



AMBULANCE RULES AND REGULATIONS GROUND AMBULANCE VEHICLE INSPECTIONS AND PERMITS

I. AUTHORITY:

California Code of Regulations, Title 22, Division 9, Chapter 12. California Code of Regulations, Title 13, Division 2, Chapter 5. California Health and Safety Code, Division 2.5, Sections 1797.200, 1797.204, & 1798. County of Orange Ambulance Ordinance. Policy sets minimum acceptable standards, any exemptions for public providers allowed by law.

II. APPLICATION:

This policy establishes the standard for inspections and issuance of ambulance vehicle permits for ground ambulance vehicles conducted by OCEMS staff members.

III. PROCEDURE:

- A. Ambulance service entities shall not provide any ambulance patient transport services unless a valid ambulance permit has been issued by the OCEMS Medical Director or OCEMS designee to this entity.
- B. An ambulance permit is valid from the date of issue until December 31 of the same calendar year.
- C. The ambulance permit may be renewed as part of the renewal process for ambulance service license.
- D. Ambulance permits are non-transferrable. If the ambulance service provider permanently removes a permitted vehicle from service during the term of the permit, it shall immediately notify OCEMS and return the ambulance decal and permit to OCEMS.
- E. Pay the established fee. (Reference OCEMS Policy #470.00).

IV. FREQUENCY:

- A. Initial ambulance inspection:
 - 1. Initial application for ambulance permit applies to vehicles not currently permitted to operate in Orange County.
 - 2. All ambulances shall undergo an initial inspection prior to providing ambulance patient transport services.
- B. Renewal ambulance inspection:
 - 1. Applications for Renewal ambulance inspections and permits apply to ambulances currently permitted to operate in Orange County.
- C. Other ambulance inspections:
 - 1. Other ambulance inspections apply to any ambulance operating within Orange County.
 - 2. OCEMS may inspect any ambulance operating in Orange County at any time to ensure compliance with the Health and Safety Code and OCEMS policies. OCEMS inspections will not interfere with ambulance services to a patient.

V. ELEMENTS OF INSPECTION:



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- A. OCEMS shall inspect an ambulance for:
 - 1. Required documentation,
 - 2. Required medical equipment,
 - 3. Required non-medical equipment,
 - 4. Acceptability of supplies and equipment for medical use,
 - 5. Operational status of all equipment, and
 - 6. Cleanliness of ambulance, equipment, and supplies as outlined in Section VIII. Cleaning Standards for Ambulances and Ambulance Equipment.

- B. OCEMS ambulance inspections shall not duplicate Vehicle Code and California Highway Patrol (CHP) regulatory inspections performed by CHP. Ambulances in possession of a valid and current California Highway Patrol ambulance inspection report shall be deemed in compliance with Vehicle Code and regulations adopted by the California Highway Patrol Commissioner.
 - 1. OCEMS may perform its inspections in conjunction with inspections performed by the CHP.

VI. RECORD OF INSPECTION:

- A. All ambulance inspections shall be documented on an OCEMS ambulance inspection form.
- B. Any item of non-compliance with the Ordinance and/or any OCEMS policies shall be documented.
- C. OCEMS shall review all noted items of non-compliance with the ambulance service provider at time of inspection.
- D. OCEMS shall provide a copy of the inspection documentation to the ambulance service provider at the time of inspection.

VII. NON-COMPLIANCE:

- A. Initial ambulance inspection:
 - 1. No ambulance shall be issued an ambulance permit or be allowed to operate until all items of non-compliance identified are corrected by the ambulance service provider and re-inspected by OCEMS.

- B. Renewal ambulance inspection:
 - 1. No ambulance permit shall be renewed until all items of non-compliance, identified by OCEMS during the annual inspection, are corrected by the ambulance service provider and re-inspected by OCEMS.
 - 2. Ambulances issued a Type II or Type III "Item of Non-Compliance" during a renewal inspection, may continue to operate if they have a current annual OCEMS ambulance permit as described in section C below.

