AGREEMENT

THIS AGREEMENT made and entered into this <u>3rd</u> day of <u>September</u>, 1975 between the CITY OF JACKSONVILLE, a municipal corporation in Duval County. Florida, hereinafter referred to as "Jacksonville," and NASSAU COUNTY, a political subdivision of the State of Florida, hereinafter referred to as "Contractor."

WITNESSETH:

WHEREAS the City of Jacksonville has negotiated and received a grant from the United States of America, which is designated as 04-H-001041-01-0, and

WHEREAS the City of Jacksonville in said grant has agreed to continue overall management of a model system of emergency medical services which is the Eight County Emergency Medical Service System, a part of a comprehensive health care delivery system, hereinafter referred to as "Project," and

WHEREAS NASSAU County, Florida, is desirous of participating in the continuation of the aforementioned model emergency medical services system with the City of Jacksonville and is desirous of operating this system throughout its geographical boundaries.

NOW THEREFORE, the parties hereto agree as follows:

ARTICLE I - DESCRIPTION OF WORK. It shall be the responsibility of the City of Jacksonville, pursuant to HEW Grant # 04-H-001041-01-0 to continue overall direction of the total system of emergency medical services which will demonstrate that existing technology and management can be applied to operate a coordinated improved emergency medical services effort. The City of Jacksonville shall identify, develop, and test measures of effectiveness of such an emergency medical services system, its subsystems, and component parts. The system will continue to demonstrate a system approach to handling the full spectrum of physical, mental and psychological emergencies. The City of Jacksonville shall assist in the development of autonomicus local emergency medical management committee and shall assist in conducting suitable analyses and evaluation procedures to improve the performance of the Eight County emergency medical services system.

Contractor supports the concept of this Project and agrees to participate and lend its support in the accomplishment of the aforementioned goals as hereinafter provided.

<u>ARTICLE II - PERIOD OF PERFORMANCE</u>. The period of performance for the completion of the work as described in Article I hereof shall commence upon the execution of this Agreement and shall terminate on June 30, 1976.

<u>ARTICLE III - DESIGNATION OF PROJECT EXECUTIVE DIRECTOR</u>. The Project Executive Director shall provide direct supervision of the Project and coordinate the efforts of the participating counties and other agencies in the Project.

<u>ARTICLE IV - DESIGNATION OF PROJECT MANAGER UNDER FEDERAL GRANT</u> <u>04-H-001041-01-0</u>. The Project Manager who shall supervise the overall work and services performed pursuant to Federal Grant shall be John M. Waters. Review and approval of the work hereunder shall be performed by the Project Manager or his duly authorized representative.

ARTICLE V - PROJECT MANAGEMENT. Contractor will participate in the management of the local system through the appointment of an Emergency Medical Management Committee. Minimum membership of said committee shall include hospital administrator, physician associated with hospital emergency room functions, sheriff, representative from ambulance operator, county commissioner, city fire chief.

In addition the contractor shall appoint or have appointed from the above management committee a committee coordinator. Said coordinator to be paid from funds provided contractor by the project; will serve as a point of contact between Project Director and committee members, and will be responsible for keeping records of committee meeting and activities.

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ARTICLE VI - REPORTS. Contractor shall submit to Jacksonville reports concerning such aspects of the Project as may from time to time he required and requested by the Project Executive Director.

<u>ARTICLE VII -- ESTIMATED REIMBURSABLE COST</u>. It is estimated that the total cost to be reimbursed to the Contractor by Jacksonville for services provided pursuant to this Agreement shall be the sum of \$2,400.00 and Contractor agrees to use its best efforts to perform the work and services and all obligations under this Agreement within such estimated cost.

<u>ARTICLE VIII - LIMITATION OF FUNDS</u>. The City of Jacksonville shall not be liable to Contractor for reimbursement of cost incurred in excess of the estimated reimbursable cost as defined in Article VII above.

ARTICLE IX - FUNDING. Contractor shall maintain books, records, documents, and other evidence pertaining to the costs and expenses of this Project to the extent, and in such detail, as will properly reflect all net costs, direct costs, labor, materials, equipment supplies and services, and all other costs and expenses of whatever nature which will be used for evaluating system effectiveness.

Funding of the Project will be of a cost reimbursable nature and requests for reimbursement for committee coordinator services will be filed on forms or format provided by the Project staff.

ARTICLE X - PROJECT OPERATION. A data system including ambulance run reports, emergency room reports, hospital records, and autopsy results will be used in evaluating the performance of the Project. Data will be collected on response time, and on quality control inspections of facilities and operations. Contractor agrees to participate and comparate fully in evaluating the performance of the Project and will enfeavor to insure that all personnel and activities participating in this Project within Contractor's county will also aid in the evaluation of the performance of the Project.

Coordination of training and training facilities to be used in support of the system will be provided by Contractor at no cost to the Project. ARTICLE XI - INDIGENT CARE. Contractor agrees to pay the University Hospital, Jacksonville, for emergency medical services received by indigent residents of contractor's county evacuated by Eight County EMS rescue vehicles to University Hospital during the term of the Project as defined in Article I.

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ARTICLE XII - EMERGENCY ROOM OPERATION. Contractor will maintain Category IV Emergency Department Services as defined by the American Medical Association. Standards for Category IV Emergency Department Service are attached hereto as Annex 1, and by this reference made a part hereof. Participating hospitals shall provide on-the-job training for emergency medical technicians not based in local hospitals as may be feasible.

