

**CHAPTER 90: AMBULANCE SERVICES**

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(A) Umatilla County is located in the northeastern portion of the state. The county is bordered on the west by Morrow County, on the north by the state of Washington, on the east by Union and Wallowa Counties and the south by Grant County. The county covers 3,231 square miles. Population of the county as of January 1992 was 61,100. The city of Pendleton (population 15,395), the city of Hermiston (population 10,145), city of Milton-Freewater (population 5,630) and the city of Umatilla (population of 3,085) are the county's largest cities. Pendleton is located in the north central portion of the county at the intersection of Interstate 84 and US Route 395. Hermiston is located in the northwestern portion of the county on US Route 395. The City of Milton-Freewater is located in the northeastern portion of the county on State Route 11. Interstate 84, Interstate 82, US 395 and State Route 11 are the main roads in the county. Agriculture, food processing, wood products, tourism, manu-facturing and recreation provide the basis of the county's economy. Each September the city of Pendleton hosts the Pendleton Roundup. This attrac-tion results in a large influx of visitors to the county each year.

(B) The county is divided into five separate ambulance service areas. The ambulance service providers offer basic, intermediate and advanced life support emergency medical care and transportation. The five ambulance service providers that serve the county, their boundaries and other general information are described in this chapter. (Ord. 92-02, passed 2-19-92)

**§ 90.02 DEFINITIONS.**

For the purpose of this chapter, the following definitions shall apply unless the context clearly indicates or requires a different meaning.

**ADDRESS AND CONSIDER.** Has the meaning given these terms by ORS 682.205(2)(3).

**AMBULANCE.** Has the meaning given that term by ORS 682.025.

**AMBULANCE SERVICE.** Has the meaning given that term by ORS 682.325.

**AMBULANCE SERVICE AREA (ASA).** A geographic area which is served by ambulance service

provider(s), and may include all or a portion of a county, or all or portions of two or more contiguous counties.

**AMBULANCE SERVICE PLAN.** A written document, which outlines a process for establishing a county emergency medical services system. A plan addresses the need for and coordination of ambulance services by establishing ambulance service areas for the entire county and by meeting the other requirements of these rules. Approval of a plan will not depend upon whether it maintains an existing system of providers or changes the system. For example, a plan may substitute franchising for an open-market system.

**ASA ADVISORY COMMITTEE (COMMITTEE).** A committee formed to review standards, make recommendations to or set new standards for the Board of County Commissioners for all matters regarding EMS and review and make recommendations regarding soundness of the ASA.

**COMMUNICATION SYSTEM.** Two-way radio communications between ambulances, dispatchers, hospitals and other agencies as needed. A two-channel multi-frequency capacity is minimally required.

**DIVISION.** The Oregon Health Division, Department of Human Resources.

**EFFECTIVE PROVISION OF AMBULANCE SERVICES.** Ambulance services provided in compliance with the county ambulance service plan provisions for boundaries, coordination and system elements.

**EFFICIENT PROVISION OF AMBULANCE SERVICES.** Effective ambulance services provided in compliance with the county ambulance service plan provisions for provider selection.

**EMERGENCY.** Any non-hospital occurrence or situation involving illness, injury or disability requiring immediate medical or psychiatric services, wherein delay in the provision of such services is likely to aggravate the condition and endanger personal health or safety.

**EMERGENCY MEDICAL SERVICE (EMS).** Those pre-hospital functions and services whose

purpose is to prepare for and respond to medical emergencies, including rescue and ambulance services, patient care, communications and evaluation.

**EMERGENCY MEDICAL TECHNICIAN-BASIC (EMT-BASIC).** A person certified by the Division as defined in O.A.R. 333-265-0000(8).

**EMERGENCY MEDICAL TECHNICIAN-INTERMEDIATE (EMT-INTERMEDIATE).** A person certified by the Division as defined in O.A.R. 333-265-0000(9).

**EMERGENCY MEDICAL TECHNICIAN-PARAMEDIC (EMT-PARAMEDIC).** A person certified by the Division as defined in O.A.R. 333-265-0000(10).

**FIRST RESPONDER.** A person certified by the Division as defined in ORS 682.025(11)(a)(b).

**HEALTH OFFICER.** The Umatilla County Health Officer.

**LICENSE.** Those documents issued by the Division to the owner of an ambulance service and ambulance, when the service and ambulance are found to be in compliance with ORS 682.015 to 682.991 and O.A.R. 333-250-0000 through 333-250-0100 and 333-255-0000 through 333-255-0090.

**MASS CASUALTY INCIDENT PLAN (MCI).** Provides guidance to EMS response personnel in the coordination of response relating to mass casualty incidents.

**MEDICAL DIRECTOR.** Has the meaning of a supervising physician as provided in ORS 682.235.

**NOTIFICATION TIME.** The length of time between the initial receipt of the request for emergency medical service by either a provider or a PSAP, and the notification of all responding emergency medical service personnel.

**OWNER.** The person having all the incidents of ownership in an ambulance service or an ambulance vehicle or where the incidents of ownership are in different persons, the person, other than a security interest holder or lessor, entitled to the possession of an ambulance vehicle or operation of an ambulance

service under a security agreement or a lease for a term of 10 or more successive days.

**PATIENT.** An ill, injured, or disabled person who may be transported in an ambulance.

**PROVIDER.** Any public, private or volunteer entity providing EMS.

**PROVIDER SELECTION PROCESS.** The process established by the county for selecting an ambulance service provider or providers.

**PUBLIC SERVICE ANSWERING POINT (PSAP).** A 24-hour communications facility established as an answering location for 911 calls originating within a given service area.

**QUICK RESPONSE TEAM (QRT).** An agency that provides initial response and basic life support care without transportation capabilities by certified First Responders.

**RESPONSE TIME.** The length of time between the notification of each provider and the arrival of each provider's emergency medical service unit(s) at the incident scene.

**SYSTEM RESPONSE TIME.** The elapsed time from when the PSAP receives the call until the arrival of the appropriate provider unit(s) on the scene.

**UMATILLA COUNTY BOARD OF COMMISSIONERS (BOARD).** The elected officials that has jurisdiction over the Umatilla County ASA Plan. (Ord. 92-02, passed 2-19-92)

### § 90.03 BOUNDARIES.

(A) ASAs. Umatilla County is divided into seven ASAs. The six ASAs are:

- (1) Pendleton;
- (2) Hermiston;
- (3) Umatilla;
- (4) Milton-Freewater;
- (5) Athena;

(6) Mill Creek; and

(7) Confederated Tribes of the Umatilla Indian Reservation (“CTUIR”).

(B) *Maps.* Maps depicting boundaries for the ASAs, Appendix A, Map 1; PSAP locations and 911 coverage, Appendix A, Map 2; Fire Protection Districts, Appendix A, Map 3; Incorporated cities, Appendix A, Map 4; and Ambulance Service Areas Response Times, Appendix A, Map 5, are a part of this Chapter.

(C) *ASA narrative description.* The boundaries for each of the seven ambulance service areas are as follows:

(1) *ASA-1.* Beginning on State Highway #37 at the northwest corner of Section 30, Township 5 North, Range 31; thence south along section lines to a point on the east section line of Section 13, Township 4 North, Range 30, where an unimproved road intersects Terney Road (County Road #997) from the west; thence westerly along said unimproved road to Kilgore Road (County Road #1001) on the west section line of said Section 13; thence south on Section lines to the center point of the east section line of Section 11, Township 3 North, Range 30; thence west across Sections 11, 10, and 9 to and along Reese Road (County Road #1112) to Barth Quarry Pond/Nolin Grade Road (County Road #1133); thence south along Nolin Grade Road (County Road #1133) to Nolin and continuing in a southwesterly direction along Cunningham Road (County Road #1362) to the west section line of Section 12, Township 2 North, Range 29; thence south along section lines to the southwest corner of the county; thence east along the south county line to southeast corner of the county; thence northerly and easterly along the county line to the northeast corner of Section 4, Township 2 South, Range 35; thence west along section lines to the northwest corner of Section 6, Township 2 South, Range 34; thence north along section lines to the intersection of McKay Creek; thence northwesterly along McKay Creek to the intersection of the south boundary of the Umatilla