- C. Items of non-compliance identified by OCEMS during any inspection shall be corrected by the ambulance service provider and re-inspected by OCEMS. Items of non-compliance are categorized as follows:



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1. Type I:
 - a. Requires re-inspection by an OCEMS representative and ambulance may not be utilized to transport patients until it passes a re-inspection.
 - b. Requires a re-inspection fee. (Reference OCEMS Policy #470.00).
2. Type II:
 - a. Requires re-inspection by an OCEMS representative within 15 days of identification of non-compliance. The ambulance may be utilized until re-inspection. Failure of a second inspection in this category will result in unit being unable to transport patients in Orange County until an additional inspection demonstrates that areas of non-compliance have been corrected.
 - b. Requires a re-inspection fee. (Reference OCEMS Policy #470.00).
3. Type III:
 - a. Requires documentation submitted to OCEMS, within 30 days of identification of non-compliance, that the area of non-compliance has been corrected.
 - b. No re-inspection required. (Reference OCEMS Policy #470.00).

VIII. CLEANING STANDARDS FOR AMBULANCES AND AMBULANCE EQUIPMENT

- A. **Cleaning Schedule-** Each ambulance shall maintain a monthly checklist following the cleaning schedule identified in sections C, D and E below.
- B. **Cleaning Frequency-** The cleaning frequency describes cleaning requirements beyond that identified within the minimum standards in the cleaning schedule in sections C, D and E below.
 1. Hospital Grade cleaning products and disinfectants will be used to clean ambulance patient and EMS crew compartments.
- C. Vehicle Equipment: Patient Contact

Equipment	Standard	Cleaning Schedule	Cleaning Frequency	Considerations
Stretchers	All parts should be visibly clean with no blood, body substances, dust, dirt, debris, adhesive tape or spillages	Daily	Cleaning shall be done daily and after every patient use	



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Spinal boards/flats /head blocks	All parts should be visibly clean with no blood, body substances, dust, dirt, debris, adhesive tape or spillages	Daily	Cleaning shall be done daily and after every patient use	
Transport chair and other manual patient transfer equipment	All parts should be visibly clean with no blood, body substances, dust, dirt, debris, adhesive tape or spillages	Daily	Cleaning shall be done daily and after every patient use	
All reusable medical equipment (e.g. cardiac monitor, defibrillators, resuscitation equipment, etc.)	All parts should be visibly clean with no blood, body substances, dust, dirt, debris, adhesive tape or spillages	Daily	Cleaning shall be done daily and after every patient use	
Stretcher mattresses	Cover should be damage free All parts should be visibly clean with no blood, body substances, dust, dirt, debris, adhesive tape or spillages	Daily	Cleaning shall be done daily and after every patient use	
Pillows	Should be visibly clean with no blood, body substances, dust, dirt, debris, adhesive tape or spillages	Daily	Cleaning shall be done daily and after every patient use	
Linens	Should be visibly clean with no blood, body substances, dust, dirt, debris, adhesive tape or spillages	Daily	Cleaning shall be done daily and after every patient use	



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Driver, passenger and all seats in patient compartment- Upholstered	All parts, including seatbelt and the underneath, should be visibly clean with no blood, body substances, dust, dirt, stains, debris, adhesive tape or spillages	Daily	Cleaning shall be done daily and after every patient use	Replace seatbelts if contaminated with blood or body fluids use Torn or damaged seat covers shall be replaced Vacuum for dirt or debris and shampoo for blood or body substances or spillages
Driver, passenger and all seats in patient compartment- Vinyl/Leather	Cover should be damage free All parts, including seatbelt and the underneath, should be visibly clean with no blood, body substances, dust, dirt, stains, debris, adhesive tape or spillages	Daily	Cleaning shall be done daily and after every patient use	Replace seatbelts if heavily soiled Torn or damaged seat covers shall be replaced
Medical Gas Equipment	All parts should be visibly clean with no blood, body substances, dust, dirt, stains, debris, adhesive tape or spillages	Daily	Cleaning shall be done daily and after every patient use	Replace single use items after each use
Computer Equipment	All parts should be visibly clean with no blood, body substances, dust, dirt, stains, debris, adhesive tape or spillages	Daily	Daily and after each use	

D. Vehicle Equipment: Non Patient Contact

Equipment	Standard		Cleaning Frequency	Considerations
Response Kits and Bags	All surfaces, including underside, should be visibly clean with no blood,	Daily	Bags regularly taken into patient care areas must be wiped clean after every use, with special attention	All bags placed on ambulances should be made of wipe able material



