

# ***EMS Service Inspection Policy***

Approved 04/01/2016

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## **The Kansas Board of EMS**

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## **POLICY ITEM**

**Date:** 04/01/2016

**KBEMS PLCY - TBD**

**RE: EMS Service Inspection**

Purpose: To identify the process of EMS Service Inspections.

History/Background: Last revision February 7, 2018

### ***Inspection Procedures/Corrective Actions***

1. K.A.R. 109-2-1(a) Each operator of an ambulance service shall perform the following:
  - (1) Notify the board of any change in the service director within seven days of the change; and
  - (2) designate a person as the ambulance service director to serve as an agent of the operator.

(b) The ambulance service director shall meet the following requirements:

  - (1) Be responsible for the operation of the ambulance service;
  - (2) be available to the board regarding permit, regulatory, and emergency matters
    - In the event a service director or a service representative is not available for an inspection, board staff may contact the local dispatch center (911 if necessary) and request a service representative respond to the service's administrative office. Board staff shall not conduct a service inspection without a service representative present. If a service operator refuses to participate with a service inspection, board staff shall refer the matter to the Investigation Committee for consideration of administrative action.
2. K.A.R. 109-2-5(k) Each operator shall produce the service permit upon request of the board.
  - If the service permit is lost, board staff may request an operator to apply for a duplicate permit within five (5) business days of the inspection. A duplicate permit fee of \$10.00 shall be assessed to the operator.
3. K.A.R. 109-2-5 (q) Each operator shall maintain a current duty roster that demonstrates compliance with K.S.A. 65-6135, and amendments thereto. The duty roster shall reflect appropriate staffing for the service and ambulance type as specified in K.A.R. 109-2-6.
  - If the service does not have a duty roster on file, board staff may request the service director to develop a duty roster within five (5) days. Board staff may request the service enter into a compliance monitoring program to ensure future compliance.
4. K.A.R. 109-2-1(b) The ambulance service director shall meet the following requirements:
  - (3) be responsible for maintaining a current list of the ambulance service's attendants;
  - (5) notify the board of each addition or removal of an attendant from the attendant roster within 90 days of the addition or removal;
    - Board staff shall verify the service roster with the KBEMS database produced roster to verify compliance.

5. K.A.R. 109-2-5 (s) Each ambulance service operator shall develop and implement operational policies or guidelines, or both, that have a table of contents and address policies and procedures.
  - If a service operator is unable to produce a current copy of the service's operational policies or guidelines, or both, or if the operational policies or guidelines do not meet the requirements of K.A.R 109-2-5(s); board staff may request the operator submit a current copy of the services operational policies or guidelines, with the necessary revisions, within thirty (30) days of the inspection.
  
6. K.A.R109-2-5 (u) Each ambulance service operator shall adopt and implement medical protocols developed and approved in accordance with K.S.A. 65-6112, and amendments thereto. The medical protocols shall be approved annually.
 

(v) Each operator's medical protocols shall include a table of contents and treatment procedures at a minimum for the following medical and trauma-related conditions for pediatric and adult patients:

  - If a service operator is unable to produce a current copy of the service's medical protocols, or if the medical protocols do not meet the requirements of K.A.R 109-2-5(v); board staff may request the operator submit a current copy of the services medical protocols, with the necessary revisions, within thirty (30) days of the inspection.
  
7. K.A.R 109-2-2(h)(2) (2) Each operator submits the list of supplies and equipment carried on each ambulance validated by the signature of the ambulance service's medical director to the board each year with the operator's application for an ambulance service permit.
  - Board staff may verify that the listed supplies and equipment are present on each ambulance inspected. K.A.R. 109-2-8 details out the minimum equipment required to be carried on each ambulance. Board staff may inspect the service according to the minimum equipment list as indicated in K.A.R. 109-2-8 and as determined by the service's medical protocols.
  
8. K.A.R 109-2-5(n) Each operator shall maintain a daily record of each request for ambulance response. This record shall include the date, time of call, scene location, vehicle number, trip number, caller, nature of call, and disposition of each patient.
  - If an operator is unable to produce a daily log of each request for service, board staff shall request the operator provide a copy within five (5) days of the inspection.
  
