

Policy 305

Non-Emergency Transport Provider

Rev: 2/18

- I. To ensure appropriate patient care and transportation by personnel who are duly authorized by San Benito County Emergency Medical Services to provide BLS, ALS, Gurney and/or Wheelchair Van transportation services within San Benito County.
- II. Definitions
 - A. Acute Care Facility shall, for the purpose of this policy, means a hospital providing 24-hour inpatient care, including medical, nursing, surgical, anesthesia, laboratory, radiology, pharmacy, and dietary services, as defined in the California Code of Regulations, Title 22, Division 5, or similar facility possessing a license for either basic or standby emergency medical services. Urgent Care Centers shall be considered an acute care facility for the purpose of this policy.
 - B. Acute Psychiatric Facility means a hospital providing 24-hour inpatient care for mentally disordered, incompetent, or other patients referred to in Division 5 of the California Code of Regulations, Title 22.
 - C. 5150 refers to a patient who is being held under the Welfare and Institutions Code, Section 5150, because the patient is a danger to themselves, others, and/or gravely disabled. This written order may be placed by a Law Enforcement Officer or Clinician to involuntarily detain that person for up to 72 hours for evaluation and treatment in a 5150-designated facility.
 - D. Gurney Van means a vehicle which is modified, and equipped for the purpose of providing non-emergency medical transportation for those medical passengers with stable medical conditions who require transportation by gurney, and which is not routinely equipped with the medical equipment or personnel required for the specialized care provided in an ambulance.
 - E. Gurney Van Medical Passenger means a person in need of transportation for medical purposes such as attendance at a doctor's appointment, clinic visit, psychiatric or 5150 transfers, or for other non-emergency reasons. Gurney Van Medical passengers are differentiated from patients in that their medical condition is stable and it is not anticipated that they are likely to need medical observations, intervention or treatment during non-medical transportation. The gurney van medical passenger must be able to maintain an open airway without assistance and self-administer any medical care en-route.
 - F. Inter-Facility Transport is defined as the movement of a patient from one health care facility to another in a licensed ambulance.
 - G. Non-Acute Care Facility includes ambulatory and outpatient clinics, dialysis centers, rehabilitation facilities, long-term care facilities, and assisted living environments.
 - H. Wheelchair Van means a vehicle which is modified, equipped, and used for the purpose of providing non-emergency medical transportation for wheelchair van medical passengers, and which is not routinely staffed or equipped with the medical equipment or personnel required for the specialized care provided in an ambulance.



David Ghilarducci MD
EMS Medical Director

- I. Wheelchair Van Medical Passenger means a passenger whose condition is such that the passenger may be transported seated in a wheelchair. The passenger must be able to sit erect, hold his/her head up, maintain an open airway without assistance, and can self-administer any medical care needed en-route.
- III. Inter-Facility Transportation
 - A. A BLS ambulance may transport a patient who requires care within the EMTs scope of practice. A transferring physician, who shall be responsible for determining the appropriate level of ambulance, must authorize an inter-facility transport. In the event that a patient presents with the criteria outside their scope of practice, the BLS crew shall immediately request the response of the San Benito County Contracted 911 Provider through Santa Cruz Regional 911 (SCR911).
 - B. An ALS ambulance may transport a patient who requires care within the Paramedics scope of practice. A transferring physician, who shall be responsible for determining the appropriate level of ambulance, must authorize an inter-facility transport. In the event that a patient presents with criteria outside their scope of practice, the crew shall refuse the transport and request the appropriate level of ambulance.
- IV. Gurney and Wheelchair Transport
 - A. Permits: See Policy 306 *Guidelines for Transport Vehicle Permits and Inspections*.
 - B. Personnel Requirements:
 - 1. Gurney and Wheelchair Van Personnel must be staffed in accordance with California Code of Regulations, Title 22, Division 3, Chapter 3, Article 3. Drivers and Attendants of Gurney and Wheelchair Vans shall be at least eighteen (18) years of age, shall hold an appropriate valid California Driver's License;
 - 2. Drivers and Attendants of Gurney and Wheelchair Vans shall hold a current certificate in CPR, and shall demonstrate compliance with all applicable State and local laws and regulations;
 - 3. Have passed a physical examination within the past two years and possess a current Department of Motor Vehicle form DL-51, Medical Examination Report, which is specifically incorporated herein by reference.
 - 4. Personnel shall wear visible identification including the employee's name and the name of the Transportation Entity;
 - 5. No person shall act in the capacity of a Gurney Van and/or Wheelchair Van Driver or Attendant when such person:
 - a) Is required by law to register as a sex offender for any offense involving force, duress, threat or intimidation.