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	body substances, dust or dirt		given if contaminated with blood or body fluid Heavily used bags should be laundered weekly or monthly Lesser used bags should be cleaned every other month	Any bag heavily contaminated with blood or body fluids should be disposed
Hand Sets (e.g. radios and mobile phones)	All parts should be visibly clean with no blood, body substances, dust, dirt, debris, adhesive tape or spillages	Daily	Daily and when contaminated	
Sharps Containers	The external surfaces should be visibly clean with no blood, body substances, dust, dirt, debris, adhesive tape or spillages	Weekly	Weekly and when contaminated	

E. Vehicle Internal and External Fixed Features

Equipment	Standard	Cleaning Schedule	Cleaning Frequency	Considerations
Overall Appearance- Exterior	The vehicle exterior should be clean at all times. Any presence of blood or body substances is unacceptable	Weekly	Routine cleaning should be performed weekly, or as necessary due to weather conditions	If operational pressures prevent thorough cleaning of the exterior, the minimum cleaning standards to comply with health and safety laws should be met (i.e. windows, lights, reflectors, mirrors and license plates)



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Overall Appearance-Interior	The area should be tidy, ordered and uncluttered, with well-maintained seating and workspace appropriate for the area being used. All surfaces should be visibly clean with no blood, body substances, dust, dirt, debris, adhesive tape or spillages	Daily	Daily, clean between patients and deep clean weekly	Clean all surfaces in contact with the patient and that may have been contaminated Crews should routinely clean the vehicle floor Remove all detachable equipment and consumables
Ceiling	All surfaces should be visibly clean with no blood, body substances, dust, dirt, debris, adhesive tape or spillages	Daily	Daily and when contaminated	
Cabinets, Drawers, and Shelves	All parts, including the interior, should be visibly clean with no blood, body substances, dust, dirt, debris, adhesive tape or spillages	Weekly	Weekly and when contaminated	
Product Dispensers	All parts of the dispenser including the underside, should be visibly clean with no blood, body substances, dust, dirt debris, adhesive tape or spillages	Daily	Daily and as soon as possible if contaminated	Liquid dispenser nozzles should be free of product buildup, and the surround areas should be free from splashes of the product
Electrical Switches, Sockets and Thermostats	All surfaces, including the undersides, should be visibly clean with no blood, body substances, dirt, dust, or adhesive tape	Weekly	Weekly and as soon as possible if contaminated	



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Equipment Brackets	All parts of the bracket, including the undersides, should be visibly clean with no blood, body substances, dirt, dust or adhesive tape	Weekly	Weekly and as soon as possible if contaminated	
Fire Extinguisher	All surfaces, including the undersides, should be visibly clean with no blood, body substances, dirt, dust or adhesive tape	Weekly	Weekly and as soon as possible if contaminated	
Floor	The entire floor, including all edges, corners and the main floor spaces, should be visibly clean with no blood, body substances, dirt, dust or adhesive tape	Daily	Daily and when heavily soiled or contaminated with blood and/or body fluids	
Floor Mounted Stretcher Locking Device/Chair Mounting	All surfaces, including the undersides, should be visibly clean with no blood, body substances, dirt, dust or adhesive tape	Weekly	Weekly and as soon as possible if contaminated	
Hand Rails	All parts of the rail, including the undersides, should be visibly clean with no blood, body substances, dirt, dust or adhesive tape	Daily	Clean rails that have been touched after every patient Clean all rails weekly	
Heating Ventilation Grills	The external part of the grill should be visibly clean with no blood, body substances, dirt, dust, spillages or adhesive tape	Weekly	Weekly and as soon as possible if contaminated	



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Walls	All wall surfaces should be visibly clean with no blood, body substances, dirt, dust or adhesive tape	Daily	Daily and as soon as possible if contaminated	
Windows	All interior glazed surfaces should be visibly clean and smear free with no blood, body substances, dust, dirt, debris or adhesive tape. A uniform clean appearance should be maintained	Weekly	Weekly and as soon as possible if contaminated	
Work Surfaces	All surfaces should be visibly clean with no blood, body substances, dirt, dust, spillages or adhesive tape	Daily	After every patient	
Waste Receptacles	The waste receptacle, including the lid, should be visibly clean with no blood, body substances, dirt, dust, stains, spillages or adhesive tape	Daily	Daily and as soon as possible if contaminated	

Approved:

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