ARTICLE XIII - AMBULANCE SERVICE. Contractor agrees that the following operating standards for ambulance service provided within the Project will be enforced and applied in its county:

- (a) Emergency personnel availability and service shall be maintained on a twenty-four hours a day basis.
- (b) Operators and attendants shall meet Standards and Requirements of the 1973 Florida Emergency Medical Services Act, and emergency rescue vehicles will be equipped and maintained in accordance with Florida Division of Health Emergency Medical Services Rules and Regulations (Annex 2).
- (c) Emergency medical technicians must possess thorough knowledge of the territory within their individual service areas and the health and traffic ordinance and laws concerning the emergency care and transportation of the sick and injured.
- (d) Emergency medical technicians must possess the necessary driver's license and professional license or certification as required by law.
- (e) The primary emergency vehicles shall not be utilized for routine non-emergency invalid transportation.
- (f) Emergency equipment and supplies in emergency vehicles shall be maintained to meet minimal equipment requirements of the Broject. Minimal equipment requirements of the Project shall be table as set out in Annex 3 to this Agreement.

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In addition to the foregoing standards of operation, Contractor agrees also that ambulance run reports shall be maintained and submitted periodically as required by the Project staff and financial records of ambulance and personnel operations will be available for examination by the Project staff representatives. Ambulance operators are responsible for maintenance of emergency vehicles and they shall comply with county ordinances or state law regulating ambulance service. In the event an emergency vehicle is assigned to Contractor's county is inoperable for an extended period of time, then the Project staff will provide for the temporary loan of another emergency vehicle, when available. Contractor shall maintain custody of any ambulance furnished under the Project, during the term of this agreement.

ARTICLE XIV - COMMUNICATIONS SERVICE. Contractor shall maintain a central dispatcher on a twenty-four hours a day basis and shall maintain dispatch records as required by the Project staff. Contractor shall provide maintenance for all radios furnished by the Project and maintain custody of communications equipment furnished by the Project during the terms of this agreement. The Project staff will continue to fund a single emergency telephone number for all participating counties and will also fund during the period of this agreement a private line, automatic ring down circuit from Jacksonville Fire Control Center to the ambulance dispatcher in each county. The Contractor shall provide a single medical emergency number.

ARTICLE XV - ADMINISTRATION OF GOVERNMENT-OWNED PROPERTY. Contractor shall maintain an inventory of Project government-owned equipment and sight subject equipment each six (6) months after the date of execution of this Agreement. The status of the inventory shall be submitted to the Project staff upon completion of sight inventory.

Contractor agrees to provide storage facilities, including proper identification and protection, for all Project government-owned equipment upon completion of this Agreement until disposal instructions are provided without cost to Jacksonville or the United States Government. Such disposition instructions shall be provided Contractor not later than sixty (60)

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days after the completion of this Agreement.

ARTICLE XVI - EQUAL OPPORTUNITY. During the performance of this Agreement, Contractor agrees that it will not discriminate against any employee or applicant for employment because of race, creed, color, sex or national origin. Contractor will take affirmative action to insure that applicants are employed and that employees are treated during employment without regard to their race, creed, color, sex or national origin. Such action shall include, but not be limited to, the following: Employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship.

ARTICLE XVII - INSURANCE. Contractor represents and warrants that it is now maintaining with responsible insurance carriers (1) adequate insurance against liability on account of damage to persons or property arising from occurrences involving personnel, equipment, or governmentowned property being utilized for Project purposes; and (2) adequate insurance under all applicable Workmen's Compensation Laws. Contractor agrees that, until ownership of government equipment has been transferred to the Contractor he will maintain the aforementioned insurance and will maintain adequate insurance on any materials, supplies, equipment and other government furnished equipment provided for purposes of this Agreement, and will furnish such certificates with respect to insurance as the Project Executive Director may from time to time require.

ARTICLE XVIII - MODIFICATION. This Agreement may be modified upon mutual consent of the parties hereto from time to time as may be necessary to comply with any change in the Grant Agreement # 04-H-001041-01-0 or any other requirement of the Department of Health, Education, and Welfare.

ARTITLE XVIV - PAYMENTS TO BE MADE. It is expressly understood between the parties to this Agreement that all funds to be utilized for the implementation and operation of the Project shall be federal funds made available pursuant to Federal Grant 04-H-001041-01-0. In the event that Federal funds become unavailable, then Jacksonville shall be under no

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obligation to provide continued funding to Contractor pursuant to this Agreement.

IN WITNESS WHEREOF, the parties hereto have duly executed this Agreement the day and year first above written.

ATTEST:

By Secretary

(SEAL)

ATTEST:

By Clerk of Circuit çoart, Ex-Officio Secretary of the Board

(SEAL)

CITY OF JACKSONVILLE By Mayor

COUNTY

Acting by and through its Board of County Commissioners

Chairman lac

In compliance with the Charter of the City of Jacksonville, I do certify that there is an unexpended, unencumbered and unimpounded balance in the appropriation sufficient to cover the foregoing contract and provision has been made for the payment of the moneys provided therein to be paid.

of Finance My ctor CULTRACT 3855-1

FORM APPROVED

ASSISTANT COUNSEL

CATEGORY IV EMERGENCY DEPARTMENT SERVICES

SCOPE OF CAPABILITIES

The hospital shall be equipped, prepared, and adequately staffed to render emergency resuscitative and life-support medical services for patients of all ages. Transfer when necessary shall be under prior agreement with other hospitals.

EMERGENCY DEPARTMENT

Essential Staff

A designated physician shall be on-call from in-house or outside the hospital 24 hours a day. The department shall be staffed by a registered nurse or a licensed practical nurse, who shall be on-call inhour 24 hours each day, and other allied health personnel. All must be trained in emergency lifesaving procedures.