- b) Habitually or excessively uses or is addicted to narcotics or dangerous drugs, or has been convicted during the preceding seven (7) years of any felony offense relating to the use, sale, possession or transportation of narcotics, addictive or dangerous drugs, or alcohol.
 - c) Habitually or excessively uses intoxicating beverages.
- C. Transportation services shall ensure that they are in compliance with the following standards in regard to the types of transportations that are authorized for either a Gurney or Wheelchair Van and shall be pre-arranged, scheduled, and non-emergency in nature.
- 1. The transportation may originate from a non-acute care setting and terminate at a similar non-acute care setting.
 - 2. The transportation may originate at an acute care setting in which the person to be transported has been discharged from the care of said facility and requires transportation services to a non-acute care setting.
 - 3. The only circumstance in which a transport provider may engage in transportation from an acute care setting and delivers a patient to an acute care setting is for:
 - a) A pre-arranged, scheduled appointment for out-patient diagnostic services, or;
 - b) A individual being taken to an acute psychiatric facility to receive in-patient care in which the facility has previously accepted the patient.
- D. Under no circumstances shall a Gurney or Wheelchair Van service provider transport a person with an acute medical condition or acute alteration of an existing medical condition that has not been diagnosed by a physician and which requires transportation to an emergency department or urgent care center.
- E. If at any time prior to the transportation or during the transportation of a person, personnel from the transport provider have any questions regarding the appropriateness of transporting a person or the person's condition appears to be inconsistent with the pre-scheduled, non-emergency nature of the transportations authorized herein, they shall immediately call 911 and request assistance.
- F. Transportation providers shall be allowed to transport passenger-delivered medication and devices, as long as the medication and/or devices have been in use for 12 hours or more, so long as the passenger remains in control of the deliver, e.g. oxygen, feeding tube devices, etc. Transport providers may not initiate the delivery of any medication, including oxygen, to any patient that does not have a prescription for same and their own medication and device as described above.



V. Emergent Patient Encountered

- A. An emergent patient is one who has a life or limb-threatening condition, requiring immediate and definitive care. An emergent patient may have respiratory distress, airway compromise, neurological changes from baseline, signs of actual or impending shock, or meet Trauma criteria. This shall not include patients with valid Do Not Resuscitate (DNR) orders.
- B. A patient determined to be emergent shall be transported to the closest emergency department Code 3, if the time from arrival on the scene to arrival at the hospital is less than ten (10) minutes. In all other cases, the crew shall contact SCR911 by radio or telephone and request a 911 response. In such cases, the crew shall monitor the radio frequency and communicate with responding 911 units as necessary.
- C. If the patient is transported Code 3, the unit shall immediately advise SCR911 and request a County EMS Event Number.
- D. In the event that a 911 response is activated, the crew shall transfer care to the arriving Paramedic unit.
- E. An Unusual Occurrence Report should be completed and submitted to EMS within 48 hours by all involved transport provider personnel.

VI. Use in the 911 System

- A. Non 911 ambulances may transport patients when determined necessary by the Incident Commander or County EMS during a Multi-Casualty Incident (MCI), local proclamation of emergency or unique circumstance.

VII. Still Alarms

- A. In the event that a non-911 ambulance arrives on the scene of a collision, illness, or injury by coincidence, the crew shall provide appropriate care and immediately notify SCR911 by radio or phone and request the response of the San Benito County Contracted 911 Provider.

