



INYO COUNTY
EMERGENCY MEDICAL CARE COMMITTEE



Bishop Fire Training Facility
960 Poleta Street
(Off of East Line Street)
Bishop, CA 93514

July 19, 2010
QI Committee --5:00 p.m.
EMCC -- 6:00 p.m.

A G E N D A

- I. CALL TO ORDER**
- II. APPROVAL OF MAY 24, 2010 MINUTES**
- III. ICEMA UPDATE**
 - A. Medication Shortage Update
 - B. Implementation of 2010 EMT Regulations
- IV. EMS SYSTEM MANAGEMENT REPORTS**
 - A. ALS/BLS Reports
 - B. Base Hospital Report
 - C. ePCR Update
- V. OLD BUSINESS**
 - A. EMS Strategy Subcommittee Report
 - B. Other
- VI. NEW BUSINESS**

EMT Incident Investigation, Determination of Action, Notification and Administrative Hearing Process -- Reference #1070
- VII. OTHER/PUBLIC COMMENT**
- VIII. COMMITTEE MEMBER REQUEST FOR TOPICS FOR NEXT MEETING**
- IX. NEXT MEETING DATE AND LOCATION**
- X. ADJOURNMENT**

The Inyo County Emergency Medical Care Committee (EMCC) meeting facility is accessible to persons with disabilities. If assistive listening devices or other auxiliary aids or services are needed in order to participate in the public meeting, requests should be made through the Inland Counties Emergency Medical Agency at least three (3) business days prior to the EMCC meeting. The telephone number is (909) 388-5823, and office is located at 515 North Arrowhead Avenue, San Bernardino, CA



INYO COUNTY EMCC MEETING
Big Pine Fire Department

MINUTES
May 24, 2010

Voting Members Present:

Paul Postle, Chairperson
Judd Symons, Vice Chair
Phil Ashworth
Le Roy Kritz
Steven Davis
Andrew Stevens
Jean Turner
Lloyd Wilson
Lee Barron

So. Inyo Fire Prot. District, Chief
Symons Emergency Specialties, Inc.
Independence Fire Department
Lone Pine Fire Department, Chief
Olancha Cartago Fire Dept., Chief
Northern Inyo Hospital
Health & Human Services, Director
Big Pine Fire Department, Chief
Southern Inyo Hospital

paul2701@wildblue.net
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LChief2401@lonepinetv.com
olanchafire@aol.com
Andrew.stevens@nih.org
jturner@inyocounty.us
dlwilson41@msn.com
leebee40@aol.com

Voting Members Absent:

Dr. Michael Dillon
Joe Cappello
Mike Patterson
Martha Reynolds

ER Physician
Independence Fire Department
Sierra Life Flight, Program Director
Northern Inyo Hospital

MichaelDillon@qnet.com
jcappello@cebridge.net
mike@sierraaviation.com
marthareynolds@nih.org

Other Attendees:

Diane Fisher
Gina Ellis
Marty Fortney
Rick Johnson, MD
Tamara Cohn
Ray G. Seguire
David Calloway
Chief John Marzano
Angela F. Sirohui
Paul Bedell
Melissa Best-Baker
Denise Lauffer, RN
Kevin Carunchio

ICEMA
ICHHS, Recording Secretary
Inyo County Supervisor
ICHHS, Public Health
ICHHS, Public Health
Bishop Fire Department
Big Pine Fire Department
Big Pine Fire Department
So. Inyo Fire Prot. District
Inyo County Sheriff's Office
ICHHS, Public Health
Southern Inyo Hospital
Inyo County CAO

DFisher@cao.sbcounty.gov
gellis@inyocounty.us
marty@aberdeenresort.com
drrickjohn@gmail.com
tcohn@inyocounty.us
Seguire@ca-bishop.us

BigPineFire@chilitech.net

PBedell@inyocounty.us
mbestbaker@inyocounty.us
deniselauffer@aol.com
KCarunchio@inyocounty.us

I. CALL TO ORDER

Chairperson, Paul Postle called the meeting to order at 6:18 p.m.

II. APPROVAL OF MARCH 22, 2010 MINUTES

Chairperson Paul Postle asked if there was any opposition to approving the minutes of March 22, 2010 EMCC meeting. There was no opposition. Motion carried unanimously.