9. K.A.R 109-2-5 (r) Each operator shall provide a quality improvement or assurance program that establishes medical review procedures for monitoring patient care activities. This program shall include policies and procedures for reviewing patient care documentation. Each operator shall review patient care activities at least once each quarter of each calendar year to determine whether the ambulance service's attendants are providing patient care commensurate with the attendant's scope of practice and local protocols.
  - (1) Review of patient care activities shall include quarterly participation by the ambulance service's medical director in a manner that ensures that the medical director is meeting the requirements of K.S.A. 65-6126, and amendments thereto.
  - (2) Each operator shall, upon request, provide documentation to the executive director demonstrating that the operator is performing patient care reviews and that the medical director is reviewing, monitoring, and verifying the activities of the attendants pursuant to K.S.A. 65-6126, and amendments thereto, as indicated by the medical director's electronic or handwritten signature.
  - (3) Each operator shall ensure that documentation of all medical reviews of patient care activities is maintained for at least three years.
    - If an operator does not have a written quality improvement or assurance program or cannot provide documentation that the service is performing quality improvement according to the service's policies; or if the operator cannot provide tangible evidence that the service's medical director is participating at least quarterly each year, board staff may request an operator to submit

to a compliance monitoring program or to complete the QA reviews. The option shall be at the discretion of the inspector based on the level of deficiencies.

10. K.A.R 109-2-5 (m) Each operator shall ensure that documentation is completed for each request for service and for each patient receiving patient assessment, care, or transportation. Each operator shall furnish a completed copy or copies of each patient care report form upon request of the board.
  - (o) Each operator shall maintain a copy of the patient care documentation for at least three years.
    - Board staff may evaluate a patient report form to determine the patient's condition and appropriateness of care based on the service's protocols. In the event patient care is questionable or does not comply with the service's medical protocols; or if the patient report forms reflect consistent inadequacies in documentation, board staff may refer any concern with patient care to the services medical director, and/or the Investigation Committee for consideration of administrative action.
  
11. K.A.R 109-2-8 Standards for ground ambulances and equipment, K.A.R 109-2-11 Standards for air ambulances and equipment, 109-2-12 Standards for rotor wing ambulance aircraft and equipment, and K.A.R 109-2-13 Standards for fixed wing ambulance aircraft and equipment.
  - If deficiencies are discovered with an operator's ambulances or equipment during the inspection process, board staff may recommend corrective actions according to the potential negative effects these deficiencies may have on patient care.
  
  - Board staff may request an operator to remove an ambulance from operation if problems with either the vehicle or equipment pose a threat to the public. Board staff may request an operator to replace or repair existing problems with the service's vehicles and equipment as indicated by the compliance time line list included in this policy. Board staff may request a receipt or invoice indicating equipment replacement or repair. In the event board staff identifies serious or recurrent issues with a service's ambulances or equipment, board staff may refer the service to the investigations committee for consideration of administrative action.
  
  - If there is an equipment failure during a vehicle inspection, and the operator has placed ancillary equipment on board to be used in the case of such failure, that failure may not be listed on the final inspection report, due to the operator making provisions for a possible failure. This policy will not apply to electric portable suction when a manual unit is stocked also.
  
  - If less than three non-critical violations are noted during a vehicle inspection and those violations are corrected immediately, those may not be included on the final inspection report. Non-critical violations are those deemed at the discretion of the inspector, to not be a detriment to patient care or the health and safety of the attendants, patients, or the public.
  
12. K.A.R 109-2-5 (g) Each operator shall park all ground ambulances in a completely enclosed building with a solid concrete floor. Each operator shall maintain the interior heat of the enclosed building at no less than 50 degrees Fahrenheit. Each operator shall ensure that the interior of the building is kept clean and has adequate lighting. Each operator shall store all supplies and equipment in a clean and safe manner.
  - Board staff may request that the operator take immediate steps to protect cold sensitive supplies and equipment. Board staff may also request the operator to provide an appropriate heat source within five (5) days of the inspection and submit proof that such corrective action was taken. In the event other garaging problems are found, board staff may request an operator to submit proof that appropriate actions were taken to correct the problem. Board staff may allow an operator up to thirty (30) days to correct the problem depending on the urgency for corrective action.

