

Oregon Health Authority EMS and Trauma Systems Program



Ambulance Service Facilities and Records Survey

Ambulance Service Facilities	s and	ı net	Joius	Survey
Survey Date/Time:				
Ambulance Service Name:				
Service Address:				
Additional Locations:				
Service Representative(s):				
OHA Representative(s):				
EMS Medical Director:				
Total of Each Level of Provider: Qualified DriverEMR EN	/IT	EMT	-l	AEMT Paramedic ABC
Total Licensed Ambulances:				
Pre-Survey Documentation				
Administration Office				OAR 333-250-0255
	Yes	No	N/A	Notes
Building in good repair				
Free from fire and saftey hazards				
Clean floors, walls ceilings				
Ambulance Location(s)				OAR 333-250-0255
	Yes	No	N/A	Notes
Building in good repair				
Free from fire or saftey hazards				
Clean walls, floors ceilings				
Business Licenses and Records	L	L		OAR 333-250-0210,0220,0250,0270
	Yes	No	N/A	Notes
			,	
OHA-EMS ambulance service license displayed in the business office				
CLIA certificate or certificate of waiver				
Staffing schedule to show adequate staffing that supports the type				
of service, local call volume and the needs of the area				
Private service: Documentation from the Oregon Secretary of State's				
Corporation Division that the ambulance service is registered and in				
good standing				
Private service: Copy of insurance documents for vehicles and				
professional liability				
Public service: Documentation from the county or city authorizing operation of an ambulance service				
Documentation which defines the organizational structure including;				
responsibility, authority, and chain of command for all necessary				
functions within the organization				
Copies of registrations for all vehicles (Include aircraft, if applicable)				
A copy of the licensed ambulance service's Air Carrier Operating				
Certificate, if the service will be operating an air ambulance				
Signed mutual aid agreements with other licensed ambulance				

service organizations

Signed contracts with teaching institutions if service provides				
paramedic internships				
Copy of any variance granted by OHA-EMS				
EMS related continuing education offered by the licensed ambulance				
service or designee must be documented and provided to the				
•				
employee or volunteer				
OHA License Management System (LMS) is updated: Contact person,				
address(es), personnel (including staff roles) and vehicle rosters				
Documentation showing a licensed ambulance service requires each				
person staffing an ambulance or providing prehospital emergency or				
non-emergency care to display his or her level of licensure on the				
outermost garment.				
Documentation showing all records relating to an ambulance				
service's operations are retained for not less than seven years.				
Provide and require that each employee, volunteer, and ambulance				
based clinician complete an initial orientation program that includes				
but is not limited to: Ambulance service standing orders; Ambulance				
service policies and procedures; Driving and operating requirements				
for ambulance vehicles; and operations of equipment				
Documentation of training on the proper use of any new				
equipment, procedure, or medication prior to being placed				
into operation on an ambulance				
Policies and Procedures				OAR 333-250-0265
Tollers and Troccaules				O/111 333 230 0203
	Vec	No	NI/Δ	Notes
Delign and presenting for year time control for blood because	Yes	No	N/A	Notes
Policy and procedure for work practice controls for bloodbourne	Yes	No	N/A	Notes
pathogens	Yes	No	N/A	Notes
pathogens Policy and procedure for storage and security of medications, both	Yes	No	N/A	Notes
pathogens Policy and procedure for storage and security of medications, both controlled and non-controlled substances including; identification		No	N/A	Notes
pathogens Policy and procedure for storage and security of medications, both controlled and non-controlled substances including; identification and destruction of deteriorated, expired, or unfit for use medications		No	N/A	Notes
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Quality assurance and improvement program is in place				OAR 333-250-0320
Policy and procedure regarding patient rights, including distribution to employees				OAR 333-250-0330
Medical Director Requirements				OAR 333-250-0300
	Yes	No	N/A	Notes
Written and signed set of treatment protocols for each level of service provided. Attach a separate list of all medications				
Signed and dated contract between the ambulance service and EMS medical director				
DEA License listing the location of any controlloed substances when not stored on an ambulance				
A signed and dated policy describing the type and amount of controlled substances stored on each ambulance and how controlled substances will be stored, accessed, recorded, administered, destroyed and secured				
Housing Personnel and Equipment				OAR 333-250-0255
	Yes	No	N/A	Notes
Sleeping area if on duty for a 24-hour shift Adequate toilet, hand-washing and shower facilities with hot and cold running water, antiseptic soap and clean towels for hand and				
body drying				
If the licensed ambulance service does not have shower facilities, the licensed ambulance service must have a signed agreement or contract with a medical facility or other entity to make available shower facilities to ambulance personnel for the purpose of showering after coming in contact with medical or other biohazardous waste				
Separate storage areas for clean and soiled linen				
Designated storage area for expired or otherwise unfit for use medications				
Designated storage area for out of service equipment				
Secure storage for all patient care equipment, supplies and medications				
A signed agreement with a medical facility that the medical facility will provide the patient care equipment, supplies, and medications				
PCR Requirements				OAR 333-250-0310
	Yes	No	N/A	Notes
An electronic PCR is submitted in each instance where patient contact is initiated and sent to OREMSIS within 24 hours				
Process for personnel to relay pertinent patient care information to the hospital or receiving facility staff prior to leaving the hospital or receiving facility				
Procedure for releasing a PCR to appropriate requesting parties				
PCRs are stored in a secure manner, with limited access to the PCRs by office and ambulance personnel (Paper forms)				

Procedure for the method and verification of the destruction of a PCR (Maintained for 10 years, minors records until the patient reaches the age of 21 or for at least 10 years) (Paper forms)					
Communication and Dispatching				OAR 333-250-0290	
	Yes	No	N/A	Notes	
FCC license					
Contract with PSAP					
Providing a reliable means of alerting and communicating with an ambulance crew before, during and after an ambulance call					
Ambulance service phone refers the public to dial 911 for an emergency if not answered by a live person					
Dispatch records available for at least seven years					
DPSST EMD course certificate or equivalent					
Four hours of annual refresher training				These records may be located at the PSAP	
Advertising OAR 333-250-0250					
	Yes	No	N/A	Notes	
Advertise or promote "9-1-1" for emergency ambulance service					
Advertising must include; the legal name of the ambulance service, hours and days of operation and the level of service					
Maintain copies of all print, audio, video, and all other types of advertisements for one year after use					

Notes: