

## Sample Policies

These SAMPLE Policies are starting points *only*. There is no guarantee that adoption of these policies constitutes achievement of an EMS agency's policy development. It is the EMS Agency's responsibility to review these policies for accuracy with your agencies operations.

These Sample Policies coincide with Administrative Inspection checklist of 7/2016 on the website.

(8/2016)

**Policy for  
EMS vehicles, equipment and supplies.**

All EMS personnel of \_\_\_\_\_

EMS Agency Name

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

AFFILIATE #: \_\_\_\_\_

**§ 1027.3. Licensure and general operating standards**

(c) *EMS vehicles, equipment and supplies.* The Department will publish in the *Pennsylvania Bulletin*, and update as necessary, vehicle construction, and equipment and supply requirements for EMS agencies based upon the types of services they provide and the EMS vehicles they operate. Required equipment and supplies shall be carried and readily available in working order.

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Signature of Principal Official

\_\_\_\_\_

Printed Name of Principal Official

\_\_\_\_\_

Date

#2 Pg. 6157; §1027.3(d)

**Policy for  
Use of persons under 18 Years of age**

All EMS personnel of \_\_\_\_\_

EMS Agency Name

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

AFFILIATE #: \_\_\_\_\_

**§ 1027.3. Licensure and general operating standards**

(d) *Use of persons under 18 years of age.* The EMS agency shall comply with the Child Labor Act (43 P.S. §§ 40.1-40.14), or a successor act, and regulations adopted under the Child Labor Act when it is using persons under 18 years of age to staff its operations. The EMS agency shall also ensure that an EMS provider under 18 years of age, when providing EMS on behalf of the EMS agency, is directly supervised by an EMS provider who is at least 21 years of age who has the same or higher level of EMS provider certification an at least 1 year of active practice as an EMS provider.

\_\_\_\_\_  
Signature of Principal Official

\_\_\_\_\_  
Printed Name of Principal Official

\_\_\_\_\_  
Date

**Policy for  
EMS data collection**

All EMS personnel of \_\_\_\_\_

EMS Agency Name

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

AFFILIATE #: \_\_\_\_\_

**§ 1027.8. EMS data collection.**

- (a) *Reasons for EMS data collection.* The Department, either directly or through regional EMS councils or the Advisory Board, may collect EMS data for the purpose of evaluating the effectiveness of the Statewide and regional EMS system plans and the need to revise those plans and pursue future EMS system initiatives. This will include collecting EMS data to determine the status of the Statewide and regional EMS systems, the degree of compliance with the requirements in the act and this subpart, and the effectiveness of the Statewide and regional EMS systems in reducing morbidity and mortality when the EMS systems are involved.
- (b) *Duty to provide EMS data and records.* Persons regulate by the Department under the act, as well as PSAPs and others dispatchers of EMS resources, shall provide data and access to records, including audio records, without charge, as reasonably requested by the Department, the regional EMS councils or the Advisory Board when they are acting for and on behalf of the Department, to aid the Department, the regional EMS councils and the Advisory Board in conducting the activities references in subsection (a) and engaging in an investigation authorized under the act and this subpart.

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Signature of Principal Official

\_\_\_\_\_

**Printed Name of Principal Official**

\_\_\_\_\_

**Date**

**#4 Pg. 6130 & 6131; §1021.41 and §1021.42**

**Policy for  
EMS patient care reports and Dissemination of  
information**

**All EMS personnel of** \_\_\_\_\_

**EMS Agency Name**

**(Address)** \_\_\_\_\_

**(City)** \_\_\_\_\_ **(State)** \_\_\_\_\_ **(Zip)** \_\_\_\_\_

**AFFILIATE #:** \_\_\_\_\_

**§ 1021.41. EMS patient care reports.**

(a) EMS agencies shall collect, maintain and electronically report complete, accurate and reliable patient data and other information as solicited on the EMS PCR form for calls for assistance in the format prescribed by the Department. An EMS agency shall file the report for calls to which it responds that result in EMS being provided. The report shall be made by completing an EMS PCR within the time prescribed by the EMS agency's written policies, no later than 72 hours after the EMS agency concludes patient care, and then submitting it, within 30 days, to the regional EMS council that is assigned responsibilities for the region in which the EMS agency is licensed. Upon request, the EMS agency shall provide a copy of the EMS PCR to the regional EMS council that is assigned responsibilities for the region in which the EMS agency encountered the patient. An entity located out-of-State, but licensed as an EMS agency by the Department, shall file its EMS PCRs with the regional EMS council with which it has been directed to file its EMS PCRs by the Department. The Department will publish a list of the data elements

