

IN THE MATTER OF: )

)

**CONSENT ORDER**

Thomas E. Edmonds, RCP )

License Number -3210 )

Case Number - 20-988

**1. Jurisdiction**

The North Carolina Respiratory Care Board (the Board) is an occupational licensing board of the State of North Carolina, organized under The Respiratory Care Practice Act codified at N.C. Gen. Stat. § 90-646, et seq. The Board has jurisdiction over this matter pursuant to N.C. Gen. Stat. § 90-652 and 21 N.C. Admin. Code § 61.0307.

**2. Identification of Licensee**

The Respiratory Care Practitioner is Thomas E. Edmonds (the "RCP"). His mailing address is 286 Huddle Rd., Wytheville, VA 24382. The RCP holds a North Carolina Respiratory Care License Number 3210 (the "License"), which was first issued on March 24, 2003, and expires on March 31, 2021.

**3. Waiver of Rights**

I, Thomas E. Edmonds, the RCP, hereby confirm that I understand that I have each of the following rights, and as noted by my initials below, I hereby freely and knowingly waive each of these rights without further process and agree to the terms of this Consent Order regarding my License:

(Initials)



The right to a hearing before the Board;



The right to present evidence to disprove all or some of the charges against me;



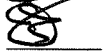
The right to present evidence to limit or reduce any sanction that could be imposed for a violation;



The right to confront and cross-examine witnesses and to challenge evidence presented by the Board against me;



The right to present legal arguments to the Board; and



The right to appeal from any final decision adverse to my License to practice respiratory care.

#### 4. Stipulation to Facts

The Respiratory Care Practitioner (“RCP”) and the Board stipulate to the accuracy of each of the following facts:

A. The RCP was engaged in the practice of respiratory care in North Carolina when the events occurred that led to the initiation of this complaint.

B. On April 27, 2020, a complaint was filed by the Manager of Respiratory Care at Northern Regional Hospital in Mt. Airy, NC. The complaint stated that the RCP was terminated from Northern Regional Hospital on April 17, 2020 for falsifying medical records and misrepresenting his delivery of care.

C. On May 5, 2020, in an interview with the Board Investigator, the Manager of Respiratory Care stated that on the morning of April 13, 2020, one of the therapists that worked with the RCP during the previous shift relayed information to him that the Nursing staff had concerns with the RCP’s work. The manager was told that the nursing staff had brought the information to their leadership and to the Critical Care Director. The manager stated that they discovered several discrepancies related to The RCP’s documentation. Their investigation concluded that:

- a. The RCP did properly complete the ventilator/patient checks and documentation for the 1st and 3rd rounds.
- b. The RCP did not assess the 3 ventilator patients for the 2nd round (during the middle of the shift) but completed documentation in the electronic medical record indicating that he did. Their investigation concluded that The RCP had falsified the patient’s medical record.

D. On April 17, 2020, during the Termination Conference with the RCP, the manager stated that he presented the video and badging evidence to the RCP and that he was being terminated for false documentation. The RCP stated that “there must have been something wrong with his times”. The RCP signed his termination paperwork, but at no time did he admit that he did anything wrong.

E. On May 12, 2020, in an interview with the Board Investigator, the RCP stated that he wrote his ventilator checks on a paper towel because he did not have his computer with him. He stated that he logged on to the computer later to document, but had not written down the exact times, so he documented in the patients’ charts the times that he thought he was in the patients’ rooms. He added that he “was busy that night and got to things late”. The RCP agreed that there is a discrepancy between the video and badge clocking evidence and what he has described in his summary of event. The RCP was asked if he could explain this difference. The RCP responded: “I don’t know what to say”. The RCP was asked if there is anything that he can think of that would explain why the evidence shows one thing and he is stating something else. The RCP responded: “I don’t know” and then he stated “I do recall doing the checks. I just don’t remember the times”. And then he stated: “I can’t argue with video evidence”.

F. On June 16, 2020, the RCP attended the Investigative Committee meeting. During the interview, he admitted that he did not chart properly but denied he falsely charted. He disputed the time provided by the manager regarding his time in the Respiratory Department, which is a separate location away from assigned the patient units. The time reported shows he was in the department 7 of 12 hours during his shift. He could not recall if he was busy that night and indicated he did his ventilator assessments and suctioning of each patient. He stated it would take him 20 minutes per patient. He had no explanation for fact that the time for all three patients equaled the time that would be required to provide treatment for a single patient. According to the video and badge data, he was in the department during the times that he charted his assessments.

G. On July 9, 2020, at its Quarterly Board Meeting, the Board determined that the weight of the evidence clearly indicates that the RCP willfully made or filed a false report or record. The Board determined to offer the RCP a reprimand with additional stipulations, as stated in this Consent Order.

H. On July 10, 2020, the RCP agreed to the Consent Order offered by the Board in an email reply to the Executive Director.

