



1626 Atlantic University Circle
Jacksonville, Florida 32207

Standard Operating Guidelines
Section 100
Rules and Regulations

Standard Operating Guidelines

Welcome to Liberty Ambulance Service. We hope you will find your employment here to be enjoyable, rewarding, and professionally fulfilling. Liberty Ambulance Service is committed to providing Northeast Florida and Southeast Georgia with high quality, affordable EMS and non-medical transportation services. This is only possible through the quality efforts of our outstanding personnel. We have developed procedures to provide a good and productive workplace, but this is a never-ending task. We value your input in suggesting changes that might make Liberty Ambulance Service, and your job here, better, more professional and make us all able to better serve our customers.

Company History

Liberty ambulance Service was established in May of 1984 as a family owned business. We initially started with one 24 hour crew and 1 day unit. We have grown over the years to a large fleet we can be proud of. We currently operate in 4 Counties in northeast Florida.. We are constantly marketing to improve our market share and increase our business volume.

Philosophy

Liberty Ambulance Service and its subsidiaries are professional emergency and medical transportation services established on Biblical principles and are dedicated to providing Northeast Florida and Southeast Georgia with quality prehospital, interfacility and medical transports. Liberty Ambulance Service shall always strive to provide care based on integrity, professionalism and compassion.

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Mission Statement

To provide northeast Florida and southeast Georgia with the finest possible EMS and medical transportation with the emphasis on courtesy, professionalism and customer satisfaction.

Governing Values

Integrity: We strive for the highest integrity:

In handling patients, families, belongings and confidential information.

In business dealings with vendors and payers, ordering, payment and filing of claims.

In the management of employees, with time, pay, benefits and discipline.

Courtesy: We will treat all persons with respect and dignity.

Quality: The highest achievable standards of system performance, customer service and patient care.

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Liberty Ambulance Service, Inc. is a Florida Drug Free Workplace. All applicants and employees must test negative for drugs and/or alcohol prior to employment and continue to test negative to remain employed at Liberty Ambulance Service.

A criminal background check is performed on all applicants. Conviction for any felony, or any misdemeanor conviction for child abuse or neglect, domestic violence, drug possession, theft, assault/battery or DUI/DWI are grounds for disqualification for employment or termination of existing employment, continued employment will be based on the offense.

All applicants for positions for which driving is a requirement also undergo a driving record check. Our insurance agent checks for insurability and we obtain driving records as required by the Florida EMS Bureau rules. We reserve the right to qualify applicants based on insurability. Employees are encouraged to follow the Florida motor vehicle laws and avoid traffic citations. Those whose job depends on their driving privilege are subject to annual reviews by our insurers and could be disqualified from driving should they obtain too many traffic violations. Should you get a traffic citation, immediately see the training officer for advantageous ways to protect your driving record prior to electing a disposition of the citation.

The rules and regulations contained within this document cannot cover every conceivable situation. The scope of your employment and job description is not limited by this document. Administration or any designated supervisor or FTO may assign duties to you as needed. These are to be followed as if they were written directives.

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Section 100.100 Job Descriptions

A. Driver

1. Definition

A driver is a person who meets the qualifications of FS 401. and 64E-2 as outlined below and drives wheelchair vans, non-emergency stretcher vans, and/or ambulances. A driver is not an EMT, but an EMT may drive. EMT's and Paramedics who drive must comply with the training and licensing requirements.

2. Qualifications: Ambulance Driver

Seven years driving experience (age 23 if licensed at 16)

Holds at least a current FL Class E driver license

- A. Certifies free from mental illness or addiction to alcohol or drugs
- B. Has not been convicted of DUI within the past 7 years
- C. Has a high school diploma, equivalent certificate or GED certificate.
- D. Hold a current ARC Standard First Aid Certification or equivalent.
- E. Hold a current certification in American Red Cross or American Heart Association CPR for Health care Workers
- F. Has completed a US DOT 16 hour Emergency Vehicle Operators Course or its in-service equivalent
- G. Physical Performance Requirements:
 - a. Ability to Lift 150 lbs
 - b. Ability to Perform significant and prolonged bending and stooping
 - c. With the help of a partner, ability to carry a patient weighing 150-200 lbs up and down 1 flight of stairs
 - d. Ability to Load a 250 lb patient into an ambulance on a cot
 - e. With the help of a partner, ability to raise and lower a standard ambulance cot loaded with a 250 -300 lb patient.
- H. Have and maintain a good driving record

3. Qualifications: Wheelchair or Non-emergency Stretcher Driver

- a. Be at least 23 years of age
- b. Has a high school diploma, equivalent certificate or GED.
- c. Hold a current Fla Class E license
- d. Be free from mental illness or alcohol or drug addiction
- e. Hold a current certification in American Red Cross or American Heart Association CPR for Health care workers.
- f. Has not been convicted of DUI within the last 7 years.

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4. Duties

- A. Vehicle maintenance duties required by all drivers
 - a. Operation of the vehicle in a safe and courteous manner.
 - b. Each day upon coming on duty:
 - c. Check the vehicle for cleanliness and new damage.
 - d. Check the oil, transmission, radiator, brakes, batteries, power steering and windshield washer reservoir for proper levels and fill as necessary.
 - e. Check the condition of all belts and hoses for hose condition and proper belt tension and excessive wear.
 - f. Check tires for wear and proper inflation
 - g. Check all lights, including emergency lights on ambulances, for proper operation and notify the fleet manager of any defective bulbs.
 - h. At the end of the day, with the help of any applicable partner, clean, refuel, and restock the unit so as it will be ready for use.
 - i. Fully complete the Daily Driver Vehicle Report
 - j. Assure the safety and security of the unit and patient
 - k. Other duties as assigned by administration or supervisor
- B. Maintain the privacy, confidentiality and security of all protected health information
- C. Physical Performance Requirements
 - a. Ability to Lift 150 lbs
 - b. Ability to Perform significant and prolonged bending and stooping
 - c. With the help of a partner, ability to carry a patient weighing 150-200 lbs up and down 1 flight of stairs
 - d. Ability to Load a 250 lb patient into an ambulance on a cot from the foot end
 - e. With the help of a partner, ability to raise and lower a standard ambulance cot loaded with a 250 -300 lb patient

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B. Dispatcher

1. Definition

A Dispatcher is a person who coordinates the ambulance activities. Preference in hiring is given to medically trained individuals.

2. Qualifications

- a. Be at least 18 years of age.
- b. Be in generally good health.
- c. Be emotionally mature and able to handle stressful situations well.
- d. Be free of alcohol or drug addiction.
- e. Has completed high school or has an equivalency certificate or GED, or obtained approval from administration.
- f. Possess a current ARC or AHA CPR for Health Care Workers certificate of training.
- g. Be free from mental illness which would impair the ability to perform their duties.
- h. Possess a clear and easily understood telephone and radio voice.
- i. EMT or EMD (by City Ordinance)

3. Basic Duties

- a. Answer the telephone promptly, preferably after the first ring.
- b. Dispatch all calls in a timely manner, whether an emergency or not.
- c. Notify supervisor immediately of any problems with units or field personnel.
- d. Keep the Dispatch area neat and clean.
- e. Before the end of the shift, assure that the dispatch area is clean, trash emptied and vacuumed.
- f. Assure all patient care reports have been turned in by all crews that depart during your hour shift. Night dispatcher must have the total accumulated patient care reports from 0000 hrs to 2359 hrs each day.
- g. Assure all monies collected during your shift are accounted for and secure. Account for all monies at shift change and have the oncoming dispatcher sign for the money.

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- h. Assure each crew has keys, a Nextel and gas cards when beginning their shift. Give each driver a Daily Drivers Vehicle report and make sure he/she properly fills it out when reporting on duty. Tracks ALS and BLS equipment..
- i. Maintain a high degree of professionalism in your telephone and radio voice at all times. YOU are representing the company.
- j. Sign in and out employees as they come in and go off duty. Do not let anyone else sign in or out.
- k. Log any schedule changes and notify chief or ~~assistant~~ deputy chief of operations immediately of any call-ins.
- l. Track all keys, gas cards and Nextel's via equipment log; drivers sign them out at the beginning and at the end of their shift.
- m. Maintain the privacy, confidentiality and security of all protected health information entrusted to you.

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C. Emergency Medical Technician

1. Definition: An Emergency Medical Technician is a person qualified as required in F.S. 401 who provides Basic Life Support medical care and serves on either a Basic Life Support or Advanced Life Support Ambulance. An Emergency Medical Technician may drive a BLS unit, serve as Senior Medical Technician on a BLS unit, and drive an ALS unit.

2. Qualifications

- a. Be at least 18 years of age
- b. Hold a current Florida Class E License
- c. Have and Maintain a good driving record
- d. Be in generally good physical health
- e. Be free from mental illness
- f. Be free from addiction to alcohol or drugs
- g. Has a high school diploma, equivalent certificate or GED.
- h. Possess a current American Heart Association BLS course "C" or an American Red Cross CPR for Healthcare Workers CPR certification card
- I. Possess a current Certification as an EMT from the State of Florida
- j. Have documentation of completion of state required 16 hr EVOC course

3. Vehicle Maintenance Duties (If driving)

- a. Operation of the vehicle in a safe and courteous manner at all times
- b. Perform a maintenance check on your vehicle using appropriate checklists each morning when coming on duty to include:
 - Checking the general condition of the vehicle for cleanliness and damage
 - Checking the levels of oil, radiator fluid, battery, transmission fluid, power steering fluid, brake fluid, windshield washer fluid
 - Checking condition of belts and hoses and report to supervisor for correction
 - Checking tires visually for proper inflation, general condition and wear and report problems to the supervisor
 - Checking all lights, including emergency lights and replace burned out bulbs as needed, report other problems to the supervisor

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- c. At the end of the day, cleans and refuels vehicle as necessary for the unit to be used the following day
- d. If the senior medical technician, make sure the white inventory sheets are completed daily.

4. Medical Duties

- b) Assess patient's condition
- c) Take and record vital signs including pulse oximetry
- d) Provide airway management using manual maneuvers, oro-pharyngeal airways, esophageal obturator or double lumen airway.
- e) Administer oxygen by inhalation or bag-valve-mask
- f) Control shock
- g) Apply appropriate splints and bandages
- h) Monitor non-medicated IV fluids on interfacility transfers
- i) Assist the Paramedic on the ALS unit by administering oxygen, putting patient on the monitor, setting up an IV, or other duties as requested by the Paramedic
- j) Perform defibrillation using a semi-automatic defibrillator
- k) Initiate IV on an ALS unit meeting the requirements of 64E2 if trained to do so.
- l) Monitor the pt's O2 saturation via Pulse Oximetry
- m) Assure the safety and security of the patient and vehicle
- n) Maintain the privacy, confidentiality and security of all protected health information.
- o) Any other duties as assigned by Administration or the Medical Director.

5. Physical Performance Requirements:

- a. Ability to lift 150 lbs
- b. Ability to perform significant and prolonged bending and stooping
- c. With the help of a partner, ability to carry a patient weighing 150-200 lbs up and down 1 flight of stairs
- d. Ability to Load a 250 lb patient into an ambulance on a cot from the foot end
- e. With the help of a partner, ability to raise and lower a standard ambulance cot loaded with a 250 -300 lb patient

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D. Paramedic

1. Definition

A Paramedic is a person who meets the criteria in F.S. 401 for certification as a Paramedic, and provides Advanced Life Support Emergency Medical Care.

2. Qualification

- a. Is at least 18 years of age
- b. Possess a current Florida Class E License
- c. Has and maintains a good driving record
- d. Is in generally good health
- e. Is free from mental illness
- f. Is free from addiction to alcohol and drugs
- g. Has completed high school or equivalency or GED
- h. Holds a current Florida Paramedic Certificate
- I. Holds a Current AHA/ARC CPR for Health care workers certificate
- j. Has completed a 16 hr EVOC course
- k. Has not been convicted of DUI in the past 7 years

3. Vehicle Maintenance Duties (if Driving)

- a. Operation of the vehicle in a safe and courteous manner at all times
- b. Perform a maintenance check on your vehicle each morning when coming on duty to include:
 - Checking the general condition of the vehicle for cleanliness and damage
 - Checking the levels of oil, radiator fluid, battery, transmission fluid, power steering fluid, brake fluid, windshield washer fluid
 - Checking condition of belts and hoses and report to supervisor for correction
 - Checking tires for proper inflation, general condition and wear and report problems to the supervisor
 - Checking all lights, including emergency lights and replace burned out bulbs as needed, report other problems to the fleet manager.

