

**BEFORE THE DELAWARE STATE FIRE PREVENTION COMMISSION**

IN RE: RICHARD SMITH )  
 ) CASE NO.: SFC-24-0063  
EMT I.D. NO.: 81320 )

**FINAL ORDER**

This is the Final Order of the Delaware State Fire Prevention Commission (the “Commission”) with respect to the above-referenced disciplinary matter.

**NATURE OF THE PROCEEDINGS**

Pursuant to due notice and 16 *Del. C.* § 6604(5), the Commission held a hearing on August 14, 2024, concerning a disciplinary proceeding filed by the State against Richard Smith (“Respondent” or “Smith”). In a Complaint, dated June 12, 2024, the State alleged that Respondent (1) demonstrated gross negligence, a pattern of negligence, or has proven otherwise to be grossly incompetent in violation of subsection 14.4.1.3, (2) violated Protocols in violation of subsection 14.4.1.4, (3) violated or aided or abetted in the violation of any provision of these regulations in violation of subsection 14.4.1.5, (4) engaged in unprofessional conduct in violation of subsection 14.4.1.9, and (5) his conduct was “dishonorable, unethical, or other conduct likely to deceive, defraud, or harm the public” in violation of subsection 14.4.2.3.

Renee Hrivnak, Deputy Attorney General, presented the State’s case. Respondent appeared and represented himself *pro se*.

**SUMMARY OF THE EVIDENCE**

The following documents were admitted into evidence and made part of the record:

**State Exhibit 1 (“SE1”)**: the State’s Complaint filed in this matter as well as the Temporary Suspension dated June 14, 2024.

**State Exhibit 2 (“SE2”):** Smith’s Delaware Emergency Medical Technician license printout.

**State Exhibit 3 (“SE3”):** Email received by Jerry Brennan originally dated February 24, 2024 entitled Middletown Medical Response Concern.

**State Exhibit 4 (“SE4”):** Call for Service Detail Report – CFS 5615.

**State Exhibit 5 (“SE5”):** Patient Care Report for Incident 2024-02700490.

**State Exhibit 6 (“SE6”):** SE6 a, b, and c were videos shown during the hearing.

**State Exhibit 7 (“SE7”):** Medical Control Call transcript.

**State Exhibit 8 (“SE8”):** Interview transcript between Investigator Fioravaniti and Smith

**State Exhibit 9 (“SE9”):** Email chain between Investigator Fioravaniti and Scott Legore, of the Maryland Institute for Emergency Medical Services Systems.

**State Exhibit 10 (“SE10”):** Delaware Basic Life Support Protocols, Guidelines and Standing Orders for Prehospital and Interfacility Patients.

**State Exhibit 11 (“SE11”):** Pictures with descriptions from surveillance video that was introduced as SE6.

The Respondent did not present any exhibits. The State presented testimony from the following witnesses: Drexanne Fields, Jordan Watson, Bernardo Fioravaniti, and Patrick Matthews. Before the testimony began, Respondent said he did not dispute that he offered subpar treatment. Respondent’s concern was that he felt the plea offer extended by the State was too harsh.

Ms. Fields is a foster parent. Her foster child, “BT”, was having trouble breathing. She called 911 and her neighbor, Jordan Watson. Dr. Watson is a pediatrician at Nemours. Dr. Watson came over and began assessing BT using her stethoscope while sitting on the floor with him. Dr.

Watson described BT as wheezing with fast, belly breathing. She testified he was in mild to moderate respiratory distress. When the EMTs arrived, Dr. Watson identified herself as a doctor although she did not think they heard her. She asked for, and received, a pulse oximeter from them. Dr. Watson did not see either EMT take a manual heart rate. She testified that the EMTs immediately said BT “looked good” upon their arrival. The EMTs mentioned previous calls with unconscious patients as comparators. Overall, Dr. Watson felt there were signs that BT was in respiratory distress at the time when the EMTs were present.

Investigator Fioravaniti testified as to his investigation. As a foster parent, Ms. Fields has surveillance cameras inside her home. Investigator Fioravaniti was able to collect the relevant surveillance video and introduced it to the Commission. The EMTs arrived at 19:22. Respondent said, “do you want me to look at him, he’s in no distress whatsoever.” The video also showed Respondent’s partner, EMT Blackburn using his radio to cancel ALS less than 1 minute after arrival. At no time does the video show Respondent assessing or even touching BT. However, EMT Blackburn gave the radio to Respondent who used it to communicate with Medical Control. The recording of the conversation with Medical Control was played for the Commission’s review. Respondent gave a blood pressure of 68/42 and a heart rate of 124 to Medical Control. Neither of these vital signs given came from assessing BT.

At some point during the interaction, Ms. Fields told Respondent that BT suffers from asthma. She said the pharmacy closed before she was able to fill his prescription for albuterol. Just before leaving the house, Respondent gave Ms. Fields a dose of albuterol for use later.