and the form specifications for the EMS PCR form in a notice in the *Pennsylvania Bulletin* and on the Department's web site. The reporting shall conform to the requirements in the notice published in the *Pennsylvania Bulletin*. The Department will maintain a list of software it has determined to satisfy the requirements for electronic reporting.

(b) When an EMS provider relinquishes primary responsibility for the care of a patient to another EMS provider, the EMS provider relinquishing that responsibility shall provide the other EMS provider with the patient information that has been collected.

(c) When an EMS agency transports a patient to a receiving facility, before its ambulance departs from the receiving facility, the EMS agency having primary responsibility for the patient shall verbally and in writing, or other means by which information is recorded, report to the individual at the receiving facility assuming responsibility for the patient, the patient information that is essential for immediate transmission for patient care. The Department will publish a notice in the *Pennsylvania Bulletin* specifying the types of patient information that are essential for patient care. The EMS agency shall provide the completed EMS PCR to the receiving facility to which the patient was transported within 72 hours after the EMS agency concluded patient care. Upon request of any other facility that subsequently provides health care services to the patient related to the reason the patient was transported to the original receiving facility, the EMS agency shall provide the completed EMS PCR to that facility within 24 hours of the request or within 72 hours after the EMS agency concluded patient care, whichever is later. The EMS agency shall submit the data to the facility in a mutually acceptable manner to the facility and the EMS agency which ensures the confidentiality of information in the EMS PCR.

(d) The EMS provider who assumes primary responsibility for the patient shall complete an EMS PCR for the patient and ensure that the EMS PCR is accurate and complete and completed within the time prescribed by the EMS agency under subsection (a). When a patient is transported to a receiving facility, an EMS provider of the EMS agency having primary responsibility for the patient shall also ensure that before the ambulance departs from the receiving facility essential patient information is reported to the receiving facility as required under subsection (c).

(e) The EMS agency shall retain a copy of the EMS PCR for a minimum of 7 years.

#### **§ 1021.42. Dissemination of information.**

(a) A person who collects, has access to or knowledge of information collected under § 1021.41 (relating to EMS patient care reports), by virtue of that person's participation in the Statewide EMS system, may not provide the EMS PCR, or disclose the information contained in the report or a report or record thereof, except:

(1) To another person who by virtue of that person's office as an employee of the Department or a regional EMS council is entitled to obtain the information.

(2) For research or EMS planning purposes approved by the Department, subject to strict supervision by the Department to ensure that the use of the data is limited to the specific research or planning and that appropriate measures are taken to protect patient confidentiality.

(3) To the patient who is the subject of the report or to a person who is authorized to exercise the rights of the patient with respect to securing the information, such as a person appointed as the patient's health care agent under a health care power of attorney.

(4) Under an order of a court of competent jurisdiction, including a subpoena when it constitutes a court order, except when the information is of a nature that disclosure under a subpoena is not authorized by law.

(5) For the purpose of quality improvement or peer review activities, with strict attention to patient confidentiality.

(6) For the purpose of data entry, data retrieval and billing, with strict attention to patient confidentiality.

(7) As authorized under § 1021.41.

(8) To a health care provider to whom a patient's medical record may be released under law.

(b) The Department or a regional EMS council may disseminate non-confidential, statistical data collected from EMS PCRs to EMS agencies and other participants in the Statewide EMS system for improvement of services.