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4. Make sure the white inventory sheets are completed daily.
5. Medical Duties
 - a. Assess patients
 - b. Provide airway control through manual maneuvers, oro-pharyngeal airways, esophageal or endo-tracheal intubation
 - c. Administer Oxygen by inhalation or Bag-Valve-Mask
 - d. Administer the following classification of drugs by inhalation, injection, oral, sublingual, or topical routes
 - Catecholamines
 - Antiarrhythmic agents
 - Alkalotic Agents
 - Calcium Channel Blockers
 - Cardiotonics
 - Analgesics, including narcotics
 - Any other medications as approved by the Medical Director
 - Antisiezure Preparations
 - Antihypertensive agents
 - Vasopressors
 - Bronchodilators
 - Sugar or Salt solutions
 - e. Performs intravenous cannulation for the purpose of administering medications, fluids, or drawing blood.
 - f. Perform gastric intubation and suction
 - g. Perform oral/nasal tracheal suctioning
 - h. Treat shock with fluids, or vasopressors
 - i. Perform needle thorocostomy, cricothyrotomy and intraosseous access
 - j. perform End Tidal CO2 monitoring
 - k. perform 12 lead ECG and cardiac monitoring
 - l. Assess SAO2 via pulse oximetry
 - m. Assure the safety and security of the patient and vehicle
 - n. Maintain the privacy, confidentiality and security of protected health information
 - o. Any other duties or procedures as assigned by the Medical Director or Administration
6. Physical Performance Requirements:
 - a. Ability to Lift 150 lbs independently
 - b. Ability to Perform significant and prolonged bending and stooping
 - c. With the help of a partner, ability to carry a patient weighing 150-200 lbs up and down 1 flight of stairs
 - d. Ability to Load a 250 lb patient into an ambulance on a cot from the foot end
 - e. With the help of a partner, ability to raise and lower a standard ambulance cot loaded with a 250 -300 lb patient

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E. Supervisor Duties

A. General Duties:

In addition to the regular duties outlined in the job description for the certification level the supervisor holds, supervisors shall:

1. Assure all policies and procedures are adhered to by employees they supervise, including providing written and verbal warnings and disciplinary action up to and including suspension.
2. Inspect the facility and grounds for cleanliness and assign personnel to correct any deficiency.
3. Assure the units are checked out properly, utilizing the Medical Supply Checklists on a daily basis.
4. Inspect units used that day and assure they are washed, the interior cleaned, and are left with 3/4 capacity of fuel.
5. Assure that the Stericycle box for disposing of the red biohazard bags is kept available for use. If full, it must be sealed up and a bar code label applied. The boxes must not be allowed to overfill. All boxes must be lined with a red biohazard bag supplied by Stericycle. No biohazard trash shall be mixed with the linen.
6. Assure that the linen bin is kept neat and clean and that when full, the linen bags are placed in the in the large Rubbermaid unit. All linen cans are lined with a large blue bag. Supervisors should be aware of the linen and Stericycle schedules.
7. Assist with the QA of patient care reports for medical care and billing information. Forward a list of any deficiencies to the Training Officer for correction and Medical Director review.

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E. Supervisor Duties

B. Specific Duties

1. QA Officer

- a. Review all patient care reports for protocol compliance.
- b. Forward any deficient patient care reports to the medical director for review.
- c. Provide the medical director with patient care reports as specified and requested by assistant chief of operations.
- d. Serve as a member of the QA committee.
- e. Work with the Resource Officer, Assistant Resource Officer and Operations Chiefs to evaluate and choose new medical supply items as needed.
- f. Pull aggregate data for submission to the EMS Bureau

2. Resource/Supply Officer (duties currently performed by Deputy Chief of Operations)

- a. Order, store, and inventory all medications and medical supplies as needed.
- b. Maintain the inventory at such levels as to reasonably assure that a needed medication or supply item is available for replacement.
- c. Maintain an inventory record, at least monthly, of all medications including the expiration dates.
- d. Maintain the medication storage area and supply shed in a neat and orderly fashion.
- e. Work in conjunction with the Chief of Operations and Assistant Chief of Operations to evaluate and choose new medical supply items as needed.

3. Assistant Resource/Supply Officer (as above)

- a. Order, store and inventory all durable medical equipment as needed.
- b. Maintain DME at such levels, within budgetary restrictions, as to reasonably assure that a needed piece of equipment is available for replacement.
- c. Work in conjunction with the Deputy Chief of Operations to evaluate and recommend new DME items as needed.
- d. Inventory, on a yearly basis as determined by administration, all DME and submit a report to the Deputy Chief of Operations.
- e. Assure all vehicles are inventoried for medical supplies, medications and DME, using appropriate forms, on at least a weekly basis to assure compliance with state guidelines.
- f. Work in conjunction with the Deputy Chief of Operations to evaluate medical equipment for purchase.

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F. Patient Account Representative

1. Definition

A Patient Account Representative (PAR) is an individual who is hired to perform billing, collections, and administrative functions for the company.

2. Qualifications

High school graduate or equivalent

Good communication skills and a clear phone voice.

Familiar with computer operations in the windows environment and has adequate typing skills.

Proficiency in Microsoft Office desirable.

Familiar with medical terminology.

Familiar with Medical Billing desirable.

3. Duties

a. Data entry of calls performed by field personnel

b. Collection of additional medical and insurance information needed to adequately bill the calls.

c. Interacting with field personnel, medical facilities, patient and families to obtain needed insurance and billing information, and answer

d. Transmission/EDI of claims to Medicare and Medicaid if trained to do so.

e. Printing and mailing of bills and appropriate insurance forms to insurance companies, patients and other responsible parties.

f. data entry of payments when received if trained to do so.

g. collection and processing of returned mail.

h. mailing notices of privacy practices and receipt of acknowledgements.

i. maintaining the privacy of any patient's PHI

j. Maintaining the privacy, confidentiality and security of all medical records and PHI.

k. appropriate filing and storage of all medical records and patient information.

l. answering the phone in a timely manner, usually within 2 rings and answering pleasantly and professionally.

m. collection of past due bills or processing accounts to be turned over to our collection agency.

n. maintaining your work area in a neat and clean manner.

o. any other duties as may be assigned by your supervisor, manager or administration

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G. HIPAA Compliance/Privacy and Security Officer

The Privacy Officer oversees all activities related to the development, implementation, and maintenance of Liberty Ambulance's policies and procedures covering the privacy of patient health information. This person serves as the key compliance officer for all federal and state laws that apply to the privacy of patient information, including the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA).

This individual is tasked with the responsibility of ensuring that all of the organization's patient information privacy policies and procedures related to the privacy of, and access to, patient health information are followed.

DUTIES AND RESPONSIBILITIES

Principle Responsibilities

1. Develop policies and procedures on staff training related to the privacy of patient health information and protected health information;
2. Develop policies on the security of health care information including computer and password security and patient data integrity;
3. Defines levels of staff access to PHI and minimum necessary requirement for staff based on the required job responsibilities;
4. Oversees, directs, delivers, and ensures the delivery of initial and ongoing privacy training and orientation to all staff members, employees, volunteers, students and trainees.
5. Serves as the contact person for the dissemination of PHI to other health care providers;
6. Serves as the contact person for patient complaints and requests;
7. Processes patient requests for access to and amendment of health information and consent forms;
8. Processes all patient accounting requests;
9. Ensures the capture and storage of patient PHI for the minimum period required by law;

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10. Ensures ambulance service compliance with all applicable HIPAA Rule requirements and works with legal counsel and other managers to ensure the company maintains appropriate privacy and confidentiality notices and forms and materials.
11. Cooperates with the state and federal government agencies charged with compliance reviews, audits and investigations.

QUALIFICATIONS:

Educational Requirements

High school Diploma or GED Equivalent. Health care provider license or certification preferred, with a working knowledge of the Privacy and Security Rule required.

Maintains current knowledge of applicable federal and state privacy laws and monitors changes in privacy practices for the ambulance industry to ensure current organizational compliance.

Mental Requirements of the Job

Reading and writing skills required. Experience working with the public is essential.

Demonstrated organizational, facilitation, communication and presentation skills.

Disclaimer

The information provided in this description has been designed to indicate the general nature and level of work performed by incumbents within this job. It is not designed to be interpreted, as a comprehensive inventory of all duties, responsibilities, qualifications and working conditions required of employees, assigned to this job. Management has sole discretion to add or modify duties of the job and to designate other functions as essential at any time. This job description is not an employment agreement or contract.

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A. Reporting for Work

1. All personnel are responsible for reporting to work on time. Chronic tardiness causes problems with anticipated workload and will not be tolerated. Tardiness will be recorded by the dispatcher and passed to the operations manager. Disciplinary action will be taken for anyone with three or more tardies in a 90 day period.

2. Report Times

- a. Shift Crew members report no later than: 0700 for 24 hr shifts except Shands 0600
Various Hours for 12 hour shifts (day trucks)
0600 for 16 hour shifts
- b. Day crew personnel will report to work at the times assigned on the schedule unless otherwise told by dispatch or management.
- c. Billing Office staff will report as assigned by the billing office manager or supervisor.

3. Shift personnel who work other jobs or have school and must leave before their shift is up must secure their own relief for the remainder of the shift. This includes school which conflicts with pre-scheduled work days. The employee is ultimately responsible for securing relief. If relief cannot be obtained for school, then let the lead dispatcher know and a reasonable effort will be made to help you find relief.

4. It is the dispatcher's responsibility to check the scheduled runs each night by 2000 hours and determine if additional crews need to be called in early. Check with Operations management and notify crew members if report times have changed. Calls should be made before 2200 hrs.

5 Crew members who call-in for illness or being late should be made as early as possible. Last minute calls create problems in scheduling coverage for early morning scheduled runs.

6. Leave time or swap time, including vacations, must be submitted in writing, in advance, AND approved by administration. This rule applies to all personnel.

7. Anytime a driver (or crew) takes a unit anywhere, you must get permission from dispatch, this includes meals and errands.

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B. Uniform and Dress Codes

It is the intent of Liberty Ambulance Service for it's employee to be attired and present themselves in a professional manner.

1. Dress Code

a. All field personnel are expected to report to work clean and in a pressed uniform. *You are expected to report to the dispatcher in the appropriate uniform.* Personnel are expected to be clean so as not to give off any offensive bodily odors. After shave lotion or perfume should be used in keeping with good taste. Class A uniforms will be worn during regular business hours (0700-1700) and shirt tails will be kept tucked in. The only exception is if the employee is cleaning or performing minor repairs on the unit. Then a grey or dark blue crew neck t-shirt must be worn. No tank tops, or other logo t-shirts may be worn. In the winter months a grey or dark blue long sleeve turtle neck *or crew neck t-shirt* may be worn. Thermal underwear is NOT acceptable. Dress code will be enforced any time an employee is in uniform or on duty. Liberty Ambulance Service reserves that right to control when, where and how any uniform identifying an individual as an employee of Liberty Ambulance Service is worn. Class B uniforms may be worn weekends, holidays and at special events as approved by management so long as both crew members are in the same uniform.

b. Office personnel are expected to report to work clean and professional looking in business casual attire each day. Shorts are NOT permitted.

2. Men's hair will be kept well groomed, off the collar and no more than 2 covering the ear. Hair style must reflect a professional appearance and those deemed inappropriate by administration will not be allowed. Women's hair will be well groomed and field personnel must be kept up off the shoulders for safety and sanitation if handling patients.

3. Facial hair: Field Personnel

is not permitted, except for mustaches which will be neatly trimmed, and sideburns must be straight, with squared corners and will not extend past the earlobe. Mustaches must not extend past the corners of the mouth. Men must otherwise be clean shaven **daily**, before reporting to work.

Non-Field Personnel: Facial hair/beards are permitted

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Dress Code Cont'd

4. Jewelry should be kept to a minimum for safety and sanitation reasons and should reflect good taste and a professional appearance. Field personnel should keep necklaces inside the shirt. Women shall wear only stud-type earrings. No tongue piercings or facial piercing other than single pair of stud type earrings on the earlobes is permitted. Men are not permitted to wear earrings or have any visible piercings.
5. Visible tattoos must be covered by clothing as described in this policy. Any employee who acquires a tattoo that cannot be covered by an approved uniform may be subject to termination. Any employee considering acquiring a tattoo should keep this policy in mind.
6. Official Uniform (Class A) for field personnel
 - a. Gray uniform shirt, button pockets and epaulets
 - Liberty patch Left sleeve 2" down and centered. Replace faded patches promptly.
 - Certification patch right sleeve 2" down & centered
 - Name badge, over right pocket 2" up & centered-CPR, BTLS, ACLS, etc. pins, if worn, over left pocket & centered
 - Rank insignia, if applicable, is worn on the shoulder and must be worn by supervisors
 - b. Navy Blue Trousers or EMS pants, non bloused, no pleated pants
 - c. Black belt
 - d. Black shoes or boots capable of being cleaned and shined with liquid or paste shoe polish
 - e. A T-shirt must be worn under the uniform shirt. This will allow the uniform shirt to be removed if necessary to work on simple mechanical problems or unit cleaning and keep the uniform shirt clean. It also keeps the employee cooler in the summer and warmer in the winter and appears more modest for female employees. Liberty T-shirts are approved.
 - d. Jackets: As approved
 - e. Class B Uniforms

In lieu of a uniform shirt, for special events, the official Liberty golf shirt may be worn providing both crew members are in the same uniform.

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C. Daily Routine

1. Reporting to work: Report to the dispatcher immediately upon arriving to work. All personnel are responsible for reporting to work on time. Chronic tardiness causes problems with scheduled runs and will not be tolerated. Tardies will be recorded and 3 unexcused tardiness or absences in a 90 period may result in disciplinary action.

