

COUNTY OF ORANGE HEALTH CARE AGENCY Regulatory/Medical Health Services EMERGENCY MEDICAL SERVICES 405 W. Fifth Street, Suite 301A, Santa Ana, CA 92701 (714) 834-3500



## Orange County Multi Agency Disaster Net (OCMAD) Meeting

Thursday, January 24, 2019 – 9:00 a.m. to 10:30 a.m.

#### Location:

Orange County Global Medical Center 1001 N. Tustin Ave Santa Ana, CA 92705

**Net Goals:** "HVA, partner hospitals with HCC, all are ICS compliant, keeping familiar with all disaster equipment, keeping equipment in an operational status."

#### AGENDA

- I. CALL TO ORDER
- II. INTRODUCTIONS/ANNOUNCEMENTS

#### III. APPROVAL OF MINUTES

Action Item: Approval of minutes from the December 13, 2018 meeting

(Deferred)

#### IV. EMS/HEM REPORT

- Health Emergency Management (HEM) Program
- ReddiNet/HEAR, HAvBED/Census Reports

CAHAN

(Attachment 1)

#### V. UNFINISHED BUSINESS

• HCC Governance, Bylaws, Organization

(Attachment 2)

- Priorities, Performance Measures & Plans
- HPP Finance
- 2019 HCC Exercise (IPC 1/23/19)
- 2019 HVA

(Attachment 3)

#### VI. <u>NEW BUSINESS</u>

Inventory Review

(Attachment 4)

#### **VII. OTHER BUSINESS**

- FCC
- Round Table

VIII. NEXT MEETING – February 28, 2019 at 9:00 a.m.

#### IX. ADJOURNMENT

# OCMAD January 24, 2019

**ATTACHMENT 1** 

#### **MCI Results**

Facility	#	%
Anaheim Global Medical Center	2	33%
Anaheim Regional Medical Center	5	83%
Chapman Global Medical Center	4	80%
Children's Hospital of Orange County (CHOC)	6	100%
Foothill Regional Medical Center	8	89%
Fountain Valley Regional Hospital and Medical Cntr	7	78%
Garden Grove Hospital and Medical Center	4	80%
Hoag Hospital Irvine	8	100%
HOAG HOSPITAL NEWPORT BEACH	6	100%
HUNTINGTON BEACH HOSPITAL	8	89%
Kaiser Anaheim	9	100%
Kaiser Irvine	5	83%
La Palma Intercommunity Hospital	4	67%
Los Alamitos Medical Center	5	100%
Mission Hospital Laguna Beach	3	50%
MISSION HOSPITAL MISSION VIEJO	6	100%
Orange Coast Memorial Medical Center	9	100%
ORANGE COUNTY GLOBAL MEDICAL CENTER	9	100%
Placentia-Linda Hospital	7	78%
Saddleback Memorial Medical Center	4	67%
South Coast Global Medical Center	5	56%
St. Joseph Hospital	6	100%
ST. JUDE MEDICAL CENTER	9	100%
UNIVERSITY OF CALIFORNIA-UCI MEDICAL CENTER	6	100%
West Anaheim Medical Center	4	67%

LOWEST SCORE GOES TO ANAHEIM GLOBAL @ 33%

#### **HavBed Results**

Facility	#	%
Anaheim Global Medical Center	23	74%
Anaheim Regional Medical Center	25	81%
Chapman Global Medical Center	31	100%
Children's Hospital of Orange County (CHOC)	31	100%
Foothill Regional Medical Center	31	100%
Fountain Valley Regional Hospital and Medical Cntr	30	97%
Garden Grove Hospital and Medical Center	29	94%
Hoag Hospital Irvine	31	100%
HOAG HOSPITAL NEWPORT BEACH	30	97%
HUNTINGTON BEACH HOSPITAL	31	100%
Kaiser Anaheim	31	100%
Kaiser Irvine	30	97%
La Palma Intercommunity Hospital	28	90%
Los Alamitos Medical Center	28	90%
Mission Hospital Laguna Beach	31	100%
MISSION HOSPITAL MISSION VIEJO	31	100%
Orange Coast Memorial Medical Center	27	87%
ORANGE COUNTY GLOBAL MEDICAL CENTER	31	100%
Placentia-Linda Hospital	31	100%
Saddleback Memorial Medical Center	29	94%
South Coast Global Medical Center	29	94%
St. Joseph Hospital	31	100%
ST. JUDE MEDICAL CENTER	31	100%
UNIVERSITY OF CALIFORNIA-UCI MEDICAL CENTER	30	97%
West Anaheim Medical Center	31	100%