Indian Reservation; thence west along the south boundary of the Umatilla Indian Reservation to the southwest corner of Section 6, Township 1 South, Range 33; thence north along the Umatilla Indian Reservation western boundary to the west 1/4 corner of Section 6, Township 2 North, Range 33; thence east to the center point of Section 5, Township 2 North, Range 33; thence north along the center line of Section 5 to the north 1/4 corner of said section; thence east to the northeast corner of Section 2, Township 2 North, Range 33; thence north along the west line of Section 36, Township 3 North, Range 33, to the intersection of Duff Road (County Road #794); thence east on Duff Road (County Road #794) to Rothrock Road (County Road #857); thence north on Rothrock Road (County Road #857) to Midway Road (County Road #850); thence west on Midway Road (County Road #850) to Midway Elevator; thence north on the Helix Highway #335 to Athena-Holdman Highway #334; thence west on said highway to State Highway #37; thence northwesterly on Highway #37 to the point of beginning

(2) *ASA-2.* Beginning at the northwest corner of Section 27, Township 5N, Range 27 EWM; thence south and east along the county boundary to the southeast corner of Section 35, Township 1N Range 29 EWM; thence north along section lines to a point where it intersects with County Road #1362; thence northeasterly to Nolin; thence north on Nolin Road to Barth Quarry Pond; thence northwesterly on County Road #1112 to the center of Section 10, Township 3N Range 30 EWM; thence east to the center point of the east line of Section 11, Township 3N Range 30 EWM; thence north along section lines to a point on the west line of Section 13, Township 4N Range 30 EWM where an unimproved road intersects from the east; thence easterly on said unimproved road to the east section line of Section 13, Township 4N Range 30 EWM; thence north along section lines to the northeast corner of Section 36, Township 6N Range 30 EWM; thence south-westerly in a diagonal line to the southeast corner of Section 35, Township 6N Range 30 EWM; thence west along the section line to the southwest corner of said Section 35; thence southwesterly in a diagonal line to the southeast corner of Section 8, Township 5N Range 30 EWM; thence

west along the section line to the southwest corner of said Section 8; thence in a diagonal line to the southwest corner of Section 24, Township 5N Range 29 EWM; thence north to the center point of the west line of Section 24; thence west in a line through the centers of sections to the center point of the west section line of Section 24, Township 5N Range 28 EWM; thence south to the southwest corner of Section 24; thence west along section lines to the point of beginning.

(3) ASA-3. Beginning at the northwest corner of Umatilla County; thence south along the west county boundary to the southwest corner of Section 22, Township 5 North, Range 27 EWM; thence east along section lines to the southeast corner of Section 23, Township 5 North, Range 28 EWM; thence north along the east line of Section 23 to the center point of the section line; thence east along centerlines of sections to the center point of the east section line of Section 23, Township 5 North, Range 29 EWM, thence south along the section line to the southeast corner of Section 23; thence northeasterly in a diagonal line to the southwest corner of Section 8, Township 5N Range 30 EWM; thence east along the section line to the southeast corner of said Section 8; thence northeasterly in a diagonal line to the southwest corner of Section 35, Township 6N Range 30 EWM; thence east along the section line to the southeast corner of said section; thence northeasterly in a diagonal line to the north county line; thence west along the county line to the Columbia River; thence south and west along the Columbia River to the northwest corner of the county and the point of beginning.

(4) ASA-4. Beginning at a point on the east section line of Section 18, Township 6 North, Range 33 EWM where it crosses the north boundary of Umatilla County; thence south along section lines to the southeast corner of Section 30, Township 6 North, Range 33 EWM; thence east along section lines to the southeast corner of Section 27, Township 6 North, Range 33 EWM; thence south along section lines to the southeast corner of Section 3, Township 5 North, Range 33 EWM; thence east along section lines to the northeast corner of Section 11, Township 5 North, Range 34 EWM; thence south along section lines to the southeast corner of Section 14, Township 5 North, Range 34 EWM; thence east along section lines to the northeast corner of Section 22, Township 5 North,

Range 35 EWM; thence south along section lines to the southeast corner of Section 34, Township 5 North, Range 35 EWM; thence east along section lines to the northeast corner of Section 2, Township 4 North, Range 35 EWM; thence south along section lines to the center point of the west section line of Section 12, Township 4 North, Range 35 EWM; thence east along the centerline of Section 12 to the center point of the east section line of Section 12; thence south along the section line to the southeast corner of Section 12; thence east along section lines to the southeast corner of Section 9, Township 4 North, Range 36 EWM; thence south along the section line to the center point of the east line of Section 16, Township 4 North, Range 36 EWM; thence east along centerlines of sections to the center point of the west section line of Section 18, Township 4 North, Range 37 EWM; thence south along the section line to the southwest corner of Section 18, Township 4 North, Range 37 EWM; thence east along section lines to the east boundary of Umatilla County; thence north along the county boundary to the northeast corner of Section 6, Township 5 North, Range 39 EWM; thence west along the section lines to the northeast corner of Section 1, Township 5 North, Range 37 EWM; thence north along the section lines to the north boundary of the county; thence west along the north county boundary to the point of beginning.

(5) ASA-5. Beginning at a point on the east section line of Section 18, Township 6 North, Range 33 EWM, where it crosses the north boundary of Umatilla County; thence south along section lines to the southeast corner of Section 30, Township 6 North, Range 33 EWM; thence east along section lines to the southeast corner of Section 27, Township 6 North, Range 33 EWM; thence south along section lines to the southeast corner of Section 3, Township 5 North, Range 33 EWM; thence east along section lines to the northeast corner of Section 11, Township 5 North, Range 34 EWM; thence south along section lines to the southeast corner of Section 14, Township 5 North, Range 34 EWM; thence east along section lines to the northeast corner of Section 22, Township 5 North, Range 35 EWM; thence south along section lines to the southeast corner of Section 34, Township 5 North, Range 35 EWM; thence east along section lines to the northeast corner of Section 2, Township 4 North, Range 35 EWM; thence south along section lines to the center point of the west section line of Section 12, township 4 North, Range 35 EWM; thence east along

the centerline of Section 12 to the center point of the east section line of Section 12; thence south along the section line to the southeast corner of Section 12; thence east along section lines to the southeast corner of Section 9, Township 4 North, Range 36 EWM; thence south along the section line to the center point of the east line of Section 16, Township 4 North, Range 36 EWM; thence east along center lines of sections to the center point of the west section line of Section 18, Township 4 North, Range 37 EWM; thence south along the section line to the southwest corner of Section 18, Township 4 North, Range 37 EWM; thence east along section lines to the east boundary of Umatilla County; thence south along the east county line to the point where U.S. Forest Service Road FS 32 intersects with the east section line of Section 25, Township 2N Range 37 EWM; thence northerly on FS 32 to its intersection with County Road #900 at Bingham Springs; thence southwesterly along the county road to Thorn Hollow; thence north on Thorn Hollow Road (County Road #825) to County Road #794; thence west on County Road #794 to County Road #857; thence north on County Road #857 to County Road #850; thence west on County Roads #850 and #960 to Midway Elevator; thence north on the Helix Highway to Middle Cold Springs Highway; thence west on said highway to State Highway 37; thence northwesterly on Highway 37 to the southwest corner of Section 19, Township 5N Range 31 EWM; thence north along section lines to the southwest corner of Section 30, Township 6N Range 31 EWM; thence northeasterly in a diagonal line to the north county line; thence east along the county line to the point of beginning.

(6) *ASA-6*. Beginning at the northwest corner of Section 18, Township 6 North, Range 38 EWM; thence south along the section lines to the southwest corner of Section 31, Township 6 North, Range 38 EWM; thence east along the section lines to the east boundary of Umatilla County; thence north along the east boundary line to the north boundary of Umatilla County; thence west along the north county boundary to the point of beginning.

(7) *ASA-7*. Beginning at the west 1/4 corner of Section 6, Township 2 North, Range 33, being the point of beginning for this description; thence east to the center point of Section 5, Township 2

North, Range 33; thence north along the center line of Section 5 to the north 1/4 corner of said section; thence east to the northeast corner of Section 2, Township 2 North, Range 33; thence north along the west line of Section 36, Township 3 North, Range 33, to the intersection of Duff Road; thence east along Duff Road to the intersection of Thorn Hollow Road; thence south along Thorn Hollow Road to the intersection of Bingham Road; thence east along Bingham Road to its intersection of FS 32 Road; thence southerly on FS 32 Road to its intersection with the County Line in Section 25, Township 2 North, Range 37; thence south and east along the County Line to the northeast corner of Section 4, Township 2 South, Range 35; thence west along section lines to the northwest corner of Section 6, Township 2 South, Range 34; thence north along section lines to the intersection of McKay Creek; thence northwesterly along McKay Creek to the intersection of the south boundary of the Umatilla Indian Reservation; thence west along the south boundary of the Umatilla Indian Reservation to the southwest corner of Section 6, Township 1 South, Range 33; thence north along the Umatilla Indian Reservation western boundary to the west 1/4 corner of Section 6, Township 2 North, Range 33, being the point of beginning for this description.