2. Checking out units:

Upon reporting to the dispatcher, you will be assigned to a unit, given the keys and a Daily Drivers Vehicle report. The driver is responsible for filling out the Drivers Daily Vehicle Report. It is to be filled out completely and correctly and turned in to dispatch. You will then be given a pager, gas cards, etc. The 24 hour crews are NOT exempt from this requirement. The sheets follow the driver and not the unit. If you are switched to another unit, then obtain another to check out unit you are getting on. This must be followed even if the unit was already checked out by another crew. If you are given a run as soon as you come on duty and cannot check out your unit, have the dispatcher sign the DDVR, and take the sheet with you and fill it out and turn it in prior to ending your tour of duty. If you are prevented from doing this by run volume, then turn the entire sheet in at the end of the day. The senior medical tech must complete the medical supply checklists daily.

3. Supply Procedure:

At the end of the shift, the supply requisition must be turned in to the dispatcher. All supplies must be requested in writing.

4. Ending tour of Duty:

At the end of the assigned shift, the following items must be performed:

- A. The unit must be washed and dried, interior vacuumed and the patient compartment mopped with an appropriate antiseptic.
- B. Trash, biohazard and linen must be emptied and linen put in the hamper. Try to drop off linen at the hospital if possible, to prevent a build up at the office.
- C. Upholstery should be wiped off and windows cleaned, if needed.
- D. All equipment must be put back in its proper place. Medical equipment turned in as appropriate. Controlled Drug Sets turned back in if not relieved by another Paramedic. Nothing is to be left on the bench seat.
- E. refill portable O2.
- F. Turn runbook, map book, completed patient care reports, Nextel and keys in to dispatch

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5. No TV watching during regular hours 8-5 M-F.
6. Daily duties may be adjusted at the discretion of administration or the Shift Supervisors, subject to the needs of the company and/or available manpower.
7. Oxygen procedures:
 - A. No one is approved to fill O2 bottles until you have been trained through a supervisor or the training officer to do so for safety and operational reasons. All portables must have a minimum of 1000 psi. Main O2 is procured through a local vendor. If, O2 gets below 500 psi, let the supervisor know and he will get you there for O2 to be swapped out. On Fridays and the day before Holidays, check main O2 and notify the supervisor if you think it's going to run out during the holiday or weekend.
 - B. Cascade System Operation:
 1. Obtain cylinder for filling and attach to system.
 2. Open the cylinder and determine the pressure in the cylinder.
 3. Find the K cylinder in the system with the least pressure which is more than the pressure of the cylinder you are filling.
 4. Open the valve on the K cylinder slowly and allow the pressure in the two tanks to equalize.
 5. Close the valve.
 6. Find the cylinder with the next higher pressure.
 7. Repeat steps 3-5 until the cylinder is pressurized to the maximum available in the system.
 8. If the maximum available system pressure drops below 1500 psi, notify a supervisor to replace the cylinders.
 9. There are spare O2 bottles in the cascade room for the replacement of main O2 on units on nights or weekends. Regular change-outs are to be done at the O2 supplier. When the bottle is used, remove the full indicator ring and hang up. All bottles in the cascade area must be chained to the wall and have caps placed on them.

Standard Operating Guidelines
Section 100.125 General Operations

D. Unit, Building and Grounds Maintenance

Minor repairs needed to units should be performed by crew members and major problems should be logged on the DDVR and the fleet manager notified. Minor building maintenance such as changing light bulbs, unstopping a drain or toilet, etc should be performed as the need is discovered. Notify administration if tools or other supplies are needed. The grounds must be kept clean and lawn areas mowed, edged, etc. without being instructed to do so as needed. Other assignments may be designated by the supervisor as needed.

E. Response and Scene Times

After a call is dispatched, the crew MUST be 10-51 within 3 minutes. The unit will proceed to the scene using the fastest possible route. When the unit arrives, and goes 10-97 on the radio, the scene times begin. Scene times should be within the following guidelines:

1. BLS and Discharges: 15 minutes
2. ALS First Response: 25 minutes
3. Interfacility Transfers: 30 Minutes (Complex ALS are exempt)
4. ER Time : 10 minutes to go 10-8

The dispatcher should be notified should there be a reason to exceed these times. If you are responding in emergency mode, go "10-51 Bravo". All discharges and first time callers should receive phone stickers and business cards.

Standard Operating Guidelines
Section 100.125 General Operations

F. Miscellaneous

1. Only **on duty dispatchers** or administrative personnel supervising dispatch are allowed to be in dispatch, at any time, 24 hours per day, including weekends and holidays. No one is to be “hanging out” in dispatch. This includes crewmembers that are cross-trained as dispatchers.
2. The door to dispatch must be kept closed at all times.
3. Crews must do their business from the front window only. Persons requesting to come back within administration must:
 - Have a specific purpose or person to see
 - Must be cleared by a member of administration
 - Cannot come back to simply “use the bathroom” there are restrooms across in the crew quarters for that purpose

Billing personnel must use the side window to conduct business.

4. All non-administrative or billing personnel must be announced before being allowed to proceed past the locked door.
5. The access door to administration must be kept closed and locked at all times.

6. Non-Employee Riders

A. Civilian Observers

Due to a recent opinion by the Office of Civil Rights (OCR), civilian observers are not allowed to ride units.

B. Volunteers

All persons wishing to become official volunteers with Liberty Ambulance or its affiliated companies must fill out an application for employment and be processed exactly as if the individual was becoming employed by Liberty Ambulance or the affiliated company. They are subject to all company rules and regulations including the dress code. They must pass a criminal background check and a pre-assignment drug screen.

C. Students

Students of area EMT/Paramedic programs may ride as a part of their training.

This policy does not affect families accompanying patients on a transport.

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Section 100.125 General Operations

7. Tobacco Policy

There will be NO SMOKING or other tobacco use at any time on any property, or in any office, building or vehicle owned or leased by Liberty Ambulance Service. This includes snuff and chewing tobacco.

8. In Charge of Units

The driver is responsible for the unit and its care. The SR. Med. Tech. is in charge of the patient's medical care and the medical equipment. If there is a dispute over company policy or procedures between partners, the most senior full time crew member is considered in charge. The supervisor should be consulted as soon as possible for verification.

9. Traffic Safety

Units will at all times be operated with the safety and courtesy of others in mind, obeying all applicable traffic laws and keeping the use of lights and siren to a minimum.

10. Delay in Transport or Response

A. Breakdown

Notify the dispatcher immediately. Advise of any assistance needed. Try to handle minor mechanical problems yourself. If needed, a spare unit, wrecker, or mechanic will be dispatched to your location for major problems.

B. Traffic Collision

Never admit fault or apologize. Assist any injured persons. Call for another unit immediately if transporting a patient. An incident report *must* be filled out ASAP after the collision. Any incident in which a person is injured as a result of a traffic incident of any kind, must be reported to the police. This is even if there is no contact vehicle to vehicle or other object. A near miss with an associated injury must have a police report made.

Standard Operating Guidelines
Section 100.125 General Operations

C. Traffic or Train Delays

Notify the dispatcher as soon as encountered. If transporting a critical patient and you encounter a train delay, call dispatch to notify fire communications, they can notify CSX who can break the train in certain instances.

11. Cooperation with the Police at the Scene

Upon arriving at a scene and finding the Police there, you should cooperate with the Police to the fullest possible extent, bearing in mind that if you are first on the scene, YOU are in charge of the patient, until relieved by more qualified personnel.

12. Additional Assistance at the Scene

Contact the dispatcher and notify of your needs. DO NOT call fire control directly, the Liberty dispatcher will send appropriate help from approved lists.

13. Meals and Breaks

There are no set meal times for field employees. Business office staff meal times are assigned by the office manager. Business office staff is afforded a 15 minute break in the morning and afternoon. All employees should eat breakfast before coming on duty. There is no guarantee that a break can be offered to field employees in the morning. Day crews will be afforded a chance to each at least once during their shift. 24 hour and 16 Hour crews will be afforded a time to eat twice during their shift. Crews must request a 10-84 by phone or radio and give the location. A 10-83 may be taken at any time and should not be denied by the dispatcher unless there is a compelling reason such as an emergency call holding. If possible, the field employee should take 30 minutes to eat and rest outside the ambulance for meals. If this is not possible, meals may be eaten in the cab of ambulances under the following conditions:

- a. The meal is consumed entirely in the cab of the unit. Eating in the patient compartment is not allowed due to OSHA regulations.
- b. All trash and other materials are cleaned up and throw away at your earliest convenience. Used cups and left over food and trash attract vermin which present a serious health hazard.

Standard Operating Guidelines
Section 100.125 General Operations

14. Safety and security of Patients and Vehicles and Riders

a. All vehicles should be turned off and locked if they are left unattended for an extended period of time. The vehicles may be left running while delivering or picking up a patient at the hospital, nursing home or other facility, or at a home. While out of service or waiting for a call the vehicle should be turned off and the patient compartment, at a minimum, should be locked.

b. All persons riding in or operating any vehicle owned or leased by Liberty Ambulance Service must wear a seat belt. All patients must be transported on an ambulance cot or portable stretcher with all supplied straps, including shoulder straps in use. In an MCI situation, those who can walk can ride on the squad bench provided they wear a seat belt. All patients must be secured to the cot or stretcher with a minimum of 3 straps and the shoulder harnesses. Any patient refusing to be transported on a stretcher or cot will not be transported without the approval of management. All Baker Act patients will be restrained to a stretcher or cot or local law enforcement will be called to restrain the patient

K. True Emergency, Definition of...

"Situations in which there is a significant risk of death, permanent disability or deterioration of the patient's condition shall constitute a true emergency. This includes those patients who are unconscious, delusional or otherwise incapable of giving informed consent. Any situation declared an emergency by a Doctor or nurse will be considered an emergency. Any situation considered by a citizen to be an emergency will be considered such until on-scene evaluation can prove otherwise or a Physician's advice can be obtained."

L. Response with lights and sirens should be limited to those requests for service which fall under the definition of a true emergency, or information received by the dispatcher leads them to believe a true emergency exists.

Dispatchers must follow the dispatch protocol in making a determination on whether or not to send a unit responding with lights and siren.

Standard Operating Guidelines
Section 100.125 General Operations

M. Code of Conduct

Certain reasonable minimum rules of conduct have been established to ensure efficient and congenial working conditions for you regardless of your location. The observance of these rules is necessary for your safety and protection. Each employee is expected to follow these rules.

While we have not attempted to list every activity which would be considered improper conduct, the offenses below are among those for which an employee may be subject to the disciplinary action up to and including immediate discharge without prior warning. The Company reserves the right to discipline or terminate anyone although such conduct may not be specified below. The following misconduct is prohibited.

1. Dishonesty of any form, including fabrication or falsification of any documents or records, any misrepresentation, or material omission of any fact with intent to harm or defraud.
2. Neglect, misuse or unauthorized use of company funds, equipment, vehicles, or property.
3. Theft, misappropriation of property, or intentionally damaging property belonging to a patient, the company, a visitor, or an employee.
4. Disrespectful actions or words directed to a patient, visitor, employee, supervisor, or anyone else with whom the company deals with at any time
5. Causing any serious complaint by a patient, visitor, employee, supervisor, or anyone else with whom the company deals with at any time.
6. Insubordination or refusal or failure to obey instructions from a supervisor/manager or using disrespectful, obscene, abusive or threatening language to a supervisor/manager.
7. Fighting, disorderly conduct, rude boisterous play, practical jokes, or pranks, while performing company business or while on company premises or in company vehicles.

Standard Operating Guidelines
Section 100.125 General Operations
Code of Conduct, cont'd

8. An employee leaving the job during working hours without permission of management.
9. Use of obscene, abusive or threatening language, intimidation or coercion of/towards a patient, visitor, employee, or anyone else with whom the company deals with at any time and for any reason.
10. Immoral conduct, indecency, inappropriate language or gambling during work, or on company property.
11. An employee's unauthorized sleeping on the job, avoidance of work or slow down of work.
12. Excessive personal telephone calls during working time or using company phones for personal long distance calls without prior approval.
13. Making false or malicious statements about a patient, visitor, employee, or supervisor.
14. An employee's refusal to work additional or irregular hours when requested by management.
15. Failure to cooperate with any internal investigation.
16. An employee's tardiness or excessive absenteeism, or not following the calling in procedure.
17. Disclosing confidential information about a patient, visitor, employee, supervisor, or anyone else with whom the company deals with at any time without authorization from management. Removal of any company or confidential records without authorization from management. Failure to follow rules regarding privacy, confidentiality or security of PHI.
18. Solicitation, acceptance or giving of bribes
19. An employee refusing to submit to a drug screening test when requested, any attempt to tamper with a drug screening test, or unsatisfactory test results.

Standard Operating Guidelines

Standard Operating Guidelines
Section 100.125 General Operations

20. Failure to report a workplace injury or accident on company property, while operating a company vehicle, in the parking lot or while conducting company business.
21. Willful disregard of safety rules and procedures. Failure to use safety equipment or tampering with safety devices.
22. Possession of, consumption of, or being under the influence of alcoholic beverages while on company premises, including the parking lot, or while conducting company business, or during an employee's meal break during the work day, or at any other time while the employee is on duty.
23. Illegal use, manufacture, distribution, sale or possession of illegal drugs or unprescribed controlled substances, or the dispensing of drugs without a proper prescription. Having illegal drugs in your system.
25. Being convicted of, pleading guilty to, or pleading no contest to a felony, or any crime or conduct which damages the reputation of the company or makes you unfit for further employment.
26. Interfering with the work of others.
27. Failure to comply with any company policy, including but not limited to Non-Discrimination, Harassment Policy, Drug Free Workplace, or any other policy set forth in the company rules.
28. Failure to immediately report the harassment or intimidation of anyone at the company, specifically including harassment or intimidation because of that employee's sex, race, color, age, religion, national origin, handicap (or disability) or marital status.
29. An employee's absence from work with a failure to call- in for a period of three days, unless on an approved leave of absence covering the time period the employee is out.
30. An employee giving a false or misleading reason to obtain any leave or to obtain benefits.
31. Filling out or punching another employee's time card or sheet entry.

