hours.
- (j) § 100070 – Failure to supervise teaching assistants and principal instructors.
- (k) § 100150(b)(3) – Failure of Program Director to ensure compliance with the regulations.
- (l) 22 CCR § 100070, subd. (d) – Failure to Timely Provide Course Completion Rosters.
- (m) 22 CCR § 100068 – Clinical Supervision Provided by Individuals Who Do Not Meet Principal Instructor/Teaching Assistant Requirements.
- (n) 22 CCR § 100077, subd. (a) – Improper Issuance of Course Completion Records.

The Plan admittedly did not fully address all the Program's deficiencies. (Plan at p.1, ¶ 2.) The Plan discusses a corrective action plan that it developed and that has been implemented to ensure full compliance within 60 days of its receipt of the Notice, however, the Program did not provide this implemented corrective action plan to CCCEMSA. (*Id.*)



Anthony Blakeley  
EMT Program Director  
November 13, 2023  
Page 9

Overall, the Plan failed to present solutions for correcting its non-compliance for the EMT cohorts in years 2019 through 2023, and for EMT students who had been issued course completion certificates when the Program was out of compliance.

**SUSPENSION EFFECTIVE DATE:**

The suspension of the Los Medanos College's EMT Training Program Approval is effective **January 12, 2024**.

If you have any questions regarding this Decision, please write me at [aaron.doyle@cchealth.org](mailto:aaron.doyle@cchealth.org).

Sincerely,

CONTRA COSTA COUNTY EMS



AARON DOYLE  
Prehospital Care Coordinator

ec: Marshall Bennett, Director of Emergency Medical Services  
Matt Kaufman, Deputy Director, Contra Costa Health  
Christy Hollis, EMS Prehospital Care Coordinator, CCCEMSA  
Ben Keizer, EMS Prehospital Care Coordinator, CCCEMSA  
Brandon Rowley, EMS Prehospital Care Coordinator, CCCEMSA  
Dennis Franco, Dean, Workforce Development, Los Medanos College  
A'kilah Moore, Interim Vice President of Instruction, Los Medanos College  
Kim Lew, Division Chief, California Emergency Medical Services Authority  
Joshua J. Tilton, Sr. Stakeholder Program Manager, National Registry of EMTs