

PURPOSE

The purpose of this Impact Evaluation Report (IER) is to provide an assessment of potential impacts on the community, availability of emergency care at surrounding hospitals, and effects on emergency medical services (EMS) providers following the closure of Saddleback Memorial Medical Center – San Clemente (SMMC-SC) on May 31, 2016.

The report contains statutory authorities related to hospital closures, immediate historical background, city demographics; SMMC-SC and surrounding hospital capabilities including Emergency Department (ED) volumes; 9-1-1 paramedic services; ambulance transports; public comments and incorporates impact analysis statements within appropriate sections.

AUTHORITY/ED CLOSURE REQUIREMENTS

California state law outlines requirements on general acute care hospitals and the local emergency services agency related to service downgrades and closures of emergency departments. Hospitals must notify the California Department of Public Health (CDPH), the local government in charge of health care services, health plans under contract with the hospital and the public. The notification must be made as soon as possible but not later than 90 days prior to the proposed reduction or elimination of emergency services (Attachment 1).

Pursuant to the Health and Safety Code, Division 2, Chapter 2, Articles 1 and 5, §1255.1, §1300 (http://law.onecle.com/california/health/1255.1.html & http://law.onecle.com/california/health/1300.html), correlating Orange County Emergency Medical Services (OCEMS) policy #615.00 and general public policy, an impact evaluation is conducted by the local governmental body and forwarded to the California Department of Public Health (CDPH) within 60 days of a notice of hospital service downgrade and/or closure of an emergency department. CDPH considers the report findings and makes a final hospital licensure determination.

BACKGROUND

In Fall 2014, Memorial Care announced plans for a feasibility study to explore changes to the San Clemente Campus, to include ED closure and creation of an outpatient center and high-level urgent care, to be open 24 hours per day. Multiple local forums and workshops were held in the San Clemente area and residents attended City Council meetings to provide input and concerns regarding potential hospital closure. Local legislators were involved and two bills were introduced into the State legislature to allow Memorial Care to operate a free-standing ED on the campus. Neither bill was approved by the state legislature.

In December 2015, a Healthcare Workshop, open to the public, was held with presentations on a variety of options for emergency and urgent care.

In November 2015, the San Clemente City Council proposed re-zoning the property to be hospital-only. On January 19, 2016 a public hearing was held at the San Clemente City Council Meeting with regard to the re-zoning resolution. San Clemente Resolution 16-03 was adopted by the City Council to amend the General Plan to create a regional medical facilities land use designation for the current hospital property. Ordinance 1616 was introduced. Second reading of the ordinance was on February 2, 2016.



On March 2, 2016, Saddleback Memorial Medical Center – San Clemente (SMMC-SC) reported to Orange County Emergency Medical Services (OCEMS) that they had notified the California Department of Public Health (CDPH) of SMMC-SC's intent to voluntarily suspend their Acute Care Hospital license and close the facility

On March 4, 2016, OCEMS letter #2615 was sent to all Orange County hospitals, prehospital providers and zoning authorities. On April 4 & 15, 2016, public notices of the public hearing were published in the OC Reporter (Attachments 2, 3).

On April 29, 2016 a public hearing opportunity was held at the regularly scheduled Emergency Medical Care Committee (EMCC) in the Commission Hearing Room at 333 West Santa Ana Boulevard, Santa Ana, CA 92705.

SUMMARY OF FINDINGS City of San Clemente – Saddleback Memorial Medical Center, San Clemente

SMMC-SC is owned and operated by Memorial Care Health System and is located in the southwest portion of the County in the City of San Clemente. Bordering cities include Capistrano Beach, Dana Point and San Juan Capistrano. The facility also serves as the nearest civilian hospital for the Marine Corps Base Housing in northern San Diego County. The city of San Clemente is 18.71 square miles and has a 2015 estimated population of 65,326. In 2015, 13.2% of its residents were at or over the age of 65.

Population for San Clemente and the contiguous cities of Dana Point and San Juan Capistrano is approximately 135,724 persons. This population may be higher in summer and vacation seasons due to influx to beach communities (www.census.gov/quickfacts/table/PST045215/0665084,00).





