



New York State
Department of Health
Bureau of Emergency Medical Services

POLICY STATEMENT

Supercedes/Updates:

No. 95-03

Date: 08/01/95

**Re: ALSFR Service
Requirements**

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REQUIREMENTS FOR

ADVANCED LIFE SUPPORT FIRST RESPONSE (ALSFR) SERVICES

I. Introduction

The 1993 amendments to Article 30 of the Public Health Law require that First Responder (non-transport) EMS services, which provide ALS, be certified by the Department (PHL 3005). To enable the certification of ALSFR services, this policy sets forth the requirements that an ALSFR service must meet. Each ALSFR service must have an operational plan (Section II a), specific BLS and ALS equipment (Section V), policies and procedures relating to operations, dispatch, and documentation (Section III), and reporting certain incidents (Section IV). These requirements have been designed to compliment the typical requirements that REMAC's and local medical directors have required of ALSFR services.

This policy statement will serve as interim direction for the minimum requirements, conduct and competency in the operation of ALSFR services under the provisions of Section 3012 of the Public Health Law, until final regulations are adopted by the Department.

II. General Requirements

An ALSFR service shall:

- a. develop and submit to the Department, for review and/or modification and approval, a plan which demonstrates the manner in which the ALSFR service will provide ALS care. This plan shall include but not necessarily be limited to:
 1. staffing patterns and level(s) of care;
 2. vehicle configuration, type and use;
 3. access, safeguarding, security and secure storage, including environmental protection from temperature and other damage, of all ALS equipment and supplies while in use and storage;
 4. dispatch, ambulance and ALS communications;
 5. ALS protocols and on-line medical control; and
 6. Written approval of medical control for participation in the plan,
- b. identify to the department all vehicles or other conveyances which will be used as ALSFR vehicles;

- c. display on each ALSFR vehicle when in service a valid Department of Health certificate of inspection;
- d. have and maintain each ALSFR vehicle in compliance with all applicable federal or state agency (DMV, DOT, FAA, USCG, etc.) registration and applicable requirements;
- e. have for each ALSFR vehicle or conveyance any appropriate safety inspection certificate from a federal or state agency (DMV, DOT, FAA, USCG, etc.), unless specifically exempted by statute;
- f. notify the department in writing when any designated ALSFR vehicle is permanently removed from service as an ALSFR vehicle. Any department certificate of inspection shall be removed at such time;
- g. display on the exterior of both sides on any ALSFR vehicle the name of the service in clearly legible letters not less than 3 inches in height;
- h. equip any ALSFR vehicle placed in service with the minimum equipment set forth in this part;
- i. have on each call when providing ALS care at least one individual who is a certified advanced emergency medical technician attending the patient at all times;
- j. provide ALS care only at a level and in a manner authorized by medical control;
- k. only permit ALSFR conveyances to be operated by a duly licensed individual;
- l. make available for inspection, with or without notice, to representatives of the department all vehicles, conveyances, materials, equipment, records, procedures, and facilities;
- m. maintain current and accurate personnel files for all certified first responders and emergency medical technicians, showing qualifications, training and certifications and health records including immunization status. Employee health records shall be maintained separately and in compliance with all applicable requirements. Information contained in such personnel files shall be reviewed no less frequently than annually, and may be disclosed only to authorized individuals;
- n. maintain a record of each EMS call in compliance with the requirements of 800.32 of this part;
- o. maintain adequate, secure and safe storage facilities for all equipment, supplies and oxygen. Separate storage and disposal shall be maintained for soiled supplies and waste in accordance with applicable requirements;

- p. maintain all equipment and supplies in a clean and sanitary condition, secure and environmentally protected;
- q. have a written agreement with one or more ambulance services which describes dispatch criteria and procedures and which requires the ambulance service to transport any patients in the care of the ALSFR service and ALSFR service personnel, to a hospital;
- r. operate only within its primary territory except:
 - 1. in response to a request for mutual aid in accordance with the service's written mutual aid plan; or
 - 2. in response to a mutual aid plan implemented by a central dispatch agency on behalf of an ambulance or ALSFR service or on behalf of a county or city emergency management office; or
 - 3. by approval of the department and the appropriate regional emergency medical services council for up to 60 days if the expansion of territory is necessary to meet an emergency need;

III. Required Policies

- a. have and enforce written policies concerning:
 - 1. mutual aid, including any required authorizations and agreements, to request the response of the nearest, appropriate, available EMS service(s). The written plan shall consider the incident location and access to it, location of the mutual aid agency, primary service area, level of service, staff availability and any other pertinent information when identifying the mutual aid agency;
 - 2. coverage of the service's response area when it is unable to respond to emergency calls for assistance;
 - 3. the maximum call receipt interval for all emergency calls for assistance, except for MCI or disaster situations;
 - 4. actions to be taken if the maximum call receipt interval determined in (3) is exceeded and an ALSFR vehicle has not yet started toward the incident location;
 - 5. authorization and protocols for a central dispatch agency to send a mutual aid service when the service does not or cannot respond;
 - 6. minimum qualifications and job descriptions for all patient care providers, drivers and EMS dispatchers;
 - 7. physical, health and immunization requirements for all patient care providers and drivers, including provisions for biennial review and updating of such requirements;
 - 8. preventive maintenance requirements for all authorized EMS response vehicles and patient care equipment;
 - 9. cleaning and decontamination of authorized EMS response vehicles and equipment, in accordance with currently accepted practices;
 - 10. equipping and inspection of all authorized EMS response vehicles;
 - 11. reporting by the agency of suspected:
 - i. crimes;
 - ii. child abuse;

- iii. patient abuse; and/or
 - iv. domestic violence, including any directed toward elderly persons;
12. responsibilities of patient care providers when:
- i. a patient cannot be located
 - ii. entry cannot be gained to the scene of an incident
 - iii. a patient judged to be in need of medical assistance refuses treatment and/or transportation;
 - iv. patients seek transportation to a hospital outside the area in which the service ordinarily transports patients;
 - v. a receiving hospital requests that a patient be transported to another facility before arrival at the hospital;
 - vi. treating minors;
 - vii. treating or transporting patients with reported psychiatric problems;
- and
- viii. confronted with an unattended death.
13. infection control practices and a system for reporting, managing and tracking exposures and ensuring the confidentiality of all information that is in compliance with all applicable requirements;
14. by July 1, 1995, have an EMS response plan for hazardous material incidents. Participation in a county or regional plan will meet this requirement.
15. By July 1, 1996, have a response plan for multiple casualty incidents. Participation in a county or regional MCI plan will meet this requirement.