13. K.A.R 109-2-10a(a) Each operator of an air ambulance service shall have an air safety training program for all air medical personnel.
  - (b) Each operator of an air ambulance service shall maintain documentation demonstrating the initial completion and annual review of the air safety training program for all air medical personnel and shall provide this documentation to the board on request.
    - If an operator is unable to document that all personnel working for the service have completed the service's air safety and training program, board staff may request an operator to submit written documentation within thirty (30) days of the inspection that all personnel have completed the air safety training program.
    - If an informational publication is not available, board staff may request an operator to provide a copy of the informational publication to the board within thirty (30) days of the inspection.
14. K.A.R 109-2-10a(c) Each operator of an air ambulance service shall provide an informational publication that promotes the proper use of air medical transport, upon request, to all ground-based ambulance services, law enforcement agencies, and hospitals that use the air ambulance service.
15. Board staff shall leave a copy of each inspection form used during the inspection with the service's director or a service representative. Board staff shall explain any inspection deficiencies resulting in regulatory violations to the service director or service representative present during the inspection. Board staff shall provide follow-up documentation to the service director within ten (10) days of an inspection. This documentation shall reiterate the inspection deficiencies and proposed corrective actions.
16. If a service director fails to submit documentation which satisfactorily demonstrates compliance with proposed corrective actions, based on KBEMS Inspection Policy guidelines, board staff shall re-notify the service director, and shall provide documentation of the service inspection and proposed corrective actions to the service operator, city or county commission, and the service medical director. Board staff may allow additional time to correct inspection deficiencies if it is determined the service director has made a good faith effort to comply.
17. Board staff shall refer any service inspection to the Investigation Committee in which the operator demonstrates a disregard of Kansas statutes or regulations; or where such inspection is found to be in substantial statutory or regulatory non-compliance and could adversely affect patient care, and the safety of the attendants, and/or the public.

## ***Notification of Service Inspection***

1. Board staff shall provide at least a 24 hour notice of service inspection to each service director. It is the service director's responsibility to notify the medical director and service operator of the inspection.
2. In the event a service inspection cannot be performed at the arranged time, board staff shall re-notify the service's director prior to performing an inspection.
3. Board staff shall notify each service director or his or her designee at the business telephone number, or e-mail address identified on the service's "Permit Application" form. The inspector will also send the service director an e-mail confirming the date and time of the inspection and any other pertinent conversation.
4. When a service director is unavailable, board staff shall provide notice to the person answering the service's business telephone, or leave a message on the service's voice mail.
5. If a service's business telephone is not answered, board staff shall attempt to reach the service's director at an alternative telephone number if such number is provided.
6. If a service director cannot be contacted at the service's business telephone or alternative number, or by e-mail, the service's prior notification of an inspection shall be forfeited.
7. Board staff may determine the order in which each service is inspected, and the number of additional inspections deemed necessary to verify regulatory compliance.
8. If board staff determines that an additional inspection may be necessary due to regulatory non-compliance the service's director shall be informed that the service is subject to re-inspection, and that any additional inspections will be performed without prior notification.
9. In the event a service director states that he/she will not be available for a service inspection, board staff shall instruct the director to provide a service representative who can assist board staff during the inspection.
10. K.S.A. 65-6130 The Board may inquire into the operation of services and the conduct of attendants, and may conduct periodic inspections of facilities, communications services, materials and equipment at any time without notice.

If a service director fails to provide access to any of the service's ambulances, equipment or records as required by K.S.A 65-6130, board staff shall refer the service to the Investigation Committee for consideration of administrative action.

## ***Compliance Monitoring***

1. Board staff may establish a compliance monitoring program for any service found to be in regulatory non-compliance. Each compliance monitoring program shall be pertinent to the regulatory violations found.
2. Each compliance monitoring program shall be explained to the service director or his or her Designee at the time of the inspection. Compliance monitoring programs shall be considered voluntary.
3. If a service director agrees to the terms of the compliance monitoring program as explained during the inspection, board staff shall mail a formalized copy of the compliance monitoring agreement for the service director's signature.
4. If the service director is not available, board staff may leave documentation with a service representative requesting that the service director contact board staff within five (5) business days. In situations where immediate corrective action is required, board staff may request the service director to contact the board office by the end of the next business day.
5. In the event a service director desires not to consent to a compliance monitoring program or fails to return a signed copy of the compliance monitoring agreement within the timeframe designated in the agreement, board staff shall refer the service to the Investigation Committee for consideration of administrative action.
6. If a service director enters into a compliance monitoring program and fails to meet the terms of the agreement, board staff shall provide a copy of the compliance monitoring agreement to the service operator and the service medical director. Board staff shall also inform the service director of any non-compliance issues. After consulting with the service director, board staff may allow additional time to meet the terms of the agreement if it is determined the service has made a good faith effort to comply.