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**Signature of Principal Official**

\_\_\_\_\_  
**Printed Name of Principal Official**

\_\_\_\_\_  
**Date**

**#5 Pg. 6131; §1021.64**  
**Policy for**  
**Cooperation**

**All EMS personnel of** \_\_\_\_\_

**EMS Agency Name**

**(Address)** \_\_\_\_\_

**(City)** \_\_\_\_\_ **(State)** \_\_\_\_\_ **(Zip)** \_\_\_\_\_

**AFFILIATE #:** \_\_\_\_\_



**§ 1021.64. Cooperation.**

Each individual and entity licensed, certified, recognized, accredited or otherwise authorized by the Department to participate in the Statewide EMS system shall cooperate in the Statewide and regional EMS quality improvement programs and peer reviews conducted under the act and this subchapter and shall provide information, data, reports and access to records, including audio records, as reasonably requested by quality improvement and peer review committees to conduct reviews.

\_\_\_\_\_  
**Signature of Principal Official**

\_\_\_\_\_  
**Printed Name of Principal Official**

\_\_\_\_\_  
**Date**

#6 **Pg. 6158; §1027.3(f)**

**Policy for  
Responsible staff**

**All EMS personnel of** \_\_\_\_\_

**EMS Agency Name**

**(Address)** \_\_\_\_\_

**(City)** \_\_\_\_\_ **(State)** \_\_\_\_\_ **(Zip)** \_\_\_\_\_

**AFFILIATE #:** \_\_\_\_\_

**§ 1027.3. Licensure and general operating standards**

(f) *Responsible staff.* An EMS agency shall ensure that persons who staff the EMS agency, including its officers, directors and other members of its management team, EMS providers and EMSVOs, are responsible persons. In making that determination, it shall require each person who staffs the EMS agency to provide it with the information and documentation an EMS provider is required to provide to the Department under § 1023.21(b) (relating to general rights and responsibilities) and require each EMSVO to provide it with the information and documentation an EMSVO is required to provide to the Department under § 1023.21(b), and to update that information if and when additional convictions, disciplinary sanctions and exclusions occur. The EMS agency shall consider this information in determining whether the person is a responsible person. An EMS agency shall also provide the Department with notice, at least 30 days in advance, of any change in its management personnel to include as a new member of its management team a person who has reported to it information required under this subsection.

\_\_\_\_\_  
Signature of Principal Official

\_\_\_\_\_  
Printed Name of Principal Official

\_\_\_\_\_  
Date

**#7 Pg. 6158; §1027.3(g)**  
**Policy for**  
**Communicating with PSAPs**

All EMS personnel of \_\_\_\_\_

EMS Agency Name

(Address) \_\_\_\_\_

(City)\_\_\_\_\_ (State)\_\_\_\_\_ (Zip)\_\_\_\_\_

**AFFILIATE #:** \_\_\_\_\_

**§ 1027.3. Licensure and general operating standards**

(g) Communicating with PSAPs

(1) *Responsibility to communicate unavailability.* An EMS agency shall apprise the PSAP in its area, in advance, as to when it will not be in operation due to inadequate staffing or for another reason and when its resources are committed in a manner that it will not be able to respond with an EMS vehicle, if applicable, and required staff, to a request to provide EMS.

(2) *Responsibility to communicate delayed response.* An EMS agency shall apprise the PSAP, as soon as practical after receiving a dispatch call from the PSAP, if it is not able to have an appropriate EMS vehicle, if applicable, or otherwise provide the requested level of service, including having the required staff enroute to an emergency within the time as may be prescribed by a PSAP for that type of dispatch.

(3) *Responsibility to communicate with PSAP generally.* An EMS agency shall provide a PSAP with information, and otherwise communicate with a PSAP, as the PSAP requests to enhance the ability of the PSAP to make dispatch decisions.

(4) *Response to dispatch by PSAP.* An EMS agency shall respond to a call for emergency assistance as communicated by the PSAP, provided it is able to respond as requested. An EMS agency is able to respond as requested if it has the staff and an operational EMS vehicle, if needed, capable of responding to the dispatch. An EMS agency may not refuse to respond to a dispatch based upon a desire to keep staff or an EMS vehicle in reserve to respond to other calls to which it has not already committed.

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**Signature of Principal Official**

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**Printed Name of Principal Official**

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**Date**

**#8 Pg. 6158; §1027.3(h)**  
**Policy for**  
**Patient management**

**All EMS personnel of** \_\_\_\_\_

**EMS Agency Name**

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

**AFFILIATE #:** \_\_\_\_\_

**§ 1027.3. Licensure and general operating standards**

(h) *Patient management.* All aspects of patient management are to be handled by an EMS provider with the level of certification necessary to care for the patient based upon the condition of the patient.