III. ICEMA UPDATE

A. Personnel Update

Diane Fisher gave a brief ICEMA personnel update. She reported that one employee was leaving, and his duties would be redistributed, and that there was also a new hire.

IV. EMS SYSTEM MANAGEMENT REPORTS

A. ALS/BLS Reports

The ALS and BLS reports for the period of January 2010 – April 2010 were distributed and reviewed.

B. Base Hospital Report

There was no base hospital report. Northern Inyo Hospital needs to submit a report. This topic was discussed at the Q.I. meeting.

C. ePCR Update

There was a group discussion on the best times to conduct training on Toughbooks. Many suggestions were made, but most of the agency representatives agreed that the trainings should be held at multiple locations, perhaps on a weeknight when local agencies already gather for their meetings. The trainings will take about three hours. A suggestion was made to have “train the trainer” sessions. There was discussion on how to use the system. It was said that Symons Ambulance has staff that are familiar with the system, and they have an in-house training tool. Diane noted that now is a good time to get on the system since currently there is no cost to the providers, and that it could be costly in the future, and it will have to be done at some point. She added that although the transition may be difficult and will require double data entry at the beginning, it will prove helpful for collections and provide important data. It was noted that Northern Inyo Hospital needs a wireless printer, and that the printer that was given to Symons Ambulance did not fit. Diane will coordinate a training schedule based on information provided by the various fire departments.

V. OLD BUSINESS

A. Symons Ambulance

Judd reported that so far there have not been any major issues as a result of the service cutbacks. He said that there has been a slight increase in fire requests and Big Pine Fire Department has come to assist 4-5 times. There was discussion on “super rural” areas, and Mule Days coverage. It was felt that this item does not need to be a standing item on future agendas.

B. Letter of Support to ICEMA – EMT-I Requirement

The Inyo County Board of Supervisors at their May 11, 2010 meeting approved a letter to ICEMA regarding “The Looming Crisis with Loss of EMS Volunteers in Rural Inyo County”. The Chairperson of the Board and the Health and Human Services Director

signed the letter. Paul Postle would be the final signature and the letter sent to ICEMA and copies to several State agencies.

B. Implementation of 2010 EMT Regulations

There will not be any new certifications issued while the system is transitioning from June 18, 2010 to July 1, 2010. People need to apply before June 18 or after July 1, 2010. Existing EMT's need to have their Livescans done now. They do not have to wait to recertify; they can go in early. It will be more expensive after July 1, 2010. For those who already have it done, they do not need to do it again. If anyone encounters a problem, they can send Diane an e-mail.

VI. NEW BUSINESS

A. Ambulance Rates Ordinance

The Inyo County Board of Supervisors at their May 11, 2010 meeting adopted the new ambulance rates ordinance. The ordinance and the rate setting policy emulated the ICEMA language. The old rate ordinance was rescinded. The new rates go into effect July 1, 2010. The new Ambulance Rate Ordinance and the Board Order approving the ordinance were distributed to the group.

B. Radio Narrow Banding Requirement – Sgt. Paul Bedell

Sergeant Paul Bedell of the Inyo County Sheriff's Department reported that by 2013 all radio systems will need to be narrow banded. He recommended that local agencies begin looking at their equipment now and begin planning well in advance. He added that equipment newer than 1997-1998 may be capable of narrow banding. Agencies should make a list of their radios with make and model and send an e-mail to pbedell@inyocounty.us or khardcastle@inyocounty.us by July 1, 2010. There was extensive group discussion on the process and the details involved with coordinating this effort. The Sheriff's office will coordinate future timelines and will work with the State. There is a cost involved with programming the radios. Tamara Cohn of Inyo County Public Health spoke about HPP funds that may be available for EMS and hospitals.

C. ICEMA Fee Schedule 2010/2011

The 2010/2011 ICEMA Fee Schedule was included in the meeting packet. Diane Fisher gave an overview and noted that there are some new fees. The fee for trauma hospitals will apply in the future if and when hospitals opt to apply for designation.

D. Nasal Administration of Medications

Diane Fisher spoke about the Nasal Administration of Medications document in the packet noting that the changes will go into effect July 1, 2010.

