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		Effective:	12/01/07
		Revised:	07/12/07
		Review:	07/01/09

EMS Medical Director

Chief, Emergency Medical Services

I. INTENT:

To establish minimum standards for ambulance providers seeking advanced life support (ALS) designation from the Sacramento County EMS Agency (SCEMS).

II. AUTHORITY:

A. Health and Safety Code, Division 2.5, Ch. 2, §1797.78; Ch. 3, Art. 5, §1797.178; Ch. 4, Art.1, §1797.206, §1797.218 & §1797.220.

B. California Code of Regulations, Title 22, Division 9, Ch. 4, Art. 2, §100147.

III. POLICY:

Before an ALS service provider shall be considered for ALS designation by SCEMS, the following items shall be submitted for review in the following order and format:

A. Name and address of the organization.

B. Narrative description of the ownership of the organization to include at a minimum, public or private ownership and the organizational structure.

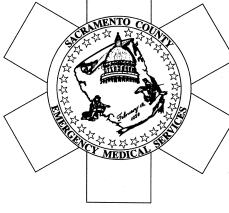
C. Narrative description of the tax status of the organization, profit, not-for-profit or governmental.

D. Name of the organization's liaison to Sacramento County. All questions and correspondence shall be directed to this person.

E. Provide a narrative description of emergency, non-emergency ALS ambulance and related services currently provided by the organization, to include but not be limited to:

1. The number of ALS transporting units.

2. The number of ALS non-transporting units.

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3. The staffing of both transporting and non-transporting units.

F. List at least three hospital emergency departments and three public safety agencies with which the organization has worked during the past year and which may serve as references.

G. Describe the organization's experience in providing ALS emergency and non-emergency ambulance service. Please specify areas and populations in area(s) your organization is presently serving and/or has served.

H. Describe the organization's method(s) of providing medical control.

I. Describe the organization's continuous quality improvement (CQI) process. At a minimum, your CQI process shall meet the requirements of the SCEMS CQI program document for ALS providers.

Once the provider has satisfactorily completed the above requirements the provider shall enter into a written ALS service provider designation agreement with SCEMS.

CROSS REFERENCE: Continuous Quality Improvement, PD#4002