Essential Capabilities and Equipment

The emergency department shall be equipped with surgical equipment, airway control and ventilation equipment, suction devices, gastric lavage equipment, intravenous fluids, and drugs and supplies. Electrocardiograph-defibrillator shall be readily available for use in the emergency department.

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Essential Staff

A designated physician shall be on-call from in-hour or outside the hospital 24 hours a day. Additional members of the medical staff shall be available at all times as needed. All must be trained in emergency life-saving procedures.

Blood Bank

Blood shall be readily available from an established blood bank or from local donors on roster.

Laboratory Services

The laboratory services shall be capable of performing analyses of blood gases, pII, and electrolyte determinations, and staffed by a technician in-hospital or on-call 24 hours a day from outside the hospital.

Radiological Services

The radiological services shall be staffed by a technician in-house or on-call 24 hours a day from outside the hospital.

Operating Room(s)

An operating room shall be continuously ready for surgery utilizing operating room and anesthesia personnel on-call 24 hours a day from outside the hospital.

Communications Equipment

Communications equipment shall be available and operating for in-hospital coordination. In addition, direct two-way radio service available between hospital, ambulances, and other appropriate emergency service personnel is required.

RULES

OF

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DEPARIMENT OF HEALTH AND REPABILITATIVE SERVICES

DIVISION OF HEALTH

CHAPTER 10D-65

EMERGENCY MEDICAL SERVICES RULES AND REGULATIONS

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OF

DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

DIVISION OF HEALTH

CHAPTER 10D-66

EMERGENCY MEDICAL SERVICES RULES AND REGULATIONS

10D-66.01 PURPOSE

These regulations are issued under provision of Florida's EMS Act of 1973 for the purpose of improving the quality of emergency medical care to citizens of this State when and as they require the services of ambulances. Further, it is the purpose of these regulations to promote the policy of the State to save lives and speed the healing of persons injured in accidents or otherwise in need of medical services by providing an emergency care system that will bring the injured or sick person under the care of persons properly trained to care for the injured or sick in the shortest practical time, and that will provide safe transportation for the injured or sick person.

General Authority Section 15, Chapter 73-126, Laws of Florida; Law Implemented Chapter 73-126, (2), (21), (15).

10D-66.02 SANITATION AND MAINTENANCE - Effective January 1, 1974

(1) Each ambulance service shall have adequate office space and sleeping quarters for personnel, in accordance with requirements of the Occupational Safety and Health Act.

(2) All branch places of business of each ambulance service shall meet the requirements of this chapter.

(3) All ambulance services shall have a telephone to accept calls from the public which shall be answered on a twenty-four hour basis; two way voice contact must be established with the ambulance crew, and the ambulance must be dispatched on each call as rapidly as possible.

(4) The ambulance service shall be responsible for the supervision, preparation, filing and maintenance of records. This responsibility may be delegated to a member of his staff. Provisions shall be made for the safe storage of records. This shall mean that records are handled in such a manner as to insure reasonable safety from water and fire damage and are

safeguarded from unauthorized use. Records of ambulance service operation shall be maintained and preserved by the ambulance service operator for a period of not less than 24 months. When an ambulance service operator ceases to exist, records shall be disposed of as directed by the Division of Health. Ambulance service records shall be indexed and filed for ready access. Ambulance Services Response and Data Records and other records maintained by the ambulance service operator as required by these Rules and Regulations shall be accessible to representatives of the Division of Health. Each ambulance service operator shall maintain the following administrative records:

(a) Current personnel records of each ambulance service employee which shall include date of employment, records of training, qualifications, and license held by the employee.

(b) Vehicle records on each ambulance or other emergency vehicle operated to include preventive maintenance records, vehicle registration records and records of safety inspections.

(5) The ambulance service operator shall maintain on a form satisfactory to the Division of Health, a record of each ambulance service activity and make available a copy to the Division of Health upon request. This Response Data Record shall include, as a minimum, the following information:

(a) Critical times including time of call, time of arrival at scene, time of departure from scene, time of arrival at hospital, and time back in service.

(b) Location of call.

(c) Injury characteristics.

(d) Treatment rendered at scene and en route to hospital.

(6) Not less than once each year, the ambulance service operator shall submit on such form as may be prescribed by the Division of Health an annual report. The annual report shall include, as a minimum, the following information:

a) Name of location of each ambulance station operated by the ambulance service operator.

(b) Number and characteristics of each ambulance operated.

(c) Communications equipment and copubilities.

(d) Number of ambultance service calls since last reporting

period, and number of calls classified as "emergency runs".

(:) Ambulance personnel and their classification.

(f) Training received by each individual during the past year.

(7) Every ambulance service shall keep a trip report upon which shall be recorded the time, place of origin, destination and charges for each trip made and such other operating and patient information as may be required by the Division. Every ambulance service shall retain and preserve all daily manifests for at least two (2) years and such manifests shall be available for inspection by the Division upon request.

(3) The interior of the ambulance and the equipment within the ambulance shall be sanitary and maintained in good working order at all times.

(9) Equipment shall be of smooth and easily cleanable construction.

(10) Freshly laundered linen or disposable sheets and pillow cases shall be used in transporting of patients. Linen will be changed after each use.

(11) Adequate and clean enclosed storage for linen, disposable sheets, pillow cases, etc. shall be provided on each ambulance.

(12) Adequate first aid supplies will be stored in a clean container, free from dust, insects and rodents. A separate, portable, first aid kit with adequate supplies, for outside use is required.