LOWEST SCORE GOES TO ANAHEIM GLOBAL @ 74%

#### **Patient Census Results**

Facility	#	%
Anaheim Global Medical Center	22	71%
Anaheim Regional Medical Center	21	68%
Chapman Global Medical Center	31	100%
Children's Hospital of Orange County (CHOC)	31	100%
Foothill Regional Medical Center	25	81%
Fountain Valley Regional Hospital and Medical Cntr	30	97%
Garden Grove Hospital and Medical Center	27	87%
Hoag Hospital Irvine	31	100%
HOAG HOSPITAL NEWPORT BEACH	30	97%
HUNTINGTON BEACH HOSPITAL	30	97%
Kaiser Anaheim	31	100%
Kaiser Irvine	30	97%
La Palma Intercommunity Hospital	27	87%
Los Alamitos Medical Center	28	90%
Mission Hospital Laguna Beach	31	100%
MISSION HOSPITAL MISSION VIEJO	31	100%
Orange Coast Memorial Medical Center	27	87%
ORANGE COUNTY GLOBAL MEDICAL CENTER	31	100%
Placentia-Linda Hospital	31	100%
Saddleback Memorial Medical Center	28	90%
South Coast Global Medical Center	30	97%
St. Joseph Hospital	30	97%
ST. JUDE MEDICAL CENTER	31	100%
UNIVERSITY OF CALIFORNIA-UCI MEDICAL CENTER	30	97%
West Anaheim Medical Center	31	100%

LOWEST SCORE GOES TO ANAHEIM GLOBAL @ 71%

#### **HEAR Test Results**

Facility	#	%
Anaheim Global Medical Center	6	100%
Anaheim Regional Medical Center	6	100%
Chapman Global Medical Center	5	83%
Children's Hospital of Orange County (CHOC)	6	100%
Foothill Regional Medical Center	5	83%
Fountain Valley Regional Hospital and Medical Cntr	6	100%
Garden Grove Hospital and Medical Center	0	0%
Hoag Hospital Irvine	6	100%
HOAG HOSPITAL NEWPORT BEACH	6	100%
HUNTINGTON BEACH HOSPITAL	6	100%
Kaiser Anaheim	6	100%
Kaiser Irvine	6	100%
La Palma Intercommunity Hospital	6	100%
Los Alamitos Medical Center	6	100%
Mission Hospital Laguna Beach	6	100%
MISSION HOSPITAL MISSION VIEJO	6	100%
Orange Coast Memorial Medical Center	6	100%
ORANGE COUNTY GLOBAL MEDICAL CENTER	6	100%
Placentia-Linda Hospital	6	100%
Saddleback Memorial Medical Center	5	83%
South Coast Global Medical Center	6	100%
St. Joseph Hospital	2	33%
ST. JUDE MEDICAL CENTER	6	100%
UNIVERSITY OF CALIFORNIA-UCI MEDICAL CENTER	6	100%
West Anaheim Medical Center	6	100%

LOWEST SCORE GOES TO GARDEN GROVE @ 0%

# OCMAD January 24, 2019

**ATTACHMENT 2** 

Health Care Coalition of Orange County

Charter and Bylaws 2019

#### **Plan Authorization**

#### **HCC Executive Committee Members**

Name/ Signature	Title/Affiliation	Representing	Signature	Date	Alternate	
Calvin Fakkema	Hospital Emergency Management / CHOC	Hospitals		1/22/2019	Nicola Harwood	
	Hospital					
T D d	Hospital Emergency	TT 1/ 1		1/02/2010	NY 1 II 1	
Joe Brothman	Management / UCI Medical Center	Hospitals		1/22/2019	Nicola Harwood	
		EMS				
Rob Viera	Care Ambulance	Transport		1/22/2019	TBD	
Ruth Clark	Base Hospital	EMS		1/22/2019	TBD	
Kutii Ciaik	Coordinator / OCGMC	Non Transport		1/22/2019		
	Assistant Emergency					
	Manager /	Emergency Management		1/22/2019	Michelle Anderson	
Vicki Osborne	Orange County Sheriff's					
	Department Emergency					
	Management  Behavioral Health					
	Disaster Reponses/	Public Health			Rachael Ferraiolo	
Nicole Garcia	Orange County Health			1/22/2019		
	Care Agency					
	Administration/					
Rick Byrum	The Covington Skilled	Long Term Care		1/22/2019	Symon Calimbahin	
	Nursing Facility	Skilled Nursing		1,22,2019	5, mon cumioumi	
Brian Froman	Administration/	Hospice		1/22/2010	TDD	
	Team Select Homecare	Home Health		1/22/2019	TBD	
Danilo Concepcion	Administrator / St.	Outpatient		1/22/2019	Edward Cuelich	
	Joseph Renal Service	Dialysis		1/22/2017	Lawara Cacricii	
Don Hoa	Administrator	Outpatient		1/22/2019	Diana Mata	
	Share Ourselves Clinic	Outpatient		1,22,2017	Diana muu	

## SECTION I INTRODUCTION

#### I. INTRODUCTION

The Health Care Coalition of Orange County (HCCOC) charter outlines the functions of the Health Care Coalition of Orange County while the Bylaws describe the rules that direct the operations of the HCCOC. This document is a product of collaborative planning to address immediate medical health response requirements of healthcare providers in the Orange County area in the event of a disaster.

