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EMS Authority December 28, 2011
Investigator Miss Yu
10901 East Gold Center Drive., Suite 400
Rancho Cordova, Ca. 95670

Regarding: Investigation Cover Up

Dear Miss Yu,

I need assistance resolving an issue regarding investigating a cover up by the CCSF Paramedic Program Facilitator, Megan Corry. I witnessed numerous incidents with the SFFD Preceptors during my CCSF Paramedic Internship which Megan Corry was informed of and I do not believe it was resolved appropriately by her.

Earlier this year, March 2011 you interviewed me regarding an incident which occurred last October 2010 during my CCSF Paramedic Internship with SFFD Station 49 while under the supervision of Paramedic Preceptor, Scott Hellesto. The incident under investigation was the assault and suffocation by Scott Hellesto to a patient while the patient was under restraints. My understanding from our March 2011 interview was that you made numerous attempts to contact me in December of 2010 through March 2011 by requesting my contact information through the CCSF Paramedic Program Facilitator, Megan Corry. From our interview of March 2011 you informed me that she did not respond or release my contact information to you until March of this year, which led to our interview. I spoke with Megan via phone, in person and I had a meeting with her before you and I met. EMS Authority nor you were ever mentioned. I witnessed numerous incidents during my internship under SFFD Station 49 Preceptors. The fact is, the CCSF Paramedic Program cannot be an accredited program without a preceptor division, and the majority of all preceptors who assist the CCSF Paramedic Program come from SFFD Station 49. It is a voluntary program which paramedics can participate in and be paid an 8% salary increase in addition to their normal pay. This financial increase is due to the CCSF students paying an additional $1,825.00 in order to have a preceptor. It is only valid for the first 480 hours of the student's internship which is the minimum amount of hours required to pass a paramedic intern. The maximum amount of hours allocated for the internship is 720 before a student must have remediation. After the first 480 hours, the preceptor does not get paid the additional 8% salary increase.

To quantify, I did witness the incident you investigated, however I did not report it. You received an anonymous letter informing you of the occurrence, but it was from someone else who witnessed part of the incident. That evening, Scott and I spoke about that specific patient interaction and I disagreed how it was approached. During the time of the incident, I was passing my paramedic internship until shortly after that evening. 480 hours is the passing minimum requirement. At 450 hours Scott assured me that I would

pass and that I was performing competently. I have internship evaluations written by Scott which lead to that evening and support my statement. Shortly after that night, all my evaluations spun into a downward spiral and I was released from my internship with in 2 weeks of that day, with a failed status. I contacted Megan Corry via e-mail and asked her to intervene and assist immediately at 480 hours once I suspected there were problems and questionable intent. Megan did not respond to my following e-mail. I need to know from you Miss Yu, when you received the anonymous letter and initially contacted Megan Corry for my contact information.

10-30-10
Hi Megan, I know your busy, I sent you part of the text below Wednesday. Did you get it?
"Thank you for the ride along. I need your help, it is paramount that I pass this internship. I want to come into class every week at least once and go over any difficulties that my Preceptor wants me to over come. I want to bring you more into the loop of the final portion of this internship so I can better prepare to pass. Will you have your office hours next Tuesday?"
I just recently passed my 480-hour mark and Scott feels he wants me to fine tune and prepare for my five call. As you already know, my internship with Pedro was less than productive. I have 2 questions:
Will you be working office hours on Tuesday?
After the 480-hour mark with an intern, when does the 8% preceptor fee stop?
Can you please let me know at your earliest convenience, I am now taking more days off work in order to finish this internship quicker.
Sincerely, Paul

After failing my internship at less than 550 hours in early November 2010, I went to Megan's office in person. Megan Corry was supposed to have prepared a remediation program in December for me, however it was not completed until 4 months later, right before my interview with you. The remediation program consists of 5 weeks of simulation labs, clinical rotations and another internship. In other words, completing the entire program again, excluding the didactic portion which she is responsible for teaching. 2 of my co-workers who work at King-American Ambulance which attended the CCSF Paramedic program the previous year were beginning their second full internships. Neither of them were required to follow my remediation program, however I was told that I was the first student and it would be the following process for all failing paramedic interns.

I am setting the record with EMS Authority of my CCSF Paramedic Internship experience with SFFD Station 49 preceptors. During the time of my March 2011 interview with you, numerous factors hindered me from releasing full information of witnessed accounts of several occurrences. In order to do that I would have had to compromise my safety, employment during a time of injury which required medical treatment and my career.

The company I work for is King-American Ambulance which is located in San Francisco. A small private ambulance company which relies on sharing the SFFD 911 contract with AMR in order to stay in business. King-American Ambulance cannot survive without the

911 contract. Exposing my experience would compromise that contractual relationship. In addition to my safety, I was worried that if I came forward and informed EMSA of what I experienced with SFFD Preceptors through the CCSF Paramedic Program, I would compromise my safety and be held responsible for King-American Ambulance losing the contract if SFFD chose to award the 911 contract to AMR. I was also aware it was during a time that the 911 contract was under negotiations. I hope by coming forward that no other CCSF Paramedic Student encounters my experience of having a teacher who is dishonest and willing to sabotage a student's future in order to protect her reputation. I also hope that by coming forward that no patient should ever have to go through the numerous incidents which I have witnessed and will expose in this letter. I sacrificed a valuable investment of time, money and trust into a program which has failed to provide the service it should have from a teacher who was negligent of diligence.