## ***KRAF Grant inspection***

Awards shall not be transferable. Any funds disbursed pursuant to an award shall be properly used and accounted for at all times. Grantee is to be responsible for the preparation and maintenance of proper accounting records which shall be maintained for a period of not less than five (5) years and which shall be subject to and available for inspection by the Executive Director, State Inspector, or his agent for state audit inspections. By applying for, and accepting the awarded property, the recipient acknowledges their responsibility for a period of five years of receipt to:

- Ensure the equipment and/or materials are available for annual inspection by a KBEMS representative.
- Ensure the equipment and/or materials are maintained in operational order.
- Grantee must comply with all conditions as noted in award letter.
- Should any audit reveal that funds were used for item(s) not awarded funding, the grantee shall be held responsible for repayment.



## ***Compliance timelines***

### **General Vehicle Standards**

<b><i>Exterior appearance (109-2-5 (c))</i></b>	<b><i>24 hours to 30 days (based on deficiency)</i></b>
<b><i>Body integrity</i></b>	<b><i>If damage could allow carbon monoxide into cab or patient compartment request the director to remove from service</i></b>
<b><i>Identification/ Markings (109-2-8 (j))</i></b>	<b><i>30 days</i></b>
<b><i>Loading lights (109-2-8 (i))</i></b>	<b><i>30 days</i></b>
<b><i>Emergency lights (109-2-8 (h))</i></b>	<b><i>Immediately up to 30 days (based on deficiency)</i></b>
<b><i>Siren (109-2-8 (h))</i></b>	<b><i>Request the director to remove the unit from service immediately until repaired.</i></b>
<b><i>Electrical System (109-2-8 (g))</i></b>	<b><i>24 hours</i></b>
<b><i>Tires</i></b>	<b><i>Request the director to remove the unit from service immediately until repairs per K.S.A. 8-142 (e).</i></b>
<b><i>Lantern/ flashlights (109-2-8 (l) (2))</i></b>	<b><i>30 days</i></b>
<b><i>5 lbs. Fire extinguisher secured(109-2-8(l)(1))</i></b>	<b><i>24 hours if missing or discharged, 30 days if out dated less than three months</i></b>
<b><i>Air conditioning (109-2-8 (d))</i></b>	<b><i>24 hours to 30 days (weather dependent)</i></b>
<b><i>Heater (109-2-8 (d))</i></b>	<b><i>24 hours to 30 days (weather dependent)</i></b>
<b><i>No smoking sign (109-2-8 (l) (11))</i></b>	<b><i>30 days</i></b>
<b><i>2 way communication (109-2-5 (a))</i></b>	<b><i>Immediate (cell phone acceptable)</i></b>

### **Patient Compartment**

<b><i>Interior appearance (109-2-5(c))</i></b>	<b><i>24 hours to 30 days (based on deficiency)</i></b>
<b><i>Ambulance license (109-2-8 (b))</i></b>	<b><i>5 business days</i></b>
<b><i>No Smoking sign (109-2-8(l)(11))</i></b>	<b><i>30 days</i></b>
<b><i>Air conditioner (109-2-8 (d))</i></b>	<b><i>24 hours to 30 days (weather dependent)</i></b>
<b><i>Heater (109-2-8 (d))</i></b>	<b><i>24 hours to 30 days (weather dependent)</i></b>
<b><i>Interior lights (109-2-8 (f))</i></b>	<b><i>24 hours to 30 days (based on deficiency)</i></b>

<i>Non-secured equipment (109-2-5 (f))</i>	<i>Immediately</i>
<i>Ventilation fan (109-2-8 (e))</i>	<i>30 days</i>
<i>4 or 6 wheel elevating cot (109-2-8 (l)(2))</i>	<i>Immediately (missing or damage which impairs safe function)</i>
<i>5 lbs. Fire extinguisher secured (109-2-8(l)(1))</i>	<i>24 hours if missing or discharged, 30 days if outdated less than three months</i>
<i>Waterproof cot cover (109-2-8(l)(9))</i>	<i>5 business days</i>
<i>2 Blankets (109-2-8 (l)(8))</i>	<i>5 business days</i>
<i>Linen change (109-2-8 (l)(7))</i>	<i>5 business days</i>
<i>Pillow (109-2-8 (l)(10))</i>	<i>5 business days</i>
<i>Bed pan (109-2-8 (l)(5))</i>	<i>5 business days</i>
<i>Urinal (109-2-8 (l (4)))</i>	<i>5 business days</i>
<i>Emesis basin/bag (109-2-8 (l)(6))</i>	<i>5 business days</i>
<i>Disaster tags (109-2-8 (o)(6))</i>	<i>5 business days</i>