(D) *ASA map and system response time zones*. See Appendix A, Maps 1 and 5. These maps represent "System Response Time" which includes notification time, role out time and provider response time. Actual response time is subject to the variables of access, weather, road and traffic conditions as well as other circumstances that can impact response time.

(E) *911 Map*. See Appendix A, Map 2.

(F) *Fire Protection District boundaries*. See Appendix A, Map 3.

(G) *Incorporated cities*. See Appendix A, Map 4.

(H) *Alternatives to reduce response times*.

(1) Heavily forested, mountainous terrain

and serve winter weather conditions present difficult access and long response time to ground ambulances. In those situations, when an urgent response is indicated, the PSAP may elect to call the nearest appropriate rotary-wing air ambulance or the Umatilla County Search and Rescue.

(2) In addition, a tiered response system is used to provide the best available patient care while maximizing the available resources.

(3) In some instances, for various reasons, an ambulance service provider from an adjoining county's ASA could respond quicker to an incident. This would be covered under a signed Mutual Aid Agreement and would be at the discretion of the dispatcher.

(Ord. 92-02, passed 2-19-92; Ord. 2002-11, passed 12-18-2002; Ord. 2004-06, passed 4-7-2004)

#### **§ 90.04 AMBULANCE SERVICE ORDINANCE TO BE ADOPTED.**

The County Board of Commissioners shall adopt a county ambulance service ordinance. The ordinance shall include criteria for administering the county Ambulance Service Area Plan, limiting ambulance services that may operate in the county; establishing an application process; ambulance franchise terms; enforcement; preventing interruption of service; appeals, abatement and penalties; duties of the franchisee; and establishing membership and duties of the advisory committee.

(Ord. 92-02, passed 2-19-92)

#### ***SYSTEM ELEMENTS***

#### **§ 90.10 NOTIFICATION; RESPONSE TIMES.**

(A) The County ASA system response times shall be as depicted on the county time zone map 90% of the time, barring inclement weather or other extraordinary conditions.

(B) Notification times for ambulances shall be within two minutes 90% of the calls.

(C) Provider response time shall be as listed as follows for 90% of the calls: Urban - 6 min.; Suburban - 13 min.; Rural - 43 min.; and Frontier - 4 hours and 28 min.

(D) System response time shall be as listed as follows for 90% of the calls: Urban - 8 min.; Suburban - 15 min.; Rural - 45 min.; and Frontier - 4 hours and 30 min.

(E) Monitoring of notification and response times shall be accomplished by the following:

(1) Information received from the public, dispatch center, prehospital care providers, hospitals, or county EMS administration.

(2) Types of information received are written or verbal complaints, patient care report forms, radio transmission tapes, notification and response time incident cards, trauma registry forms, etc.

(Ord. 92-02, passed 2-19-92)

#### **§ 90.11 LEVEL OF CARE.**

(A) An ambulance operating in the county and providing basic life support level care must consist of a qualified driver and one certified EMT-Basic or above. The EMT must always be with the patient in the patient compartment of the ambulance.

(B) An ambulance operating in the county and providing intermediate life support level care must consist of one certified EMT-Basic and one certified EMT-Intermediate. The EMT-Intermediate must always be with the patient in the patient compartment of the ambulance when intermediate level care is required or rendered.

(C) An ambulance operating in the county and providing advanced life support level care must consist of an EMT-Basic and an EMT-Paramedic. The EMT-Paramedic must always be with the patient in the patient compartment of the ambulance when ALS care is required or being rendered.

(Ord. 92-02, passed 2-19-92)

#### **§ 90.12 PERSONNEL.**

When operating an ambulance in Umatilla County, all personnel must meet the requirements of ORS 682.015 to 682.991 and O.A.R 333-255-0070 (1), (4), or (6). The practice of staffing an ambulance on a part-time basis with EMTs certified to a higher level of care than is possible at other times does not construe a requirement that the ambulance provide the same level of care on a regular basis. (Ord. 92-02, passed 2-19-92)

**§ 90.13 MEDICAL SUPERVISION.**

(A) Each EMS agency utilizing EMTs shall be supervised by a physician licensed under ORS 677, actively registered and in good standing with the Board of Medical Examiners as a Medical Doctor (MD) or Doctor of Osteopathic Medicine (DO). The physician must also be approved by the Board of Medical Examiners as a medical director.

(B) Each EMS agency or ambulance service may have its own medical director. The medical director shall:

(1) Comply with the requirements listed in O.A.R. 847-35-0025;

(2) Hold at least one meeting a year with the EMTs affiliated with the respective a ambulance services;

(3) Designate an EMT coordinator who shall conduct case reviews in the physicians absence and send summaries of the reviews and problems identified and proposed problem resolution to the physician; and

(4) Provide or authorize at least one case review meeting for all EMTs quarterly.

(C) St. Anthony Hospital, located in Pendleton, Oregon, Good Shepard Community Hospital located in Hermiston, Oregon and St. Mary's Medical Center located in Walla Walla, Washington shall be the Medical Resource Hospitals. (Ord. 92-02, passed 2-19-92)

**§ 90.14 PATIENT CARE EQUIPMENT.**

Patient care equipment must meet or exceed the Oregon Health Division's requirements as specified in ORS 682.015 to 682.991 and O.A.R. 333-255-0070 (2), (3), (5), or (7). The ambulance service provider shall maintain a list of equipment for their ambulances, which shall be furnished to the Board upon their request. (Ord. 92-02, passed 2-19-92)

**§ 90.15 VEHICLES.**

All ambulances must be either a Type I, II, or III and be licensed by the Oregon Health Division. Ail ambulances must met or exceed the requirements as set forth in ORS 682.015 to 682.991 and O.A.R. 333-255-0060. An up-to-date list of each provider's ambulances shall be furnished to the Board upon their request. (Ord. 92-02, passed 2-19-92)

**§ 90.16 TRAINING.**

(A) Blue Mountain Community College located in Pendleton, Oregon is the primary institution of learning to provide EMT training. If Blue Mountain Community College does not offer a particular level of training, it may require an individual to obtain that level of training at another teaching institute which would be further away.

(B) Whenever possible, the ambulance service provider shall provide assistance (tuition, textbooks, exam fees, etc.) for prospective ambulance personnel taking initial BLS training.

(C) Each EMS provider in Umatilla County shall provide continuing medical education which meets recertification standards as specified by the Oregon Health Division. EMT recertification and continuing medical education shall be obtained through in-house training programs and seminars that are sponsored by local EMS agencies or teaching institutions. When classes are not available within the county, it may require an individual to augment their continuing education by attending classes, workshops and

conferences outside of the ASA and/or county. When possible, the ambulance service provider shall provide assistance with registration, lodging, meals, fuel costs, etc. for their EMTs.

(Ord. 92-02, passed 2-19-92)

**§ 90.17 QUALITY ASSURANCE.**

In order to ensure the delivery of efficient and effective pre-hospital emergency medical care, an EMS Quality Assurance Program is hereby established.

(Ord. 92-02, passed 2-19-92)

**§ 90.18 STRUCTURE.**

(A) "Umatilla County Ambulance Service Area Advisory Committee (Committee)," shall be formed by ordinance and be composed of 14 members:

- (1) County Health Officer - 1;
- (2) 911 Coordinator - 1;
- (3) Ambulance service providers - 2;
- (4) Fire Department Representative - 1;
- (5) Emergency Physician - 1;
- (6) Hospital Administrator - 1;
- (7) Medical Directors (one from each ASA) - 5; and
- (8) Public members - 2.

(B) Members of the Committee shall be appointed by the Board for a two year term. The principal function of the Committee shall be to monitor the EMS system within the county.

(Ord. 92-02, passed 2-19-92)

**§ 90.19 PROCESS.**

(A) The Board, in order to ensure the delivery of

the most efficient and effective prehospital emergency care possible with the available resources, has directed that the ASA Advisory Committee be established.

(B) Quality assurance in the county shall be accomplished through frequent case review, peer review, and periodic review by the medical directors and/or ambulance governing bodies (see respective Provider Profiles for definitions of governing bodies). Complaints regarding violation of this ASA Plan, or questions involving prehospital care provided, shall be submitted in writing to the Board who shall forward it to the Committee. The Committee shall then review the matter and make recommendations or changes on such complaints or questions to the Board. The Board shall also resolve any problems involving system operations (changing protocols to address recurring problems, etc.). Ongoing input may be provided by consumers, providers or the medical community to any individual on the Board or members of the Committee. This individual, in turn, will present the complaint, concern, idea or suggestion (in writing) to the full Board for consideration.