SMMC-SC is a community hospital and is not designated as a specialty receiving center for Cardiac, Stroke or Trauma nor does the facility provide obstetric services. The hospital is currently licensed for 66 acute care medical-surgical beds and 7 intensive care beds. It has 10 Emergency Department (ED) treatment beds. Admission rate from the ED was 9.5% in 2015. County-wide admission rate is approximately 15%. (OSHPD, 2015)

In 2013, an OCEMS designation survey was conducted. SMMC-SC administration reported that between 2010 and 2012, ED visits totaled 44,890 for the three year survey period (39,470 adult and 5,420 pediatric). Subsequent years show no significant change in annual census.

| Mode of Arrival - Adult | 2013 | 2014 | 2015 |
|-----------------------------|------|------|------|
| Walk in | 9145 | 9185 | 9381 |
| Paramedic | 1326 | 1373 | 1363 |
| BLS Ambulance | 1286 | 1207 | 1180 |
| Wheelchair | 793 | 858 | 1180 |
| Law Enforcement | 93 | 94 | 73 |
| Carried | 11 | 9 | 12 |
| Unknown | 8 | 4 | 1 |
| Paramedic release | 1 | 1 | 1 |
| Helicopter | 0 | 1 | 0 |
| | | | |
| Mode of Arrival – Pediatric | 2013 | 2014 | 2015 |
| Walk in | 1529 | 1452 | 1491 |
| Carried | 347 | 415 | 379 |
| Paramedic | 62 | 74 | 54 |
| Wheelchair | 31 | 42 | 40 |
| BLS Ambulance | 42 | 49 | 32 |
| Law Enforcement | 5 | 3 | 0 |
| Unknown | 1 | 0 | 0 |

(Source: SMMC reported data)

In 2014, 35 patients and in 2015, 38 patients were transferred out of SMMC-SC for higher level of care via 9-1-1 paramedic transport. Patient destinations were primarily Mission Hospital - Mission Viejo for trauma.

The 9-1-1 emergency medical service response in the SMMC-SC area is provided by the Orange County Fire Authority. Occasionally, the facility receives patients from Laguna Beach Fire Department and Camp Pendleton Fire Department. Based on transport volume of 9-1-1 patients of about 8-10 per day and the distance of alternative facilities (Mission Hospital – Mission Viejo 9 miles and Mission Hospital – Laguna Beach 7 miles), the displacement due to hospital closure will impact EMS transported patients previously serviced by SMMC-SC.

Patients presenting to other EDs, whether via the 9-1-1 system or by private vehicle, may experience longer may wait times due to increased census. Mission Hospital – Mission Viejo was on ambulance diversion for 4.3% of the time in 2013, nearly 9% of the time in 2014 and 7.8% of the time in 2015.



Orange County Emergency Medical Services System

The Orange County EMS system is comprised of 25 acute care hospitals that are all designated as OCEMS Emergency Receiving Centers (ERC). Of those, one has the distinction of a comprehensive children's receiving center and the others have varying levels of specialty designations such as Trauma, Cardiovascular and Stroke Neurology (Attachment 4).

Data obtained from the Orange County Medical Emergency Data System (OC-MEDS), most recent utilization reports from the Office of Statewide Health Planning and Development (OSHPD), 9-1-1 paramedic service providers and 9-1-1 transport agencies for 2015 denote the following approximate numbers:

• OC Emergency ED visits: 912,516

o SMMC-SC: 14,215 (1.6% of total County ED volume)

• OC Emergency 9-1-1 Incidents: 185,500 (includes AMA; non-transports)

o SMMC-SC: 2513 (1.7% of total County 9-1-1 volume) (Source: OSHPD Utilization Reports, OCMEDS)

Overall, SMMC-SC treats less than 2 percent of the total number of patients seen in OC EDs. There are two ERCs within a ten-mile radius of SMMC-SC. Mission Hospital – Mission Viejo, located approximately 9 miles away, has 33 treatment stations. Mission Hospital – Laguna Beach is approximately 7 miles away and has 12 treatment stations.

There are other hospitals between 10 and 15 miles from SMMC-SC (Saddleback Memorial Laguna Hills, Hoag Irvine, and Kaiser Irvine) with a combined number of treatment stations of 81. Mission Hospital administration is already planning for increased patient volumes. In a report to the San Clemente City Council by OCFA in February, 2015, average transport times to Mission – Mission Viejo, Mission – Laguna Beach and Saddleback Laguna Hills had an average range of 15.8 – 22.9 minutes. All combined, the ERCs within these ranges have the capabilities to provide for basic emergency and specialty care and are within maximal transport distance.