Standard Operating Guidelines
Section 100.125 General Operations

32. Unsatisfactory performance.
33. Any violation of ethics, codes of conduct, or customs and practices.
34. Any other conduct not in the best interest of the company.

Standard Operating Guidelines

Section 100.125 Transfer of Medical Information

Remember that medical information is privileged and confidential and can only be disclosed to other health care providers and immediate family. Any requests to release to other than those persons must be approved by the HIPPA officer.

It is suggested that medical information be transferred to the Emergency department using the following as a guide:

- Age, Race, Sex
- Chief complaint, the reason the patient called for help
- Vital Signs
- Degree of distress
- Level of Consciousness
- Cardiac Red
- Trauma Alert

Called as soon as a Trauma Alert patient is identified at the scene.

- Your ETA

Section 100.150 Hospital Readiness

There is currently no divert or advisory policy in place in Duval, Nassau, Baker or Clay Counties other than if the hospital has an internal disaster and has gone through JFRD (for Duval County). Hospitals should be ready to accept your patient as soon as you arrive. However, if the ED is busy and you are delayed more than 30 minutes, call dispatch and advise them.

Standard Operating Guidelines
Section 100.200 Drug Free Workplace Policy

In a commitment to safeguard the health of our employees and to provide a safe working environment for everyone, we have established a drug-free workplace policy for our company. This policy is implemented pursuant to the Drug-Free Workplace Program requirements under F.S. 440.102 and the rules 38F-9 of the Department of Labor and Employment Security, Division of Workers Compensation.

1. The company prohibits the illegal use, sale, manufacture or distribution of drugs, alcohol or other controlled substance on its property. It is also against company policy to report to work under the influence of drugs or alcohol.
2. Drug testing applicants:
 - A. All applicants considered final candidates for a position will be tested for the presence of drugs as a part of the application process.
 - B. Applicants will be asked to sign the consent to pre-employment form. If an applicant refuses, he or she will not be considered for employment and the application process will be terminated.
 - C. If an applicant's test is confirmed to be positive, the applicant will not be considered for employment at that time and will be informed that he or she has failed to meet the employment standards. The applicant may reapply after 12 months at the discretion of administration. Proof of completion of a drug treatment program may be required.
3. Testing of Employees
 - A. Reasonable Suspicion Testing: Employee will be tested if there is reasonable suspicion that an employee is using or has used drugs, including:
 1. Observable phenomena while at work such as direct observation of drug use or other physical symptoms or manifestations of being under the influence of a drug;
 2. Abnormal or erratic behavior while at work or a significant deterioration of work performance;
 3. A report of drug use, provided by a reliable and credible source;
 4. Evidence that an individual has tampered with a drug test during his employment with this company;
 5. Information that an employee has caused or contributed to, or has been involved in an accident at work;

Standard Operating Guidelines

Section 100.125 General Operations

6. Evidence that an employee has used, possessed, sold, solicited, or transferred drugs while working or while on the employer=s premises, or while operating the employer=s vehicle, machinery or equipment.

B. Routine fitness for duty: Employees will be tested if the test is conducted as part of a routinely scheduled Employees Fitness-For-Duty Medical Examination. Any employee who is suspended from work as a part of disciplinary action will be drug tested when suspended, and as a condition of returning from the suspension.

C. Random testing: The company reserves the right to random test its employees at any time.

D. Follow-up Testing: If an employee in the course of employment enters an employee assistance program for drug related problems, or an alcohol and drug rehabilitation program, the employee must submit to a drug test as a follow-up to the program, unless the employee voluntarily enters the program. In this case it shall be at the discretion of administration whether or not to require follow-up testing. If testing is required, it will be continued per ' 440.102 F.S. for a period of 2 years after the completion of the program. Advanced notice of testing will not be given to the employee to be tested.

E. All accidents requiring professional medical assistance will require drug testing.

F. Additional Testing: Additional testing may also be conducted as a required by applicable state or Federal laws, rules or regulations as deemed necessary by the company.

4. Disciplinary Action

A. In the case of a first time violation of the company=s policy, including a positive drug or alcohol test result (without evidence of use, sale, possession, distribution, dispensation, or purchase of drugs or alcohol while on company property or while on duty), the employee will be subject to discipline up to and including discharge.

1. If the company elects to continue the employees employment, it will be subject to the following conditions:

- A. Assessment by a Substance Abuse Professional
- B. Enrolling in an Employee Assistance Program
- C. Submission to random testing up to two years from the date of the positive test result.

Standard Operating Guidelines
Section 100.200 Drug Free Workplace Policy

B. The company may suspend employees without pay under this policy pending the results of drug test or investigation.

C. Any employee using, selling, purchasing, possessing, distributing, or dispensing illegal drugs or alcohol on duty or on company property will be discharged.

5. All information, interviews, reports, statement memoranda and drug test results, written or otherwise, received by the company as part of this drug testing program are confidential communications. Unless authorized by state laws, rules or regulations, the company will not release such information without a written consent form signed voluntarily by the person tested.

6. A list of the most common medications by brand name or common name, as well as by chemical name, which may alter or affect a drug test immediately follows this protocol section.

7. Any applicant who refuses and pre-employment drug test will be ineligible for hire.

8. Any employee who refuses to submit to a drug test will be terminated from employment. Any injured employee who refuses to submit to a drug test, or has a positive confirmation test, in addition to the above, forfeits their eligibility for all worker=s compensation medical and indemnity benefits.

9. At the employees written request, we will provide to any employee, a copy of their test results (this includes negatives).

10. A representative sampling of names, addresses and phone numbers of employee assistance programs and local alcohol and drug rehabilitation programs are available to employees.

11. A licensed physician, medical review officer will examine all results, both negative and positive. For all confirmed positive results, the MRO shall notify the individual for confirmation of any prescribed medication. Only then will the MRO notify the employer of the test results.

12. The company will notify, in writing, any employee or applicant who receives a confirmed positive drug test result within 5 days of receiving a written result from the MRO.

Standard Operating Guidelines
Section 100.200 Drug Free Workplace Policy

13. An employee who receives a positive confirmed drug test may contest or explain the result to the employer within 5 working days after notification of the positive test result. If a job employee=s explanation or challenge is unsatisfactory to the employer, the person may contest the result.

14. Within 180 days after written notification of a positive test result, the employee shall be permitted to have a portion of the specimen retested, at the expense of the employee.

15. An employee has the responsibility of notifying the drug testing laboratory of any administrative or civil action brought pursuant to Chapter ' 440 F.S. The lab will maintain the sample until the case or administrative appeal in settled.

16. The following is a list of the 10 drugs including alcohol for which the employer may test:

- Alcohol
- Amphetamines
- Cannabinoids
- Cocaine
- Phencyclidine
- Opiates/Propoxyphene
- Methaqualone
- Barbiturates
- Bezodiazepines
- Methadone

17. Job applicants have a right to consult the MRO for technical information regarding prescription and non-prescription medication.

18. The contents of this drug and alcohol guidelines may be changed/updated at any time.

This policy does not constitute a contract between the company and the employee. Nothing in this policy binds the company to a specific or definite period of employment or to any specific policies, procedures, actions, rules, or terms and conditions of employment.

Standard Operating Guidelines
Section 100.200 Drug Free Workplace Policy

19. Employees, as a condition of employment, are required to abide by this policy.
20. The employer shall pay the cost of initial and confirmation drug tests which it requires of employees/applicants. The employee/applicant shall pay the costs of any additional drug who is taking prescription medication that may alter his or her mentation or judgment is required to report such use, before working, to a supervisor, or the Health and Safety Officer.
22. An Inservice of 1 hour in length on drug abuse and the drug free workplace policy will be provided to all employees during new employee orientation and annually thereafter.
23. Any employee terminated for failing a drug test will be eligible for consideration for rehiring after 12 months. The individual may be required to show proof of completion of a drug rehabilitation program. Those not accepted for hire because of a failed drug test must wait 1 year to reapply. Proof of completion of drug Rehab may be required.

List of Common Medications that may alter or affect a Drug Test

- | | | |
|-----|------------------------|----------------------------------------------------------------|
| 1. | Alcohol | Vicks Nyquil, Comtrex, Contact Severe Cold Formula, Listerine |
| 2. | Amphetamine | Obetrol, Biphetamine, Desoxyn, Dexedrine, Didrex |
| 3. | Cannabanioids | Marinol |
| 4. | Cocaine | Roxanne |
| 5. | Phencyclidine | not legal by prescription |
| 6. | Methaqualone | not legal by prescription |
| 7. | Opiates | Paregoric, Donnagel PG, Morphine, Tylenol with Codeine, others |
| 8. | Barbiturates | Amytal, Seconal, Triad, Nembutal |
| 9. | Benzodiazepines | Ativan, Xanax, Serax, Valium, Halcion, Centrax |
| 10. | Methadone | Dolophine, Methadose |

Standard Operating Guidelines
Section 100.200 Drug Free Workplace Policy

11. **Propoxyphene** Darvon N, Darvocet N, Dolene

Training

All new employee will be given 1 hour of training on the drug free workplace program and drug abuse prevention during orientation and annually thereafter.

Standard Operating Guidelines

Section 100.250 Vehicle Operation Policies and Procedures

I. Introduction

Liberty Ambulance Service is dedicated to providing safe, efficient transportation for all patients transported by our service, whether ambulatory, wheelchair or stretcher patients. This policy is implemented to ensure this goal is achieved to the best of our corporate ability.

II. Driver Eligibility

All employees who operate any vehicle owned or leased by Liberty Ambulance Service must be cleared by a driver license check through our insurance carrier before employment.

All persons who may as a course of their employment drive an ambulance must have:

1. A class E license at a minimum
2. Have completed an EVOC Course under the guidelines of 64E-2 FAC

The following drivers are NOT acceptable as drivers:

a. Operator/Driver with any of the following combinations within 36 months:

1. DWI or DUI citation or conviction within the past 3 years
2. Those who have had their driving privileges revoked or suspended under the points system within the past 3 years.

Standard Operating Guidelines
Section 100.250 Vehicle Operation Policies and Procedures

IV. General Policies

A. All drivers involved in the following accidents may be suspended from driving pending an accident investigation:

1. Occurring while driving in emergency mode
2. Rear ending another vehicle
3. Damage to company vehicles, or other vehicle or property while backing while backing.
4. Careless or reckless driving during the operation of any company vehicle.

B. Any driver who has an at-fault accident as determined by the company, insurance company or law enforcement agency while driving in emergency mode may be excluded from driving for a period of up to twelve (12) months. Any other driver with an "at fault" accident in a company vehicle may be excluded from driving for a period to be determined by the company or insurance carrier.

C. The employee who is found at fault will continue to be covered under the general and professional liability portion of the policy.

D. Any employee who gives false or misleading information on any accident report, personal driving history or general or professional liability information will be excluded.

E. All drivers will undergo a new employee orientation that includes defensive driving review and a review of proper backing, parking, and emergency response and rear-end collision avoidance procedures.

F. Backing

Backing of all company owned vehicles will be accomplished with the use of a spotter, unless the ambulance or NES van has a patient being attended. In this case, the driver **MUST STOP, GET OUT, AND MAKE A WALK AROUND THE VEHICLE TO ASSURE THE AREA IS CLEAR.** The attendant for the patient must assist from his/her position in the back, patient care providing, but this does not absolve the driver of the responsibility to walk around.

Standard Operating Guidelines
Section 100.250 Vehicle Operation Policies and Procedures

G. Emergency Operation

The following policies will be adhered to when driving in emergency mode:

1. All emergency warning systems must be activated.
2. Speed not to exceed 20 MPH over the posted limit in situations where:
 - a. dry pavement
 - b. good visibility
 - c. Good road conditions

Conditions otherwise must be handled with lower speeds.

3. Siren must be in operation on the approach of other vehicles and at any intersection
4. The public address system should be used to help move traffic and NO OTHER TIME.

5. The guidelines in the 1994 USDOT EVOC NSC will be followed while driving in emergency mode.

6. The driver/operator will be expected to use common sense when driving in emergency mode regarding the use of emergency audible warning equipment at night in residential areas. Response with lights and siren will be limited to cases where a true emergency exists as determined by the dispatcher in response to a call or by the Sr. Medical Technician on the unit when transporting to a hospital.

7. Clay County: Must call Liberty to alert CCFR if you are running bravo in Clay County, no exceptions!

H. Due regard

In all cases, the driver/operator will follow the principle of due regard. This law requires that the operator of an emergency vehicle operate that vehicle with regard to the safety of all persons concerned, including crew, patients and other vehicle and pedestrians occupying the roadways or right of ways. It does not exempt the driver of liability if he/she has an accident while in emergency mode and exercising the privileges granted under applicable laws. Florida ' 316.072(5)(a)(2)(b) gives the driver of an authorized emergency vehicle the privilege of parking or standing irrespective of the provisions of the law, proceed past red or stop signals, exceeding maximum speed limits and disregard regulations governing direction of traffic flow, but this must be done with due regard, without endangering life or property, and ' 316.072(5)(a)(2)(c) states that you cannot use your emergency mode as a defense.