My first preceptor was Pedro Veirra who was not trained adequately by Megan Corry to precept. I was informed by Megan that I was his first intern. I later learned that this was not true. My classmate Jennifer G was his first intern which he released from precepting after 5 shifts. I spoke with Jennifer G who informed me that Pedro did not mentor or guide her appropriately which was my same experience. Pedro's philosophy was that all interns should be able to glide through an internship as he did when he interned. I informed Megan Corry during my 200 hours of interning with Pedro of my experience. She told me that it takes time for a student and preceptor to coincide working together and that I should continue working with Pedro. I trusted her and followed her lead. Pedro informed me he was not interested in precepting and I found myself numerous times coaching Pedro not to give up on me. When I asked him about Jennifer G he told me that I had the option to quit on my own. I was allowed to administer less than 5 I.V.s, I was told by Pedro that giving I.V.'s was a "Monkey Skill" and that it wasn't required at that time for me to practice. It was something I should have already learned during clinicals. During my internship with Pedro, my primary responsibility was to carry patients, equipment and identify patient conditions, nothing more. During one of our calls, Pedro asked me about a patient's condition regarding a woman who was tachicardic from eating Cannibus brownies. I told him that I wasn't sure if his administration of Diphenhydramine given to her was the correct treatment modality since she was neither experiencing an allergic reaction or Dystonia. Pedro's reaction however was not accepting. When I reviewed the SF Protocol, the treatment for a Tachicardic patient is NOT the administration of Diphenhydramine. This incident changed Pedro's demeanor towards me even more from poor to worse.

I called Megan Corry numerous times for guidance. She was on vacation and unavailable with no alternative support. My internship concluded when Pedro told me he had no clue of which direction to go with me regarding precepting and he would no longer precept me. He told me that I should go with an experienced preceptor who could guide me better. My internship was juggled around with two other seasoned preceptors who informed me that they were willing to accept me as their intern. Megan Corry was unreachable. Scott Hellesto told me that he had extensive experience of precepting through the CCSF Paramedic program and that he and Megan Corry were very close friends, and he would let her know that I was being precepted by him.

I was uncomfortable with continuing my internship under Scott because of his reputation of being short tempered, however I felt I had no alternative since Megan Corry was unreachable and the other preceptor, Gregory Perata was preparing to take paternity leave and would pick up where Pedro left off once he returned in 30 days. Scott already had a negative reputation from a prior intern he had failed from King American-Ambulance as someone who did not follow S.F. Protocols and was short tempered. Scott reviewed my internship evaluations from Pedro so he could get a better understanding of what I needed focusing on. After Scott's review of my evaluations from Pedro, Scott called Pedro "A fucking idiot who shouldn't be precepting". Scott began fraudulently changing Pedro's markings and scores on my evaluations and then told me to continue for him and he would dictate to me what to write. I followed his instructions without question.

My internship made an immediate 180-degree change once I started interning under Scott's guidance. I was able to make patient contact and assessments, identify patient conditions and apply treatments. I continued my internship with Scott from my 200-hour mark. After the investigation incident you interviewed me for which occurred in late 2010, I caught the Flu. Scott told me that I would pass my internship and that I needed to push through it at any cost. For reiteration purposes, 480 hours is the minimum set of hours for passing a paramedic intern; 480 hours is also the cut off point for preceptors to receive the 8% salary increase. At that time I was working during the day and interning evenings with minimal amounts of sleep. I told Scott that I was going to take some time off because of my flu symptoms and I was unable to stay awake. I felt that I was not only risking my health and all personnel on the ambulance, but patients and any other healthcare workers that I had contact with.

Scott's demeanor immediately changed. He informed me that taking anytime off would be detrimental to my internship and could result in me failing. I was told that paramedic personnel work through being sick on the job all the time and I needed to do the same. Scott then told me to double the dosage of Robetussin I was taking and I should be fine. At that point between witnessing the incident, having the flu, having little sleep and taking the double dosage of Robetussin, my health and internship immediately deteriorated and I failed my internship shortly after.

Below are questionable behaviors which I witnessed during my internship:

1.) Violations of HIPPA- I witnessed Scott Hellesto on a regular basis, take pictures of patients with his cell phone during emergency calls when the patient was either unconscious or incoherent. Then, send those pictures to paramedics, friends and family members with commentary and ridicule attached. Megan Corry was informed, and her reply was that I should be thankful that he was even precepting me. For my records, I asked Scott to send me one of those pictures of my patients. He did so and sent it to my e-mail account. The e-mail identifies his phone number and the date. If necessary, EMSA can cross-examine it with CPMC Davies Campus PCR's regarding authenticity of the patient we delivered and his condition.