During large emergencies or disasters, medical and health resources may be unavailable or inadequate to meet the demand. The California Medical/Health Mutual Aid System is designed to address these issues by identifying and facilitating the distribution of regional, state and/or federal resources to the area(s) in need.

While the California Mutual Aid System has been tested and considered reliable, healthcare providers in a community are encouraged to establish a Memorandum of Understanding (MOU) – beyond the agreement to the prepare, collaborate, and participate as outlined in this document – to share resources among themselves should an immediate need arise. The medical accrediting entities and the National Incident Management System encourage such agreements.

#### II. OBJECTIVE

The purpose of this charter is to aid healthcare providers in preparing for and responding to a disaster in a timely, comprehensive and coordinated manner. The success of this voluntary agreement is predicated on full participation of healthcare providers in Orange County.

An incident that exceeds the effective response capacity of the impacted healthcare providers will almost always involve the following entities: the Emergency Management Division of the Orange County Sheriff's Department; the Orange County Emergency Medical Services Agency; the Medical Health Operational Area Coordinator; and the affected operational area response partners. The disaster may be an "external" or "internal" event and assumes that each affected healthcare provider emergency management plans have been fully implemented.

#### III. PURPOSE OF COALITION

The purpose Health Care Coalition of Orange County (HCCOC) is to establish and develop a collaborative network of healthcare organizations and their respective public and private sector response partners within the Orange County Operational Area. The HCCOC exist to build a common operational framework that strengthens the ability of the local health and medical system to rapidly and effectively respond to emergencies. A common operational framework supports effective information flow between local and regional healthcare partners and supports efficient response when additional resources are needed during emergencies that exceed the response capabilities of local healthcare entities.

HCCOC serves as a voluntary, multidisciplinary, multi-agency group that assists in the coordination of medical and health preparedness, response, recovery and mitigation activities. Some of the activities of the HCCOC include:

- Interface with the appropriate level of emergency operations by sharing information among participating health care organizations and with jurisdictional authorities to promote common situational awareness.
- Support the needs of healthcare organizations through sharing Emergency Operation Plans.
- Meet the community needs by promoting the quality of disaster patient/victim care services and improving overall healthcare response capabilities.
- Develop and implement effective practices including continuity planning, education, training and evaluation as they relate to emergency preparedness.
- Serve as a means to strengthen and sustain the local health and medical emergency management system by properly analyzing gaps.
- Promote healthcare providers' capacity to anticipate the plan of care in the event of a medical surge.

#### IV. PLAN MAINTENANCE

#### **Review**

The Health Care Coalition of Orange County Charter and Bylaws will be reviewed annually by the Health Care Coalition Executive Committee. Revisions or changes will be distributed to participating entities.

#### Revisions

Changes should be made to the plan and the revision date will be identified in the document. Changes may be needed when:

- Hazard consequences or risk areas change;
- The concept of operations for emergencies changes;
- Communications systems are upgraded;
- A training exercise or an actual emergency reveals significant deficiencies in existing planning documents; or
- State or federal planning standards for documents are revised.

## SECTION II CHARTER

#### I. GENERAL INFORMATION

#### Mission

To support medical and healthcare entities to prepare for, respond to, mitigate and recover from disasters by promoting integration, information sharing, and resource support in the Orange County Operational Area and California Medical/Health Mutual Aid Region I.

#### Vision

To develop a unified medical and health emergency management community to prepare, respond and recover from emergency and disasters

#### Values

- Respect
- Integrity
- Service
- Team Work

#### Membership

In accordance with the Health Care Coalition of Orange County (HCCOC) Bylaws, membership consists of representatives authorized by participating healthcare partners. The HCCOC consist of General Membership and Executive Membership.

#### Meetings

HCCOC meetings will be held quarterly or as needed by rule of the Executive Committee. General Members should attend HCCOC quarterly meetings and participate in HCCOC activities. General members should designate an alternate representative to attend meetings in their absence. Executive Committee Members shall be expected to fulfill the meeting requirement as defined in the Bylaws.

#### **Training and Education**

HCCOC will coordinate training and education opportunities. Members will be queried pertaining to their interest in such trainings and education. A minimum attendance will be set for each training

#### **Drills and Exercises**

Drills and exercises will be held based on operational area needs.

#### II. GOVERNANCE PRICIPLES

#### **Committees**

The committee structure shall be inclusive of the HCC Executive Committee, HCC Advisory Committees and the General Membership HCC Committee. Governance of the HCCOC shall be in accordance with the Bylaws.

Approved by the Health Care Coalition of Orange County (HCCOC) Core Members xx-xx-xx

#### 1. Executive Committee

The HCC executive committee shall consist of the HCC Core Membership and shall be responsible for conducting the business and operations of the HCCOC.