(Ord. 92-02, passed 2-19-92)

**§ 90.20 PROBLEM RESOLUTION.**

Problems involving protocol deviation by EMTs or dispatchers shall be referred to the respective medical director or dispatch supervisor. Problems involving a non-compliant provider shall be referred to the Board. The Board may seek background data and recommendations from the Committee in such instances. However, any member of the Committee who may have a conflict of interest in the matter shall declare such conflict and refrain from participating in any recommendations made.

(Ord. 92-02, passed 2-19-92)

**§ 90.21 SANCTIONS FOR NON-COMPLIANT PERSONNEL OR PROVIDERS.**

(A) Suspension or revocation assignment. Upon a recommendation by the Committee, or upon its own motion, the Board may suspend or revoke the assignment of an ASA upon a finding that the provider has:

(1) Willfully violated provisions of an ordinance, the county ASA Plan or provisions of state or federal laws and regulations; or

(2) Materially misrepresented facts or information given in the application for assignment of an ASA or as part of the review of the performance of the service furnished by the provider.

(B) In lieu of the suspension or revocation of the assignment of an ASA, the Board may order that the violation be corrected and make the suspension or revocation contingent upon compliance with the order, within the period of time stated. Notice of the Board's action shall be provided to the holder of the assignment which shall specify the violation, the action necessary to correct the violation and the date by which the action must be taken. If the holder of the assignment fails to take corrective action within the time required, the Board shall notify the holder that the assignment is suspended or revoked upon receipt of the notice.

(C) A person receiving a notice of the assignment, denial, suspension, revocation or contingent suspension or revocation of an ASA may request a hearing before the Board by filing with the Board a written request for a hearing within 14 days of the decision, setting forth the reasons for the hearing and the issues proposed to be reviewed. The filing of a hearing request shall stay the action, pending the hearing and final determination of the decision, unless a change is required due to an immediate hazard to the public safety. The Board shall set a time and place for the hearing. Within 14 days after the conclusion of the hearing, the Board shall affirm, reverse or modify its original decision.  
(Ord. 92-02, passed 2-19-92)

**COORDINATION**

**§ 90.30 AUTHORITY FOR AMBULANCE SERVICE AREA ASSIGNMENTS.**

(A) The Board has the authority to assign an ASA within the county in compliance with ORS

682.015 to 682.991. Applications by new providers and requests for assignment change or revocation will be considered for approval if they will improve efficient service delivery and benefit public health, safety and welfare. Cities have the authority to develop and apply ambulance licensing ordinances within their jurisdictional boundaries, and nothing in this plan is intended to obviate that authority.

(B) Future updates to this plan and proposals for assignment changes will be the responsibility of the Board. The Board shall receive all requests for changes, present those requests to the Committee for their review and recommendations. Upon completing their review, the Committee shall present their recommendations to the Board. In addition, the Board has the authority to review service providers records and initiate an assignment change or service area revocation. For the purpose of this plan, the Board shall recognize the Committee as an advisory group.

(C) The Umatilla County ASA Plan was prepared with a great deal of input from all county pre-hospital care providers. The Plan requires that the ambulance services providers maintain service records in order that the County can carry out its ASA Plan responsibilities.  
(Ord. 92-02, passed 2-19-92)

**§ 90.31 ENTITY THAT WILL ADMINISTER THE ASA PLAN.**

(A) The Umatilla County ASA Committee is hereby established with the adoption of this chapter. The Committee shall serve as the principal entity to administer and accept written proposals for amendments to this ASA Plan.

(B) The Committee will be activated at any time a concern is submitted, in writing, to the Board, or when deemed appropriate by seven or more members of the Committee.

(C) This Committee, as with any governmental body, will be subject to the Oregon Open Meeting Law a (ORS Chapter 192), but may temper its activities, within legal limits, according to the sensitivity of the EMS matter involved. Appeals from

the Board, in any case where the Board would otherwise have the final decision at the county level shall be directed to the appropriate state regulatory agency, or a Circuit Court, as appropriate.

(D) The Committee shall submit a brief written report of its activities or recommendations periodically to the Board.

(E) Existence of this committee will:

(1) Prevent needless attention of state regulatory agencies to problems that can be resolved locally;

(2) Increase local awareness of potential problems that may exist; and

(3) Increase the awareness of ambulance medical directors regarding area concerns and activities.  
(Ord. 92-02, passed 2-19-92)

**§ 90.32 COMPLAINT REVIEW PROCESS.**

(A) Complaints regarding violation of this ASA Plan, or questions involving prehospital care provided, shall be submitted in writing to the Board. The Board shall then forward the complaint to the Committee for their review and recommendations or changes on such complaints or questions. The Committee shall also resolve any problems involving system operations (changing protocols to address recurring problems, etc.).

(B) Ongoing input may be provided by consumers, providers or the medical community to any individual on the Committee or members of the Board. This individual, in turn, will present the complaint, concern, idea or suggestion (in writing) to the full Board for consideration.  
(Ord. 92-02, passed 2-19-92)

**§ 90.33 MUTUAL AID AGREEMENTS.**

(A) Each ambulance service provider shall sign a mutual aid agreement with the other providers in the

county and with other providers in adjoining counties to respond with needed personnel and equipment in accordance with the agreement.

(B) All requests for mutual aid shall be made through the appropriate PSAP.

(C) All mutual aid agreements will be reviewed annually and modified as needed by mutual consent of all parties.  
(Ord. 92-02, passed 2-19-92)

**§ 90.34 DISASTER RESPONSE.**

The Committee shall coordinate the EMS medical function of disaster planning with the formal Emergency Operations Plan developed by the Umatilla County Emergency Management Director and other county authorities.  
(Ord. 92-02, passed 2-19-92)

**§ 90.35 COUNTY RESOURCES OTHER THAN AMBULANCES.**

(A) When resources other than ambulances are required for the provision of emergency medical services during a disaster, a request for additional resources shall be made through the appropriate PSAP to the County Emergency Management Office.

(B) The Director of the County Emergency Management Office shall be responsible for locating and coordinating all county EMS resources any time that the Mass Casualty Incident (MCI) Plan is implemented.

(C) The Director of the County Emergency Management Office shall work directly with local agencies, departments and governments to coordinate necessary resources during any implementation of the MCI Plan.  
(Ord. 92-02, passed 2-19-92)

**§ 90.36 OUT OF COUNTY RESOURCES.**

(A) When resources from outside the county are required for the provision of emergency medical

services during a disaster, a request for those resources shall be made through the appropriate PSAP to the County Emergency Management Office.

(B) The Director of the County Emergency Management Office shall be responsible for requesting and coordination all out of county resources any time the MCI Plan is implemented. (Ord. 92-02, passed 2-19-92)

**§ 90.37 MASS CASUALTY INCIDENT (MCI) MANAGEMENT PLAN.**

(A) The purpose of the MCI plan is to provide guidance to EMS response personnel in the coordination of response activities relating to mass casualty incidents in the county.

(B) The plan is intended for use when any single incident or combination of incidents depletes the resources of any single provider or providers during the normal course of daily operations or at the request of the Health Officer.

(C) The plan shall identify the responsibility of the provider concerning:

- (1) Coordination;
- (2) Communication;
- (3) Move up;
- (4) Triage; and
- (5) Transportation.

(D) The Committee will periodically review the medical component MCI plan and revise it to meet the county's need. Following the review and changes the Director of Emergency Management will be asked to append the changes to the medical component of the County Emergency Management Plan and the modified MCI plan will be promulgated. (See approval letter, Appendix #7 of this chapter)

(E) Coordination.

(1) The highest ranking officer of the fire or police agency in whose jurisdiction the incident occurs shall be the incident-commander.

(2) The senior/highest certified EMT at the scene will have overall responsibility for patient care (triage officer); he/she shall work closely with the incident-commander.

(3) The on-scene command frequency and staging area will be determined by the incident-commander. Dispatch center will advise responding units as to location of the staging area.

(F) EMS responder guidelines.

(1) The senior EMT on the first EMS unit to arrive at the scene shall become the triage officer and shall:

- (a) Assess nature and severity of the incident;
- (b) Advise appropriate PSAP of the situation;
- (c) Request appropriate fire and police services, if not already at the scene;
- (d) Request initiation of EMS mutual aid if needed;
- (e) Alert area hospital(s) of the situation; and
- (f) Establish and organize the transportation of all injured or ill patients.