(13) Pillows and mattresses shall be kept clean and in good repair. Protective covers shall be provided.

(14) Covered containers and/or compartments shall be provided for soiled supplies.

(15) Ambulance interior shall be cleaned after each use and disinfected on all contact surfaces, as approved by the Division of Health.

(16) Exterior surfaces of the ambulance shall be cleaned routinely, and as needed.

(17) Blankets used in any ambulance shall be washed at reasonable interrais, and as needed.

If Implements inserted into the patient's nose or mouth should be single-service, wrapped, and properly stored and handled. When multipleuse items are used, they shall be sanitized in a manner approved by the Invision or mealth.

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(19) When an ambulance has been utilized to transport a patient known, to the owner of the ambulance service or his agents, to have a communicable disease other than a common cold, the vehicle shall be cleansed throughly and disinfected as approved by the Division of Health. The ambulance service must provide each ambulance crew with written instructions for disinfecting the ambulance and disposing of contaminated linen.

(20) All storage spaces used for storage of linen, disposable sheets, pillow cases, or their equivalent; also equipment, first aid supplies and other supplies, at base stations or in ambulances shall be kept clean. These storage spaces shall be so constructed to permit thorough cleaning.

(21) All lights must function properly.

(22) Emergency audible warning devices must function in the way which they were designed to function.

(23) Body must be free from dents and rust, to the extent that there is no interference with or question of safety in operation.

(24) All equipment in the patient compartment must be adequately secured.

(25) Oxygen tanks must bear a current static pressure date and must be refilled after use as soon as possible.

(26) Ambulances must, at all times, meet state motor vehicle standards, including sufficient tire tread, braking adequacy and other safety requirements.

(27) Patient compartment must be free of safety hazards.

(28) Vehicle must carry spare tire and equipment to change flat or unserviceable tire; spare tire must be serviceable.

(29) Stored in the vehicle must be spare fan belts, appropriate tools to change it, acceptable tow chain, and battery jumper cables. An acceptable alternative to this requirement and statement #28 will be a plan for provision of an immediately available service vehicle.

(39) All doors leading into passenger compartment must open properly, and close securely with all handles working.

(31. Findows and windshield must be clean and free of cracks.

(32 - Lear view mirrors must be free of cracks and blemishes.

(33) leat belts must be in place and in usable condition.

(34) Holila Intensive Care Unit: Each ambulance which is origo 'ly equipped, or olds equipment to an "in use" ambulance which will serve as a Mobile Intensive Care Unit, must be inspected and licensed as that

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"Mobile Intensive Care Ambulance". Specialized medical equipment and telemetry must meet the standards as prescribed by the <u>Committee on</u> <u>Cardiopulmonary Resuscitation</u>, American Heart Association. An additional course in cardiopulmonary resuscitation must be successfully completed by qualified EMT (State Registry) personnel. These physician trained technicians will be required to be professionally proficient in the use of this Intensive Care equipment, including telemetry. At least two (2) qualified CPR technicians will man each Mobile Intensive Care Ambulance.

(35) Pediatric Intensive Care Unit: Each ambulance which is originally equipped, or adds equipment to an "in use" ambulance which will serve as a specialized vehicle for transportation and care of pediatric cases, must be licensed and inspected as that "Mobile Intensive Care Ambulance". Proper equipment must be contained on these vehicles and the personnel mamning these vehicles must possess the adequate specialized training in addition to the required training for attendants, that will permit adequate care for these pediatric patients.

(36) Every ambulance run must have two (2) ambulance personnel. If a patient is not being transported, only a driver is required.

(37) Back-up ambulances, when used, must possess the required equipment, trained personnel, and other requirements.

(38) Military ambulances are excluded from the requirements of this Act.

(39) Every operator shall carry bodily injury and property damage insurance with solvent and responsible insurers authorized to transact business in the State of Florida, to secure payment for any loss or damage resulting from any occurrence arising out of or caused by the operation or use of any of the operator's motor vehicles. Each vehicle shall be insured for the sum of at least one hundred thousand dollars (\$100,000.00) for injuries to or death of any one person arising out of any one accident and the sum of at least three hundred thousand dollars (\$300,000.00) for injuries to or death of more than one person in any one accident, and for the sum of at least fifty thousand dollars (\$50,000.00) for damage to property arising from any one accident. Every insurance policy or contract for such insurance shall provide for the payment and satisfaction of any finant. Judgment entered against the operator and present insured, or any person driving we insured vehicle. Such insurance shall be obtained

and certificate or certified copies of such policies shall be filed with the Division of Health. All such insurance policies, certificates thereof or certified copies of such insurance policies shall provide for a thirty (30) day cancellation notice to the Division of Health.

(40) Accident reports: Each ambulance shall report to the Division of Health any accident resulting in personal injury or damages exceeding \$100.00, which was or may have been connected with or due to the operation of its or his property, as soon as may be reasonably possible after the occurrence of such accident. If such notice is given otherwise than in writing, it shall be confirmed in writing within five days after the occurrence of such accident. Failure to comply with this requirement may result in revocation of ambulance service's license. General Authority Section 15, Chapter 73-126, Laws of Florida; Law Implemented Chapter 73-126 (15).

10D-66.03 ATTENDANT AND DRIVER TRAINING QUALIFICATION

(1) An applicant for an emergency medical technician's certificate must:

(a) Have successfully completed the Division of Health approved emergency medical technician's training program of at least eighty (80) hours, or the equivalent approved by the Division, and be on the Florida Registry of Emergency Medical Technicians. Registry candidates must be at least 18 years of age. Current Standard Red Cross First Aid Training is a prerequisite to admission to the EMT Course.