## **5. Stipulated Order**

### **A. Stipulation to Sections of Law Violated:**

I, Thomas E. Edmonds, the RCP, admit if it were proven at a hearing that I willfully made or filed a false report or record, this would constitute a violation of N.C. Gen. Stat. § 90-659 (a) (1) (b) and (d), as well as N.C. Gen. Stat. § 90-659 (a)(4) and the rules codified in 21 N.C. Admin. Code § 61 .0307, (3) (10), and (23); and provides a sufficient basis for the Board to revoke my License permanently, or take other disciplinary action.

### **B. Stipulation to Sanctions:**

Under N.C. Gen. Stat. § 90-652, in lieu of proceeding to a hearing, the Respiratory Care Practitioner and the Board hereby enter into this Consent Order and agree to each and every one of the following terms:

1) The RCP accepts and agrees to the issuance of a Board Reprimand and to hold his license on Probationary Status for a period of 12 months from the effective date of this Consent Order.

2) During the entire time that the RCP holds the License on Probationary Status, and if employed as a Respiratory Care Practitioner or in any other health care occupation, the RCP shall cause his immediate supervisor to submit written quarterly reports to the Board. Each such written report shall be submitted in a form supplied by the Board and shall document the RCP's performance in the delivery of Respiratory Care or other professional duties and detail any concerns of the supervisor about the RCP's Practice of Respiratory Care or other professional services on an electronic form supplied by the Board.

3) The RCP shall report to the Board any disciplinary action taken against him in connection with his employment as a Respiratory Care Practitioner or in connection with any other employment in which he is involved in providing health care services.

4) The RCP acknowledges and agrees that this Consent Order is a matter of public record under the North Carolina Public Records Law, N.C. Gen. Stat. § 132-1 et seq.; and that the contents of this Consent Order will be reported to the appropriate entities as outlined in Board policy and as required by state and/or federal law or guidelines. Those entities include, but are not limited to, the National Databank maintained by the National Board for Respiratory Care and the Healthcare Integrity and Protection Data Bank (HIPDB) maintained by the U.S. Department of Health and Human Services.

5) The RCP agrees that if circumstances arise which affect the RCP's ability to remain in compliance with any of the terms of this Consent Order or to make continued progress on completing any of the requirements, the RCP shall immediately notify the Board in writing, fully describing the situation and providing a specific request to modify the terms of this Consent Order for the Board's consideration. **However, the RCP acknowledges that unless and until the Board confirms its acceptance of such a modification IN WRITING to the RCP, no modification of this Consent Order shall be in effect.**

6) The RCP acknowledges and agrees that if he fails to comply with the terms of this Consent Order, either by completely failing to carry out one of his obligations, or failing to complete an obligation within a time specified, that will constitute a violation of 21 N.C. Admin. Code 61 .0307(3), and that as a result, the Board may immediately suspend or revoke the License, or impose additional disciplinary sanctions or performance obligations on the RCP.

7) The RCP acknowledges and agrees that he must continue to comply with the Respiratory Care Practice Act ("RCPA") and the Board's Rules; and further acknowledges that if other evidence of his non-compliance with the RCPA or the Board's Rules, that is not presented in the Stipulated Facts above should arise after the execution of this Consent Order, then the Board may invoke other disciplinary measures against him, based on that other evidence; and that in determining the appropriate action to take in response to any such other evidence of his non-compliance with the RCPA or the Board's Rules, the Board also may consider the conduct of the RCP which is presented in the Stipulated Facts in this Consent Order.

## **VI. Effective Date**

All provisions of this Consent Order are effective upon the date that the Executive Director of the Board signs it, and it shall remain in effect from that date for the period or periods specified, or until amended in writing by the Board.

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**CONSENT TO ISSUANCE OF ORDER BY RESPIRATORY CARE PRACTITIONER**

I, Thomas E. Edmonds, state that I have read the foregoing Consent Order; that I know and fully understand its contents; that I agree freely and without threat or coercion of any kind to comply with the terms and conditions stated herein; and that I consent to the entry of this Consent Order as a condition of maintaining my License from the North Carolina Respiratory Care Board.

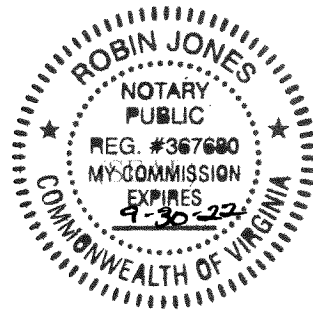
Thomas E. Edmonds  
Thomas E. Edmonds

STATE OF Virginia  
COUNTY OF Wythe

There personally appeared before me, a Notary Public in and for the County of Wythe, State of Virginia, Thomas E. Edmonds, who, after having presented documentation of his identity that was satisfactory to me, did acknowledge that he executed the foregoing Consent Order as His free and voluntary act.

This 3 day of September 2020.

Robin Jones  
Notary Public



My Commission Expires: 9-30-22

**ENTRY OF CONSENT ORDER WITH THOMAS E. EDMONDS ON BEHALF OF THE NORTH CAROLINA RESPIRATORY CARE BOARD**

The foregoing Consent Order is entered at Cary, North Carolina, this 8th day of September, 2020.

William P. Croft  
William Croft, Ed.D., Ph.D., RRT, RCP  
Executive Director  
North Carolina Respiratory Care Board