(2) Additional EMS units arriving at the scene shall:

- (a) Check-in with incident-commander;
- (b) Effect needed rescue, if trained and equipped to do;
- (c) Provide emergency medical care and transport patient(s) to the appropriate hospital(s). (Ord. 92-02, passed 2-19-92)

**§ 90.38 PERSONNEL AND EQUIPMENT RESOURCES.**

The following additional personnel and equipment resources are available to support the ambulance service provider. The current telephone numbers are available in the County Emergency Telephone Directory.

(A) *Additional ambulances.*

- (1) Rotary-wing air ambulances:
  - (a) Life Flight (Portland, OR);
  - (b) 304th MAST (Portland, OR);
  - (c) Air Life of Oregon (Bend, OR);
  - (d) Life Bird (Spokane, WA);
- (2) Fixed-wing air ambulances:
  - (a) Air Life of Oregon (Bend, OR);
  - (b) Premier Jets, Inc. (Portland, OR);
  - (c) Life Flight/Life Flight XT (Boise, ID);
  - (d) Air Ambulance America (Spokane, WA);
- (3) Ground ambulances:
  - (a) Elgin Ambulance Service (Elgin, OR);
  - (b) Morrow County Ambulance (Heppner, OR);
  - (c) Grant County Volunteer Ambulance (John Day, OR);
  - (d) Grande Ronde Hospital Ambulance (La Grande, OR);
  - (e) Boardman, OR Fire Department

Ambulance;

- (f) A+ Ambulance, Kennewick, WA;

(B) *Hazardous materials.*

(1) Eastern Oregon Regional HAZMAT Team, Hermiston Fire Department;

(2) Tribal Fire Department, CTUIR, Mission, OR;

(3) OARS (provides notification and activation of state agencies) 1-800-452-0311;

(4) CHEMTREC 1-800-424-9300;

(C) *Quick response teams.*

(1) Milton-Freewater - Rural Rescue Service;

(2) Meacham Quick Response Team;

(3) Pilot Rock Quick Response Team - Pilot Rock Fire Department;

(4) Ukiah Quick Response Team;

(D) *Search and rescue.* The majority of search and rescue within the county is provided by the Umatilla County Sheriffs Office. They are on call and available on a 24 hour basis. In many instances, search and rescue will act as first responders in remote areas that are inaccessible to conventional ambulance. Search and rescue shall either transport to the nearest ambulance or at their discretion, use the services of life flight or air life, whichever is medically appropriate. Search and rescue teams have direct radio contact with all local ambulances, hospitals, air life and the 911 centers. In winter months, search and rescue will respond to remote areas covered with snow and not accessible by the usual ambulance service. When advanced life support is called for, search and rescue will transport the ambulance crews to the patient.

(1) County Sheriff:

- (a) Umatilla County;
- (b) Union County;
- (c) Grant County;
- (d) Morrow County.
- (2) Oregon State Police:
  - (a) Pendleton Office;
  - (b) Hermiston Office;
  - (c) Milton-Freewater Office.
- (3) Oregon Civil Air Patrol.
- (4) 304th MAST.

(E) *Specialized rescue.*

- (1) Umatilla County Sheriff;
- (2) 304th MAST;
- (3) Divers Accident Network - Tri-Cities Dive Team.

(F) *Extrication.*

- (1) Applicable Fire Department District;
- (2) Umatilla County Road Department — heavy equipment.

(G) *Towing of vehicles weighing over 2½ tons.*

- (1) Schillings, Pendleton;
- (2) Woodpecker, Pendleton;
- (3) Lightfoots, Walla Walla.

(H) *County, state and federal agencies.*

- (1) U.S. Forest Service;
- (2) Bureau of Indian Affairs;

- (3) Oregon State Highway Department;
- (4) Oregon State Forestry Department;
- (5) Oregon Department of Fish and Wildlife;
- (6) Umatilla County Health Department. (Ord. 92-02, passed 2-19-92)

**§ 90.39 EMERGENCY COMMUNICATIONS AND SYSTEMS ACCESS.**

(A) *Telephone access.* The County Communications (911) Centers are located in Pendleton, Hermiston and Milton-Freewater. These centers shall receive all emergency service requests in the county. Persons having access to telephone service will have access to the county communications centers by dialing 911. Upon receipt of a request, all emergency service providers in the county, including fire and ambulance, are dispatched by the County Sheriffs Dispatch in Pendleton, the Hermiston Safety Center, or the Milton-Freewater 911 Center.

(B) *Dispatch procedures.*

(1) The appropriate personnel shall be notified by the dispatcher via radio-pagers within two minutes of receipt of a life threatening call.

(2) The dispatcher will obtain from the caller, and relay to the first responders the following:

- (a) Location of the incident;
- (b) Nature of the incident; and
- (c) Any specific instructions or information that may be pertinent to the incident.

(3) EMS personnel shall inform the dispatch center by radio when any of the following occurs:

- (a) In-service;
- (b) In-route to scene or destination and

type or response;

(c) Arrival on scene or destination;

(d) Transporting patient(s) to hospital or medical facility, the number of patients, and name of facility; and

(e) Arrival at receiving facility.

(4) Ambulance personnel shall inform the receiving hospital by radio at the earliest possible time of the following:

(a) Unit identification number;

(b) Age and sex of each patient;

(c) Condition and chief complaint of each patient;

(d) Vital signs of each patient;

(e) Treatment rendered; and

(f) Estimated time of arrival.

(C) *Radio system.*

(1) The PSAP shall:

(a) Restrict access to authorized personnel only;

(b) Meet state fire marshal standards;

(c) Maintain radio consoles capable of communication directly with all first response agencies dispatched by them via the following frequencies: primary 154.250 (or 154.370 for Walla Walla, or 154.115 for East Umatilla County); secondary 155.340 (HEAR system).

(d) Maintain radio logs which contain all information required by the Federal Communications Commission and Oregon Revised Statutes;

(e) Utilize plain English or 12-code; and

(f) Be equipped with a back-up power source capable of maintaining all functions of the center.

(2) The ambulance service provider shall equip and maintain 60 watt or greater, multi-channel radios in each ambulance that allows for the transmission and reception on assigned frequencies and 155.340 (HEAR). Each ambulance crew shall have one five watt, portable hand-held radio with a minimum of two channel capability. All ambulances in county shall be equipped to communicate on the following frequencies: 155.340 (HEAR), 155.400 (ATAB #9 Medical Resource), and 154.250 (or 154.370 for Walla Walla, or 154.115 for East Umatilla County). In most instances, once an ambulance crew has been summoned by the dispatcher, there is further capability of radio communications between the ambulance and the dispatcher via mobile or hand-held radios. Requests for mutual aid, other resources or agencies, etc., generally must be arranged with the third-party assistance of the County Sheriff's Office (via radio).

(3) Providers are dispatched by the 911 centers by radio pagers. Unless specifically determined by the nature of the call (i.e., non-emergency patient transfer, etc.) the highest level of ambulance staffing available at that time shall be dispatched. Other resources (police, fire) will be dispatched as deemed appropriate.

(D) *Emergency medical services dispatcher training.*

(1) Umatilla County EMS dispatchers must successfully complete an Emergency Medical Dispatch (EMD) training course as approved by the Oregon Emergency Management Division and the Board on Public Safety Standards and Training.

(2) All EMS dispatchers are encouraged to attend any class, course or program which will enhance their dispatching abilities and skills. (Ord. 92-02, passed 2-19-92)

***PROVIDER SELECTION***

**§ 90.50 INITIAL ASSIGNMENT OF EXISTING AMBULANCE SERVICE PROVIDERS.**

The initial assignment of existing ambulance service providers occurred under the original ASAP, adopted July 5, 1989.  
(Ord. 92-02, passed 2-19-92)

**§ 90.51 REASSIGNMENT OF AN ASA.**

(A) In the event that the ASA provider is unable to comply with the standards promulgated for the ASA by this Plan, the provider will notify the Board in writing of its inability to comply and identify which standards are involved. The Board will determine if other qualified providers are available for the ASA who can comply with the standards. If the Board determines no other qualified providers are available it will petition the Division for a variance from the standards so that continuous ambulance service may be maintained, by the existing provider, in the ASA.

(B) In the event that a reassignment of an ASA is necessary, the committee shall make a written recommendation to the Board. The committee shall develop appropriate criteria, utilizing the selection process described in this plan to be presented to the Board for consideration and/or action by the Board.  
(Ord. 92-02, passed 2-19-92)

**§ 90.52 APPLICATION PROCESS FOR APPLYING FOR AN ASA.**

See the county Ambulance Service Ordinance (§§ 90.60 through 90.81) regarding application process for applying for an ASA.  
(Ord. 92-02, passed 2-19-92)

**§ 90.53 NOTIFICATION OF VACATING AN ASA.**

In the event that an ASA provider wishes to vacate their ASA, the provider shall provide at least 60 days written notice to the Board. The ASA

provider must provide notification in accordance with the provisions of the initial service agreement or contract.