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Signature of Principal Official

\_\_\_\_\_

Printed Name of Principal Official

\_\_\_\_\_

Date

#9 **Pg. 6158; §1027.3(i)**

**Policy for  
Use of lights and other warning devices**

All EMS personnel of \_\_\_\_\_

EMS Agency Name

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

**AFFILIATE #:** \_\_\_\_\_

**§ 1027.3. Licensure and general operating standards**

(i) *Use of lights and other warning devices.* Ground EMS vehicles may not use emergency lights or audible warning devices unless they do so in accordance with the standards imposed under 75 Pa.C.S. (relating to Vehicle Code) and are transporting or responding to a call involving a patient who presents, or is in good faith perceived to present, a combination of circumstances resulting in a need for immediate medical intervention. Emergency lights and audible warning devices may be used on an ambulance when transporting a patient only when medical intervention is beyond the capabilities of the ambulance crew using available supplies and equipment.

EMS Providers and EMSVOs shall follow Protocol #123 as well.

\_\_\_\_\_

Signature of Principal Official

\_\_\_\_\_

Printed Name of Principal Official

\_\_\_\_\_

Date

All EMS personnel of \_\_\_\_\_

EMS Agency Name

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

AFFILIATE #: \_\_\_\_\_

**§ 1027.3. Licensure and general operating standards**

(j) *Weapons and explosives.* Weapons and explosives may not be worn by EMS providers or EMSVOs or carried aboard an EMS vehicle. This subsection does not apply to law enforcement officers who are serving in an authorized law enforcement capacity.

\_\_\_\_\_

Signature of Principal Official

\_\_\_\_\_

Printed Name of Principal Official

\_\_\_\_\_

Date

#11 Pg. 6158; §1027.3(k)

**Policy for  
Accident, injury and fatality reporting**

All EMS personnel of \_\_\_\_\_

EMS Agency Name

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

AFFILIATE #: \_\_\_\_\_

**§ 1027.3. Licensure and general operating standards**

(k) *Accident, injury and fatality reporting.* An EMS agency shall report to the appropriate regional EMS council, in a form or electronically, as prescribed by the Department, an EMS vehicle accident that is reportable under 75 Pa.C.S. and an accident or injury to an individual that occurs in the line of duty of the EMS agency that results in a fatality or medical treatment by a licensed health care practitioner. The report shall be made within 24 hours after the accident or injury. The report of a fatality shall be made within 8 hours after the fatality.

\_\_\_\_\_  
Signature of Principal Official

\_\_\_\_\_  
Printed Name of Principal Official

\_\_\_\_\_  
Date



All EMS personnel of \_\_\_\_\_

EMS Agency Name

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

AFFILIATE #: \_\_\_\_\_

**§ 1027.3. Licensure and general operating standards**

(l) *Committees.* An EMS agency shall have a safety committee and a quality improvement committee that meet at least quarterly. If an EMS agency operates an EMS agency dispatch center, the quality improvement committee shall also be responsible for the quality improvement of the EMS agency dispatch center and participate in the county PSAP quality assurance process.

\_\_\_\_\_  
Signature of Principal Official

\_\_\_\_\_  
Printed Name of Principal Official

\_\_\_\_\_  
Date

All EMS personnel of \_\_\_\_\_

EMS Agency Name

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

AFFILIATE #: \_\_\_\_\_

**§ 1027.3. Licensure and general operating standards**

(m) *EMS provider credentialing.* The EMS agency shall maintain a record for 7 years of the EMS agency medical director’s assessments and recommendations provided under § 1023.1(a)(1)(vi)—(viii) (relating to EMS agency medical director). An EMS agency may not permit an EMS provider at or above the AEMT level to provide EMS at the EMS provider’s certification level if the EMS agency medical director determines that the EMS provider has not demonstrated the knowledge and skills to competently perform the skills within the scope of practice at that level or the commitment to adequately perform other functions relevant to an EMS provider providing EMS at that level. Under these circumstances, an EMS agency may continue to permit the EMS provider to provide EMS for the EMS agency only in accordance with the restrictions as the EMS agency medical director may prescribe. The EMS agency shall notify the Department within 10 days after it makes a decision to allow an EMS provider to practice at a lower level based upon the assessment of the EMS provider’s skills and other qualifications by the EMS agency medical director, or a decision to terminate the EMS agency’s use of the EMS provider based upon its consideration of the EMS agency medical director’s assessment.

