



# North Region EMS System

Policy Section #	<b>Administrative</b>	
	<b>AD 215</b>	<b>Date 7/2025</b>
Title	<b>Complaints/ Request for Clarification</b>	
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## Purpose

To standardized mechanism to request clarification, report an occurrence, or report a complaint is intended to reduce morbidity and mortality and to improve the quality of patient care. All Request for Clarification (RFC) activities and complaint investigation files fall under the auspices of continuous quality improvement and are thus protected under the Medical Studies Act [735 ILCS 5/8-2101].

## Policy

**Definition:** "complaint" means a report of an alleged violation of the Act or this Part by any System Participants or providers covered under the Act, or members of the public. Complaints shall be defined as problems related to the care and treatment of a patient.

1. A party may initiate a Request for Clarification (RFC) or file a complaint if one of the following occurs:
  - a. One party believes that a discrepancy exists between EMS standards of practice and EMS practitioner actions and/or OLMC orders. Either party may request a review of the run events for clarification as to compliance with standards.
  - b. Interference at the scene hampered EMS personnel in the performance of their duties.
  - c. A patient injury was sustained after the establishment of an EMS-patient relationship either during the course of treatment at the scene or during transport.
  - d. An EMS team member was injured during the course of treatment at the scene or during transport.
  - e. There is a question of missing valuables.
  - f. There is an indication of impaired behavior exhibited by EMS personnel.
  - g. The quality or nature of radio/phone communication is questioned.
  - h. An incident adversely affects or threatens to affect patient, personnel, or public relations.
  - i. Other non-defined problems related to the care and treatment of a patient
2. Initiation and investigation of Requests for Clarification shall proceed as follows:
  - a. A completed RFC form shall be submitted in writing to the EMS Coordinator within seven (7) days of the incident occurrence. The RFC shall be initiated by the person(s) seeking review of the incident in writing.
  - b. Upon receipt of the RFC or complaint, the EMS Coordinator/educator will conduct an investigation obtain all records and/or data necessary to evaluate the situation and communicate their findings/ recommendations to the person(s) originating the RFC or complaint within ten (10) business days.



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3. Possible outcome recommendation of the investigation include:
  - a. Unfounded – evidence was insufficient to prove or disprove complaint
  - b. Sustained - complaint or allegation was supported by sufficient evidence to justify disciplinary action.
  - c. Exonerated - the complained-of conduct occurred, but the actions were deemed proper, within guidelines, or had mitigating circumstances that vacate disciplinary action.
4. If outcome was sustained, recommended possible consequences/disciplinary actions:
  - a. Re-Education – no formal warning but assigned education as determined by System
  - b. Verbal Warning – documented verbal warning with performance improvement plan
  - c. Written Warning – documented written warning with performance improvement plan
  - d. Final Written Warning – documented final written warning with performance improvement plan that may include restriction of practice and/or suspension recommendation to IDPH. Will require ongoing assessment and monitoring of behavior/performance
  - e. Suspension – see AD 204
5. Reporting a complaint to IDPH
  - a. A person who believes that the Act or this Part may have been violated may submit a complaint by means of a telephone call, letter, fax, or in person. An oral complaint will be reduced to writing by the Department. The complainant is requested to supply the following information concerning the allegation:
    - i. Date and time or shift of occurrence;
    - ii. Names of the patient, EMS Personnel, entities, family members, and other persons involved;
    - iii. Relationship of the complainant to the patient or to the provider;
    - iv. Condition and status of the patient;
    - v. Details of the situation; and
    - vi. The name of the facility where the patient was taken.
  - b. All complaints shall be submitted to the Department's Central Complaint Registry or to the EMS MD. The substance of the complaint shall be provided in writing to the System participant or provider no earlier than at the commencement of an on-site investigation.



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- c. The Department and the EMS MD or Trauma Center MD shall not disclose the name of the complainant unless the complainant consents in writing to the disclosure.
- d. The Department may conduct a joint investigation with the EMS MD, EMS Coordinator or Trauma Center MD if a death or serious injury has occurred or there is imminent risk of death or serious injury, or if the complaint alleges action or conditions that could result in a denial, non-renewal, suspension, or revocation of licensure or designation. If the complaint alleges a violation by the EMS MD, EMS Coordinator or Trauma Center MD, the Department shall conduct the investigation. If the complaint alleges a violation that would not result in licensure or designation action, the Department shall forward the complaint to the EMS MD or Trauma Center MD for review and investigation. The EMS MD or Trauma Center MD may request the Department's assistance at any time during an investigation. In the case of a complaint between EMS Systems, the Department will be involved as mediator or lead investigator.
- e. The EMS MD or Trauma Center Director shall forward the results of the investigation and any disciplinary action resulting from a complaint to the Department. Documentation of the investigation shall be retained at the hospital in accordance with the Resource Hospital record retention policy and shall be available to the Department upon request. The investigation file shall be considered privileged and confidential in accordance with the Medical Studies Act [735 ILCS 5/8-2101].
- f. Based on the information submitted by the complainant and the results of the investigation conducted in accordance with subsection (e), the Department will determine whether the Act or this Part is being or has been violated. The Department will review and consider any information submitted by the System participant or provider in response to an investigation.
- g. The Department will have final authority in the disposition of a complaint. Complaints shall be classified as valid, invalid, or undetermined.
- h. The Department will inform the complainant and the System Participant or provider of the complaint results (i.e., whether the complaint was found to be a violation, no violation, or undetermined) within 20 days after its determination.
- i. The EMS System shall have a policy in place requiring compliance with this Section.
- j. An EMS System participant or provider who is dissatisfied with the determination or investigation by the Department may request reconsideration by the Department within seven business days of the determination.



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- k. The investigative files of the EMS System and the Department shall be privileged and confidential in accordance with the Medical Studies Act [735 ILCS 5/8-2101], except that the Department and the involved EMS System may share information. The Department's final determination shall be public information subject to FOIA.

**References** Administrative Code Section 515.450 (Amended at 48 Ill. Reg. 16159, effective November 1, 2024)

**Attachment** none

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Sarah Bond  
EMS System Administrator/Coordinator

Michael I. Peters, MD  
EMS Medical Director

Written 07/2025  
Reviewed/Revised  
IDPH Approval  
Effective

DRAFT