I. Financial Responsibility for AAt Fault@ or AChargeable@ accidents

1. Any driver who experiences an "at fault" accident or damages a vehicle or property due to negligence or carelessness will be held financially responsible for the damage to the property and/or vehicle up to \$500. New employees will sign a statement agreeing to these terms as a condition of employment.

Standard Operating Guidelines

2. Any damage to vehicles while backing without a patient, or any damage not reported by the end of the shift by any crew member on the unit, will be the financial responsibility of both crew members resulting in the entire deductible of \$1000.00 being divided between the crew.

H. Exiting onto Atlantic Blvd

NO COMPANY VEHICLES are to exit onto Atlantic Blvd *going left* out of Atlantic University Circle. This means if you have to go west on Atlantic Blvd, exit Atlantic University Circle onto University Blvd, go to the traffic light at the intersection of Atlantic and University and turn left. This includes bravo responses. Turning left onto Atlantic from Atlantic University Circle is very dangerous and has resulted in several crashes.

Standard Operating Guidelines
Section 100.300 Accident/Incident and Injury Procedures

Liberty Ambulance Service strives to maintain a safe work environment for all workers and patients. Invariably incidents occur and some occur that cause injury. Should an incident of any type occur, the following procedures must be followed in order to reduce liability to the company and get the most appropriate care for the injured party:

A) Close Calls

Close calls are defined as incidents where no full failure of equipment or process occurs and/or where no injury occurs, but where the potential for injury was possible. Full reporting of all close calls is required so they can be investigated and policy or procedure changes made so they will not reoccur and result in an injury in the future. Fill out the appropriate incident report and turn in to the Safety Officer within 24 hours.

B) Incidents Involving a Patient or Visitor

All incidents no matter how minor must be reported to the safety officer immediately. Any injury must be attended to immediately and an incident report filled out within 1 hour of the incident. If we treat and/or transport the individual, fill out a PCR and obtain a CCR#. If transporting, transport to the nearest appropriate Emergency Department. Use the Patient/Visitor Incident Report Form to record the incident and elaborate in detail about the facts of the incident. Do not try to determine a cause or place blame. Do not record care given on the incident report form, use a PCR.

C) Injury to an Employee

Should an incident occur to an employee which results in injury:

- 1) Notify the Safety Officer immediately
- 2) Fill out the front side of the Employee Illness/Injury Report form and turn in to the Safety Officer during regular business hours or in to the dispatcher after hours.
- 3) Procedures for Treating Injuries
 - a. Notify the Safety Officer immediately and get first aid as needed initially. If the Safety Officer is not on duty, have either the most senior Paramedic on duty or your partner treat your injury/injuries as needed.
 - b. If further medical care is needed, you will be directed by the Safety Officer to the appropriate Facility for primary care:

Baptist Occupational Health
1325 San Marco Blvd
Jacksonville, FL 32207
202-2395

Baptist Medical Center Emergency Department
800 Prudential Drive
Jacksonville, FL 32207
202-2000

- 4) Referrals for specialist care must be pre-approved through the primary physician, the Safety Officer and our carrier.
- 5) All persons who are injured on the job must submit to drug testing in conjunction with any professional treatment given.

Standard Operating Guidelines

Section 100.350 Employment at Will

- I. All Liberty Ambulance Service employees who do not have a written employment contract for a specific, fixed term of employment are employed at the will of the Company for an indefinite period. Liberty Ambulance may terminate, layoff, or otherwise choose to not continue to employ any employee at any time, for any reason, with or without notice, and with or without cause. At the same time, employees may terminate their employment at any time, for any reason.
- II. No company representative, other than a corporate officer, is authorized to modify this policy or to enter into an agreement, oral or written, that changes the at-will relationship. The Supervisory and management personnel are not to make any representations to employees or applicants concerning the terms or conditions of employment which are not consistent with company policy. No statements made in pre-hire interviews or discussions, or in recruiting materials of any kind, alter the at-will nature of employment or imply that discharge will only be for cause.
- III. No other policies, memoranda, employee handbooks, employment applications, or recruiting or other materials may modify this policy. No policy in this manual or other company policies or rules, regulations or guidelines shall be construed as creating any contractual obligation on the company's part that termination will occur only for Ajust cause@. Statements of grounds for termination set forth in this manual or in any other Company documents are examples only, not all-inclusive lists, and are not intended to restrict the Company=s right to terminate at-will.
- IV. Completion of the required 90 day probationary period or conferral of regular employee status does not change an employee=s status as an at-will employee or in any way restrict the Company=s right to terminate such an employee or change the status or conditions of employment. This at will policy extends to the period of the probation as well.
- V. Administrative personnel may be asked to sign non-compete agreements at the discretion of the CEO.

Standard Operating Guidelines
Section 100.375 Introductory Period

- I. It is the policy of Liberty Ambulance that all new employees and all present employees transferred or promoted to a new job are to be monitored and evaluated for an initial period.
- II. The initial introductory period will be normally 90 days. Supervisors should carefully observe the performance of each new employee, or employee in a new job position. Where appropriate, weaknesses in performance, behavior or deportment are to be brought to the employee's attention for correction.
- III. Supervisors may recommend termination of any newly hired employee at any time. A recommendation for termination should be made in writing to the Operations Chief or his designee for review, and should include an evaluation and a list of actions taken to assist the employee. Action for termination must have the approval of the Operations Chief and/or Company President.
- IV. Transferred or promoted employees who fail to satisfactorily perform their new jobs may, at the discretion of management, be returned to their original jobs, if a vacancy exists, or may be terminated.
- V. New employees working during an introductory period will be ineligible for any company benefits, except for holiday pay. If an employee's introductory period necessarily passes 90 days, then the employee will become eligible for group health on the 1st day of the month following the 90th day of full time employment.

Standard Operating Guidelines
Section 100.400 Orientation and Training

- I. Policy
It is the policy of Liberty Ambulance Service to conduct orientation for all new employees and such in-service training as is deemed necessary and appropriate.
- II. Responsibility
It is the responsibility of the Training Officer for the overall development and implementation of new employee orientation and in-service training. Orientation shall be accomplished using a multi-disciplinary approach with a representative from each area of responsibility within the company having involvement in the orientation process.
- III. Scope of Orientation
 1. Field Employees
The orientation of new employees will include but not be limited to:
 - A. Company Rules and Regulations
 - B. Medical Standard Operating Guides Review
 - C. Defensive Driving Review
 - D. Infection Control Policies and Procedures
 - E. Fit Test for Medical Respirator
 - F. Map Use and City Orientation
 - G. Patient care report completion
 1. Basic PCR completion
 2. Insurance Needs
 3. Patient Confidentiality and HIPPA
 - H. Drug Free Workplace policies
 - I. Hazcom/Hazwopr Policies
 - J. Safety Policies and Procedures
 - K. Field Preceptorship
 1. Field preceptorship shall be at least 8 hours for any EMT or Paramedic with 1 year or more private ambulance experience. Those with less than one year shall serve a preceptorship of at least 16 hours.
 2. During the preceptorship, the following areas shall be assessed for competence:
 - a. patient assessment at the level of certification
 - b. EKG interpretation (paramedics)
 - c. IV starts and glucometer use
 - d. intubation (paramedic on manikin)
 - e. operation of all stretchers
 - f. PCR documentation
 - g. Operation of all medical equipment at the appropriate certification level

Standard Operating Guidelines
Section 100.400 Orientation and Training

h. CPR and ACLS review dependent on certification level
The total orientation time will be 32-40 hours, divided into 24 hours of classroom and the balance field preceptorship. The amount of field preceptorship will be determined by management.

2. Office Personnel (to be performed by office manager or designee)
 - A. Company Rules and Regulations
 - B. Job Specific Training and Orientation by billing management, including training on the Amazon software.

IV. Reimbursement

Requests for reimbursement of in-service training expenses must be submitted in writing, to the Operations Chief. Approval will be granted at the discretion of the COO based on the benefit to the company and available funds at the time of request.

- IV. The Company, to the extent feasible, will maintain a library of reference and instructional materials for self use, which must be checked out with the training officer for use. Use of Company library materials without following proper checkout procedures will be considered theft and dealt with accordingly. Failure to return items checked out will result in a payroll deduction to cover the cost of the materials.

- V. Employee may receive certificates of completion for successfully completing Company sponsored training or educational programs. A copy of these certificates will be maintained in the employees training records.

Standard Operating Guidelines

Section 100.425 Medical Examinations (not Workers Compensation Related)

I. Policy

It is the policy of Liberty Ambulance Service that applicants to whom a conditional offer of employment has been extended and current employees *may be* required to undergo medical tests, procedures or examinations whenever management determines that these are needed for the safe and efficient operation of the organization.

II. Implementation

1. Applicants for employment may be required as a condition of employment to pass a medical examination to establish their fitness to perform the jobs for which they have applied without endangering the health and safety of themselves and others. If management determines that an examination is appropriate for a particular position because of the risks associated with that position, all applicants for that position will be examined.

2. Employees may be required to have a medical examination when the examination is job related and consistent with business necessity. For example, when an employee is exposed to toxic or unhealthful conditions, requests an accommodation for a disability, or has a questionable ability to perform his/her duties or the job for which he/she has been considered. Employees may also be required to have a pre-employment screening as a condition of continued employment post positive drug test result.

3. Employees are encouraged, but not required, to have periodic physical examinations during their employment, and to participate in wellness programs.

4. Medical examinations required by the Company will be paid for by the Company and must be performed by a Physician or licensed medical facility designated or approved by it. Medical examinations paid for by the Company are property of the Company, and the examination records are to be held in separate medical files. However, record of specific examination required by law or regulation, will be made available to the employee, persons designated by the employee, public agencies, relevant insurance companies, or the employee's doctor upon written permission of the employee.

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Section 100.425 Medical Examinations

5. Employees who need to use prescribed medication or narcotics while at work must report this requirement to the Safety Officer if the use might impair their ability to perform the job safely and effectively. Depending on the circumstance, the employee may be reassigned, forbidden to perform certain tasks, or even prohibited from working if they are judged unable to perform their jobs safely and properly while taking prescribed drugs or narcotics.
6. The Company reserves the right to require acceptable confirmation of the nature and extent of any illness or injury that requires an employee to be absent from scheduled work. Employees returning from a disability leave or absence caused by health problems may be required to provide a doctor's certification that they are able to perform their regular work satisfactorily without endangering themselves or fellow employees.
7. The Company reserves the right, as allowed by law, to require a second or, if necessary, third opinion regarding an employee's absence because of illness or injury.
8. Employees who become ill or injured on the job from a work-connected situation, no matter how minor, must report to their supervisor, or the Safety Officer who will arrange for appropriate referral for treatment. Time spent by an employee waiting for and receiving this treatment will be considered hours worked for pay purposes.
9. Any supervisor, member of management, or medical personnel are authorized, in the absence of the Safety Officer, to have any ill or injured employee transferred to an outside medical facility for treatment in an emergency. However, the Safety Officer is responsible for developing and administering the programs concerning employee health and safety.
10. Those employees with infectious, long-term, life-threatening or other serious diseases may work as long as they are able to perform the duties of their job without undue risk to their own health or that of another employee, customer, patient, or member of the public. Any employee with an infectious disease which may be transmissible to other persons must check with the infection control officer before reporting or returning to work for clearance. Guidelines of the ADA law will be used to determine whether or not an employee may work.

Standard Operating Guidelines
Section 100.450 Sexual Harassment

Sexual harassment will not be tolerated at Liberty Ambulance Service. Sexual harassment is defined as unwanted physical contact, sexually explicit comments or display of sexually related material to others.

Sexual harassment should be immediately reported to your supervisor. Appropriate actions will be taken to protect employees who have been victims of sexual harassment.

Standard Operating Guidelines
Section 100.55 Family and Medical Leave Act

The Family and Medical Leave Act allows an eligible employee to take up to twelve weeks of unpaid leave from work each twelve months for certain reasons.

An "eligible employee" is an employee who:

1. works for an employer who has at least fifty employees working within seventy-five miles of the same worksite during at least twenty weeks in a calendar year; AND
2. has been employed by this employer for at least twelve months prior to requesting time off under this law; AND
3. has worked at least 1,250 hours (an average of twenty-four hours per week) during the twelve months prior to requesting time off under this law.

An eligible employee may only take time off from work under this law for the following reasons:

1. because of the birth of a child to you (whether you are the mother or father); OR
2. because you have had a child placed with you for adoption or foster care; OR
3. because you are caring for your spouse, child or parent who has a serious health condition (which means an illness, injury, impairment, or physical or mental condition that involves inpatient care in any actual health care facility or hospice, or which involves continuing treatment by a health care provider); OR
4. because you are suffering from your own serious health condition that causes you to be unable to do your job.

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Depending on the reason you request time off under this law, you may take up to twelve weeks all at once or you may spread this period out over twelve months in as little as one quarter of a day off at a time.