A compilation of the nearest Emergency Receiving Centers' (ERC) proximity to SMMC-SC, hospital capabilities, OCEMS designation status and 2015 ED visits are illustrated within Attachment 5.

Nearest EDs are all to the north. The nearest public emergency department to the south is in San Diego County. Tri-City Medical Center is over 35 miles away and may not necessarily be a viable option for emergency care.

INITIAL ASSESSMENT

The downgrade or closure of any emergency service has an impact. Of most concern is the communities' loss of an acute care hospital within a short distance of beach cities in south Orange County. Although alternative hospitals are in relatively close physical proximity, any decrease in service to this population has undeterminable impacts to individuals and presumed impacts of increased emergency department wait times and ambulance diversion at alternative hospitals.



Some known facts:

- SMMC-SC is not designated as a Base Hospital. There will be no impact on patients needing Base Hospital medical direction
- SMMC-SC is not a designated trauma center. There will be no impact on 9-1-1 patients that meet trauma center criteria or guidelines
- SMMC-SC is not a designated stroke-neurology center. There will be no impact on 9-1-1 patients that meet criteria for specialty stroke services
- SMMC-SC is not a designated cardiovascular receiving center. There will be no impact on 9-1-1 patients that meet criteria for specialty cardiac services
- SMMC-SC is not licensed for inpatient psychiatric services. There will be no direct impact on 9-1-1 patients waiting for admission to a psychiatric bed other than potential crowding at neighboring hospitals
- SMMC-SC does not offer obstetrical services. There will be no direct impact on 9-1-1 patients requiring obstetrical care

Further conclusions pending outcome of April 29 hearing.



Attachment 1

Health & Safety Code Division 2, Chapter 2, Article 5, §1255.1; 1300

- 1255.1. (a) Any hospital that provides emergency medical services under Section 1255 shall, as soon as possible, but not later than 90 days prior to a planned reduction or elimination of the level of emergency medical services, provide notice of the intended change to the state department, the <u>local government entity in charge</u> of the provision of health services, and all health care service plans or other entities under contract with the hospital to provide services to enrollees of the plan or other entity
- (b) In addition to the notice required by subdivision (a), the hospital shall, within the time limits specified in subdivision (a), provide public notice of the intended change in a manner that is likely to reach a significant number of residents of the community serviced by that facility.
- (c) A hospital shall not be subject to this section or Section 1255.2 if the state department does either of the following: (1) Determines that the use of resources to keep the emergency center open substantially threatens the stability of the hospital as a whole. (2) Cites the emergency center for unsafe staffing practices.
- 1300. (a) Any licensee or holder of a special permit may, with the approval of the state department, surrender his or her license or special permit for suspension or cancellation by the state department. Any license or special permit suspended or canceled pursuant to this section may be reinstated by the state department on receipt of an application showing compliance with the requirements of Section 1265.
- (b) Before approving a downgrade or closure of emergency services pursuant to subdivision (a), the state department shall receive a copy of the impact evaluation of the county to determine impacts, including, but not limited to, an impact evaluation of the downgrade or closure upon the community, including community access to emergency care, and how that downgrade or closure will affect emergency services provided by other entities. Development of the impact evaluation shall incorporate at least one public hearing. The county in which the proposed downgrade or closure will occur shall ensure the completion of the impact evaluation, and shall notify the state department of results of an impact evaluation within three days of the completion of that evaluation. The county may designate the local emergency medical services agency as the appropriate agency to conduct the impact evaluation. The impact evaluation and hearing shall be completed within 60 days of the county receiving notification of intent to downgrade or close emergency services. The county or designated local emergency medical services agency shall ensure that all hospital and prehospital health care providers in the geographic area impacted by the service closure or change are consulted with, and that local emergency service agencies and planning or zoning authorities are notified, prior to completing an impact evaluation as required by this section. This subdivision shall be implemented on and after the date that the county in which the proposed downgrade or closure will occur, or its designated local emergency medical services agency, has developed a policy specifying the criteria it will consider in conducting an impact evaluation, as required by subdivision (c).
- (c) The Emergency Medical Services Authority shall develop guidelines for development of impact evaluation policies. On or before June 30, 1999, each county or its designated local emergency medical services agency shall develop a policy specifying the criteria it will consider in conducting an impact evaluation pursuant to subdivision (b). Each county or its designated local emergency medical services agency shall submit its impact evaluation policy to the state department and the Emergency Medical Services Authority within three days of completion of the policy. The Emergency Medical Services Authority shall provide technical assistance upon request to a county or its designated local emergency medical services agency.