(b) Successfully complete any appropriate refresher training as required by the Division.

(c) Be free from addiction to alcohol or any drug.

(d) Be free from any physical or mental defect or disease which might impair the applicant's ability to attend an ambulance.

(e) Pay \$15.00 original application fee and \$10.00 for each renewal.

(f) If there is only one EMT ambulance attendant on the ambulance, then this attendant must be in the patient compartment when patients are being transported.

(2) An applicant for an emergency ambulance driver's certificar whit meet all standards required of an emergency medical technician wheelt the eighty (80) hour training required in Section (a) above, and in addition:

(a) Must possess a current Standard Red Cross First Aid Certificate.(It is highly recommended that drivers complete additional training.)

(b) Must have completed, when applicable, within the past two (2) years a defensive driving course (DDC) or a flight safety or water vehicle operator's safety course approved by the Division. Where available, an EVOC course should be completed en lieu of a DDC.

(c) Must hold Federal Aviation Administration instrument flight reference rating or marine certificate if applicable.

(d) Re-examination of attendants and drivers may be requested for cause at any time.

(3) A combination driver/attendant certificate may be issued for \$15.00, provided the applicant possesses all requirements for driver and attendant. General Authority Section 15, Chapter 73-126, Laws of Florida; Law Implemented Chapter 73-126 (7), (11), (15).

10D-66.04 EQUIPMENT, SUPPLIES AND COMMUNICATIONS - Effective July 1, 1974

(1) Required equipment for ambulances shall consist of all items contained in the current listing of "Essential Equipment for Ambulances" published by the American College of Surgeons, May 1970 Bulletin; except that those items requiring physician approval for use need not be carried unless such physician approval is obtained. The number of items required is specified opposite each item.

(2) Large and pocket size flashlights must be carried on ambulances.

(3) A scoop type stretcher must be carried on ambulances.

(4) An ABC 4 Ih fire extinguisher must be carried in ambulances.

(5) All ambulances must possess operating capability of direct radio communication with their headquarters and with the major hospitals within their area of operation.

Ceneral Authority Section 15, Chapter 73-126, Laws of Florida: Law Implemented Chapter 73-126 (11), (15).

10D-fo.15 VEHICLE DESIGN AND CONSTRUCTION - Effective January 1, 1976

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(1) It is recognized that regulations for vehicle design and construction do not become effective until January 1, 1976; however, it is highly renormended that the purchase of all new ambulances prior to that time equal or exceed the recommendations of the U.S. Department of Transportation pertaining to vehicle design and construction. Attachment #1, published by the National Highway Traffic Safety Administration, pertaining to ambulance design should be used as a guide. (Note: Ambulance flashing lights should be red - not blue.)

General Authority Section 15, Chapter 73-126, Laws of Florida; Law Implemented Chapter 73-126 (11), (15).

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AMBULANCE DESIGN CRITERIA

The design criteria set forth herein are to be used as guidelines until January 1, 1976, when they shall become mandatory.

The ambulance is defined as a vehicle for emergency care which provides a separate driver compartment, and patient compartment which can accommodate at least one emergency medical technician and two litter patients so positioned that at least one patient can be given intensive life-support during transit; which carries equipment and supplies.for optimal emergency care at the scene as well as during transport, for two-way radio communication, for safeguarding personnel and patients under hazardous conditions, and for light rescue procedures; and which is designed and constructed to afford maximum safety and comfort, and to avoid aggravation of the patients' condition, exposure to complications, and threat to survival.

- The patient compartment should be designed primarily for medical care in transit, including external cardiac compression and should be unencumbered by equipment not essential to patient care.
- 2. Regardless of local circumstances which may influence the extent to which optional equipment may be employed, the manufacturer's product should be sufficiently standardized

Attachment #1

to provide the space not only for required installed and portable equipment and supplies, but also for optional items now available and for adaptation to more advanced equipment that will become available.

- 3. Principal environmental requirements for medical care include sustained environmental control and ventilation that minimize contamination from outside air.
- 4. Communications requirements include two-way radio and public address.
- The vehicle shall meet state safety standards.
 Criteria incorporated in this guideline are based on those.

contained in the current issue of the United States Department of Transportation publication, <u>Ambulance Design Criteria</u> (February 1970). PHYSICAL CHARACTERISTICS

Length

The limitations of overall length of the vehicle are those imposed by the area in which it is to be used; however, for ease of maneuvering it should not exceed 22 feet over bumpers.

Width

The overall width of the vehicle shall not exceed 96 inches. Height

The overall height of the vehicle with equipment, but minus patients and technicians shall not exceed 115 inches, including roof mounted equipment.

Ground Clearances

The lowest part of the vehicle when loaded to rated load condition shall be a minimum of 8 inches.

• In areas where off-highway travel is anticipated, it may be necessary to consider higher ground clearances. AMBULANCE BODY DIMENSIONS Inside Length of Patient Compartment

The compartment length shall provide a minimum of 25 inches clear space at the head and 15 inches at the foot of a 76 inch litter. 116 inches is considered the minimum length for a patient compartment. Inside Width of Patient Compartment

The compartment shall provide space for the technician to perform external cardiac compression on one of the patients when the technician is in a right angle, kneeling position to the side of the patient, with 25 inches of free unobstructed space for lower legs and feet.

Inside Height of Patient Compartment

Inside height of patient compartment shall be a minimum dimension of 54 inches, floor to ceiling, throughout the entire compartment.