To request time off under this law, you must:

1. Give us notice that you are requesting time off under the Family Medical and Leave Act. This notice should be in writing, but an oral notice in emergency situations will be accepted. Your notice must indicate which of the four reasons described above is the basis for your request to take time off and the anticipated amount of time off you are requesting. If you are requesting an intermittent schedule of time off, your notice must describe your anticipated schedule of time off. In all situations, you must identify the date of the first day you are requesting off from work.
2. If we request verification from a health care provider of the need to take time off from work to care for yourself or a family member, you must contact the health care provider and arrange for this verification to be sent to us. The information to be included in this verification must include: the date the health condition began; the probable duration of the condition; the appropriate medical facts known by the health care provider regarding the condition; a statement that you are needed to care for your spouse, child, or parent, if you are requesting time off for this reason; and a statement that your medical condition prevents you from doing your job, if you are requesting time off for this reason.
3. If you are requesting time off because of childbirth or because a child is placed with you through adoption or foster care, you must let us know when you expect to return to work.
4. Notice of a request for time off under this law may be made after you have begun to take time off in the event of an unscheduled childbirth or sudden illness, injury or other medical condition. However, you must let us know as soon as possible of your request for time off. In the event your condition causes you to be unable to communicate with us, notice may be given by your spouse, family member or other personal representative.

The conditions of any leave you take under this law are:

1. You can take no more than a total of twelve weeks leave in any twelve-month period. This twelve-month period does not run from January through December. It runs from the date of the first day you take any time off under this law and continues for the following twelve months.
2. The twelve-weeks of leave can be taken all at once or it can be intermittent and it can include partial days or whole days.
3. It is not necessary that each period of leave under this law be for the same reason.
4. You will not be paid for any time you take off from work under this law.
5. If you have accrued paid leave time, such as vacation time or paid sick leave, you may request

Standard Operating Guidelines

that your accrued paid leave be applied to your time off, or we may require you to apply your accrued paid leave to your time off under this law. We will inform you at the time you request time off under this law if we will require you to apply your accrued paid leave.

6. The time you take off under this law does not count toward your seniority or toward your eligibility for retirement or other employment benefits. However, you will not lose any time you have already accumulated toward seniority, retirement or any other employment benefit.
7. You will not be dropped from coverage under any group health plan of which you are a member of at the time your leave under this law begins. However, you must continue making your share of any premium payments that come due during your leave time. We will continue to make our share of the premium payments for your group health plan during your leave.
8. No matter how much or how little of the twelve-weeks leave you may take under this law, you will not lose your job, your title, your pay, your benefits or any aspect of your position with us for taking time off under this law. When you return to work it will be to exactly the same position, status and conditions of employment you enjoyed at the beginning of your leave time.
9. You must return to work at the end of any leave time taken under this law. In the event you do not return to work at that time, your employment may be terminated. If your employment is terminated because you do not return to work at the end of your leave time, we may demand that you repay to us the amount of your group health plan we paid during your leave period.
10. If you have used the entire twelve weeks of leave time under this law, but remain unable to return to work for the same reason that you requested the leave time, you must notify us of this fact. You must also provide verification of the circumstances of your condition if we so require. We will then determine how to handle your situation based on whether you have any accrued paid leave time remaining, your ability to return to work, when you might be able to return to work, the nature of any medical restrictions that may apply to you when you would return to work, your desires regarding your employment and our ability to place you in appropriate employment. The options in this situation would include: your continued employment with us; your continued employment with us, but changed as appropriate; your retirement; or termination of your employment.

The form on the next page may be used when requesting leave time under this law

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**NOTICE OF REQUEST FOR LEAVE UNDER
THE FAMILY AND MEDICAL LEAVE ACT**

I, _____, am requesting leave under the Family and Medical Leave Act (28 U.S.C. 2601, et seq.).

The reason I am requesting leave is:

I request that my leave time begin (or that it began) on _____. I anticipate that I will return to work on _____. In the event my reason for requesting leave requires a schedule of intermittent leave, I am requesting leave on this schedule:

I am also requesting that my accrued paid leave time (including sick leave, vacation and personal days) be applied to this leave until either such accrued paid leave has been fully used or I return to work, whichever occurs first.

I understand that I must continue to make my share of the premium payments for the group medical health plan coverage I receive through my employment.

Employee Signature: _____ Date: _____

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Section 100.500 Computer Use

1. All data created or recorded using any computer equipment owned, controlled or used for the benefit of Liberty Ambulance is at all times the property of Liberty Ambulance. Because of the need to protect the Liberty Ambulance computer network, the company cannot guarantee the confidentiality of information stored on any network device belonging to Liberty Ambulance, except that it will take all steps necessary to secure the privacy of all protected health information in accordance with all applicable laws.
2. Staff members are responsible for exercising good judgment regarding the reasonableness of personal use and must follow operational guidelines for personal use of Internet/Intranet/Extranet systems and any computer equipment.
3. At no time may any pornographic or sexually offensive materials be viewed, downloaded, saved, or forwarded using any Company computer equipment. Please refer to the Company's Policy on Preventing Sexual and Other Harassment for further information.
4. For security and network maintenance purposes, authorized individuals within Liberty Ambulance may monitor equipment, systems and network traffic at any time, to ensure compliance with all Company policies.

A. Security and Proprietary Information

1. Confidential information should be protected at all times, regardless of the medium by which it is stored. Examples of confidential information include but are not limited to: individually identifiable health information concerning patients, company financial and business information, patient lists and reports, and research data. Staff members should take all necessary steps to prevent unauthorized access to this information.
2. Keep passwords secure and do not share accounts. Authorized users are responsible for the security of their passwords and accounts. System level passwords should be changed quarterly, and user level passwords should be changed every 6 months..
3. All PCs, laptops, workstations and remote devices should be secured with a password-protected screensaver, wherever possible, and set to deactivate after being left unattended for 10 minutes or more, or by logging-off when the equipment will be unattended for an extended period.
4. All computer equipment used by staff, whether owned by the individual staff member or Liberty Ambulance, shall regularly run approved virus-scanning software with a current virus database in accordance with company policy.

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Section 100.500 Computer Use

5. Staff members must use extreme caution when opening e-mail attachments received from unknown senders, which may contain viruses.

B. Unacceptable Use

Under no circumstances is a staff member of Liberty Ambulance authorized to engage in any activity that is illegal under local, state, or federal law while utilizing Liberty Ambulance computer resources.

The lists below are by no means exhaustive, but attempt to provide a framework for activities that fall into the category of unacceptable use.

C. System and Network Activities

The following activities are strictly prohibited, with no exceptions:

1. Violations of the rights of any person or company protected by copyright, trade secret, patent or other intellectual property, or similar laws or regulations, including, but not limited to, the installation or distribution of "pirated" or other software products that are not appropriately licensed for use by Liberty Ambulance.
2. Unauthorized copying of copyrighted material including, but not limited to, digitization and distribution of photographs from magazines, books or other copyrighted sources, copyrighted music, and the installation of any copyrighted software for which Liberty Ambulance or the end user does not have an active license is strictly prohibited.
3. Exporting system or other computer software is strictly prohibited and may only be done with express permission of management.
4. Introduction of malicious programs into the network or server (e.g., viruses, worms, etc.).
5. Revealing your account password to others or allowing use of your account by others. This includes family and other household members when work is being done at home.
6. Using a Liberty Ambulance computer device to actively engage in procuring or transmitting material that is in violation of the Company's prohibition on sexual and other harassment.

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Section 100.500 Computer Use

7. Making fraudulent statements or transmitting fraudulent information when dealing with patient or billing information and documentation, accounts or other patient information, including the facsimile or electronic transmission of patient care reports and billing reports and claims.
8. Causing security breaches or disruptions of network communication. Security breaches include, but are not limited to, accessing data of which the staff member or employee is not an intended recipient or logging into a server or account that the employee is not expressly authorized to access.
9. Providing information about, or lists of, Liberty Ambulance staff members or patients to parties outside Liberty Ambulance.
10. Sending unsolicited e-mail messages, including the sending of "junk mail" or other advertising material to individuals who did not specifically request such material (e-mail spam).
11. Any form of harassment via e-mail, telephone or paging, whether through language, frequency, or size of messages.
12. Unauthorized use, or forging, of e-mail header information.
13. Solicitation of e-mail for any other e-mail address, other than that of the poster's account, with the intent to harass or to collect replies.
14. Creating or forwarding "chain letters", "Ponzi" or other "pyramid" schemes of any type.
15. Use of unsolicited e-mail originating from within Liberty Ambulance's networks or other Internet/Intranet/Extranet service providers on behalf of, or to advertise, any service hosted by Liberty Ambulance or connected via Liberty Ambulance's network.

D. Use of Remote Devices

The appropriate use of Laptop Computers, Personal Digital Assistants (PDAs), and remote data entry devices is of utmost concern to Liberty Ambulance. These devices, collectively referred to as "remote devices" pose a unique and significant patient privacy risk because they may contain confidential patient, staff member or company information and these devices can be easily misplaced, lost, stolen or accessed by unauthorized individuals

1. Remote devices will not be purchased or used for use with PHI or proprietary company information without prior Company approval.
2. The Company must approve the installation and use of any software used on the remote device for the collection, storage or retrieval of PHI or proprietary company information.
3. Remote devices containing confidential or patient information must not be left unattended.
4. If confidential or patient information is stored on a remote device, access controls must be employed to protect improper access. This includes, where possible, the use of passwords and other security mechanisms.
5. Remote devices should be configured to automatically power off following a maximum of 10 minutes of inactivity.
6. Remote device users will not permit anyone else, including but not limited to user's family and/or associates, patients, patient families, or unauthorized staff members, to use company-owned remote devices for any purpose.
7. Remote device users will not install any software onto any PDA owned by Liberty Ambulance except as authorized by the Company.
8. Users of company-owned remote devices will immediately report the loss of a remote device to a supervisor or the Privacy Officer.

E. Server Policies and Procedures

1. Servers are secure hardware components with access limited to system administrators or his/her designee.
2. Servers will be password protected and passwords will be safeguarded to prevent non-authorized persons from gaining access to vital system information or components.
3. Servers will be locked unless a system administrator is present and working at the console.
4. Servers will be protected by anti-Spyware and antivirus software. Antivirus scans will be scheduled daily. Software firewalls will be installed and activated as available. Hardware firewalls will be in place.
5. The system integrity utility will be performed on the Amazon Database weekly.

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F. Enforcement

Any staff members or employees found to have violated this policy may be subject to disciplinary action, up to and including suspension and termination.

Standard Operating Guidelines
Section 100.600 HIPAA Policies and Procedures

Liberty Ambulance Service, Inc. is a Hybrid Entity under the Health Insurance Portability and Accountability Act of 1996 (the Act). These policies and procedures are designed to bring us into compliance with the privacy requirements of the Act.

Liberty Ambulance Service operates several departments within its operations. Some are healthcare components and some are not. Healthcare components must comply with the provisions of HIPAA, however, non-healthcare components are not required to comply with the provisions.

The healthcare components of Liberty Ambulance Service are:

- Ambulance Operations, including NES transports
- Billing
- Administration
- Dispatch

Non-Healthcare components are:

- Wheelchair Van Transportation, dispatch and operations

Glossary

- **Business Associate:** a person or organization that performs a service for a covered entity that's uses or discloses individually identifiable health information.
- **Covered Entity:** a health plan, a healthcare clearinghouse or a health care provider who transmits any health information in electronic form in connection with a transaction between two entities
- **Direct Treatment Relationship:** The relationship between and individual and a HCP in which the provider is caring directly for the patient.
- **Disclosure:** The release, transfer, provision of access to, or divulging in any other manner, protected health information (PHI) to another entity
- **Gap Analysis:** The process of reviewing an organization's current privacy practices and procedures and comparing them to the requirements of the privacy rule, identifying areas of non-compliance and implementing new practices and procedures to ensure compliance.
- **Health care:** Care, services, or supplies related to the care of an individual
- **HealthCare Operations:** Activity directly related to treatment or payment such as QA, protocol development, improvement activities, training programs, fraud and abuse detection and compliance programs

Standard Operating Guidelines
Section 100.600 HIPAA Policies and Procedures

- **Health Care Provider:** provider of medical or health services and any other person who bills, furnishes or is aid for health care in the normal course of business.
- **Health Information:** Any information, oral, written or in any other form or medium, that is created or received by a health care provider and relates to past, present or future physical or mental condition of an individual or past, present or future billing for HCS provided to an individual.
- **Hybrid Entity:** A business that has sections which if they were independent companies, would not be covered entities.
- **Indirect Treatment Relationship:** Relationship between an individual and a HCP in which the HCP delivers health care to an individual based on the orders of another HCP.
- **Individually Identifiable Health Information:** Information which is a subset of health information including demographic information and is created or received by a HCP; relates to past, present or future physical or mental health or condition and *identifies the individual* or there is a reasonable basis to believe the information may identify an individual.
- **Preemption:** A doctrine in which Federal law takes precedence over state laws to the extent state laws are inconsistent with Federal law.
- **Privacy Rule:** The Standards for the Privacy of Individually Identifiable Health Information as promulgated by the US Department of HHS.
- **Protected Health Information:** Individually Identifiable Health Information that has been transmitted by electronic media; maintained or transmitted in any other form or medium.
- **Security Rule:** The final regulations from the US Dept. of HHS addressing the technical and physical safeguarding of electronic PHI.
- **Transaction:** The transmission of information between two parties to carry out financial or administrative activities related to health care.
- **Transactions and Code Sets:** Regulations promulgated by the US Dept. of HHS establishing standard code sets and transaction formats for health care

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Section 100.600 HIPAA Policies and Procedures

- transactions including claims processing, remittance advice and other such functions
- *Use:* The sharing employment, application, utilization, examination analysis of individually identifiable health information held within the entity that maintains the information.