**Airway**

<i>In-line oxygen system (109-2-8 (M)(1))</i>	<i>30 days (2<sup>nd</sup> portable with two spare oxygen cylinders must be placed on ambulance during repair of in-line system)</i>
<i>Portable oxygen (109-2-8 (n)(1))</i>	<i>Immediately</i>
<i>Oxygen cannulas adult and ped (109-2-8(n)(6))</i>	<i>24 hours</i>
<i>Adult mask adult and ped (109-2-8(n)(5))</i>	<i>24 hours</i>
<i>Assorted oropharyngeal airways (109-2-8(n)(7))</i>	<i>24 hours</i>
<i>Adult BVM (109-2-8(n)(3))</i>	<i>Immediately</i>
<i>Ped BVM (109-2-8(n)(4))</i>	<i>Immediately</i>
<i>On-Board suction (109-2-8(m)(2))</i>	<i>30 days (2<sup>nd</sup> portable, one of which must be electrically powered, must be placed on ambulance during repairs)</i>
<i>Suction tubing (109-2-8(m)(2))</i>	<i>Immediately</i>
<i>Non-metallic tip (109-2-8(m(2)))</i>	<i>Immediately</i>
<i>Portable Suction (109-2-8(n)(2))</i>	<i>Immediately</i>

*Suction tubing (109-2-8(n)(2))* *Immediately*

*Non-metallic tip(109-2-8(m)(2))* *Immediately*

### **Medical Supplies**

*BP Manometer (109-2-8 (n) (8))* *Immediately*

*Pediatric BP cuff (109-2-8 (n) (8))* *5 business days*

*Adult cuff (109-2-8 (n)(8))* *Immediately*

*Extra-large cuff (109-2-8 (n))* *5 days*

*Stethoscope (109-2-8 (n)(8))* *Immediately*

*O.B. Kit (109-2-8 (n)(9))* *5 business days*

*1 L Sterile Water saline (109-2-8 (n)(17))* *5 business days if missing or expired*

*Bandage scissors (109-2-8 (n) (16))* *24 hours*

*Occlusive gauze (109-2-8 (n) (13))* *24 hours*

*Sterile gauze pads (109-2-8 (n) (12))* *24 hours*

*Roller gauze dressings(109-2-8 (n) (14))* *24 hours*

*1" + adhesive tape (109-2-8 (n) (15))* *24 hours*

*Large trauma dressing (109-2-8 (n) (11))* *24 hours*

*Burn sheet (109-2-8 (n) (10))* *5 business days*

### **Splinting**

*Long spine board (109-2-8(o)(1))* *Immediately*

*Head stabilizer (109-2-8(o)(2))* *Immediately*

*Cervical Collars adult and ped. (109-2-8(o)(4))* *Immediately*

*Extremity splints(109-2-8(o)(1))* *Immediately*

### **Body Substance Isolation**

*Protective gloves (109-2-8(p)(1))* *24 hours*

*Eye protection (109-2-8(p)(2))* *24 hours*

*Filtering mask (109-2-8(p)(3))* *24 hours*

<i>Protective gowns (109-2-8(p)(4))</i>	<i>24 hours</i>
<i>Sharps container (109-2-8(p)(5))</i>	<i>24 hours</i>
<i>Leak-proof container (109-2-8(p)(6))</i>	<i>24 hours</i>

**ALS Equipment**

<i>IV solutions (109-2-8(q)(4))</i>	<i>24 hours</i>
<i>Assorted syringes and needles (109-2-8(q)(5))</i>	<i>24 hours</i>
<i>Monitor/Defibrillator (109-2-8(q)(1))</i>	<i>24 hours</i>
<i>Drugs per protocol (109-2-8(p)(2))</i>	<i>24 hours</i>
<i>Currently dated medications (109-2-5(c))</i>	<i>24 hours</i>

Policy Effective Date: 04/01/2016

**Approved: 04/01/2016**

\_\_\_\_\_  
Joel Hornung, M.D., Chair

\_\_\_\_\_  
Date

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Joseph House, Executive Director