E. Protocols

Reference#

1. 1050, MICN Certification Requirements
2. 1080, Flight Nurse Authorization

3. 6050, Pulse Oximetry Provider (Delete Protocol)
4. 6080, Paramedic Blood Draw for Chemical Test at the Request of a Peace Officer
5. 8010, Interfacility Transport Guidelines (ALS)
6. 9020, Physician on Scene
7. 9040, Reporting Incidents of Suspected Abuse Policy
8. 9050, Organ Donor Information

Diane Fisher asked if the group would be willing to approve the protocols in one motion, or if they would like to discuss and approve each of the protocols individually. She gave a brief overview of the items, noting that they had been out for public comment for 45 days. Motion Steve Davis, seconded by Leroy Kritz to approve protocols #1-#8 as outlined on the agenda with the exception that a typo (Peace Officer) found in Reference #6080 item #5 (i) be corrected.

VII. OTHER/PUBLIC COMMENT

A. Strategy Subcommittee

The Strategy Subcommittee has not yet met. This subcommittee should be a standing item on future agendas. It was felt that this group should meet face-to-face, and that video conferencing could be used to connect meeting sites. There was group discussion on staffing shortages and the impact on the local agencies. A request was made that ICEMA furnish a list of providers in the area so that they may be contacted to determine interest in resuming their role as an EMT. Lone Pine and Olancho-Cartago Fire Departments are looking into offering an express EMT training. Community awareness regarding volunteer shortages was discussed. Additional participants for the subcommittee were proposed. Members will include Steve Davis, Jean Turner, Paul Postle, Judd Symons, Kevin Carunchio, Denise Lauffer, LeRoy Kritz, Lloyd Wilson, Dr. Rick Johnson, Supervisor Marty Fortney and Phil Ashworth. The first meeting will be held on June 3rd at 5:15 p.m. at the Bishop Fire Training Facility.

B. National Registry Exam

An accelerated EMT class will start June 8, 2010 in Lone Pine; the class will be free. This training is designed to help people taking the test.

C. Pearson VUE Test Site

The Pearson VUE test site in Ridgecrest will be up and running as of June 25, 2010. Comments were made that the test and the process need to be less intimidating and may have scared people off in the past. Testing will only be offered in Ridgecrest since the military base may be an instrumental part of providing persons to test, where Bishop and Mammoth may not. The group agreed that this is a positive step in the right direction.

D. Free Respiratory Protection Training

Inyo County Public Health will host free Respiratory Protection training on June 3, 2010, at the Bishop Fire Training Facility. Flyers were distributed.

VIII. COMMITTEE MEMBER REQUEST FOR TOPICS FOR NEXT MEETING

A reminder was given that items on the agenda need to be sent to Diane two weeks ahead of time.

IX. NEXT MEETING DATE AND LOCATION

Monday, July 19, 2010, Inyo County HSS (at the Bishop Fire Training Facility)
Q.I. 5:00 p.m.
EMCC 6:00 p.m.

X. ADJOURNMENT

Motion Steve Davis, seconded by Leroy Kritz to adjourn the meeting. Motion carried unanimously. The meeting adjourned at 8:11 p.m.

Staff Report - EMCC

Emergency Drug Shortage Update

ICEMA was informed of a national shortage of emergency medications, specifically Dextrose 50% and Epinephrine 0.1mg/ml 10 ml emergency syringes. This shortage is due to Amphastar Pharmaceuticals ceasing production of their unapproved emergency drug syringes. Currently one pharmaceutical company, Hospira, is producing these medications in the emergency syringes. Due to the increased demand, Hospira's supply is on back order. Hospira does not indicate when this shortage will end and is releasing product as soon as it is available.

ICEMA issued a memo on June 24th outlining alternative methods to treat hypoglycemic and cardiac emergencies involving these two medications. The memo reinforced the importance of base station contact to avoid medication and dosing errors.

ICEMA was also informed of a shortage of morphine packaged in ampules. ICEMA policy states morphine must be carried in ampules to assure tamper resistance. Baxter Pharmaceuticals indicates that this shortage is a packaging issue with ampules and the shortage should be temporary. On June 24th, ICEMA issued a memo allowing providers more flexibility in the concentration of ampules that may be carried during this shortage. ICEMA will continue to monitor the situation and modify the drug and equipment list if needed.

Sherri Shimshy, RN
7/15/10



EMERGENCY MEDICAL TECHNICIAN INCIDENT INVESTIGATION, DETERMINATION OF ACTION, NOTIFICATION AND ADMINISTRATIVE HEARING PROCESS

PURPOSE

To establish a policy and procedure governing reportable situations and the evaluation and determination regarding whether or not disciplinary cause exists.

POLICY

Any information received from any source, including discovery through medical audit or routine follow-up on complaints, which suggests a violation of, or deviation from, state or local EMS laws, regulations, policies, procedures or protocols will be evaluated pursuant to this policy and consistent with the California Code of Regulations (CCR), Title 22, Division 9, Chapter 6.

AUTHORITY

California Health and Safety Code, Division 2.5, Chapter 4 and 5, the California Code of Regulations, Title 22, Chapter 6.

DEFINITIONS

Certificate - means a valid Emergency Medical Technician (EMT) certificate issued pursuant to Division 2.5 of the California Health and Safety Code.

Certifying entity - as used in this policy, means the medical director of the ICEMA or a public safety agency or the office of the State Fire Marshal if the agency has a training program for EMT personnel that is approved pursuant to the standards established in Section 1797.109 of the Health and Safety Code.

Certification Action - means those actions that may be taken by the ICEMA medical director that include denial, suspension, revocation of a certificate, or placing a certificate holder on probation.

Certificate Holder – for the purpose of this policy, shall mean the holder of a certificate, as that term is described above.

CCR – means the California Code of Regulations, Title 22, Division 9.

Discipline - means either a disciplinary plan taken by a relevant employer pursuant to Section 100206.2 of the CCR or certification action taken by a medical director pursuant to Section 100204 of the CCR, or both a disciplinary plan and certification action.

Disciplinary Cause - means an act that is substantially related to the qualifications, functions, and duties of an EMT and is evidence of a threat to the public health and safety, per Health and Safety Code Section 1798.200.

Disciplinary Plan - means a written plan of action that can be taken by a relevant employer as a consequence of any action listed in Section 1798.200 (c).

EMSA - State Emergency Medical Services Authority

Functioning outside of medical control - means any provision of prehospital emergency medical care which is not authorized by, or is in conflict with, any policies, procedures, or protocols established by ICEMA, or any treatment instructions issued by the base hospital providing immediate medical direction.

HSC - Health and Safety Code

Model Disciplinary Orders (MDO) - means the Recommended Guidelines for Disciplinary Orders and Conditions of Probation (EMSA document #134) which were developed to provide consistent and equitable discipline in cases dealing with disciplinary cause.

Notification of Defense - Notification sent to ICEMA by certificate holder that states certificate holder intends to defend actions through APA hearing process.

Prehospital emergency medical personnel - means those persons who have been certified/authorized/accredited as qualified to provide prehospital emergency medical care pursuant to Division 2.5, HSC.

Relevant employer(s) - means those ambulance services permitted by the Department of the California Highway Patrol or a public safety agency that the certificate holder works for or was working for at the time of the incident under review, as an EMT either as a paid employee or a volunteer.

PROCEDURE

Responsibilities of Relevant Employer

1. Under the provisions of the CCR and this policy, relevant employers:
 - a. May conduct investigations to determine disciplinary cause.
 - b. Upon determination of disciplinary cause, the relevant employer may develop and implement, a disciplinary plan, in accordance with the MDOs.

2. The relevant employer shall submit that disciplinary plan to ICEMA along with the relevant findings of the investigation related to disciplinary cause, within three (3) working days of adoption of the disciplinary plan.
3. The employer's disciplinary plan may include a recommendation that the medical director consider taking action against the holder's certificate to include denial of certification, suspension of certification, revocation of certification, or placing a certificate on probation.
4. The relevant employer shall notify the ICEMA medical director within three (3) working days after an allegation has been validated as potential for disciplinary cause.
5. The relevant employer shall notify the ICEMA medical director within three (3) working days of the occurrence of any of following:
 - a. The employee is terminated or suspended for a disciplinary cause,
 - b. The employee resigns or retires following notification of an impending investigation based upon evidence that would indicate the existence of a disciplinary cause, or
 - c. The employee is removed from employment-related duties for a disciplinary cause after the completion of the employer's investigation.