Liberty Ambulance Policy on Privacy Training

Purpose

To ensure that all members of LIBERTY Ambulance Staff — including all employees, volunteers, students and trainees (collectively referred to as "staff members ")who have access to patient information understand the organization's concern for the respect of patient privacy and are trained in the Company's policies and procedures regarding Protected Health Information (PHI).

Policy

HIPAA

1. All current staff will be required to undergo privacy training in accordance with the HIPAA Privacy Rule prior to the implementation date of the Privacy Rule, which is April 1, 2004.
2. All new staff members will be required to undergo privacy training in accordance with the HIPAA Privacy Rule within a reasonable time upon association with the organization, as scheduled by the Privacy Officer.
3. All staff members will be required to undergo privacy training in accordance with the HIPAA Privacy Rule within a reasonable time after there is a material change to the Company's policies and procedures on privacy practices.

Procedure

1. The Privacy Training will be conducted by the Training Officer, in cooperation with the Privacy Officer or his or her designee.
2. All attendees will receive copies of the Company's policies and procedures regarding privacy.

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Section 100.600 HIPAA Policies and Procedures

3. All attendees must attend the training in person and verify attendance and agreement to adhere to the Company's policies and procedures on privacy practices.
4. Training will be conducted in the following manner:
by the use of PowerPoint slides and copies of the policy and procedure manuals. A general discussion and question and answer period with immediately follow the training class.
5. Topics of the training will include a complete review of the Company's Policy on Privacy Practices and will include other information concerning the HIPAA Privacy Rule, such as, but not limited to the following topic areas:
 - a. Overview of the federal and state laws concerning patient privacy including the Privacy Regulations under the Health Insurance Portability and Accountability Act of 1996 (HIPAA)
 - b. Description of protected health information (PHI)
 - c. Patient rights under the HIPAA Privacy Rule
 - d. Staff member responsibilities under the Privacy Rule
 - e. Role of the Privacy Officer and reporting employee and patient concerns regarding privacy issues
 - f. Importance of and benefits of privacy compliance
 - g. Consequences of failure to follow established privacy policies
 - h. Use of the Company's specific privacy forms

Designated Records Sets

Purpose

To ensure that Liberty Ambulance releases Protected Health Information (PHI) in accordance with the Privacy Rule, this policy establishes a definition of what information should be accessible to patients as part of the DRS, and outlines procedures for requests for patient access, amendment, and restriction on the use of PHI.

Under the Privacy Rule, the DRS includes medical records that are created or used by the Company to make decisions about the patient.

Policy

The DRS should only include HIPAA covered PHI, and should not include information used for the operational purposes of the organization, such as quality assurance data, accident reports, and incident reports. The type of information that should be included in the DRS is medical records and billing records.

Procedure

The Designated Record Set

1. The DRS for any requests for access to PHI includes the following records:
 - a. The patient care report or PCR created by EMS field personnel (this includes any photographs, monitor strips, Physician Certification Statements, Refusal of Care forms, or other source data that is incorporated and/or attached to the PCR.
 - b. The electronic claims records or other paper records of submission of actual claims to Medicare or other insurance companies.
 - c. Any patient-specific claim information, including responses from insurance payers, such as remittance advice statements, Explanation of Medicare Benefits (EOMBs), charge screens, patient account statements, and signature authorization and agreement to pay documents.

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- d. Medicare Advance Beneficiary Notices, notices from insurance companies indicating coverage determinations, documentation submitted by the patient, and copies of the patient's insurance card or policy coverage summary, that relate directly to the care of the patient.
- e. Amendments to PHI, or statements of disagreement by the patient requesting the amendment when PHI is not amended upon request, or an accurate summary of the statement of disagreement.

The DRS also include copies of records created by other service providers and other health care providers such as first responder units, assisting ambulance services, air medical services, nursing homes, hospitals, police departments, coroner's office, etc., that are used by the Company as part of treatment and payment purposes related to the patient.

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Section 100.600 HIPAA Policies and Procedures

Policy on Security, Levels of Access and Limiting Disclosure and Use of PHI

Purpose

To outline levels of access to Protected Health Information (PHI) of various staff members of Liberty Ambulance Service and to provide a policy and procedure on limiting access, disclosure, and use of PHI. Security of PHI that is everyone's responsibility.

Policy

Liberty Ambulance Service retains strict requirements on the security, access, disclosure and use of PHI. Access, disclosure and use of PHI will be based on the role of the individual staff member in the organization, and should be only to the extent that the person needs access to PHI to complete necessary job functions.

When PHI is accessed, disclosed and used, the individuals involved will make every effort, except in patient care situations, to only access, disclose and use PHI to the extent that only the minimum necessary information is used to accomplish the intended purpose.

Procedure

Role Based Access

Access to PHI will be limited to those who need access to PHI to carry out their duties. The following describes the specific categories or types of PHI to which such persons need access is defined and the conditions, as appropriate, that would apply to such access.

Section 100.600	HIPAA Polices and Procedures	
Job Title	Description of PHI to Be Accessed	Conditions of Access to PHI
EMT	Intake information or forms from dispatch, patient care reports,	May access only as part of completion of a patient event and post-event activities and only while actually on duty
Paramedic	Intake information or forms from dispatch, Patient Care Reports	May access only as a apart of completion of patient event and post event and only while actually on duty
Billing Clerk	Dispatch information either in electronic or written form, patient are reports, billing claim forms, remittance	My access only as a part of duties to complete patient billing and follow up and only while actually on duty

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Field Supervisor	Dispatch information, patient care reports	May access only as a part of completion of patient event and post event as well as quality assurance checks and corrective counseling
Dispatcher	Intake information, preplanned CAD information on patient address, PCR's for review and updating of	completion of an incident, from receipt of information to dispatch an incident to the closing of an incident. As part of receiving PCR's when
Training Coordinator	Intake Information, CAD information, PCR's	May only access as a part of training and quality assurance activities. All individually identifiable patient information should be redacted prior
Administration and Managers		May access only to the extent necessary to monitor compliance an to accomplish appropriate supervision and management of

Physical Security of the Building.

The building will be kept secure and exterior doors leading directly into the administrative offices locked at all times. Front exterior doors are to be locked from sundown to sunup. Only approved, authorized or cleared visitors and employees may pass into the inner doors of the administration building. The doors of any office containing PHI, PCR's or computer terminals with potential access to the electronically stored PHI will be locked after business hours. Keys will be issued only to those individuals who need them and a log kept of keys issued. Rooms will be numbered and the corresponding number engraved or stamped on the key. Locks will be fashioned so they cannot be easily pried or "jimmied" open. Filing cabinets containing PHI will be locked during non-working hours. Storerooms containing PHI will be locked during non-working hours.

Operations supervisors not having business related to utilization of stored PHI will not have access to filing cabinets and storerooms containing PHI unless a clear need to use PHI is demonstrated. Non-PHI materials should not be stored with materials containing PHI unless the individual's regularly requiring access also would have access to the PHI. Doors must not be propped open except for short periods and then only if an authorized staff member or employee has a clear line of sight to the door.

Should a breach of security occur where keys become lost or stolen, the appropriate locks must be immediately re-keyed and keys reissued. The cost of re-keying for lost keys will be born by the person losing the keys.

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Access to PHI is limited to those identified previously, and to the identified PHI only, based on the Company's reasonable determination of the persons or classes of persons who require PHI, and the nature of the health information they require, consistent with their job responsibilities.

Disclosures Authorized by the Patient

You are not required to limit to the minimum amount of information necessary required to perform your job function, or your disclosures of PHI to patients who are the subject of the PHI. In addition, disclosures authorized by the patient are exempt from the minimum necessary requirements unless the authorization to disclose PHI is requested by the Company.

Authorizations received directly from third parties, such as Medicare, or other insurance companies, which direct you to release PHI to those entities are not subject to the minimum necessary standards.

For example, if we have a patient's authorization to disclose PHI to Medicare, Medicaid or another health insurance plan for claim determination purposes, the Company is permitted to disclose the PHI requested without making any minimum necessary determination.

Company Requests for PHI

If the Company needs to request PHI from another health care provider on a routine or recurring basis, we must limit our requests to only the reasonably necessary information needed for the intended purpose, as described below. For requests not covered below, you must make this determination individually for each request and you should consult your supervisor for guidance. For example, if the request is non-recurring or non-routine, like making a request for documents via a subpoena, we must review make sure our request covers only the minimum necessary PHI to accomplish the purpose of the request.

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Holder of PHI	Purpose of Request	Information Reasonably Necessary to Accomplish Purpose
Skilled Nursing Facilities	To have adequate patient records to determine medical necessity for service and to properly bill for services	Patient face sheets, discharge summaries, physician certification statements, and statements of medical necessity, mobility assessments
Hospitals	To have adequate patient records to determine medical necessity for service and to properly bill for services	Patient face sheets, discharge summaries, physician certification statements, and statements of medical necessity, mobility assessments
Physician Offices or Outpatient Services Clinics	To have adequate patient records to determine medical necessity for service and to properly bill for services	Patient face sheets, discharge summaries, physician certification statements, and statements of medical necessity
Mutual Aid EMS Providers	To have adequate patient records to conduct joint billing operations for patients mutually transported by the company	PCR's

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For all other requests, determine what information is reasonably necessary for each on an individual basis.

Incidental Disclosures

The Company understands that there will be times when there are incidental disclosures about PHI in the context of caring for a patient. The privacy laws were not intended to impede common health care practices that are essential in providing health care to the individual. Incidental disclosures are inevitable, but these will typically occur in radio or face-to-face conversation between health care providers, or when patient care information in written or computer form is left out in the open for others to access or see.

The fundamental principle is that all staff need to be sensitive about the importance of maintaining the confidence and security of all material we create or use that contains patient care information. Coworkers and other staff members should not have access to information that is not necessary for the staff member to complete his or her job. For example, it is generally not appropriate for field personnel to have access to billing records of the patient.

But all personnel must be sensitive to avoiding incidental disclosures to other health care providers and others who do not have a need to know the information. Pay attention to who is within earshot when you make verbal statements about a patient's health information, and follow some of these common sense procedures for avoiding accidental or inadvertent disclosures:

Verbal Security

Waiting or Public Areas: If patients are in waiting areas to discuss the service provided to them or to have billing questions answered, make sure that there are no other persons in the waiting area, or if so, bring the patient into a screened area before engaging in discussion.

Garage Areas: Staff members should be sensitive to that fact that members of the public and other agencies may be present in the garage and other easily accessible areas. Conversations about patients and their health care should not take place in areas where those without a need to know are present.

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Other Areas: Staff members should only discuss patient care information with those who are involved in the care of the patient, regardless of your physical location. You should be sensitive to your level of voice and to the fact that others may be in the area when you are speaking. This approach is not meant to impede anyone's ability to speak with other health care providers freely when engaged in the care of the patient. When it comes to treatment of the patient, you should be free to discuss all aspects of the patient's medical condition, treatment provided, and any of their health information you may have in your possession with others involved in the care of the patient.

Physical Security

Patient Care and Other Patient or Billing Records: Patient care reports should be stored in safe and secure areas. When any paper records concerning a patient are completed, they should not be left in open bins or on desktops or other surfaces. Only those with a need to have the information for the completion of their job duties should have access to any paper records.

Billing records, including all notes, remittance advices, charge slips or claim forms should not be left out in the open and should be stored in files or boxes that are secure and in an area with access limited to those who need access to the information for the completion of their job duties.

Computers and Entry Devices: Computer access terminals and other remote entry devices such as PDA's and laptops should be kept secure. Access to any computer device should be by password only. Staff members should be sensitive to who may be in viewing range of the monitor screen and take simple steps to shield viewing of the screen by unauthorized persons. All remote devices such as laptops and PDA's should remain in the physical possession of the individual to whom it is assigned at all times. See the Liberty Ambulance Service Policy on Use of Computer Equipment and Information Systems.

Patient Access, Amendment and Restriction on Use of PHI

Purpose:

Under the HIPAA Privacy Rule, individuals have the right to access and to request amendment or restriction on the use of their protected health information, or PHI, and restrictions on its use that is maintained in "designated record sets," or DRS. (See policy on Designated Record Sets).

To ensure that Liberty Ambulance Service, Inc. only releases the PHI that is covered under the Privacy Rule, this policy outlines procedures for requests for patient access, amendment, and restriction on the use of PHI.

This policy also establishes the procedure by which patients or appropriate requestors may access PHI, request amendment to PHI, and request a restriction on the use of PHI.

Policy

Only information contained in the DRS outlined in this policy is to be provided to patients who request access, amendment and restriction on the use of their PHI in accordance with the Privacy Rule and the Privacy Practices of Liberty Ambulance Service, Inc.