IV. Required Reporting

- a. upon discovery by or report to the governing authority of the service, report to the Department's Area Office by telephone no later than the following business day and in writing within 5 working days every instance in which:
 - 1. a patient dies, is injured or otherwise harmed due to actions of commission or omission by a member of the ALSFR service;
 - 2. an authorized EMS response vehicle operated by the service is involved in a motor vehicle crash in which a patient, member of the crew or other person is killed or injured to the extent requiring hospitalization or care by a physician;
 - 3. EMS personnel are killed or injured to the extent requiring hospitalization or care by a physician while on duty;
 - 4. patient care equipment fails while in use, causing patient harm;
 - 5. it is alleged that any member of the service has responded to an incident or treated a patient while under the influence of alcohol or drugs;
- b. On or in a form approved by the Department, maintain a record of all unexpected authorized EMS response vehicle and patient care equipment failures that could have resulted in harm to a patient and the corrective actions taken. A copy of this record shall be submitted to the Department with the EMS service's biennial recertification application.

V. ALS First Response Vehicle Equipment Requirements

Every ALS first response vehicle shall be equipped, meeting all requirements of 800.23 and shall be supplied as follows:

- a. Emergency care equipment and supplies consisting of:
 1. twelve sterile 4"x4" gauze pads;
 2. adhesive tape, 2 rolls assorted sizes;
 3. six rolls conforming gauze bandage, assorted sizes;
 4. two universal dressings, minimum 10 by 30 inches;
 5. six 5"x9" (minimum size) sterile dressings or equivalent;
 6. one pair of bandage shears;
 7. six triangular bandages;
 8. sterile normal saline in plastic container (1/2 liter minimum) within the manufacturer's expiration date;
 9. one air-occlusive dressing;
 10. one liquid glucose or equivalent;
 11. disposable sterile burn sheet;
 12. one emergency childbirth kit, with sterile supplies;
 13. blood pressure cuff(s) in adult and pediatric sizes;
 14. one stethoscope
 15. rigid extrication collars capable of limiting movement of the cervical spine. These collars shall include one each pediatric and small, medium and large adult sizes;
 16. carrying case for essential equipment and supplies;
 17. one set or personal protective mask and goggles or equivalent for each crew person;
 18. four pairs of disposable gloves in two sizes;
 19. one pen light or flashlight; and
 20. one blanket.

- b. Oxygen and resuscitation equipment consisting of:
 1. portable oxygen with a minimum 360 liter capacity with pressure gauge, regulator and flow meter (medical "D" size or larger) and one spare cylinder. The oxygen cylinders must contain a minimum of 2,000 psi between them, and each cylinder shall contain a minimum of 500 psi;
 2. manually operated self-refilling bag valve mask ventilation devices in pediatric and adult sizes, each with a system capable of operating with oxygen enrichment and, as appropriate, two sizes each of clean adult and pediatric masks with air cushion;
 3. six oropharyngeal airways, one each in a range of sizes child through adult, packaged so as to be individually identifiable and maintained sanitary;
 4. two each: disposable non-rebreather oxygen masks, and disposable nasal cannula individually wrapped;
 5. one each, pediatric non-rebreather mask and nasal cannula;

6. portable electric suction equipment capable, according to the manufacturer's specifications, of producing a vacuum of over 300 mm Hg when the suction tube is clamped, including one wrapped plastic Yankauer pharyngeal suction tip, one 8 fr. Catheter and one pediatric suction device;
 7. one pen light or flashlight; and
 8. one blanket.
- c. Two-way voice communications by radio or equivalent enabling reliable, direct communication with the ALSFR service dispatcher, the responding ambulance vehicle and, as required, on line medical control throughout the duration of the call on frequencies other than citizens band.
- d. Safety equipment consisting of:
 1. six flares or three U.S. Department of Transportation approved reflective road triangles;
 2. one battery lantern in operable condition; and
 3. one Underwrites' Laboratory rated five-pound ABC fire extinguisher or any extinguisher having a UL rating of 10BC.
- e. Provide one or more of the following categories of advanced life support equipment as defined by medical control for the level of ALS care authorized:
 1. fluid administration equipment and supplies;
 2. airway management equipment and supplies;
 3. a defibrillator and supplies;
 4. medication administration equipment and supplies;
 5. other equipment and supplies to provide ALS care as authorized by medical control, the Commissioner and the State EMS Council.
- f. Maintain all equipment and supplies in such a manner as to:
 - i. prevent damage or deterioration from environmental changes;
 - ii. limit access and maintain security at all times; and
 - iii. be secure and packaged so as to prevent physical damage.
- g. An ALSFR service may make application to the Commissioner for modification or exceptions to the vehicle or equipment requirements of this part if the nature of the EMS operation justifies such modification. Such application must clearly demonstrate that the ALSFR service plan meets the requirements as set forth in section 800.30(a) of this part, and provide specific justification for any exemptions requested.