

Foundation Document for Inspections Ambulance Vehicle License Committee

Purpose: To provide a document to NASEMSO that outlines the steps or process of an agency inspection (as defined by the State office);

Prerequisite: Prior to a State EMS official or EMS office staff member conducting an agency inspection : the State EMS Office should have in place a credentialing or approval process that shows the State Official or Inspector has been trained and deemed competent. Training and competency may include, but not be limited to:

- Relevant Statutes detailing the powers and duties of the State’s EMS Office;
- Relevant Regulations detailing requirements for licensure of individuals and agencies (specific and general);
- Relevant Interpretive Guidelines that provide specific details that address how agencies can show compliance with regulations and statutes;
- Confidentiality requirements;
- Basic interview techniques;
- Basic evidence gathering techniques;
- State EMS office policies regarding documentation of evidence (record review, interviews, and direct observations); and
- Basic report writing.

Definitions:

1. Agency – An organization that has been certified or licensed by the state to perform as part of an Emergency Medical Services System. The agency will be required to meet 1) Scope of License limitations that define how the organization provides its services, and 2) ensuring that personnel at the agency stay within both department and State Office scope of practice limitations.
2. Individual – A person that has been certified or licensed by the State to perform as an emergency medical professional at one of several state specific levels. The individual is limited to a specific scope of practice as defined by the State EMS Office.
3. Inspection – A general overview of an agency. The scope of the inspection may include vehicles, records, and/or personnel certifications or credentials. It is a methodology used to determine if an agency (or in some cases, an individual) is compliant with requirements for State certification or licensure.

Essentially, the inspection is conducted to:

- Determine if the agency is compliant with licensure requirements, and if not;
- Determine what license requirements are not being met;
- Provide a way to identify what an agency needs to do to become compliant.

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Methodology:

The successful completion of an inspection relies on specific methods that include:

- Direct Observation – what the inspector learns from their senses;
- Interview – what the inspector is told by personnel or witnesses;
- Record Review – what the inspector learns through the documents maintained at the agency or by the individual.

Examples of this include:

An interview during an inspection may be limited to determining if a specific item or document is available at the time of the inspection; more expansive to determine if a practice is occasional or routine.

Record Reviews during an inspection may be limited to specific regulatory requirements, or expansive to determine the continuity of a procedure or policy has continuity across different document types.

Direct Observations during inspections may be the most important because it is based on the State Official’s observations at the time of the inspection.

Conclusion: An inspection is a snapshot of an agency at that time. The agency may have been compliant weeks before an official’s arrival. However, prior to the inspectors arrival something broke; resulting in non-compliance. Conversely, an item may have been missing for weeks and it arrived the day before the inspection. The inspection is conducted to determine if there were compliance issues at the time of an Inspection. If compliance is attained after a prior to the Department staff officials arrival; officials may not be able to show non-compliance at the time of the event.

Steps or Processes for an Inspection

Inspection	Direct Observation, Interview, and Record Review
1. Identify Scope of the inspection	<ul style="list-style-type: none"> A. Records B. Vehicles C. Personnel (independent of the Agency)
2. Arrival at agency	<ul style="list-style-type: none"> A. Identify Agency Director/Owner Responsible party B. State Purpose of inspection C. Identify any support staff from agency to assist in inspection
3. Vehicle Inspection	<ul style="list-style-type: none"> Ambulance Specifications (Lights, Sirens, Radios, Safety Equipment, Insurance Documentation, Manufacturing Documentation, etc. Mandatory Equipment (BLS, ALS, PLS) equipment, sanitation, required amounts, equipment minimums; supplies, medications, expiration dates, etc. Ambulance vehicle permit or license to operate.

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4. Record Review	Ambulance Vehicle Maintenance Records; (is the vehicle safe to operate?)
	Equipment maintenance records (is the equipment safe to operate/does it operate within manufacturers standards?)
	Insurance Records for vehicle, liability, workers comp
	Record of Events (call log, patient care reports, call screening)
	Policies for communication, quality assurance, response, mutual aid, data submissions,
	Credential Files for personnel, as required for licensure, scope of practice, and medical director authorization.
	Data Submission – as required by statute/regulation
	Medical Director Oversight – Quality Assurance/Improvement
Record Review Continued	Education activities conducted by State Approved Instructors

Deficiencies or specific areas of non-compliance with licensure requirements.