(Ord. 92-02, passed 2-19-92)

**§ 90.54 MAINTENANCE OF LEVEL OF SERVICE.**

In the event that an ASA provider is unable to comply with the standards promulgated for the ASA by this Plan, the provider will notify the Board in writing of its inability to comply and identify which standards are involved. The Board will determine if other qualified providers are available for the ASA who can comply with the standards. If the Board determines no other qualified providers are available it will apply to the Division for a variance under ORS 682.285 for a variance from the standards so that continuous ambulance service may be maintained, by the existing provider, in the ASA.

(Ord. 92-02, passed 2-19-92)

**§ 90.60 TITLE AND AUTHORITY.**

(A) *Title.* This subchapter shall be known as the Ambulance Service Ordinance, and may be so cited and pled.

(B) *Authority.* This subchapter is enacted pursuant to ORS 682.205, 682.275 and ORS 203.035, Umatilla County Home Rule Charter, Chapter II, and other applicable law.

(Ord. 96-06, passed 4-3-96)

**§ 90.61 POLICY AND PURPOSE.**

The County Board of Commissioners finds:

(A) That ORS 682.205 requires the county to develop and adopt a plan for the county relating to the need for a coordination of emergency ambulance services and to establish Ambulance Service Areas (ASAs) consistent with the plan to provide efficient and effective emergency ambulance services.

(B) That this subchapter, which establishes an

ASA, methods for selecting an emergency ambulance provider for an ASA, and the Ambulance Service Area Advisory Committee, together with the document known as the Umatilla County Ambulance Service Area Plan (ASA Plan), make up the complete plan for emergency ambulance services for the county.

(C) That the provisions of ORS 221.485 and 221.495, 478.260(3), and 682.025 through 682.355 requires the county to develop and adopt a plan for emergency ambulance services that recognizes the authority of cities and rural fire protection districts to operate and regulate emergency ambulance services within their own territories subject to the ASA Plan. That the provision of effective and efficient emergency ambulance services pursuant to the county ASA Plan within cities and rural fire protection districts must be accomplished primarily on a cooperative basis. The county will employ formal sanctions and litigation to enforce the provisions of the county ASA Plan when voluntary compliance cannot be obtained.  
(Ord. 96-06, passed 4-3-96)

**§ 90.62 DEFINITIONS.**

(A) The words and phrases in this subchapter shall have the meaning provided in ORS Chapter 682 and O.A.R. Chapter 333, Divisions 250, 255, 260, and 265, unless specifically defined herein to have a different meaning.

(B) For the purpose of this subchapter, the following definitions shall apply unless the context clearly indicates or requires a different meaning.

**ADMINISTRATOR.** A person designated by order of the Board to administer this subchapter and the duly authorized deputy or assistant of such person.

**AMBULANCE SERVICE AREA (ASA).** A geographical area which is served by ambulance service provider(s), and may include all or a portion of a county, or all or portions of two or more contiguous counties.

**AMBULANCE SERVICE AREA ADVISORY COMMITTEE (COMMITTEE).** The committee that

will advise the Board as it pertains to the ASA Plan.

**BOARD.** The Umatilla County Board of Commissioners for Umatilla County, Oregon.

**FRANCHISE.** A franchise to provide emergency ambulance service issued by the Board pursuant to this subchapter.

**PERSONS.** Includes individuals, corporations, associations, firms, partnerships, joint stock companies, cities, rural fire protection districts, and special service districts formed and existing pursuant to Oregon Revised Statute.  
(Ord. 96-06, passed 4-3-96)

**§ 90.63 EXEMPTIONS.**

This subchapter shall not apply to:

(A) Ambulance services and ambulances owned or operated under the control of the United States Government;

(B) Vehicles and aircraft being used to render temporary assistance in the case of a major catastrophe or emergency with which the ambulance services of the surrounding locality are unable to cope, or when directed to be used to render temporary assistance by an official at the scene of an accident;

(C) Vehicles operated solely on private property or within the confines of institutional grounds, whether or not the incidental crossing of any public street, road or highway through the property or grounds is involved; and

(D) Ambulances or vehicles transporting patients from outside the county to a health care facility within the county, or which are passing through without a destination in the county.  
(Ord. 96-06, passed 4-3-96)

**§ 90.64 ADMINISTRATION.**

The administrator, under the supervision of the Board and with the assistance of the Committee, shall

be responsible for the administration of this subchapter. In order to carry out the duties imposed by this subchapter, the administrator, or persons authorized by the administrator, are hereby authorized to enter on the premises of any person regulated by this subchapter at reasonable times and in a reasonable manner to determine compliance with this subchapter and regulations promulgated pursuant thereto. The administrator shall also have access to records pertaining to ambulance service operations of any person regulated by this subchapter. These records shall be made available within five working days to the administrator at the person's place of business, or copies made and provided as requested by the administrator.

(Ord. 96-06, passed 4-3-96)

**§ 90.65 AMBULANCE SERVICE AREAS.**

For the efficient and effective provision of emergency ambulance services in accordance with the ASA Plan, the ASA shown in Appendix A, Map 1, and incorporated herein by this reference, are hereby adopted as the ASA for the county. The Board, after notice to the affected AsA provider and by the adoption of an order, may adjust the boundaries of an ASA from time to time as necessary to provide efficient and effective emergency ambulance services.

(Ord. 96-06, passed 4-3-96)

**§ 90.66 AMBULANCE SERVICE PROVIDERS REGULATED.**

Effective April 3, 1996, no person shall provide emergency ambulance services in the county unless such person is franchised in accordance with the applicable provisions of this subchapter.

(Ord. 96-06, passed 4-3-96)

**§ 90.67 APPLICATION FOR AMBULANCE SERVICE FRANCHISE.**

(A) Any person desiring to provide ambulance service within the county shall submit an application to be assigned an ASA within 30 days of the effective date of this subchapter. The application shall be

submitted to the Health Officer.

(B) Applications for franchises shall be on forms provided by the Board. In addition to information required on the forms, the Board may require additional information it deems necessary to insure compliance with this subchapter.

(C) The applicant shall provide the following information:

(1) The name and address of the person or agency applying.

(2) The ASA the person desires to serve, the location(s) from which ambulance services will be provided, and the level of service to be provided.

(3) A statement as to whether or not the person will subcontract for any service to be provided. If some service will be provided by subcontract, a copy of that subcontract shall be provided.

(4) A list of vehicles to be used in providing emergency ambulance services including year, make and model, and verification that each vehicle is licensed as a basic and/or advance life support ambulance by the Health Division.

(5) A statement that all equipment and supplies in each ambulance conforms to Health Division standards.

(6) A list of personnel to be used in providing emergency ambulance service and their current Emergency Medical Technician level and certificate number, or other appropriate certification.

(7) Proof of financial ability to operate, including an operating budget for public bodies or financial statement for private entities, references and/or statement of past ambulance service. Private companies must include a profit and loss statement in addition to the above materials. Other appropriate financial information, such as income, tax returns, or reports by governmental authorities shall also be submitted upon request. Public bodies must provide information regarding the sources and amounts of funding for emergency ambulance services.

(8) Proof of public liability insurance in the amount of not less than \$100,000 because of bodily injury to or death of one person to any one accident; subject to that limit for one person, \$300,000 because of bodily injury to or death of two or more persons in any one accident; \$20,000 because of injury to or destruction of the property of others in any one accident; and \$500,000 because of injury arising from the negligent provision of prehospital care to any individual. Applicants may be self-insured.

(9) A statement of experience in providing emergency ambulance service of a comparable quality and quantity to insure compliance with this subchapter, regulations promulgated thereunder, any franchise issued, and the ASA Plan.

(10) Proof of ability to comply with the terms and conditions of the ASA Plan and applicable county ordinances, in the form of a narrative summary.

(11) A description of any prepaid ambulance service plan, including number of members, number of years of operation, funding and term.

(12) Information, in the form of run logs, medical records, medical director correspondence, audit reports, training records, policy and procedure manuals and equipment records and inventories, and any other records or materials requested.

(13) In the case of an application to transfer or take over an already assigned franchise:

(a) A detailed summary of how the proposed change will improve emergency ambulance response time, and the quality and level of services to the ASA. It shall include an assessment of how the proposed change will impact the existing first response system.