\_\_\_\_\_  
Signature of Principal Official

\_\_\_\_\_  
Printed Name of Principal Official

\_\_\_\_\_  
Date

# Monitoring compliance

All EMS personnel of \_\_\_\_\_

EMS Agency Name

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

AFFILIATE #: \_\_\_\_\_

## § 1027.3. Licensure and general operating standards

(o) *Monitoring compliance.* An EMS agency shall monitor compliance with the requirements that the act and this part impose upon the EMS agency and its staff. An EMS agency shall file a written report with the Department if it determines that an EMS provider or EMSVO who is on the staff of the EMS agency, or who has recently left the EMS agency, has engaged in conduct not previously reported to the Department, for which the Department may impose disciplinary sanctions under § 1031.3 or § 1031.5 (relating to discipline of EMS providers; and discipline of EMS vehicle operators). The duty to report pertains to conduct that occurs during a period of time in which the EMS provider or EMSVO is functioning for the EMS agency.

\_\_\_\_\_  
Signature of Principal Official

\_\_\_\_\_  
Printed Name of Principal Official

\_\_\_\_\_  
Date

# Policy for Out-of-hospital do-not-resuscitate orders

All EMS personnel of \_\_\_\_\_

EMS Agency Name

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

AFFILIATE #: \_\_\_\_\_

## § 1027.3. Licensure and general operating standards

(p) *Policies and procedures.* An EMS agency shall maintain written policies and procedures ensuring that each of the requirements imposed under this section, as well as the requirements imposed under §§ 1021.8(b), 1021.41, 1021.42, 1021.64 and 1027.5 and **Chapter 1051 (relating to out-of-hospital do-not-resuscitate orders)**, are satisfied by the EMS agency and its staff. It shall also maintain written policies and procedures addressing infection control, management of personnel safety and the safe operation of EMS vehicles, storage and environmental control of medications, substance abuse in the workplace and the placement and operation of its resources, and ensure that appropriate staff are familiar with these policies and procedures.

An EMS agency/EMS provider shall follow Protocol #324 from the PA Statewide BLS protocols.

\_\_\_\_\_  
Signature of Principal Official

\_\_\_\_\_  
Printed Name of Principal Official

\_\_\_\_\_  
Date

**Policy for  
Infection control**

All EMS personnel of \_\_\_\_\_

EMS Agency Name

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

**AFFILIATE #:** \_\_\_\_\_

**§ 1027.3. Licensure and general operating standards**

(p) *Policies and procedures.* An EMS agency shall maintain written policies and procedures ensuring that each of the requirements imposed under this section, as well as the requirements imposed under §§ 1021.8(b), 1021.41, 1021.42, 1021.64 and 1027.5 and Chapter 1051 (relating to out-of-hospital do-not-resuscitate orders), are satisfied by the EMS agency and its staff. It shall also maintain written policies and procedures addressing **infection control**, management of personnel safety and the safe operation of EMS vehicles, storage and environmental control of medications, substance abuse in the workplace and the placement and operation of its resources, and ensure that appropriate staff are familiar with these policies and procedures.

An EMS agency shall reference Guideline #103 from the PA Statewide BLS protocols. These guidelines are not designed to supersede an EMS agency's infection control policy [as required by EMS Act regulation 28 § 1005.10 (I)], but this general information may augment the agency's policy.

\_\_\_\_\_  
**Signature of Principal Official**

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\_\_\_\_\_

Printed Name of Principal Official

Date

#17 Pg. 6159; §1027.3(p)

**Policy for  
Management of personnel safety**

All EMS personnel of \_\_\_\_\_

EMS Agency Name

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

AFFILIATE #: \_\_\_\_\_

**§ 1027.3. Licensure and general operating standards**

(p) *Policies and procedures.* An EMS agency shall maintain written policies and procedures ensuring that each of the requirements imposed under this section, as well as the requirements imposed under §§ 1021.8(b), 1021.41, 1021.42, 1021.64 and 1027.5 and Chapter 1051 (relating to out-of-hospital do-not-resuscitate orders), are satisfied by the EMS agency and its staff. It shall also maintain written policies and procedures addressing infection control, **management of personnel safety** and the safe operation of EMS vehicles, storage and environmental control of medications, substance abuse in the workplace and the placement and operation of its resources, and ensure that appropriate staff are familiar with these policies and procedures.