When deficiencies or areas of non-compliance are identified through an inspection, documentation is required as well as the development of a plan to bring the agency or individual into compliance. An additional inspection may be needed to show the agency has corrected the issue and is in compliance. Additionally, some deficiencies may actually put agency employees and patients at risk for harm or potential death.

Standard Level Deficiencies (non-immediate) deficiencies:

- A. Deficiency is corrected at time of the inspection.
 - 1. This is still a deficiency. The reason behind this is the deficiency was in place at the time of the inspection It is not known if the deficiency would have continued if the state official had not noted the deficiency.
- B. Deficiency cannot be corrected at time of the inspection .
 - 1. Is the inability to correct this immediately allowing a harmful activity to continue? (if yes, see below)
If no, What is the time frame for the agency to correct the deficiency (This may be established through statute, rule, or policy)
 - 2. A report is needed to document the deficiency. The report will be sent to the agency with instruction on how to report back that the deficiency has been corrected in the required timeframe.

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Deficiency is at a level that can cause harm to staff and patients.

Establish a state office policy that measures potential harm to staff and patients due to the deficiency to the potential harm of removing the (staff, unit, and agency) from activities until the deficiency is corrected.

1. If the staff, unit, and/or agency is removed from service until the deficiency(ies) are corrected; then determine if the agency or the State Official will notify the:
 - A. communication center;
 - B. mutual aid agencies;
 - C. Medical director;
 - D. local governmental jurisdiction;
 - E. State Office Supervisor;
 - F. Others
2. Explain in detail to the agency representative their recourse or appeal options. (As detailed in statute or regulation).
3. Provide to the agency representative what is specifically needed to remove the deficiency from causing harm.
4. Detail to the agency representative what documentation will be acceptable from the agency to remove the deficiency from causing harm.
5. Inform the agency if a follow-up inspection will be required to ensure the agency is in compliance before the agency will be permitted to resume activities with the staff member(s), unit, or as an agency.

Report writing.

The purposes of the report is to:

1. Inform the agency of the results of the inspection;
2. Identify the specific areas of non-compliance or specific deficiencies;
3. Describe how the agency is deficient in meeting the license requirements;
4. List the evidence that describes how the deficiency was determined; and
5. Detail how the agency representative was informed of the deficiency at the time of the inspection and their response to the information;

If applicable, include a methodology of measuring non-compliance. An example of this might be:

- 25 of 50 license files were missing licensure documentation; or
- 1 of 5 ambulances were missing flashlights; or
- 1 of 15 vials of medication was expired.

When the State EMS Office staff member completes the report, a review process for the report is needed to ensure the report is accurate, complete, checked for spelling, and grammatically correct.

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The report will be sent to the agency and other responsible parties as detailed in statute or regulations. Directions should be sent to the agency with the report to assist them in responding to the report. The report will need to be tracked to ensure delivery either through mailing the report, or by sending the report electronically.

Lastly, if a response from the agency is required, that response will need to be received within the time frame permitted by statute or regulation. When the response is received, it will need to be reviewed to determine if the agency has corrected the deficiency in an acceptable manner and in an acceptable timeframe.

Failing to respond appropriately to deficiency reports may impact the licensure status of agencies.

The State EMS Office may find it beneficial to conduct quality oversight of the inspection and report writing process by conducting Customer Service Surveys. The survey may be limited in scope to identify discrepancies in the inspection process. The survey may be limited to the following process points:

- *Did the inspector or official identify themselves and the purpose of the inspection to the most appropriate individual present;*
- *How long was the inspector on site*
- *Did the inspector answer questions about regulations;*
- *Did the inspector provide explanations as to why an requirement was not met;*
- *Did the inspector conduct an exit interview with the most appropriate person available at the time of the inspection.*

Lastly, as part of a quality assurance review; is the state EMS office staff member providing correct information to the agencies, inspecting agencies and individuals consistently, and within EMS office guidelines.