#### 2. Advisory Committees

Advisory committees shall advise the HCC Executive Committee on the performance measures and progress for their specific committee. There shall be established the following standing Advisory Committees of the HCCOC to focus on the goals, objectives and performance measures of the specific healthcare entities. The standing Advisory Committee members of which shall be appointed by the Chairperson include:

- a) Hospital HCC Advisory Committee
- b) Long Term Care/Skilled Nursing Facility Advisory Committee
- c) Home Health/Hospice HCC Advisory Committee
- d) Outpatient (Clinics, Dialysis, Surgical Centers, Urgent Care) HCC Advisory Committee
- e) Emergency Medical Services HCC Advisory Committee

Special subcommittees may be appointed by the Chairperson of the Executive Committee or Advisory Committees when deemed necessary to carry on the work of the HCCOC.

#### 3. General Membership HCC Committee

The General Member HCC Committee meeting is an open meeting for the purpose of information sharing, collaboration, networking, education and providing updates on the progress, efforts, objectives and performance measures of the HCCOC.

#### III. PROTOCOLS AND FORMALITIES

#### **Agenda Development and Distribution**

It is the policy of the HCCOC to assure that meeting agendas are developed, posted, and distributed in a way that allows for timely and open access to the process. The following is an outline of the required process in support of agenda development and distribution:

#### 1. Agenda Development

Items of business may be suggested by any HCCOC member. The inclusion of agenda items will be at the discretion of the Executive Committee Chair, HPP Grant Manager and HCC Coordinator. The agenda must contain a brief general description of each item of business, and indicate the time and place of the meeting. Each agenda item will identify the speaker/presenter. Agenda items will be submitted to the HCC Coordinator twenty-one (21) calendar days prior to the HCCOC regular meetings. Items submitted less than the 21 calendar days prior to a scheduled meeting date may be postponed to a later meeting date in order to allow sufficient time for consideration and preparation of the issue. Any urgent or time sensitive items that occur outside the normal meeting cycle will be brought to the Executive Committee Members and a determination will be made if a Special Meeting session needs to be called.

Approved by the Health Care Coalition of Orange County (HCCOC) Core Members xx-xx-xx

#### 2. Agenda Distribution

The agenda, together with any supporting materials will be posted electronically at least three (3) calendar days prior to the regular meeting date. Limited copies of the agenda package will be available in hard copy at the HCCOC meetings.

#### IV. FINANCE

The HCCOC has no direct fiscal authority nor operates and/or maintains an annual budget. The members of HCCOC shall serve without compensation. If tasks require financial funding for implementation, they must equitably support all stakeholder initiatives.

#### V. HCCOC PLANS, POLICIES & PROCEDURES

The HCCOC Executive Committee Membership will be responsible for the approval of HCCOC plans, policy and procedures that guide HCCOC preparedness, mitigation, response and recovery functions of the HCCOC.

## SECTION III BYLAWS

#### I. INTRODUCTION TO BYLAWS

Name

The name of this organization shall be the Health Care Coalition of Orange County (HCCOC)

Preamble

The Health Care Coalition of Orange County serves the citizens of Orange County, California.

#### II. PURPOSE

The Health Care Coalition of Orange County (HCCOC) is a collaborative network of healthcare organizations and their respective public and private sector response partners within the Operational Area of Orange County. HCCOC serves as a voluntary, multidisciplinary, multiagency group that assists in the coordination of health and medical emergency management preparedness, response, recovery and mitigation activities.

#### **III. FUNCTIONS**

The functions of the HCCOC include:

- 1. Interface with the appropriate level of emergency operations by sharing information among participating health care organizations and with jurisdictional authorities to promote common situational awareness.
- 2. Support the needs of healthcare organizations through collaboration of coalition partners' various Emergency Operation Plans.
- 3. Meet the community needs by promoting the quality of disaster patient/victim care services and improving overall healthcare response capabilities.
- 4. Develop and implement effective practices including continuity planning, education, training and evaluation as they relate to emergency preparedness.
- 5. Serve as a means to strengthen and sustain the Public Health and medical emergency management system by properly analyzing gaps.
- 6. Promote healthcare providers' capacity to anticipate the plan of care in the event of a medical surge.

#### IV. AUTHORITY

- 1. The authority of the HCCOC lies with those entities that entrust the HCCOC to provide recommendations.
- 2. Such an advisory role does not obligate the HCCOC as an entity to perform any specific administrative, fiscal or disciplinary function.

