



<b>Procedure Title:</b> Maintenance Inspection of Vehicle's Wheelchair Tie-down Systems	<b>Procedure #:</b> 07-006	<u><b>Review Dates</b></u>	
<b>Category:</b> Facilities Management  <b>Subject:</b> Maintenance Inspection of Vehicle's Wheelchair Tie-down Systems	<b>Prepared by:</b> Environment of Care Committee  <b>Approved by:</b> DocuSigned by:  Rich Francisco, Executive Director		
	<b>Effective Date:</b> 11/27/1996		<b>Last Revised Date:</b> 04/03/2026

I. PURPOSE

To ensure Wheelchair Tie-down Systems in HealthWest-owned vehicles are operational and safely maintained.

II. APPLICATION

HealthWest-owned vehicles.

III. DEFINITIONS

Wheelchair Tie-down System: This is a 4-point wheelchair fastening system that secures the wheelchair to the floor and the wheelchair passenger securely to the chair.

IV. PROCEDURES

- A. The Property Supervisor and Designee will be properly trained on the use of the wheelchair tie-down system coordinated by the HealthWest Training Unit/qualified staff.
- B. Upon successful completion of this training, the HealthWest and/or Provider staff at any residential facility leasing a HealthWest vehicle will perform inspections twice yearly which includes:
  - a. Completion of the Wheelchair Tie-down Checklist (A091).
  - b. Retention of a copy of the completed checklist for the Property Supervisor's files.
  - c. Forward a copy of the completed checklist to the Provider Network Specialist if completed on a leased vehicle at a residential facility. The Provider Network Specialist will forward the checklist to the applicable Corporation/Home Supervisor.
  - d. For any system(s) found to be in need of repair/replacement, the defective part(s) will be removed immediately. Replacement part(s) will be put in place as soon as possible. Property Supervisor will respond to reports made by vehicle users of missing/broken

parts which occur between inspection dates and:

C. Complete the Wheelchair Tie-down Checklist (A091).

- a. Retain a copy for the Property Supervisor's files.
- b. Forward a copy of the checklist, upon completion, to the Provider Network Specialist, if completed on a leased vehicle at a residential facility.
- c. Any systems found to be in need of repair/replacement, the defective part(s) will be removed immediately. Replacement part(s) will be put in place as soon as possible.
- d. The Provider Network Specialist will forward the checklist to the applicable Corporation/Home Supervisor.

V. Attachment

Wheelchair Tie-down Checklist (A091)

Authors Initials KC/hb