An EMS agency could reference Guideline #102 from the PA Statewide BLS protocols in part when writing their policy.

\_\_\_\_\_  
Signature of Principal Official

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Printed Name of Principal Official

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Date

#18 **Pg. 6159; §1027.3(p)**

**Policy for  
The safe operation of EMS vehicles**

All EMS personnel of \_\_\_\_\_

EMS Agency Name

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

**AFFILIATE #:** \_\_\_\_\_

**§ 1027.3. Licensure and general operating standards**

(p) *Policies and procedures.* An EMS agency shall maintain written policies and procedures ensuring that each of the requirements imposed under this section, as well as the requirements imposed under §§ 1021.8(b), 1021.41, 1021.42, 1021.64 and 1027.5 and Chapter 1051 (relating to out-of-hospital do-not-resuscitate orders), are satisfied by the EMS agency and its staff. It shall also maintain written policies and procedures addressing infection control, management of personnel safety and **the safe operation of EMS vehicles**, storage and environmental control of medications, substance abuse in the workplace and the placement and operation of its resources, and ensure that appropriate staff are familiar with these policies and procedures.

As part of writing this policy, the EMS agency shall follow Protocol #123 from the PA Statewide BLS protocols.

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Signature of Principal Official

\_\_\_\_\_

\_\_\_\_\_

Printed Name of Principal Official

Date

#19 **Pg. 6159; §1027.3(p)**

## **Policy for**

# **Storage and environmental control of medications**

All EMS personnel of \_\_\_\_\_

EMS Agency Name

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

**AFFILIATE #:** \_\_\_\_\_

### **§ 1027.3. Licensure and general operating standards**

(p) *Policies and procedures.* An EMS agency shall maintain written policies and procedures ensuring that each of the requirements imposed under this section, as well as the requirements imposed under §§ 1021.8(b), 1021.41, 1021.42, 1021.64 and 1027.5 and Chapter 1051 (relating to out-of-hospital do-not-resuscitate orders), are satisfied by the EMS agency and its staff. It shall also maintain written policies and procedures addressing infection control, management of personnel safety and the safe operation of EMS vehicles, **storage and environmental control of medications**, substance abuse in the workplace and the placement and operation of its resources, and ensure that appropriate staff are familiar with these policies and procedures.

An EMS agency may also reference **§ 1027.5. Medication use, control and security.** (a) –(e) when writing this policy.



\_\_\_\_\_  
Signature of Principal Official

\_\_\_\_\_  
Printed Name of Principal Official

\_\_\_\_\_  
Date

#20 **Pg. 6159; §1027.3(p)**

**Policy for  
Substance abuse in the workplace**

All EMS personnel of \_\_\_\_\_

EMS Agency Name

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

**AFFILIATE #:** \_\_\_\_\_

**§ 1027.3. Licensure and general operating standards**

(p) *Policies and procedures.* An EMS agency shall maintain written policies and procedures ensuring that each of the requirements imposed under this section, as well as the requirements imposed under §§ 1021.8(b), 1021.41, 1021.42, 1021.64 and 1027.5 and Chapter 1051 (relating to out-of-hospital do-not-resuscitate orders), are satisfied by the EMS agency and its staff. It shall also maintain written policies and procedures addressing infection control, management of personnel safety and the safe operation of EMS vehicles, storage and environmental control of medications, **substance abuse in the workplace** and the placement and operation of its resources, and ensure that appropriate staff are familiar with these policies and procedures.

The EMS agency shall write this policy.