#### V. MEMBERSHIP

- 1. The membership consists of the representatives authorized by the participating entities, which are those entities that have an interest in contributing to the purpose of the HCCOC.
- 2. HCCOC consist of Executive Membership and General Membership.
- 3. Executive Committee Membership meets core membership requirements and consist of:
  - i. Hospital Representatives (2)
  - ii. EMS Representatives (1 Transport Provider 1 Non Transport Provider)
  - iii. Public Health Representative (1)

Approved by the Health Care Coalition of Orange County (HCCOC) Core Members xx-xx-xx

- iv. Emergency Management Representative (1)
- v. Long Term Care/Skilled Nursing Facility Representative (1)
- vi. Home Health/Hospice Representative (1)
- vii. Outpatient Representative (1 Dialysis 1 Other)
- 4. General Membership should include hospitals, community health centers, integrated healthcare systems, private physician offices, outpatient clinics, dialysis and other specialty treatment centers, and long-term care facilities (nursing homes, other skilled nursing facilities), and home care/hospice. General Membership should also include, but is explicitly not limited to, public and private medical or health services, emergency preparedness agencies, educational organizations, faith based organizations, nonprofit organizations, community organizations, emergency services and governmental bodies with an interest in the provision of healthcare in Orange County during disasters or other states of emergency.

#### VI. HCC GOVERNANCE

#### **HCC Executive Committee**

The officers of the HCCOC shall be a Chairperson, a Vice Chairperson, and a Secretary.

The Chairperson and Vice Chairperson of the HCCOC Executive Committee shall not be an employee of the County of Orange and shall be elected by the HCCOC Executive Committee Members. The Secretary position shall be filled by Orange County Health Care Agency Staff.

#### **Duties of Officers:**

- a) Chairperson: The Chairperson shall, when present, preside at all meetings of the HCCOC. The Chair of the Executive Committee will conduct the official vote amongst committee members. The Chair will not cast a vote unless the majority is unable to come to a consensus on the motion presented. The Chairperson shall have further powers and duties as may be assigned by the HCCOC Executive Committee Members.
- b) Vice Chairperson: In the absence of the Chairperson, the Vice Chairperson shall preside at meetings and shall exercise the powers and duties of the Chairperson. The Vice Chairperson shall have other duties and powers as may be assigned by the HCCOC Executive Committee Members.
- c) Secretary: The Secretary shall cause to be kept all minutes of all meetings of the HCCOC.

#### **HCC Advisory Committee**

The HCC Advisory Committee chair will be a representative of a medical and health entity with a definitive affiliation to the established Advisory Committee. The Advisory Committee chair may be recommended by a representative of a medical and health entity and approved by the HCCOC Executive Committee Members.

Advisory Committee Chairs who fail to attend three consecutive meetings, or who fails to attend one-half of the annual meetings, unless excused by the HCC Executive Committee Membership, shall automatically vacate the position.

Orange County Emergency Medical Services Health Emergency Management Staff:

Approved by the Health Care Coalition of Orange County (HCCOC) Core Members xx-xx-xx

The HCCOC Executive Committee and Advisory Committees shall be staffed by the OCEMS Health Emergency Management Healthcare Coalition Coordinator or designee who will prepare an agenda.

OCEMS Health Emergency Management Staff shall be responsible for advising the Executive Committee and Advisory Committee members of administrative, operational or other locally identified needs.

#### VII. MEETINGS

#### **HCC Executive Meetings**

Meetings will be held at least quarterly in January, April, July and October on the fourth Thursday of the month. The HPP manager and/or the HCC Coordinator will set the agenda for the meetings. The first meeting of each year shall be in person face-to-face meeting. Subsequent meetings will be virtual meetings unless otherwise determined by executive committee.

The HCCOC Chairperson will maintain order during the HCC Executive Committee meetings according to Roberts Rules of Order.

Minutes will be taken at all HCCOC Executive Committee meetings. The minutes will have copies of all documents for which the HCCOC has provided an opinion, approval or action.

#### **HCC General Membership Meetings**

The HCCOC Chairperson will lead maintain order at the HCCOC General Membership Meeting.

Minutes will be taken at all HCCOC General Membership meetings. The minutes will have copies of all documents for which the HCCOC has provided an opinion, approval or action.

#### **HCC Advisory Committee Meetings**

The HCCOC Advisory Committee Chairperson will lead and maintain order at the advisory committee meeting.

Minutes will be taken at all HCCOC Advisory Committee meetings. The minutes will have copies of all documents for which the HCCOC has provided an opinion, approval or action