Procedure

Patient Access:

1. Upon presentation to the business office, the patient or appropriate representative will complete a Request for Access Form.
2. The Company employee must verify the patient's identity, and if the requestor is not the patient, the name of the individual and reason that the request is being made by this individual. The use of a driver's license, social security card, or other form of government-issued identification is acceptable for this purpose.
3. The completed form will be presented to the Privacy Officer for action.
4. The Privacy Officer will act upon the request within 30 days, preferably sooner. Generally, the Company must respond to requests for access to PHI within 30 days of receipt of the access request, unless the designated record set is not maintained on site, in which case the response period may be extended to 60 days.

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5. If the Company is unable to respond to the request within these time frames, the requestor must be given a written notice no later than the initial due date for a response, explaining why the Company could not respond within the time frame and in that case the Company may extend the response time by an additional 30 days.
6. Upon approval of access, patient will have the right to access the PHI contained in the DRS outlined below and may make a copy of the PHI contained in the DRS upon verbal or written request.
7. The business office will establish a reasonable charge for copying PHI for the patient or appropriate representative.
8. Patient access may be denied for the reasons listed below, and in some cases the denial of access may be appealed to the Company for review.
9. The following are reasons to deny access to PHI that are not subject to review and are final and may not be appealed by the patient:
 - a. If the information the patient requested was compiled in reasonable anticipation of, or use in, a civil, criminal or administrative action or proceeding;
 - b. If the information the patient requested was obtained from someone other than a health care provider under a promise of confidentiality and the access requested would be reasonably likely to reveal the source of the information.
10. The following reasons to deny access to PHI are subject to review and the patient may appeal the denial:
 - a. If a licensed health care professional has determined, in the exercise of professional judgment, that the access requested is reasonably likely to endanger the life or physical safety of the individual or another person;

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- b. If the protected health information makes reference to another person (other than a health care provider) and a licensed health professional has determined, in the exercise of professional judgment, that the access requested is reasonably likely to cause substantial harm to that person;
 - c. If the request for access is made by a requestor as a personal representative of the individual about whom the requestor is requesting the information, and a licensed health professional has determined, in the exercise of professional judgment, that access by you is reasonably likely to cause harm to the individual or another person.
 - d. If the denial of the request for access to PHI is for reasons a, b, or c, then the patient may request a review of the denial of access by sending a written request to the Privacy Officer.
 - e. The Company will designate a licensed health professional, who was not directly involved in the denial, to review the decision to deny the patient access. The Company will promptly refer the request to this designated review official. The review official will determine within a reasonable period of time whether the denial is appropriate. The Company will provide the patient with written notice of the determination of the designated reviewing official.
 - f. The patient may also file a complaint in accordance with the Procedure for Filing Complaints About Privacy Practices if the patient is not satisfied with the Company's determination.
11. Access to the actual files or computers that contain the DRS that may be accessed by the patient or requestor should not be permitted. Rather, copies of the records should be provided for the patient or requestor to view in a confidential area under the direct supervision of a designated Company staff member. UNDER NO CIRCUMSTANCES WILL ORIGINALS OF PHI LEAVE THE PREMISES.
12. If the patient or requestor would like to retain copies of the DRS provided, then the Company will charge \$1.00 per page for the cost of reproduction.

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13. Whenever a patient or requestor accesses a DRS, a note should be maintained in a log book indicating the time and date of the request, the date access was provided, what specific records were provided for review, and what copies were left with the patient or requestor.

14. Following a request for access to PHI, a patient or requestor may request an amendment to his or her PHI, and request restriction on its use in some circumstances.

Requests for Amendment to PHI

15. The patient or appropriate requestor may only request amendment to PHI contained in the DRS. The "Request for Amendment of PHI" Form must be accompanied with any request for amendment.
16. The Company must act upon a Request for Amendment within 60 days of the request. If the Company is unable to act upon the request within 60 days, it must provide the requestor with a written statement of the reasons for the delay, and in that case may extend the time period in which to comply by an additional 30 days.

Granting Requests for Amendment

17. All requests for amendment must be forwarded immediately to the Privacy Officer for review.
18. If the Privacy Officer grants the request for amendment, then the requestor will receive a letter indicating that the appropriate amendment to the PHI or record that was the subject of the request has been made.
19. There must be written permission provided by the patient so that that the Company may notify the persons with which the amendments need to be shared. The Company must provide the amended information to those individuals identified by having received the PHI that has been amended as well as those persons or business associates that have such information and who may have relied on or could be reasonably expected to rely on the amended PHI.

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20. The patient must identify individuals who may need the amended PHI and sign the statement in the Request for Amendment form giving the Company permission to provide them with the updated PHI.
21. The Company will add the request for amendment, the denial or granting of the request, as well as any statement of disagreement by the patient and any rebuttal statement by the Company to the designated record set.

Denial of Requests for Amendment

22. The Company may deny a request to amend PHI for the following reasons: 1) If the Company did not create the PHI at issue; 2) if the information is not part of the DRS; or 3) the information is accurate and complete.
23. The Company must provide a written denial, and the denial must be written in plain language and state the reason for the denial; the individual's right to submit a statement disagreeing with the denial and how the individual may file such a statement; a statement that, if the individual does not submit a statement of disagreement, the individual may request that the provider provide the request for amendment and the denial with any future disclosures of the PHI; and a description of how the individual may file a complaint with the covered entity, including the name and telephone number of an appropriate contact person, or to the Secretary of Health and Human Services.
24. If the individual submits a "statement of disagreement," the provider may prepare a written rebuttal statement to the patient's statement of disagreement. The statement of disagreement will be appended to the PHI, or at the Company's option, a summary of the disagreement will be appended, along with the rebuttal statement of the Company.
25. If the Company receives a notice from another covered entity, such as a hospital, that it has amended its own PHI in relation to a particular patient, the ambulance service must amend its own PHI that may be affected by the amendments.

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Requests for Restriction

26. The patient may request a restriction on the use and disclosure of their PHI.
27. The Company is not required to agree to any restriction, and given the emergent nature of our operation, we generally will not agree to a restriction.
28. ALL REQUESTS FOR RESTRICTION ON USE AND DISCLOSURE OF PHI MUST BE SUBMITTED IN WRITING ON THE APPROVED COMPANY FORM. ALL REQUESTS WILL BE REVIEWED AND DENIED OR APPROVED BY THE PRIVACY OFFICER.
29. If the Company agrees to a restriction, we may not use or disclose PHI in violation of the agreed upon restriction, except that if the individual who requested the restriction is in need of emergency service, and the restricted PHI is needed to provide the emergency service, the Company may use the restricted PHI or may disclose such PHI to another health care provider to provide treatment to the individual.
30. The agreement to restrict PHI will be documented to ensure that the restriction is followed.
31. A restriction may be terminated if the individual agrees to or requests the termination. Oral agreements to terminate restrictions must be documented. A current restriction may also be terminated by the Company as long as the Company notifies the patient that PHI created or received after the restriction is removed is no longer restricted. PHI that was restricted prior to the Company voiding the restriction must continue to be treated as restricted PHI.

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**Policy on Procedure for Request for Amendment to
Protected Health Information**

Purpose

To provide consistent guidelines for Liberty Ambulance staff so that they may assist a patient in amending the protected health information (PHI) in their patient care record in accordance with their rights under the federal Privacy Regulations.

Policy

An individual has the right to amend his/her patient care records, as long as their protected health information is maintained by Liberty Ambulance, except in the following circumstances:

- The originator of the record is no longer available.
- The information the patient is requesting to amend was not created by Liberty Ambulance
- The information is not part of the patient care record
- The information is accurate and complete
- The information would not be available for inspection as provided by law, and therefore LIBERTY is not required to consider an amendment. This exception applies to information compiled in anticipation of a legal proceeding
- The Information received from someone else under a promise of confidentiality

Procedure

1. Confirm the identity of requestor or legal representative. If the requestor is legal representative, ask for legal proof of their representative status;
2. The patient must fill out the Request for Amendment of Health Information form completely;
3. The Company, with the assistance of legal counsel, will act on the request for amendment within 60 days of the request;

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4. If the Company agrees with the amendment,

- a. Then the record will be amended;
- b. The Company will then notify the individual of the agreement to amend the record;
- c. Copies of the amended record will be provided to our business associates, facilities to or from which we have transported the patient, and others involved in the patient's treatment.

5. If the Company denies the request for amendment,

- a. Then the individual that requested the amendment will be notified of the denial, and the reason for the denial in writing;
- b. A statement will be given to the individual that he/she may submit a short written statement disagreeing with the denial, and how the individual may file such a statement;
- c. A statement will be given to that individual that he/she may, if they do not wish to submit a statement of disagreement, that they may request that the Request for Amendment and the denial become a permanent part of their medical record;
- d. A statement that the individual may complain to the Privacy Officer of the Company at (904)721-0008 ext 227, or to the federal agency that oversees enforcement of the federal Privacy Rule, the Department of Health and Human Services;

6. All documentation pertaining to the request for amendment will be kept in the medical record.

Procedure for Filing Complaints About Privacy Practices

YOU MAY MAKE A COMPLAINT DIRECTLY TO US

You have the right to make a complaint directly to the Privacy Officer of Liberty Ambulance concerning our policies and procedures with respect to the use and disclosure of protected health information (PHI) about you. You may also make a complaint about concerns you have regarding our compliance with any of our established policies and procedures concerning the confidentiality and use or disclosure of your PHI, or about the requirements of the federal Privacy Rule.

All complaints should be directed to our Privacy Officer at the following address and phone number: 1626 Atlantic University Circle, Jacksonville, FL 32207; (904)721-0008

YOU MAY ALSO MAKE A COMPLAINT TO THE GOVERNMENT

If you believe Liberty Ambulance is not complying with the applicable requirements of the Federal Privacy Rule you may file a complaint with the Secretary of the U.S. Department of Health and Human Services. The Privacy Rule states the following:

Requirements for filing complaints. Complaints under this section must meet the following requirements:

- (1) A complaint must be filed in writing, either on paper or electronically.
 - (2) A complaint must name the entity that is the subject of the complaint and describe the acts or omissions believed to be in violation of the applicable requirements of the Federal Privacy Rule or the applicable standards, requirements, and implementation specifications of subpart E of part 164 of the Federal Privacy Rule.
 - (3) A complaint must be filed within 180 days of when the complainant knew or should have known that the act or omission complained of occurred, unless the Secretary for good cause shown waives this time limitation.
 - (4) The Secretary may prescribe additional procedures for the filing of complaints, as well as the place and manner of filing, by notice in the Federal Register.
- (c) *Investigation.* The Secretary may investigate complaints. Such investigation may include a review of the pertinent policies, procedures, or practices of the covered entity and of the circumstances regarding any alleged acts or omissions concerning compliance.

Policy on Medical Records of Employees

Policy:

To provide guidance to management and staff concerning the privacy of medical records which involve staff members of LIBERTY Ambulance.

Procedure:

Liberty Ambulance will, to the extent required by law, protect medical records it receives about employees or other staff in a confidential manner. Generally, only those with a need to know the information will have access to it, and, even then, they will only have access to as much information as is minimally necessary for the legitimate use of the medical records.

In accordance laws concerning disability discrimination, all medical records of staff will be kept in separate files apart from the employee's general employment file. These records will be secured with limited access by management.

In accordance with the Privacy Rule of the Health Insurance Portability and Accountabilities Act, medical records that are not considered employment records will be treated in accordance with the safeguards of the Privacy Rule with respect to their use and disclosure.

Employment records are not considered to be protected health information, or PHI, subject to HIPAA safeguards, including certain medical records of employees that are related to the job. These employment records not covered under HIPAA include, but are not limited to: information obtained to determine my suitability to perform the job duties (such as physical examination reports), drug and alcohol tests obtained in the course of employment, doctor's excuses provided in accordance with the attendance policy, work-related injury and occupational exposure reports, and medical and laboratory reports related to such injuries or exposures, especially to the extent necessary to determine workers' compensation coverage.

Nonetheless, despite the fact that such records are not considered HIPAA protected, LIBERTY Ambulance will limit the use and disclosure of these records to only those with a need to have access to them, such as certain management staff, the Company's designated physician, and state agencies pursuant to state law.

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With respect to staff members of Liberty Ambulance, only health information that is obtained about staff in the course of providing ambulance or other medical services directly to them is considered PHI under HIPAA. In other words, if LIBERTY Ambulance provides ambulance service to an employee, the protections typically given to such information to our ambulance service patients applies to the employee. These protections are subject to HIPAA exceptions, such as in the situation in which the staff member used LIBERTY Ambulance Service involved in a work-related injury while on duty.

As another example, if we receive a staff member's medical record in the course of providing the employee with treatment and/or transport, it does not matter that LIBERTY Ambulance happens to be the employer - that record is PHI. If, however, the employee submits a doctor's statement to a supervisor to document an absence or tardiness from work, LIBERTY Ambulance does not need to treat that statement as PHI. Other health information that could be treated as employment related, and not PHI, includes medical information that is needed for LIBERTY Ambulance to carry out its obligations under the FMLA, ADA and similar laws, as well as files or records related to occupational injury, disability insurance eligibility, drug screening results, workplace medical surveillance, and fitness-for-duty-tests of employees.

If you have any questions about how medical information about you is used and disclosed by LIBERTY Ambulance, please contact our Privacy Officer,