Attachment 2 COUNTY OF ORANGE HEALTH CARE AGENCY

HEALTH DISASTER MANAGEMENT EMERGENCY MEDICAL SERVICES

MARK REFOWITZ DIRECTOR

RICHARD SANCHEZ
Assistant Director

STEVEN THRONSON
DEPUTY AGENCY DIRECTOR
REGULATORY/MEDICAL SERVICES

DENISE FENNESSY
INTERIM CHIEF OF OPERATIONS
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TAMMI McCONNELL MSN. RN

TO:

Excellence

March 4, 2016

Orange County Fire Chiefs

Orange County Ambulance Provider CEOs

Emergency Receiving Center CEOs

Howard Backer, MD, EMS Authority Director

California Department of Public Health

SUBJECT: Closure of Saddleback Memorial Medical Center - San Clemente

Saddleback Memorial Medical Center – San Clemente (SMMC-SC) notified Orange County Emergency Medical Services (OCEMS) of its intent to close the Emergency Department effective May 31, 2016. We understand that the acute care hospital will also close.

SMMC-SC is one of twenty-five designated Emergency Receiving Centers in the county and has no OCEMS-designated specialty services (i.e. cardiac, stroke, trauma). According to the most recent Office of Statewide Health Planning & Development (OSHPD) data from 2014, SMMC-SC's ten Emergency Department (ED) beds treated 14,428 patients, or 1.9% of the county total of 771,714 ED visits. OCEMS data indicates that the hospital provides care to an even smaller proportion of paramedic-escorted patients (3,518 patients, for 1.7% of the total county 9-1-1 volume). Initial system assessment indicates that the emergency and specialty capabilities within surrounding hospitals will be able to absorb and meet the demands of the displaced patients and ambulance transport times will not significantly increase.

As directed under California Health and Safety Code Section 1300, our office will conduct a complete impact analysis and report the findings to the California Department of Public Health (CDPH). As part of our impact analysis, there will be a public hearing at 9:00 am on Friday, April 29, 2016 at the next Emergency Medical Care Committee meeting. Any comments that you have on the impact of closing this service are welcomed and encouraged. We will accept written comments in lieu of oral comments at this meeting. Written comments should be addressed to my attention at the OCEMS office before Monday, April 25, 2016. The notice of public hearing will be published. Please contact me at (714) 834-2791 with any questions or concerns.

Sincerely,

Tammi McConnell MSN, RN

EMS Administrator

TM:ee#2615:SMMC-SC Notice of Closure

cc: Orange County Fire EMS Coordinators

Base Hospital Physicians Base Hospital Coordinators

Hospital Association of Southern California

Attachment 3

NOTICE OF PUBLIC HEARING IMPACT EVALUATION REGARDING SADDLEBACK MEMORIAL MEDICAL CENTER – SAN CLEMENTE CLOSURE OF EMERGENCY SERVICES

NOTICE IS HEREBY GIVEN that the Orange County Emergency Medical Services (OCEMS) / Emergency Medical Care Committee (EMCC) will hold a public hearing regarding the proposed closure of the Emergency Department at Saddleback Memorial Medical Center – San Clemente. The hearing will ensure that community members and health care providers have the opportunity to advise OCEMS prior to the completion of an impact evaluation.

DATE OF HEARING: April 29, 2016

TIME OF HEARING: 9:00 A.M. or as soon thereafter as possible.

LOCATION OF HEARING: Board Hearing Room, County of Orange Hall of Administration, 333 West Santa Ana Blvd., Santa Ana, California, 92701.

PROPOSAL:

To hear input from the community, hospitals, fire departments, and ambulance providers impacted by the closure of emergency services at Saddleback Memorial Medical Center – San Clemente. Public comments will be utilized to assess the impact on community access to emergency medical care. Findings from the hearing will be included in the OCEMS Impact Evaluation Report to be submitted to the California Department of Public Health.