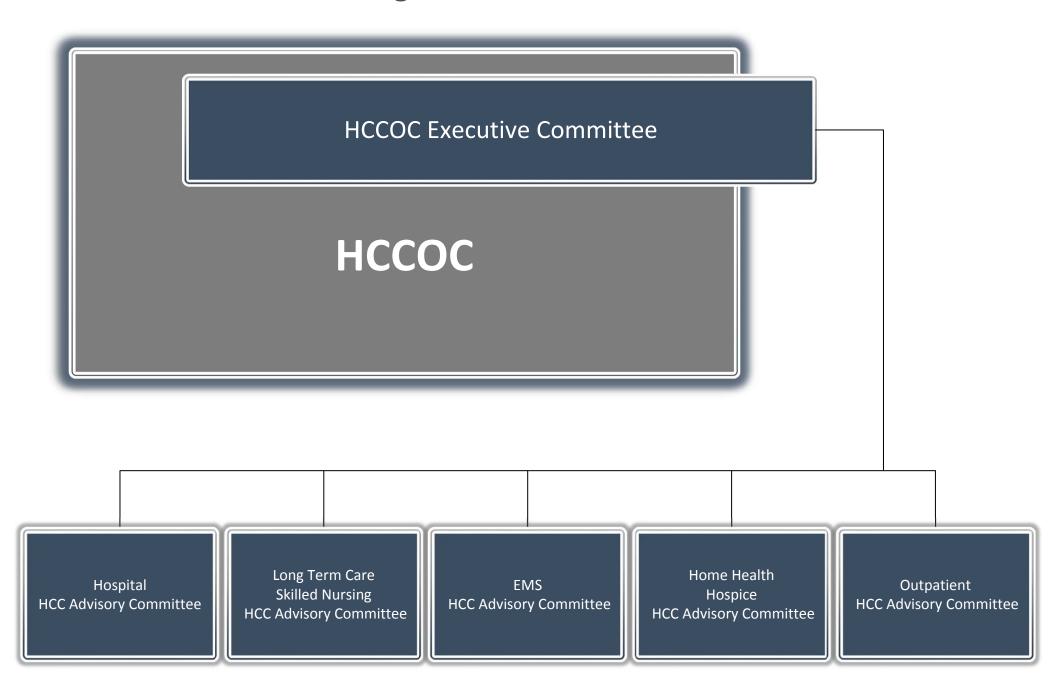
#### VIII. <u>BYLAWS, ADOPTION AND AMMENDMENTS</u>

These Bylaws, and any future amendments to these bylaws, must be approved by one over half vote by the HCCOC Executive Committee Members. The Bylaws/Amendments become effective immediately, upon approval.

The most recent date of approval will be displayed in the footer of the Bylaws.

## SECTION IV APPENDIX

## Health Care Coalition of Orange County (HCCOC) Organizational Chart

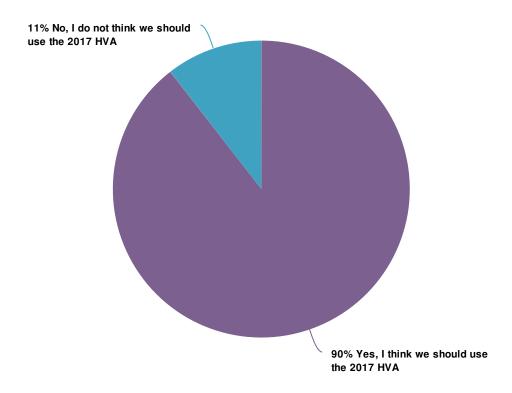


# OCMAD January 24, 2019

**ATTACHMENT 3** 

### Report for HVA Tool Vote

1. Do you want to use the January 2017 revised HVA tool that was discussed at OCMAD on December 13, 2018 and attached via email on January 4, 2019?



Value	Percent	Responses
Yes, I think we should use the 2017 HVA	89.5%	17
No, I do not think we should use the 2017 HVA	10.5%	2

