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**MEDICAL HEALTH SERVICES
EMERGENCY MEDICAL SERVICES**

DATE: December 29, 2021

TO: EMERGENCY RECEIVING CENTER (ERC) HOSPITALS
AMBULANCE PROVIDERS
911 PARAMEDIC PROVIDERS
BASE HOSPITAL COORDINATORS
HOSPITAL CEOs

**SUBJECT: TEMPORARY SUSPENSION OF DIVERSION AND ACTIONS TO
REDUCE APOTs**

The Orange County EMS Agency has been closely monitoring the rising surge in COVID-19 cases and the associated increased burden on hospital emergency departments and the EMS community. It is now clear that the rapid and sustained rise in diversion hours and Ambulance Patient Offload Times (APOTs) as a result of this surge requires action. In the last 8 days, COVID hospitalizations have doubled from 188 to 376 in-patients. Diversion hours have increased to over 200 per day (representing the loss of 1/3 of all Orange County hospital emergency departments to ambulance traffic) with APOTs in excess of 50 minutes (equates to between 17 and 21 ambulances temporarily out of service holding patients in emergency departments). Should this continue, the capabilities of EMS providers to rapidly respond to emergencies could be placed in jeopardy.

Therefore, effective at 7 AM on December 30, 2021, OCEMS will implement the following interventions:

- 1) The option to request ambulance diversion will be temporarily suspended for all hospital ERCs and Comprehensive Children's Emergency Receiving Centers.

Trauma Centers, Stroke-Neuro Receiving Centers, and Cardiovascular Receiving Centers may still request diversion.

- 2) Hospital ERCs may allow 1 ambulance crew to be held in the department for more than 60 minutes. When a second ambulance crew arrives with another

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Suspension of diversion and APOT Reduction

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patient and is held in the emergency department for more than 15 minutes, the first ambulance crew will either:

- a. Retrieve a cot from their ambulance or from an ambulance supervisor, place the patient on the cot in the emergency department, inform the charge or triage nurse of this action, and then leave the ERC; or
- b. Take the patient back into their ambulance and transport them to another hospital after informing the charge or triage nurse of this action.
- c. This action will be repeated each time an ambulance crew is held in the ERC for more than 60 minutes and a second crew is held for more than 15 minutes. With this action in place, no ERC should be holding more than one ambulance for more than 60 minutes.

OCEMS will continue to monitor the situation and may issue additional instructions as needed to ensure patients calling 911 can receive timely and appropriate care.



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cc: Hang Nguyen, CDPH District Manager