\_\_\_\_\_  
Signature of Principal Official

\_\_\_\_\_  
Printed Name of Principal Official

\_\_\_\_\_  
Date

#21 **Pg. 6159; §1027.3(p)**

**Policy for  
Placement and operation of EMS agency resources**

All EMS personnel of \_\_\_\_\_

EMS Agency Name

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

**AFFILIATE #:** \_\_\_\_\_

**§ 1027.3. Licensure and general operating standards**

(p) *Policies and procedures.* An EMS agency shall maintain written policies and procedures ensuring that each of the requirements imposed under this section, as well as the requirements imposed under §§ 1021.8(b), 1021.41, 1021.42, 1021.64 and 1027.5 and Chapter 1051 (relating to out-of-hospital do-not-resuscitate orders), are satisfied by the EMS agency and its staff. It shall also maintain written policies and procedures addressing infection control, management of personnel safety and the safe operation of EMS vehicles, storage and environmental control of medications, substance abuse in the workplace and **the placement and operation of its resources**, and ensure that appropriate staff are familiar with these policies and procedures.

The EMS agency may reference parts of Guideline #102 from the PA Statewide BLS protocols when writing this policy.

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**Signature of Principal Official**

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**Printed Name of Principal Official**

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**Date**

**Reference**

**§ 1027.5. Medication use, control and security.**

(a) An EMS agency may stock medications as approved by the Department and shall store medications in a temperature-controlled environment, secured in conformance with the Statewide EMS protocols and the EMS agency's policy and procedures on the storage and environmental control of medications. Additional medications may be stocked by an EMS agency as approved by the EMS agency medical director and the Department if the EMS agency uses PHPEs, PHRNs or PHPs.

(b) The Department will publish at least annually by notice in the *Pennsylvania Bulletin* a list of medications approved for use by EMS agencies, by EMS provider certification level and a list of medications that an EMS agency is required to stock based upon the type of EMS service it is licensed to provide.

(c) An EMS agency may procure and replace medications from a hospital, pharmacy or from a medical supply company, if not otherwise prohibited by law.

(d) EMS providers, other than a PHP, may administer to a patient, or assist the patient to administer, medications previously prescribed for that patient, as specified in the Statewide EMS protocols or as authorized by a medical command physician. A PHP may administer to a patient, or assist the patient to administer, medications that were previously prescribed for the patient.

(1) An EMS provider, other than a PHPE, PHRN or PHP, is restricted to administering medications, not previously prescribed for a patient, as permitted by the

Statewide EMS protocols.

(2) A PHPE or PHRN may administer medications, not previously prescribed for a patient, in addition to those permitted by the Statewide EMS protocols, provided the

PHPE or PHRN has received approval to do so by the EMS agency medical director, and has been ordered to administer the medication by the medical command physician.

A PHP may administer any medication that the PHP has authority to administer by virtue of the PHP's license to practice medicine or osteopathic medicine.

(e) The EMS agency shall adequately monitor and direct the use, control and security of medications provided to the EMS agency. This includes:

(1) Ensuring proper labeling and preventing adulteration or misbranding of medications, and ensuring medications are not used beyond their expiration dates.

(2) Storing medications as required under The Controlled Substance, Drug, Device and Cosmetic Act (35 P. S. §§ 780-101—780-144), and as otherwise required to maintain the efficacy of medications and prevent misappropriation.

(3) Including in the EMS PCR information as to the administration of medications by patient name, medication identification, date and time of administration, manner

of administration, dosage, name of the medical command physician who gave the order to administer the medication and name of person administering the medication.

(4) Maintaining records of medications administered, lost or otherwise disposed of and records of medications received and replaced.

(5) Providing the pharmacy, physician or hospital that is requested to replace a medication with a written record of the use and administration or loss or other disposition of the medication, which identifies the patient and includes any other information required by law.

(6) Ensuring, in the event of an unexplained loss or theft of a controlled substance, that the dispensing pharmacy, physician or hospital has contacted local police or

State Police and the Department's Drugs, Devices and Cosmetics Office and has filed a DEA Form 106 with the Federal Drug Enforcement Administration.

(7) Disposing of medications as required under The Controlled Substance, Drug, Device and Cosmetic Act.

(8) Arranging for the original dispensing pharmacy, physician or hospital, or its EMS agency medical director, to provide it consultation and other assistance necessary to ensure that it meets the requirements in this section.

**(9)** Securing medications in a manner so that only those EMS providers authorized to administer the medications in providing EMS have access to those medications.