Totals: 19

# OCMAD January 24, 2019

**ATTACHMENT 4** 

	_					
Facility	N	Part/Model	Qty.	Qty.	Missing	Comments
UCI	Name BioSeal Roll	Number BS-PKG-OC	Issued 5	Counted 4	-1	
Hoag - Irvine	Bladder, 500 Gallon	TTG-500HZ	2	0	-2	
Los Alamitos	Bladder, 500 Gallon	TTG-500HZ	2	0	-2	
UCI	Casualty Management Shelter	SCMWAA10-ZG	5	2	-3	
Mission - Laguna Beach	Chemtape	9942	3	0	-3	
<u>UCI</u>	Cot Multi Level Blue Bag	660530	6		-6	
Anaheim Global	Cot, Coleman Exponent Outfitter	2158-510	68	60	-8	
Huntington Beach Kaiser - Irvine	Cot, Coleman Exponent Outfitter  Cot, Coleman Exponent Outfitter	2158-510 2158-510	56 30	52 20	-4 -10	
St Jude's	Cot, Coleman Exponent Outfitter	2158-510	57	51	-10	
Anaheim Global	Cot, Military Style Camping	315274-B77	22	0	-22	
Orange Coast	Cot, Military Style Camping	315274-B77	43	35	-8	
St Jude's	Cot, Military Style Camping	315274-B77	29	6	-23	
Anaheim Global	Crib, Portable Playard	9350MIP / 9453MRG	10	5	-5	
<u>Chapman</u>	Crib, Portable Playard	9350MIP / 9453MRG	8	7	-1	
Fountain Valley	Crib, Portable Playard	9350MIP / 9453MRG	10	0	-10	
Kindred - West Minster Orange Coast	Crib, Portable Playard Crib, Portable Playard	9350MIP / 9453MRG 9350MIP / 9453MRG	10 10	0	-10 -2	
CHOC	CSVA Throat Mic/Voice Amp	CSVAi	5		- <u>-</u> 2	
Garden Grove	CSVA Throat Mic/Voice Amp	CSVAi	4		-4	
OC Global	CSVA Throat Mic/Voice Amp	CSVAi	4	0	-4	
St Jude's	CSVA Throat Mic/Voice Amp	CSVAi	5	1	-4	
СНОС	Decon Lights	LF-40-1	12	1	-11	
Hoag - Newport Beach	Decon Lights	LF-40-1	35	34	-1	
Kaiser - Anaheim	Decon Lights	LF-40-1	18	16	-2	
Kaiser - Irvine	Decon Lights	LF-40-1	14	2	-12	
Orange Coast	Decon Lights	LF-40-1	22	18 0	-2	
UCI UCI	Decon Lights  Decontamination System, TVI	LF-40-1 SD2-TZB05-GZ-0018	33 2		-33 -1	
Anaheim Global	, , ,			0		
Hoag - Newport Beach	EBED, 3 Tier System EBED, 3 Tier System	E-RACK-500-18-3 E-RACK-500-18-3	1	0		Sent to Mission? missing 1 tier
West Anaheim	EBED, 3 Tier System	E-RACK-500-18-3	1	0		missing 1 tier
Anaheim Global	Faceshield 96/CS	NONFS400	4		-4	This is a second of the second
UCI	Faceshield 96/CS	NONFS400	5	0	-5	
Kaiser - Irvine	Forced Air Multifuel Heater	AH-125-15	1	0	-1	
Kaiser - Irvine	Generator, Honda		2	0	-2	
OC Global	Generator, Honda		3		-1	
Anaheim Global	Inline speaker, for SRVA Voice	1915-65-010	2	0	-2	
Fountain Valley	Inline speaker, for SRVA Voice	1915-65-010	2	0	-2	
Garden Grove	Inline speaker, for SRVA Voice	1915-65-010	2	0	-2 -2	
<u>Kaiser - Irvine</u> <u>Mission - Mission Viejo</u>	Inline speaker, for SRVA Voice Inline speaker, for SRVA Voice	1915-65-010 1915-65-010	2	0	-2 -2	
Orange Coast	Inline speaker, for SRVA Voice	1915-65-010	1	0	-1	
OC Global	Inline speaker, for SRVA Voice	1915-65-010	2	0	-2	
SouthCoast Global	Inline speaker, for SRVA Voice	1915-65-010	2	1	-1	
St Jude's	Inline speaker, for SRVA Voice	1915-65-010	3	1	-2	
<u>UCI</u>	Inline speaker, for SRVA Voice	1915-65-010	2	0	-2	
Kaiser - Irvine	Med Sled 36" Standard	MS36	8		-1	
<u>UCI</u>	Med Sled 36" Standard	MS36	37	36	-1	
Kaiser - Irvine	Megaphone, Rescueman headband	RSM7500X	1	0	-1 1	Manifold is those
Anaheim Global Foothill	Mintie Technologies HEPAw/Manifold Mintie Technologies HEPAw/Manifold	OA1000V OA2000V	1	0		Manifold is there Missing Manifold
Kaiser - Anaheim	Mintie Technologies HEPAw/Manifold	OA2000V	1	0	-1 -1	The state of the s
Kaiser - Anaheim	Mintie Technologies HEPAw/Manifold	OA1000V	1	0	-1	
Kaiser - Irvine	Mintie Technologies HEPAw/Manifold	OA2000V	1	0	-1	
Kaiser - Irvine	Mintie Technologies HEPAw/Manifold	OA1000V	1	0	-1	
Orange Coast	Mintie Technologies HEPAw/Manifold	OA1000V	1	0		No Manifold
Fountain Valley	Mintie, Portable Containment Unit Bundle	ECU2-KIT	1	0		Missing one ECU2
Kaiser - Anaheim	Mintie, Portable Containment Unit Bundle	ECU2-KIT	1	0	-1	
Kaiser - Irvine	Mintie, Portable Containment Unit Bundle	ECU2-KIT	1	0	- <u>1</u>	
Kaiser - Irvine	Monitor, Analog radiation Alert	3KWK6	1	0	-1 -1	
<u>LaPalma</u> Mission - Laguna Beach	Monitor, Analog radiation Alert  Monitor, Analog radiation Alert	3KWK6 3KWK6	1	0	-1 -1	
Orange Coast	Monitor, Analog radiation Alert  Monitor, Analog radiation Alert	3KWK6	1	0	-1	
UCI	Monitor, Analog radiation Alert	3KWK6	1		-1	
Anaheim Global	Nebulizer Airlife Brand Misty Max 10	002434	10	2	-8	
Hoag - Newport Beach	Nebulizer Airlife Brand Misty Max 10	002434	10	0	-10	
Huntington Beach	Nebulizer Airlife Brand Misty Max 10	002434	10	0	-10	
Kaiser - Anaheim	Nebulizer Airlife Brand Misty Max 10	002434	10	0	-10	
Kaiser - Irvine	Nebulizer Airlife Brand Misty Max 10	002434	10	0	-10	
Orange Coast	Nebulizer Airlife Brand Misty Max 10	002434	10	0	-10 -2	
Anaheim Global Chapman	Nebulizer Portable Handheld  Nebulizer Portable Handheld	40-136-000 40-136-000	2	1	-2 -1	
Kaiser - Anaheim	Nebulizer Portable Handheld	40-136-000	2		- <u>1</u> -2	
Naiser - Ananellii	resource i ortable ridiffullelu	-0-130-000		ı U	-2	

