

**PENNSYLVANIA DEPARTMENT OF HEALTH
Bureau of Emergency Medical Services
Administrative Inspection Checklist**

Admin Headquarters:
Sub-Station:

I. GENERAL INFORMATION:

Name of EMS Agency:

Address:

City

State

Zip

Date Inspected:

Affiliate # :

Regional EMS Council:

| | YES | NO | N/A |
|---|---------|-----------|-----------|
| Was a deficiency notification issued for this facility? | | | |
| Is a copy of the deficiency notification attached to this form? | | | |
| Is a reinspection required? | | | |
| Section 1. DOCUMENTS | PRESENT | DEFICIENT | CORRECTED |
| A roster of active personnel, including the EMS agency medical director, with certification and registration documentation including certification numbers and dates of registration expiration for each EMS provider and EMSVO. | | | |
| A record of the age of each EMS provider and EMSVO and a copy of the driver's license for each EMSVO. | | | |
| Documentation, if applicable, of the initial and most recent review of each EMS provider's competence by the EMS agency medical director and the EMS provider certification level at which each EMS provider is permitted to practice. | | | |
| Agency's process for scheduling staff to ensure that the minimum staffing requirements 24/7/365 or as defined in an approved county level or broader response plan | | | |
| Identification of persons who are responsible for making operating and policy decisions for the EMS agency, such as officers, directors and other EMS agency officials. | | | |
| Criminal, disciplinary and exclusion information for all persons who staff the EMS agency as required under subsection 1027.3 (f). | | | |
| Copies of documents by which it agrees to manage another EMS agency or to be managed by another entity. | | | |
| EMS PCR's | | | |
| Call volume records from the previous year's operations. These records must include a record of each call received requesting the EMS agency to respond to an emergency, as well as a notation of whether it responded to the call and the reason if it did not respond. 1027.3 | | | |

| | | | |
|---|-------------------------|--------------------------|--|
| A record of the time periods for which the EMS agency notified the PSAP, 1027.3 under subsection (g)(1), that it would not be available to respond to a call. | | | |
| License certificate displayed | | | |
| EMS Agency Medical Director Agreement (Current) | | | |
| Section 2. POLICIES * | | | |
| EMS vehicles, equipment and supplies. 1027.3 (c) | | | |
| Use of persons under 18 years of age. 1027.3 (d) | | | |
| EMS Data Collection 1021.8 | | | |
| Dissemination of information 1021.42 | | | |
| Cooperation 1021.64 | | | |
| Responsible staff. 1027.3 (f) | | | |
| Responsibility to communicate unavailability. 1027.3 g (1) | | | |
| Responsibility to communicate delayed response 1027.3 g (2) | | | |
| Responsibility to communicate with PSAP .1027.3g(3) | | | |
| Response to dispatch by PSAP. 1027.3 g (4) | | | |
| Patient management. 1027.3 (h) | | | |
| Use of lights and other warning devices. 1027.3 (i) | | | |
| Weapons and explosives 1027.3 (j) | | | |
| Accident, injury and fatality reporting 1027.3 (k) | | | |
| Safety Committee Minutes 1027.3 (k) | | | |
| Quality Improvement Minutes 1027.3 (k) | | | |
| EMS provider credentialing. 1027.3 (m) | | | |
| Monitoring compliance 1027.3 (o) | | | |
| Out-of-hospital do-not-resuscitate orders 1027.3 (p) | | | |
| Infection control 1027.3 (p) | | | |
| Management of personnel safety 1027.3 (p) | | | |
| The safe operation of EMS vehicles 1027.3 (p) | | | |
| Storage and environmental control of medications 1027.5 | | | |
| Substance abuse in the workplace 1027.3 (p) | | | |
| Placement and operation of its resources 1027.3 (p) | | | |
| Electronic Deficiency Form Completed | Yes | N/A | |
| Digital Images Captured | Yes | N/A | |
| | Inspected By: | (Printed Name) | |
| | Signature: | <i>Scott L. Crawford</i> | |
| | Date Forwarded to BEMS: | | |
| *Policies are required to be available at a sub-station. | | | |