Driver's Compartment

Driver's compartment shall be of sufficient size to accomodate the 5 percentile to 95 percentile male driver with space to perform driving and control activities. It should also provide space for one seat to the right of the driver. There shall be a door on each side of the vehicle in the driver's compartment. <u>Full Width Partition</u>

A bulkhead or partition shall be provided between the driver and patient compartments. This shall incorporate a sliding shatterproof glass panel for visual check of conditions in the patients compartment by the driver. There shall be a means of voice communication between the driver and the technician. The visual aspects must be capable of being shielded to prevent light in the patient compartment producing glare that would interfere with the driver's forward vision.

Vehicle Color - Exterior

The color of the exterior surface of the vehicle shall be basically white in combination with Omaha orange (formulated with-out black) and black lettering.

Enblans and Markings

A cross of reflectorized Omaha orange on a square background of reflectorized white shall be on each side of the body, on the rear, and on the roof. The same shall be on the front if the vehicle design permits. The word "AMBULANCE" shall be under each cross, in black letters of not less than 3" in height. The word AMBULANCE in black letters shall be in mirror image on the front of the vehicle for mirror identification by drivers ahead. POWER TRAIN

Engine

The engine shall be eight cyclinder and of sufficient horsepower to allow the vehicle to be driven at sustained speeds of at least 70 mph over dry level hard-surfaced roads.

Transmission

The transmission shall be the automatic type, and shall be matched in horsepower and torque capacity to the engine.

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The steering system shall be power accisted.

Braking System

The braking system shall be power-assisted. Disc brakes are preferred, but not mandatory.

Communications

Two-way radio (Mobile)

Two-way radio mobile equipment shall be included which will provide a reliable system operating range of at least a 20 mile radius from the base station antenna. An RF power output of 25-50 watts will usually be required. The mobile installation shall provide microphones for transmitting at both the driver's position and in the patient's compartment. Selectable speakers putputs, singly and in combination, shall be provided at the driver's position, in the patient's compartment, and through the PA system. Siren - Public Address

Siren and public address systems shall be provided. If a combined electronic siren and public address system is provided, in siren operation, the power output shall be 100 watts. In voice operation the power output shall be 45 watts through exterior mounted speakers, at least one facing forward and one facing rearward.

The public address amplifier shall be independent of the mobile radio unit.

Environmental Systems

Environmental equipment shall be capable of maintaining inside temperature to a comfortable level in any extreme of ambient temperature within the geographic area of operation.

The various systems; heating, ventilation, and air conditioning shall be separate with one system in the driver's compartment and one system in the patient's compartment and shall be controlled within the compartment affected. The air system shall be of high volume capacity with low velocity delivery for minimum draft circulation.

This equipment shall be thermostatically controlled for constant temperature level within plus or minus two (2) degrees. The thermostatic control is to be accessible to and controllable by the driver and technician so that temperature alterations can be made to meet varying conditions.

Insulation

The entire body; sides, ends, roof, floor, and patient conpartment doors shall be insulated to minimize conduction of heat, cold, or external noise entering the vehicle interior. The insulation shall be vermin-and mildew-proof, fireproof, non-hygroscopic, non-settling type. Plywood floor when undercoated will be considered sufficient insulation for the floor area. First Aid Equipment

No ambulance unit will be eligible for participation in federal funding unless it contains as a minimum the first aid items incorporated in the current list of essential ambulance equipment issued by the American College of Surgeons (May, 1970.)

Annex 3.

MINIMAL AMEULANCE EQUIPMENT REQUIREMENT

EQUIPLENT

- 1. One Cot, Ferno-Washington, Model 50-T, 5 inch wheel "all level" shall be provided and installed, on left side of body. Three inch mattress with green zippered waterproof cover. Must have full length tilting (head down) feature, to tilt to minimum of ten degree tilt. Cots to be secured with suitable quick release holder to side and floor of body. Steel plates built into body to fasten the cot holders securely.
- Two Ferno-Washington Model #11 stretchers with hanging hardware, fair field ambulance pack number one.
- Three IV holders mounted in ceiling body. Dynamed IV bottle holders (1063-BH) with ceiling attachments.
- 4. One Side H, 240 Cubic inch oxygen cylinder and gauge with Hi-Flo regulator with yoke for oxygen cylinder. Oxygen outlets on body wall (two at head of cot) with plug in flush mounted female hospital type receptacle. Two outside with weather proof quick disconnect fittings; one mounted on curb side near side door and one left side near oxygen door.
- 5. One No. 15-00-06 MSCO Oxygen Demand #3930 valves with 15 foot hose to plug into hospital type wall receptacle. Flow meter equipped and one each of size 0, 1, 2 and 5 face mask.
- 6. One Vacuum aspirator-from-engine manifold, with vacuum tank or electric operated in body on front wall.
- 7. One Portable aspirator Air shields. (Foot operated).
- One No. 16-00-07 MSCO C-LIV miniature resuscitator inhalator, portable with elder valve and 6 foot hose with all attachments complete with 3 size D cylinders.
- 9. Two Breathing bags Laerdahl RFE II. Must have clear face-piece. 2 adult, 2 child, 2 infant.
- 10. Ine 5 1b fire extinguisher 2A 10 BC rating.
- 11. The Stair chair Model 40-S Ferno-Washington, rount on inside of right curbside door.
- 13. Two pair tengue clamps 9-1/2" with rubber tip.
- 14. Two pair Rochester-Pean Curred Forceps 9".
- 15. Two Stethoscopes Bowles 15/4" duameter Miltex #MX 1-12.

TO J. KIT

One - 12" Cold chisel. One 10" Channel Lock Pliers. One - carpenter hammer - 2 lb. One - 6" Pliers. One - 12" Pipe wrench. One - 8" Adjustable Wrench. One - Electrician Knife. One - Pair electricians side cutting pliers - 8".