Kaiser - Irvine	Nebulizer Portable Handheld	40-136-000	2	0	-2	-
Orange Coast	Nebulizer Portable Handheld	40-136-000	2	0	-2	
Saddleback	Nebulizer Portable Handheld	40-136-000	2	0	-2	
Hoag - Irvine	Quick Response Shower System	HM3101A	2	0	-2 r	missing 2 pumps
Huntington Beach	Quick Response Shower System	HM3101A	2	0	-2 r	missing 2 pumps
Kaiser - Irvine	Quick Response Shower System	HM3101A	2	0	-2	
Mission - Laguna Beach	Quick Response Shower System	HM3101A	2	0	-2 r	missing one shower 2 pumps
Mission - Mission Viejo	Quick Response Shower System	HM3101A	2	0	-2 r	missing 2 pumps
Orange Coast	Quick Response Shower System	HM3101A	2	0	-2 r	missing 2 pumps
St Jude's	Quick Response Shower System	HM3101A	2	0		missing 2 pumps
Kaiser - Irvine	Qwik-Cover Combo-Decon Kit, Adult	COMBO2B-A	68	0	-68	
Kaiser - Irvine	Qwik-Cover Combo-Decon Kit, LG Adult	COMBO2B-LA	932	30	-900	
Kaiser - Irvine	Qwik-Cover Combo-Decon Kit, Youth	COMBO2B-Y	21	0	-21	
CHOC	Radios, Motorla Magone	BPR40	7	0	-7	
Fountain Valley	Radios, Motorla Magone	BPR40	10	0	-10	
Hoag - Irvine	Radios, Motorla Magone	BPR40	5	0	-5	
Huntington Beach	Radios, Motorla Magone	BPR40	12	3	-9	
Kaiser - Anaheim	Radios, Motorla Magone	BPR40	6	0	-6	
<u>LaPalma</u>	Radios, Motorla Magone	BPR40	11	7	-4	
Mission - Laguna Beach	Radios, Motorla Magone	BPR40	5	4	-1	
Mission - Mission Viejo	Radios, Motorla Magone	BPR40	11	7	-4	
OC Global	Radios, Motorla Magone	BPR40	12	0	-12	
St Jude's	Radios, Motorla Magone	BPR40	10	0	-10	
<u>UCI</u>	Radios, Motorla Magone	BPR40	10	0	-10	
Hoag - Newport Beach	Ramfan Inline Heater/Canister	ED7125-HT	2	2	1 0	Missing 1 heater component
Kindred - West Minster	Ramfan Inline Heater/Canister	ED7125-HT	3	2	-1	Missing canister and bag
Kaiser - Anaheim	Ramfan Inline Heater/Storage Bag	HA01-125HT	1	0	-1	Missing Blower
St Jude's	Ramfan Inline Heater/Storage Bag	HA01-125HT	1	0	-1	Missing Hose
OC Global	Rubbermaid 5 drawer Work Center	7734-88	6	3	-3	
<u>Chapman</u>	Sled, Infant insert	INFS	2	1	-1	
Fountain Valley	SRVA Voice AMP/Radio Interface	CSVAi	2	0	-2	
Garden Grove	SRVA Voice Amp/Radio Interface	CSVA	7	0	-7	
OC Global	SRVA Voice Amp/Radio Interface	CSVA	2	0	-2	
St Jude's	SRVA Voice Amp/Radio Interface	CSVA	3	1	1	
<u>UCI</u>	SRVA Voice Amp/Radio Interface	CSVA	2	0	-2	
Orange Coast	Triahe Tags (50/pack)	012-TRI	20	0	-20	
Anaheim Global	Vest, Decon Team Disposable	IC1400	1	0	-1	
Orange Coast	Vest, Decon Team Disposable	IC1400	1	0	-1	