Jurisdiction of the ICEMA Medical Director

1. The medical director who issued the certificate, or in the case where the certificate was issued by a non-LEMSA certifying entity, the LEMSA medical director that has jurisdiction in the county in which the headquarters of the certifying entity is located, shall conduct investigations to validate allegations for disciplinary cause when the EMT is not an employee of a relevant employer or the relevant employer does not conduct an investigation. Upon determination of disciplinary cause, the medical director may take certification action as necessary against a certificate holder.
2. The medical director may, upon determination of disciplinary cause and according to the provisions of this policy, take certification action against an EMT to deny, suspend, or revoke, or place a certificate holder on probation, upon the findings by the medical director of the occurrence of any of the actions listed in Health and Safety Code, Section 1798.200 (c) and for which any of the following conditions are true:
 - a. The relevant employer, after conducting an investigation, failed to impose discipline for the conduct under investigation, or the medical director makes a determination that discipline imposed by the relevant employer was not in accordance with the MDOs and the conduct of the certificate holder constitutes grounds for certification action.

- b. The medical director determines, following an investigation conducted in accordance with this policy, that the conduct requires certification action.
3. The medical director, after consultation with the relevant employer or without consultation when no relevant employer exists, may temporarily suspend, prior to a hearing, a certificate holder upon a determination of the following:
 - a. The EMT has engaged in acts or omissions that constitute grounds for revocation of the certificate; and
 - b. Permitting the EMT to continue to engage in certified activity without restriction poses an imminent threat to the public health and safety.
4. If the medical director takes any certification action, the medical director shall notify the State EMS Authority of the findings of the investigation and the certification action taken and shall enter said information into the state registry.

Evaluation of Information

1. A relevant employer who receives an allegation of conduct listed in Section 1798.200 (c) of the Health and Safety Code against a certificate holder and the allegation is validated, shall notify the medical director that has jurisdiction in the county in which the violation occurred, within three (3) working days, of the certificate holder's name, certification number, and the allegation(s).
2. When ICEMA receives a complaint against a certificate holder, ICEMA shall forward the original complaint and any supporting documentation to the relevant employer for investigation, if there is a relevant employer, within three (3) working days of receipt of the information. If there is no relevant employer or the relevant employer does not wish to investigate the complaint, the medical director shall evaluate the information received from a credible source, including but not limited to, information obtained from an application, medical audit, or public complaint, alleging or indicating the possibility of a threat to the public health and safety by the action of an applicant for, or holder of, a certificate issued by ICEMA or pursuant to Division 2.5, H&SC.
3. The relevant employer or medical director shall conduct an investigation of the allegations in accordance with the provisions of this policy, if warranted.

Investigations Involving Firefighters

1. The rights and protections described in Chapter 9.6 of the Government Code shall only apply to a firefighter during events and circumstances involving the performance of his or her official duties.

2. All investigations involving certificate holders who are employed by a public safety agency as a firefighter shall be conducted in accordance with Chapter 9.6 of the Government Code, Section 3250 et. seq.

Due Process

The certification action process shall be in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code.

Determination of Action

1. Certification action shall be taken as a result of the findings of the investigation.
2. Upon determining the disciplinary or certification action to be taken, the relevant employer or ICEMA medical director shall complete and place in the personnel file or any other file used for any personnel purposes by the relevant employer or ICEMA, a statement certifying the decision made and the date the decision was made. The decision must contain findings of fact and a determination of issues, together with the disciplinary plan and the date the disciplinary plan shall take effect.
3. In the case of a temporary suspension order pursuant to Section 100209 (c) of the CCR, it shall take effect upon the date the notice required by Section 100213 of the CCR is mailed to the certificate holder.
4. For all other certification actions, the effective date shall be thirty days from the date the notice is mailed to the applicant for, or holder of, a certificate unless another time is specified or an appeal is made.