(b) Evidence that the call volume in the ASA is sufficient to financially or otherwise justify the change in service.

(c) Information, in the form of run logs, medical records, medical director correspondence, audit reports, training records, policy

and procedure manuals and equipment records and inventories, and any other records or materials requested.

(D) The Board may from time to time, by order, adopt fees to defray the actual reasonable costs incurred by the county in processing applications, and adopt annual franchise fees to defray the reasonable costs of the county in administering this subchapter.

(E) The applications shall be reviewed by the Committee and shall recommend the assignment of the ASAs to the Board. The assignment of an ASA shall be made by an Order of the Board.  
(Ord. 96-06, passed 4-3-96)

#### **§ 90.68 EXISTING AMBULANCE SERVICE PROVIDERS.**

Unless there has been more than one application made for an ASA, the persons who meet the application requirements of § 90.67 and who were providing service on the effective date of this subchapter shall be franchised to provide emergency ambulance service for the ASA they were serving on the effective date of this subchapter.

(Ord. 96-06, passed 4-3-96)

#### **§ 90.69 REVIEW OF APPLICATION FOR FRANCHISE.**

(A) Applications shall be reviewed by the Committee, who shall make such investigation as it deems appropriate, and who may request assistance of other persons as necessary.

(B) The administrator shall notify the holder of a franchise for providing emergency ambulance service to an ASA of any applications by another person to take over that franchise.

(C) Unless the time is extended by the Board for good cause, the Committee shall make its recommendation to the Board to grant, deny, modify or attach appropriate conditions to the application. The Committee shall transmit its recommendation within 60 days after the application and any required

supplemental information has been received.  
(Ord. 96-06, passed 4-3-96)

**§ 90.70 BOARD ACTION ON APPLICATION FOR FRANCHISE.**

Upon receipt of the Committee's recommendation, the Board:

(A) Shall publish notice of its intent to hold a public hearing on the application and recommendations at least 10 days, but not later than 30 days following publication of notice.

(B) May require additional investigation by the Committee if it finds that there is insufficient information on which to base its action.

(C) Shall, upon the basis of the application, the Committee's recommendation, such other information as is permitted by this subchapter, and such information as is presented to the Board at the public hearing make an order granting, denying or modifying the application or attaching conditions thereto.

(D) Shall not make an order adverse to the applicant or to the holder of; or applicant for, another franchise effective less than 30 days after the date of such order and shall notify such persons in writing of the order. The Board may suspend operation of this subsection and enter an emergency order if it finds that there is an immediate and serious danger to the public or that a health hazard or public nuisance would be created by a delay.

(E) After the Board makes an order granting an emergency ambulance service franchise, with or without conditions, and the franchisee finds he/she is unable to provide a particular service, the Board may permit the franchisee to subcontract such service to another person if the Board finds that the quality and extent of the service would not be jeopardized. The Board may require the filing of such information as it deems necessary.

(Ord. 96-06, passed 4-3-96)

**§ 90.71 FRANCHISE TERMS AND RENEWALS.**

(A) The initial ambulance service franchise in an ASA shall be valid from the date of issuance until June 30, 1997.

(B) Thereafter, unless the Board finds that a longer or shorter term is required in the public interest, the term of an emergency ambulance service franchise shall be three years, beginning on July 1 of a year and ending June 30 three years later.

(C) Unless grounds exist for refusal to renew a franchise under provisions for suspension or revocation as set forth in § 90.74, or unless the franchise is to be given to a new person, franchises shall be renewable. Application for renewal shall be made on forms provided by the Board.

(D) Not more than 180 days and not less than 120 days prior to the expiration of the franchise, a franchisee wanting to renew the franchise and any person desiring to take over the franchise shall submit an application to the administrator.

(E) Review of all applications for renewal or take over of a franchise shall be conducted in the same manner as for an application pursuant to §§ 90.67, 90.69, and 90.70.

(Ord. 96-06, passed 4-3-96)

**§ 90.72 EARLY DISCONTINUANCE OF SERVICE BY FRANCHISEE.**

(A) If a franchisee discontinues service before the expiration of his/her franchise, the Board shall set a time by which applications must be submitted for a new franchise in the ASA.

(B) The Committee shall develop an interim plan for coverage of the ASA, using existing franchisees and/or other available resources until the ASA can be reassigned.

(C) The Board shall issue a temporary certificate, valid for a stated period not to exceed six months, entitling a person to provide emergency ambulance service in all or part of the ASA. The Board may renew a temporary certificate for one additional six month period.

(Ord. 96-06, passed 4-3-96)

### **§ 90.73 TRANSFER OF FRANCHISES.**

A franchisee may transfer his/her franchise to another person only upon written notice to and approval by the Board. Review of an application for transfer of a franchise shall be conducted in the same manner as for an application pursuant to §§ 90.67, 90.69, and 90.70.

(Ord. 96-06, passed 4-3-96)

### **§ 90.74 ENFORCEMENT OF FRANCHISE PROVISIONS.**

(A) (1) Subject to the policies stated in § 90.61, and in addition to the remedy provided in § 90.75, and penalties provided elsewhere in this subchapter, the administrator shall, upon reasonable cause, make an investigation to determine if there is sufficient reason and cause to suspend, modify, revoke or refuse to renew a franchise as provided in this division.

(2) If in the judgment of the Committee or Board, there is sufficient evidence to constitute a violation of applicable local, state or federal law, this subchapter, ORS Chapter 682 or the Rules promulgated thereunder, the ASA Plan, or if the franchisee has materially misrepresented facts or information given in the application for the franchise, the Board shall a notify the franchisee in writing, by certified mail, return receipt requested, or by personal service, as is provided by law for the service of a summons, of the violation and what steps he must take to cure the violation. The Board shall send a copy of the notice to the Committee.

(3) Ten days following the receipt of notice of violation, the Board may enter its order of revocation, modification, suspension or non-renewal, and may thereby revoke, modify, suspend, or not renew the franchise, unless prior thereto the franchisee shall file with the Board his request for a hearing on the Board's notice of violation. If said request is timely filed, or if the Board so moves on its own, revocation, modification, suspension, or non-renewal will be stayed until the Board can, at its earliest

convenience, hold a public hearing thereon. Notice of said hearing shall be given to the franchisee by mail and to all others by publication in a newspaper of general circulation in the county or the ASA at least ten days prior to such hearing. The burden of proof at the hearing held hereunder shall be upon the franchisee.

(B) In lieu of the suspension or revocation of the franchise, the Board may order that the violation be corrected and make the suspension or revocation contingent upon compliance with the order within the period of time stated therein. Notice of the Board action shall be provided by mail to the franchisee. The notice shall specify the violation, the action necessary to correct the violation, and the date by which the action must be taken. The franchisee shall notify the Board of the corrective action taken. If the franchisee fails to take corrective action within the time required, the Board shall notify the franchisee by certified mail, return receipt requested, or by personal service that the franchise is suspended or revoked upon service of the notice.

(C) Should the franchisee fail to comply with the Board's order, then the Board may take any steps authorized by law to enforce its order.

(Ord. 96-06, passed 4-3-96)

### **§ 90.75 PREVENTING INTERRUPTION OF SERVICE.**

Whenever the Board finds that the failure of service or threatened failure of service would adversely impact the health, safety or welfare of the residents of this county, the Board shall, after reasonable notice, but not less than 24 hours notice to the franchisee, hold a public hearing. Upon appropriate findings after the hearing, the Board shall have the right to authorize another franchisee or other person to provide services.

(Ord. 96-06, passed 4-3-96)

### **§ 90.76 APPEALS AND ABATEMENT.**

(A) All the decisions of the Board under this subchapter shall be reviewable by the Circuit Court of

the state for the county, only by way of writ of review.

(B) The provision of emergency ambulance service by any person in violation of this subchapter, or regulations promulgated thereunder, is a nuisance and the Court may, in addition to other remedies provided by law or by this subchapter, institute injunctive abatement or other appropriate legal proceedings to temporarily or permanently enjoin or abate such emergency ambulance service. (Ord. 96-06, passed 4-3-96)

**§ 90.77 DUTIES OF AMBULANCE SERVICE FRANCHISEE.**

(A) The franchisee shall conduct its operation in compliance with all applicable state and federal laws, rules and regulations, the terms of this subchapter and the county ASA Plan;

(B) The franchisee shall not fail or refuse to respond to an emergency call for service when ambulance is available for service;

(C) The franchisee shall not respond to a medical emergency located outside its assigned ASA except:

(1) When a request for specific emergency ambulance service is made by the person calling for the ambulance and the call dose not dictate an emergency response;

(2) When the franchisee assigned to the ASA is unavailable to respond and the franchisee is requested by another franchisee or 911 dispatch to respond; or

(3) When the response is for supplemental assistance or mutual aid.