ENTRICATION EQUIPMENT

- 1. One - Crash Axe (Shield Cutter). 2. One - 39" Bolt Cutter with Jaw Opening of 1-1/4". 3. One - Shovel, Military Type-Folding with Pick Head. One - Carpenters' Crow Bar - (wrecking 36"). 4. Two 50' Sections Manila Rope - One 50' X 1/2", One 5. 50' X 3/4". One - Come a long (AB Chance Chain - 2 ton). 6. One - 20' Chain with clevis grab hook. 7. Suitable size for A-B Chance 2 ton Come A Long. One - 10' Chain with clevis grab hook. for A-B Chance 2 ton Come A Long. 8. Suitable size 9. One - Fire Axe - Pick Head. 10. One - 5 1b. Sledge Hammer - Short Handle. 11. Two - Asbestos Blankets. 12. Two Pair Asbestos Gloves. One - Sawz-All & 100' of 3 Wire Electric Cord W/Twist 13. Lock Connection. 14. One - Porto-Power 4 ton rescue set. M-S-A catalogue no. BH-37717.
- 15. One Aviation Tin-Snips.

 Two each B/P Cuff - Velcro Closure - Clayton Model 103. 1-Adult, 1-Child.

17. Six each surgical gloves - size 8-1/2" white latex.

- 13. Three each bandage scissors 5-1/2".
- 1). Three each hemostacs large 6" curved Kelly Clamps.
- 20. Twelve each Railroad Flares.
- 21. Two hand lanterns, 6 V stand up type GE Model #101.
- 22. One adjustable rail saw (Millers-Falls saw with 10" throat with 6 round carbide blades.)
- Twelve stand bags washable vinyl covering 6" wide -12" long.
- 24. Vinyl covered pillows three.
- 25. Four blankets.
- 26. One "S" tube for mouth to mouth breathing.
- 27. Two Emesis Basins
- 28. Two Laerdal pocket mask for breathing.
- 29. Two long Backboards with 2 runners glued to bottom side-no screws or nails.
- 30. One short backboard.
- 31. Patient Restraints Ferno-Washington One - Wrist Restraint Model #414-OL One - Ankle Restraint Model #415 One - Combination Restraint Model #416

SPLINTS

1. A. A. A.

One - Thomas Half Ring Splint - with heel rest.

Two - Moulded wood leg splints.

Twelve - Multiple size - fixation splints.

Four - (3" X 15") Padded board splints.

Four - (3" X 36") Padded board splints.

Four - (3" X 48") Padded board splints.

One - Set aid splints (6-pak).

T001. 1.11

Tool [3x - (Suitable to carry the following items):

One - 10^{n} Straight head screwdriver One - 41 Straight head screw driver. One - 10" Phillips head screw driver. One - 6" Phillips head screw driver.

TOOL KIT

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One - 12" Cold chisel. Gae 10" Channel Lock Pliers. One - carpenter hammer - 2 lb. One - 6" Pliers. One - 12" Pipe arench. One - 8" Adjustable Wrench. Gne - Electrician Knife. One - Pair electricians side cutting pliers - 8".

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7.	One - 20' Chain with clevis grab hook. Suitable size for A-B Chance 2 ton Come A Long.	
8.	One - 10' Chain with clevis grab hook. Suitable size for A-B Chance 2 ton Come A Long.	
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10.	One - 5 1b. Sledge Hammer - Short Handle.	
11.	Two - Asbestos Blankets.	
12.	Two Pair Asbestos Gloves.	
13.	One - Sawz-All & 100' of 3 Wire Electric Cord W/Twist Lock Connection.	
14.	One - Porto-Power 4 ton rescue set. M-S-A catalogue no. BH-37717.	
15.	One - Aviation Tin-Snips.	

DEPARTMENT OF PUBLIC SAFETY Office of the Director John M. Waters



July 26, 1976

Mr. D. O. Oxley Ex-Officio Clerk Nassau County P. O. Box 456 Fernandina Beach, Florida 32034

Dear Mr. Oxley:

This is to provide a fully executed copy of Amendment to the EMS Contract No. 3855-1 between the City of Jacksonville and Nassau County and to request that final bills under the contract be submitted no later than 15 September 1976.

Attached is a copy of the fully executed Amendment to Contract No. 3855-1 extending the Regional Emergency Medical Services Project to 30 September 1976 vice 30 June 1976. It is requested that the final bill against the contract be submitted no later than 15 September 1976. The balance in Nassau County account is \$1,000.00.

If there are any questions in this matter please let me know.

Sincerely,

Executive Director ' Northeast Florida Eight County EMC Project (904) 633-2610, 633-2611

Att.

cc: Chief James A. Graves, EMS Coordinator, Nassau County

AMENDMENT TO AGREEMENT

THIS AMENDMENT TO AGREEMENT made and entered into in duplicate on this <u>25th</u> day of <u>June</u>, 1976, by and between the CITY OF JACKSONVILLE, a municipal corporation in Duval County, Florida, hereinafter referred to as "Jacksonville," and <u>NASSAU</u> County, a political subdivision of the State of Florida, hereinafter referred to as "Contractor."

WITNESSETH:

WHEREAS, Jacksonville and Contractor entered into a certain Agreement dated <u>September</u>, <u>3</u>, 1975, and the parties desire to extend said Agreement so as to cause termination thereof on September 30, 1976, as opposed to the currently existing termination date of June 30, 1976, and to increase the maximum indebtedness of said Agreement, now therefore,

The parties do hereby agree to amend Articles II and VII of that certain Agreement as follows:

"ARTICLE II - PERIOD OF PERFORMANCE. The period of performance for the completion of the work as described in Article I hereof shall commence upon the execution of this Agreement and shall terminate on September 30, 1976."

