

EMERGENCY MEDICAL SERVICES Santa Ana, CA 92701



FACILITIES ADVISORY COMMITTEE ORANGE COUNTY EMS FACILITY DESIGNATIONS

May 14, 2024

The following hospitals have applied to Orange County Emergency Medical Services (OCEMS) for Emergency Receiving Center (ERC) and/or Specialty status (Cardiovascular Receiving Center/CVRC, Stroke Neurology Receiving Center/SNRC, and Comprehensive Children's Emergency Receiving Center/CCERC) designation or re-designation. This report summarizes the OCEMS review of their applications noting deficiencies, conditions and recommendations. Today, it is presented to the Facilities Advisory Committee for committee endorsement.

General Findings: The following facilities currently meet the designation requirements for Emergency Receiving Center and Specialty Center designation, when applicable. Endorsement considerations of designation are for one to three-year terms or otherwise specified as recommended by committee.

FACILITIES - CONTINUING DESIGNATIONS

UCI Medical Center

Emergency Receiving Center (ERC)

ERC DQ Completed: 03/15/2024
Site Survey Conducted: 04/29/2024
Program Review Dates: 04/2021-4/2024

Criteria Deficiencies:

	CONDITION	DESCRIPTION	CORRECTIVE ACTION	DUE DATE
1	No deficiencies identified			

The following are recommendations for improvement. Action is expected but not contingent on redesignation.

	RECOMMENDATIONS
1	Continue efforts, such as rapid triage and CDPH flex requests for additional treatment areas, to not exceed 200 hours per month of diversion. Improvements that could increase compliance include amending lengthy radiology turn around times and increasing staffing levels to keep all ED patient beds available at all times.
2	Improve transfer process of emergent higher level of care patients within the county.
3	Institute a designated Pediatric Emergency Care Coordinator (PECC).
4	Develop policy regarding facility's possession of a CHEMPACK and provide education to staff regarding usage and deployment to outside facilities.

Endorsement Consideration: Three (3) years (05/2024-05/2027) – unconditional

Stroke-Neurology Receiving Center (SNRC)

 SNRC DQ Completed:
 03/15/2024

 Site Survey Conducted:
 04/29/2024

 Program Review Dates:
 04/2021-04/2024



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Criteria Deficiencies:

	CONDITION	DESCRIPTION	CORRECTIVE ACTION	DUE DATE
1	No deficiencies identified			

The following are recommendations for improvement. Action is expected but not contingent on redesignation.

	RECOMMENDATIONS
1	Create a process to record all patients arriving to the ED meeting SNRC criteria via walk-in and EMS. Current Stroke Patient Registry data is inconsistent and does not capture all patients.

<u>Endorsement Consideration</u>: <u>Three (3) years (05/2024-05/2027) – unconditional</u>

Cardiovascular Receiving Center (CVRC)

 CVRC DQ Completed:
 03/15/2024

 Site Survey Conducted:
 04/29/2024

 Program Review Dates:
 04/2021-04/2024

Criteria Deficiencies:

	CONDITION	DESCRIPTION	CORRECTIVE ACTION	DUE DATE
1	Non-compliance with OCEMS policy #630.00, section IV, B, 2, d.	CVRC Program Coordinator responsibilities lack inclusion of "Development of a cardiovascular education and outreach program for local and community and assigned regional hospitals".	Hospital will submit a corrective action plan addressing role and responsibilities of CVRC Program Coordinator to encompass all requirements per policy.	July 14, 2024
2	Non-compliance with OCEMS policy #630.00, section V, B.	CVRC program is required to provide "a cardiovascular education available to hospital staff, other regional hospital staff, EMS personnel and the public, provided at the appropriate level for each group".	Hospital will submit a corrective action plan addressing education and outreach.	July 14, 2024

The following are recommendations for improvement. Action is expected but not contingent on redesignation.

	RECOMMENDATIONS
1	Create a process to record all patients arriving to the ED meeting CVRC criteria for STEMI. Current STEMI Report data is inconsistent and does not capture all patients.

Endorsement Consideration: Three (3) years (05/2024-05/2027) – conditional



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Base Hospital (BH)

BH DQ Completed: 03/15/2024
Site Survey Conducted: 04/29/2024
Program Review Dates: 04/2021-04/2024

Criteria Deficiencies:

	CONDITION	DESCRIPTION	CORRECTIVE ACTION	DUE DATE
1	No deficiencies identified			

The following are recommendations for improvement. Action is expected but not contingent on redesignation.

	RECOMMENDATIONS
1	Continue plan to gain compliance with yearly base physician bedside education requirement.

Endorsement Consideration: Three (3) years (05/2024-05/2027) – unconditional