(D) The franchisee shall not voluntarily discontinue service to his/her assigned ASA until he/she has:

(1) Given 60 days written notice to the administrator, or

(2) Obtained written approval of the Board.

(E) Division (D) above shall not apply to:

(1) Change, restriction or termination of service when required by any public agency, public body or court having jurisdiction; or

(2) Transfer of franchises pursuant to § 90.73. (Ord. 96-06, passed 4-3-96)

**§ 90.78 AMBULANCE SERVICE AREA (ASA) ADVISORY COMMITTEE.**

(A) There is hereby created an Ambulance Service Area (ASA) Advisory Committee.

(1) The Committee shall consist of 14 members:

(a) County Health Officer - 1;

(b) 911 Coordinator - 1;

(c) Ambulance service providers - 2;

(d) Fire Department Representative -

1;

(e) Emergency Physician - 1;

(f) Hospital Administrator - 1;

(g) Medical Director (one from each ASA) - 5; and

(h) Public members - 2.

(2) The administrator and other county staff as the Board deems appropriate shall be ex-officio members of the Committee.

(B) Members shall be appointed by and serve at the pleasure of the Board. The Board may appoint additional persons to the Committee to serve as ex-officio members or advisors. The Board may appoint or approve designation of alternates to serve in

the absence of persons appointed to the Committee.

(C) Except for the ASA administrator and other county staff appointments shall be for staggered terms on the initial Committee for a term not to exceed three years. Subsequent appointments shall be for two year terms. Members shall serve until their successors are appointed and qualified. Vacancies shall be filled by the Board for the balance of the unexpired term. Persons may be appointed to successive terms.

(D) The Committee shall elect a chairperson. The Committee shall meet at such times as it deems necessary or as called by the Administrator or the Board. The chairperson or any two members of the Committee may call a special meeting with five days notice to other members of the Committee; provided however, that members may waive such notice.

(E) Eight members constitute a quorum for the transaction of business. A majority vote of those present and voting is required to pass motions.

(F) In addition to other duties prescribed by this subchapter the Committee shall:

(1) Review and make recommendations to the administrator regarding the selection criteria for determining a franchise to provide ambulance service.

(2) Regularly provide information to the Board from prehospital care consumers, providers and the medical community.

(3) Periodically review the ASA Plan and make recommendations to the Board including, but not limited to:

(a) Review the standards established in the Plan and make recommendations regarding improvement of or new standards as required by O.A.R. 333-260-0050;

(b) Monitor the coordination between emergency medical service resources;

(c) Review dispatch procedures and compliance; and

(d) Review the effectiveness and

efficiency of the ASA boundaries.

(4) Implement the quality assurance program outlined in the ASA Plan to insure compliance with the ASA Plan.

(5) Perform such other duties as directed by the Board.

(F) Committee members shall avoid acting in any matters where a conflict of interest may arise. Any Committee member having a direct or indirect financial or pecuniary interest in any matter before the Committee for consideration shall withdraw from participation in any action by the Committee in said matter. Nothing in this section shall limit the ability of any person to provide testimony to the Committee. (Ord. 96-06, passed 4-3-96)

#### **§ 90.79 REGULATIONS OF AMBULANCE SERVICE.**

Upon its own motion or upon a recommendation of the Committee, the Board may adopt ordinances, resolutions or orders regulating emergency ambulance service or implementing this subchapter. Such regulations shall not conflict with ORS 682 and rules promulgated pursuant thereto.

(Ord. 96-06, passed 4-3-96)

#### **§ 90.80 INITIAL RESPONDER.**

Nothing in these provisions prohibits a 911 agency, responsible for the dispatching of emergency services, from dispatching an initial responder to the scene of a medical emergency in addition to dispatching an emergency ambulance service provider.

(Ord. 96-06, passed 4-3-96)

#### **§ 90.81 SEVERABILITY; AMENDMENT**

(A) Any judgment or declaration by any court of competent jurisdiction that any portion of this subchapter is unconstitutional or invalid shall not invalidate any other portion of this subchapter.

(B) Upon recommendation of the Committee or upon its own motion, the Board may from time to time amend the provisions of this subchapter. Amendments shall be made only after a public hearing before the Board with such advance notice of the hearing as deemed appropriate by the Board or as generally provided by ordinance, regulation or order of the Board.

(Ord. 96-06, passed 4-3-96)

**§ 90.99 PENALTY.**

(A) Any person who violates any provisions of this chapter is guilty of a violation. Failure from day-to-day to comply with the terms of this chapter shall be a separate offense for each such day. Failure to comply with any provision of this chapter shall be a separate a offense for each such provision.

(B) Violations of the provisions of this chapter are punishable, upon conviction, by a fine of not more than \$500 per day per violation.

(C) In addition to the penalties provided above, violations of any of the provisions of this chapter is declared to be a nuisance and may be regarded as such in all actions, suits, or proceedings.

(Ord. 92-02, passed 2-19-92)

(D) Any person who violates any of the provisions of §§ 90.60 through 90.81 is guilty of a violation. Failure from day to day to comply with the terms of these provisions shall be a separate offense for each day. Failure to comply with any provision shall be a separate offense for each such provision.

(E) Violations of the provisions of §§ 90.60 through 90.81 are punishable, upon conviction, by a fine of not more than \$500 for a non-continuing offense, i.e., an offense not spanning two or more consecutive calendar days. In the case of a continuing offense, i.e., an offense which spans two or more consecutive calendar days, violation of the provisions is punishable by a fine of not more than \$500 per day up to a maximum of \$1,000 as provided by law.

(Ord. 96-06, passed 4-3-96)

**APPENDIX A: MAPS**

Map

1. Ambulance service areas
2. 911 service areas
3. Fire protection districts
4. Incorporated cities
5. Ambulance service area response times

(Ord. 92-02, passed 2-19-92; Ord. 2002-11, passed 12-18-2002)

**APPENDIX B: SAMPLE MUTUAL AID AGREEMENT**

UMATILLA COUNTY  
AMBULANCE SERVICE AREA  
MUTUAL AID AGREEMENT

WHEREAS the Parties hereto maintain and operate Emergency Medical Services for the purpose of necessary lifesaving services within their respective service areas; and

WHEREAS the parties recognize the possibility that numerous medical responses and/or disaster conditions in one Party's area could create insufficient resources to allow for effective operation of Emergency Medical Services in that area; and to accommodate those times when one Party is in need of emergency assistance; and

WHEREAS the parties recognize that one Party may be more advantageously placed to provide effective Emergency Medical Services in the other Party's service area due to distance, road, or weather conditions;

NOW THEREFORE, it is agreed as follows:

1. Both parties agree to furnish personnel and equipment to the other Party when requested by competent authority, provided assisting Party has available adequate personnel and equipment to reasonably provide assistance,
2. The Parties agree to maintain compatible radio communication capabilities with each other.
3. It is mutually agreed and understood that this agreement shall not relieve either Party of the responsibility for Emergency Medical Services within its own district, nor does this agreement create any right in, or obligation to, third parties by either Party which would not exist in the absence of this agreement. It is the intent of this agreement to provide reasonable assistance only, and not primary responsibility.

4. It is agreed that this agreement for mutual aid shall constitute the sole consideration for the performance hereof and that neither Party shall be obligated to reimburse that other for use of equipment or personnel. During the course of rendering aid, the personnel and equipment of each party shall be at risk of that Party. Each Party shall protect its personnel performing under this agreement by adequate workman's compensation insurance. Each Party shall obtain and maintain in full force and effect adequate public liability and property damage insurance to cover claims for injury to persons or damage to property arising from such Party's performance of this agreement, and all right and subrogation right against each other, and against the agents and employees of each other for liability and damages covered, unless to do so would void such insurance coverage.
5. This agreement shall be and remain in full force and effect from and after the date of execution set opposite the signature of each Party until terminated or modified. This agreement may be modified at any time by mutual consent of the Parties, and terminated by Party upon reasonable notice.
6. In the event of a Presidential Disaster Declaration, or the Conflagration Act being invoked, this agreement shall not preclude or bar providers from claim for, or collection of; any type of reimbursement, payment, or restitution.

IN WITNESS WHEREOF, the Parties have caused this agreement to be executed on the day set opposite the respective signature of each; said execution having been heretofore first authorized in accordance with law.

Signature	Title	Date

Signature Title Date

(Ord. 92-02, passed 2-19-92)