Dr. Patrick Matthews is the BLS Medical Director and has been for the past 17 years. In this role, Dr. Matthews oversees quality of care by EMTs, ensures proper training, ensures protocols and scope of practice are followed, ensures good documentation, and works to address

overall quality of care concerns. He consults on all complaints involving patient care. Dr. Matthews explained that the Protocols give EMTs some discretion but do not allow for discretion to not take vital signs of a 2-year-old in respiratory distress.<sup>1</sup> Dr. Matthews was unable to comprehend a scenario where an EMT would not at least attempt to take vital signs. Dr. Matthews further explained that EMTs are expected to assess patients themselves rather than using a third party. There is no protocol for dispensing medication for later use; rather, the protocol says to give the nebulizer treatment while on scene since there was a notation of wheezing.

Dr. Matthews testified that the most egregious behavior of the interaction was the conversation with Medical Control. He said fabricating vital signs is unfathomable and inexcusable. Dr. Matthews felt this fabrication called into question all other information supplied by Respondent.

### **FINDINGS OF FACT**

Smith is a EMT licensed in the State of Delaware. This disciplinary matter stems entirely from the interaction at Ms. Fields' home on February 22, 2024. The testimony was unconverted and much of the interactions were recorded by surveillance video. The Commission found the evidence and testimony persuasive as to the events that occurred.

### **CONCLUSIONS OF LAW**

The Commission has the authority to decertify or otherwise discipline a certified EMT.<sup>2</sup> Respondent is charged with violating subsections 14.4.1.3,<sup>3</sup> 14.4.1.4,<sup>4</sup> 14.4.1.5,<sup>5</sup> and 14.4.1.9<sup>6</sup> as

---

<sup>1</sup> SE 10.

<sup>2</sup> 1 Del. Admin. Code part 710 §14.4.1

<sup>3</sup> Has demonstrated gross negligence, a pattern of negligence, or has proven otherwise to be grossly incompetent; or

<sup>4</sup> Has violated Protocols;

<sup>5</sup> Has violated or aided or abetted in the violation of any provision of these regulations; or

<sup>6</sup> Has engaged in unprofessional conduct.

<sup>7</sup> Any dishonorable, unethical, or other conduct likely to deceive, defraud, or harm the public;

defined under 14.4.2.3,<sup>7</sup> of the Ambulance Service Regulations found in Part 710. Each of these violations, standing alone, is a basis on which an EMT may be decertified or disciplined.

Respondent's actions at Ms. Fields' house warrant discipline. Respondent and his partner failed to assess or take the vital signs of a child in respiratory distress, in violation of Protocols. They seemed to allow Dr. Watson to lead the care while not knowing she is a pediatrician. Respondent and his partner claimed BT looked fine and compared his state to the state of other children on other calls who were in more severe distress. EMT Blackburn canceled ALS almost immediately, depriving BT of care. Respondent, as heard on the call to Medical Control, provided false vital sign readings. He was dishonest with Medical Control in order to receive approval to not transport BT. Finally, Respondent violated albuterol protocols by leaving a dose of the medicine for administration later. The Commission concludes Respondent violated the regulations as alleged.

\* \* \*

In light of the facts and circumstances of this matter, the Commission unanimously agrees to impose the following for the violations found above and to address all concerns raised during this proceeding:

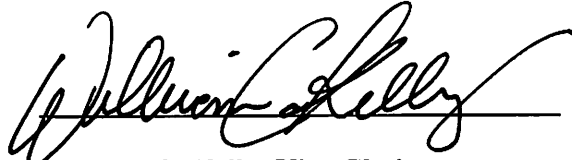
1. Report discipline to the National EMT Registry.
2. Indefinite suspension with the opportunity to re-take the EMT required courses after 3 years.

IT IS SO ORDERED, this 24<sup>th</sup> day of September, 2024, by the Commission:



---

Ronald H. Marvel, Chairman




---

William C. Kelly, Vice Chairman



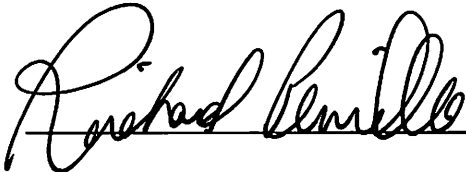
---

Lynn Truitt



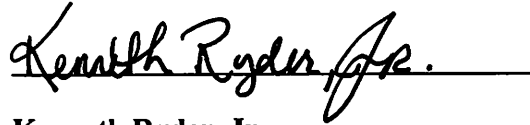
---

Jeffrey Eisenbrey



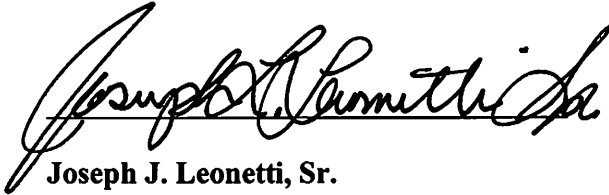
---

Richard Perillo



---

Kenneth Ryder, Jr.



---

Joseph J. Leonetti, Sr.