2.) Ethics- During my entire internship I witnessed the relationship between Scott and his partner Jennifer Ward being less than professional and more than just friends. I

understand they have worked together for numerous years and they bid on the same shifts in order to continue working together. I understand the importance of teamwork, comradery and comfort with a partner. However, I think it is inappropriate, unprofessional and unethical to refer to each other as “honey” or “baby” or seeing Scott squeeze Jennifer’s breasts to identify breast firmness because she is lactating from recently delivering a baby. The intimate relationship they share is not my concern, regardless if they are married to separate people. It is my concern when the CCSF Paramedic Facilitator, Megan Corry tells me during my remediation that Scott wasn’t the individual who failed me during my internship which I paid almost $2000.00 for, it was his partner, Jennifer Ward. It is upsetting that Megan Corry did not intervene and assist when I asked for help; she allowed me to attempt providing patient care while having the flu and taking double the dosage of Robetussin, which is a controlled substance. It is even more upsetting to know that my preceptor, Scott Hellesto does not have the ability to perform competently, morally, or independently and doesn’t have the courage to make sensible decisions on his own, even when peoples lives and internships rely on it.

3.) Reckless Endangerment- On numerous occasions while interning with Scott, I experienced dangerous ambulance driving by Jennifer Ward in order to teach unruly patients a lesson. An unruly patient is someone who the ambulance crew considers rude, inebriated or uncooperative. The driver will speed and maneuver the ambulance in quick changes of direction such as making turns, driving fast off hills where the ambulance drops and slams onto the pavement or sometimes even sudden stops while driving at high speeds. The result is a patient who is slammed around on a gurney with the interior ambulance wall.

4.) Theft- I was informed to over stock the ambulance several times before my internship shift. I watched Scott Hellesto fill a plastic garbage bag full of ambulance material and give it to one of his friends. Someone one who was not in uniform or working on an ambulance. I learned through Scott that this was common for some SFFD Paramedics from station 49 and infact there is one specific paramedic who sells the ambulance material. This specific paramedic even after being charged by the DEA for domestic violence was nominated as a SFFD Rescue Captain.

5.) Un-authorized Personnel- Numerous times during my internship we picked up friends and family members of Scott and Jennifer and drove them to certain areas with in the city. This included Jennifer’s sister and some of Scott’s friends. These are individuals who were not working for SFFD. Does SFFD financially cover or insure non-personnel or non-patients who get injured on the ambulance during a motor vehicle accident?

6.) Intimidation and Physical Abuse- I have watched Scott Hellesto intimidate and physically hurt patients numerous times, including intimidating interns and hospital staff. The investigation in question is not the only patient Scott has hurt. I witnessed Scott provoke patients while they are restrained onto gurneys and I’ve seen him punish them by twisting fingers, putting his knees on their chest and even twisting the patient’s skin. I am not the only person who has seen this; I may just be the only person who has reported it. Megan Corry was informed of these incidents, however Megan relies on Scott to precept her students.

I'm sorry I did not come forward any sooner, however I did not feel safe doing so.

Questions-

1.) When were you informed regarding the incident and when did you contact Megan Corry requesting my contact information?

2.) I am requesting an audit, since my remediation interview with Megan Corry in March 2011. How many students have exceeded their 480 internship hours and were responsible for following the same remediation plan?

3.) What Quality Improvement process should be implemented, so this doesn't occur again to any other student or patient?

4.) Are there consequences for a teacher covering up an incident like this?

5.) I would like to know how many students Scott Hellesto has precepted since me?

6.) What is the income which he has made at an 8% salary increase annually from those students? I am under the impression that he is utilizing the CCSF Paramedic program as supplemental income.

7.) Is this an ethical conflict, if and should a student exceed the 480 hour mark to be discarded, just because the preceptor is no longer receiving an 8% salary increase?

8.) I believe the 480 hour mark for the 8% increase was originally changed from 720 hours to 480 hours because there was a question of intent regarding preceptors holding students longer than needed in order for preceptors to receive an 8% salary increase longer. Why is SFFD Station 49 preceptors charging students to learn, while reputable cities such as Berkeley and Los Angeles perform the same service of mentoring for free? The 8% increase seems to continuously create a conflict of interest. Should preceptors be allowed to receive monetary compensation from institutions outside of their departments?

I hope this letter assists you in preventing this from happening again. Can you please assist me in obtaining answers to my questions. I am carbon copying Board members who maybe able to assist you. I have not included the teacher Megan Corry or the Dean or the SFFD Fire Chief Joanne White at this time because I feel advance notice of research may only continue the process of altered records.

Sincerely, Paul Macchia

Cc: COAEMSP / George W. Hatch Jr., EdD, LP, EMT-P Executive Director
COAEMSP / Jennifer Anderson Warwick, MA Site Visit Coordinator