Temporary Suspension Order

1. The ICEMA medical director may temporarily suspend a certificate prior to hearing if, the certificate holder has engaged in acts or omissions that constitute grounds for denial or revocation according to Section 100216(c) of the CCR and if in the opinion of the medical director permitting the certificate holder to continue to engage in certified activity would pose an imminent threat to the public health and safety.
2. Prior to, or concurrent with, initiation of a temporary suspension order of a certificate pending hearing, the medical director shall consult with the relevant employer of the certificate holder.
3. The notice of temporary suspension pending hearing shall be served by registered mail or by personal service to the certificate holder immediately, but no longer than three (3) working days from making the decision to issue the temporary suspension. The notice

shall include the allegations that allowing the certificate holder to continue to engage in certified activities would pose an imminent threat to the public health and safety. Within three (3) working days of the initiation of the temporary suspension by ICEMA, ICEMA and relevant employer shall jointly investigate the allegation in order for the ICEMA medical director to make a determination of the continuation of the temporary suspension.

- a. All investigatory information, not otherwise protected by the law, held by ICEMA and the relevant employer shall be shared between ICEMA, the relevant employer and the certificate holder via facsimile transmission or overnight mail relative to the decision to temporarily suspend.
- b. ICEMA shall serve within fifteen (15) calendar days an accusation pursuant to Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code (Administrative Procedures Act).
- c. If the certificate holder files a Notice of Defense, the administrative hearing shall be held within thirty (30) calendar days of ICEMA's receipt of the Notice of Defense.
- d. The temporary suspension order shall be deemed vacated if ICEMA fails to serve an accusation within fifteen (15) calendar days or fails to make a final determination on the merits within fifteen (15) calendar days after the Administrative Law Judge (ALJ) renders a proposed decision.

Final Determination of Certification Action by the Medical Director

Upon determination of certification action following an investigation, and appeal of certification action pursuant to Section 100211.1 of the CCR, if the respondent chooses, the medical director may take the following final actions on an EMT certificate:

- a. Place the certificate holder on probation
- b. Suspension
- c. Denial
- d. revocation

Placement of a Certificate Holder on Probation

The ICEMA medical director may place a certificate holder on probation any time an infraction or performance deficiency occurs which indicates a need to monitor the certificate holder's conduct in the EMS system, in order to protect the public health and safety. The term of the probation and any conditions shall be in accordance with the MDOs. The ICEMA medical director may revoke the EMT certificate if the certificate holder fails to successfully complete the terms of probation.

Suspension of a Certificate

1. The medical director may suspend an individual's EMT certificate for a specified period of time for disciplinary cause in order to protect the public health and safety.
2. The term of the suspension and any conditions for reinstatement shall be in accordance with the MDOs.
3. Upon the expiration of the term of suspension, the individual's certificate shall be reinstated only when all conditions for reinstatement have been met. The medical director shall continue the suspension until all conditions for reinstatement have been met.
4. If the suspension period will run past the expiration date of the certificate, the EMT shall meet the recertification requirements for certificate renewal prior to the expiration date of the certificate.

Denial or Revocation of a Certificate

1. The medical director may revoke any EMT certificate for disciplinary cause that has been investigated and verified by application of this policy.
2. The ICEMA medical director shall deny any application for certification or revoke an EMT or Advanced EMT certificate if any of the following apply to the applicant:
 - a. Has committed any sexually related offense specified under Section 290 of the Penal Code.
 - b. Has been convicted of murder, attempted murder, or murder for hire.
 - c. Has been convicted of two (2) or more felonies.
 - d. Is on parole or probation for any felony.
 - e. Has been convicted and released from incarceration for said offense during the preceding fifteen (15) years for the crime of manslaughter or involuntary manslaughter.
 - f. Has been convicted and released from incarceration for said offense during the preceding ten (10) years for any offense punishable as a felony.

the effective date of the certification action. EMT's whose certification is placed on probation must complete their probationary requirements with the EMS Agency that imposed the probation.

Notification of Final Decision of Certification Action

1. For the final decision of certification action, the ICEMA medical director shall notify the applicant/certificate holder and his/her relevant employer(s) of the certification action within ten (10) working days after making the final determination.
2. The notification of final decision shall be served by registered mail or personal service and shall include the following information:
 - a. The specific allegations or evidence which resulted in the certification action;
 - b. The certification action(s) to be taken, and the effective date(s) of the certification action(s), including the duration of the action(s);
 - c. Which certificate(s) the certification action applies to in cases of holders of multiple certificates;
 - d. A statement that the certificate holder must report the certification action within ten (10) working days to any other LEMSA and relevant employer in whose jurisdiction s/he uses the certificate.