"ARTICLE VII - ESTIMATED REIMBURSABLE COST. It is estimated that the total cost to be reimbursed to the Contractor by Jacksonville for services provided pursuant to this Agreement shall be the sum of \$2,600.00 and Contractor agrees to use its best efforts to perform the work and services and all obligations under this Agreement within such estimated cost."

SAVE AND EXCEPT as hereby expressly amended, that certain Agreement and all terms and conditions thereof shall be and remain in full force and effect.

IN WITNESS WHEREOF, the parties hereto have duly executed this Amendment to Agreement the day and year first above written.

ATTEST :	CITY OF JACKSONVILLE	
By Mpyrau Corporation Secretary	ByMayor	
ATTEST: Doglar	NASSAUCOUNTY	
	John F. Constrong In.	

Form approved: Assistant Counsel

In compliance with the Charter of the City of Jacksonville, I do certify that there is an unexpended, unencumbered and unimpounded balance in the appropriation sufficient to cover the foregoing Amendment to Agreement and provision has been made for the payment of the moneys provided therein to be paid.

Financ Director of T.L



NASSAU COUNTY BOARD OF COUNTY COMMISSIONERS FERNANDINA BEACH, FLORIDA 32034 D. D. DXLEY, EX-OFFICID CLERK

12.5-

JDHN F. ARMSTRONG, SR. CHAIRMAN DIST. NL S CALLAHAN ADAM H. FISHER VICE CHAIRMAN DIST. NL 3 YULEE A. RAY BEVILLE DIST. NL 1 FERNANDINA BEACH HAZEL JONES DIST. NL 2 FERNANDINA BEACH DUIGLAS HODGES DIST. NC 4 HILLIARD

ARTHUR I. JACOBS ATTORNEY RICHARD L. KING, P.E. COUNTY ENGINEER MELVIN F. DOUGHERTY BUILDING OFFICIAL AND INSPECTOR

September 5, 1975

1

SILL

Frank O. McClendon, Jr. Assistant Director Eight County EMC Project Department of Public Safety 107 Market Street Jacksonville, Florida 32202

Dear Mr. McClendon:

Enclosed please find two (2) executed copies of the agreement between the City of Jacksonville and Nassau County for the Eight County Emergency Medical Services System.

Also as requested the designated coordinator for Nassau County will be James A. Graves, P. O. Box 668, Fernandina Beach, Florida 32034, Telephone No. 261-6144.

Thank you for your consideration in this matter, and if the Board can be of any assistance to you in the future, please do not hesitate to call on them.

Yours very truly,

D. O. Oxley Ex-Officio Clerk

DOO/ma

Enclosures (2)

DEPARTMENT OF PUBLIC SAFETY Office of the Director John M. Waters



August 8, 1975

Mr. D. O. Oxley Ex-Officio Clerk Nassau County P. O. Box 456 Fernandina Beach, Florida 32034

Dear Mr. Oxley:

This is to provide two (2) copies of the proposed agreement between the City of Jacksonville and Nassau County for continuation of elements of the Eight County Emergency Medical Services System and to request that it be signed and returned to this office provided it is acceptable to the Nassau County Board of County Commissioners.

If you will recall Congressman Charles E. Bennett recently announced approval of a grant for \$93,050.00 for continuation of the Northeast Florida Eight County EMS System for the period 1 July 1975 - 30 June 1976. While this funding is minimal it is sufficient to pay for the existing regional communications network and provides supplemental funds (a monthly stipend of \$200.00) for a part-time EMS coordinator in Nassau County. The regional office in Jacksonville will continue to provide dispatch cards, rescue reports, telephone stickers, backup vehicles and guidance through your designated coordinator.

If the proposed agreement is acceptable please execute both copies and return them to this office for signature by the Mayor. It is further requested that we be advised of the name and telephone number of the designated coordinator for Nassau County. Reimbursement for the monthly stipend of \$200.00 will be paid to the county in accordance with current practice. Payment for the cost incurred incident to the regional communications network will be paid directly to the vendor by the City of Jacksonville.

NASSAU COUNTY

BOARD OF COUNTY COMMISSIONERS FERNANDINA BEACH, FLORIDA 32034

D. D. OXLEY, EX-OFFICID CLERK

JOHN F. ARMSTRONG, SR. DHAIRMAN DIST. NG. 5 CALLAHAN ADAM H. FISHER VICE CHAIRMAN DIST. NG. 3 YULLE A. RAY BEVILLE DIST. NG. 1 FERMANDINA BEACH HAZEL JONES DIST. NG. 2 FERMANDINA BEACH DIUGLAS HOOSES DIST. NG. 4 HILLIARD

ATTORNET RICHARD L. KING, P.E. County Engineer Melvin F. Dougherty Building Official And Inspector

ARTHUR I. JACOBS

SCITF

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DOO/ma

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AREA CODE 904 / 355-0411, EXT. 471 / 107 MARKET STREET / JACKSONVILLE, FLORIDA 32202

Mr. D. O. Oxley

-2-

August 8, 1975

If there are any questions in this matter or if you believe it necessary for us to meet with you for further discussion of the proposal please let us know.

Sincerely,

Frank O. Mcclendon, J Jr

Assistant Director Eight County EMC Project (904) 633-2610, 633-2611

Encl. (2)

cc: Chief James A. Graves