INVITATION TO BE HEARD:

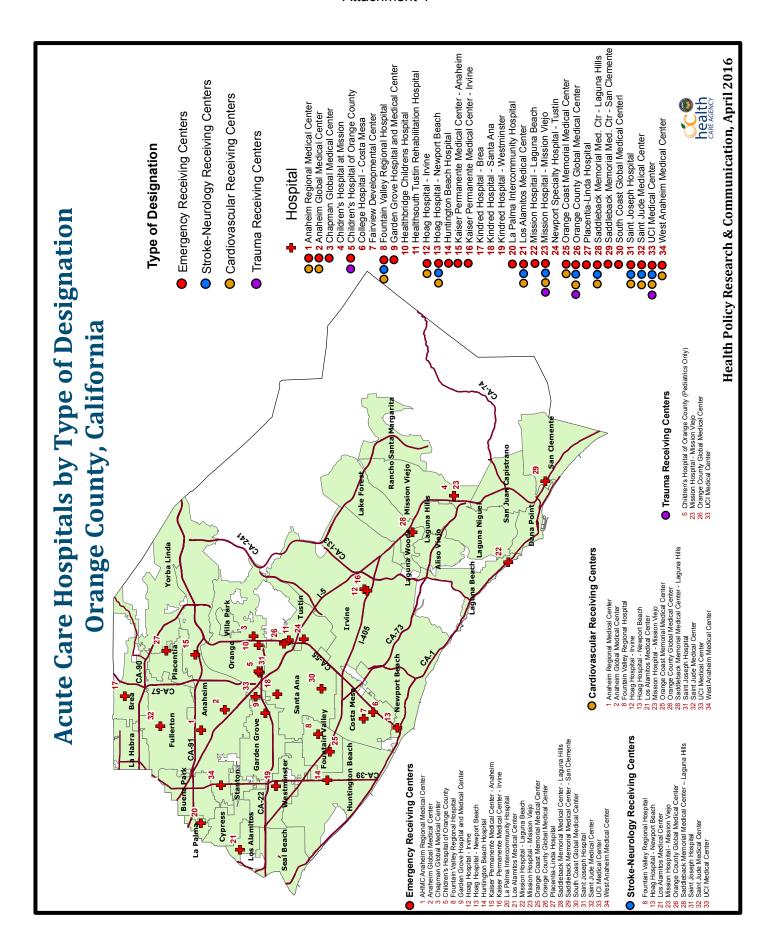
All persons are invited to present their views before the EMCC.

Any written material to be submitted to the EMCC must be submitted to OCEMS at least 24 hours prior to the hearing.

For further information, please contact Tammi McConnell, MSN, RN, EMS Administrator of the Orange County Health Care Agency Emergency Medical Services program at (714) 834-3500.

TO VIEW ONLINE:

If you are unable to attend the hearing, you may view it online at http://ochealthinfo.com/about/medical.





Attachment 5



Mission Hospital - Laguna Beach

- Approximately 7 miles from SMMC-SC
- •12 ED beds; Licensed for 142 acute care hospital beds
- •OCEMS designated receiving center: Emergency
- 2015 ED visits: 14.296



Mission Hospital - Mission Viejo

- Approximately 9 miles from SMMC-SC
- •33 ED beds; Licensed for 345 acute care hospital beds
- OCEMS designated receiving center: Emergency, Trauma, Cardiovascular and Stroke Neurology
- 2015 ED visits: 42,174



Saddleback Memorial Medical Center - Laguna Hills

- Approximately 11 miles from SMMC SC
- 31 ED beds; Licensed for 252 acute care hospital beds
- •OCEMS designated receiving centers: Emergency, Cardiovascular and Stroke Neurology
- •2015 ED visits: 37,254



SMMC - SC

10 ED beds; 73 acute care hospital beds **Emergency Receiving Center** 2015 ED Visits 14,215



Hoag Hospital - Irvine

- Approximately 19 miles from SMMC-SC
- •14 ED beds; Licensed for xxx acute care hospital beds
- •OCEMS designated receiving centers: Emergency, Cardiovascular
- •2015 ED visits: 33,516



Kaiser Permanente Medical Center - Irvine

- Approximately 19 miles from SMMC-SC
- •36 ED beds; Licensed for xxx acute care hospital beds
- OCEMS designated receiving center: Emergency
- •2015 ED visits: 43.918