



FACILITIES ADVISORY COMMITTEE
ORANGE COUNTY EMS FACILITY DESIGNATIONS
July 9, 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

Huntington Beach Hospital

Emergency Receiving Center (ERC)

ERC DQ Completed: 05/09/2024
Site Survey Conducted: 06/20/2024
Program Review Dates: 06/2021-6/2024

Criteria Deficiencies:

	CONDITION	DESCRIPTION	CORRECTIVE ACTION	DUE DATE
1	Compliance with policy #600.00	Facility must have “an institutional response for the evaluation and care of specific patient groups, to include pediatric patients, including critically ill pediatric patients”.	Hospital will submit a written policy, protocol, or guideline which outlines the triage, management, and transfer of care for a pediatric patient.	09/12/2024
2	Compliance with OCEMS policy #300.50: Hospital Discharge Data submission	0% compliance entering hospital discharge data prior to the Bi-Directional project, and for those agencies not yet onboarded since implementation.	Hospital will submit a corrective action plan addressing hospital discharge data submission.	09/12/2024
3	ReddiNet response rate for MCIs and Hospital Emergency Administrative Radio (H.E.A.R.) response rate.	Huntington Beach Hospital had an average response rate for MCIs in 2023 of 88% and a H.E.A.R. response rate of 89%.	Hospital will submit a corrective action plan to reach compliance of >90% on all ReddiNet MCIs and H.E.A.R. responses.	09/12/2024



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

RECOMMENDATIONS	
1	Create simplified algorithms/guidelines regarding the care and transfer of higher level of care (HLOC) patients (Trauma, STEMI, Stroke, Burn) and have posted in the Emergency Department for rapid access.
2	Formulate a policy for the process of sending an RN to accompany paramedics during a HLOC transport when needed.
3	Institute a designated Pediatric Emergency Care Coordinator (PECC) to advocate for pediatric care e.g., pediatric readiness, nonaccidental trauma screening tool, Child Protective Services (CPS) reporting, pediatric surge plan, management of pediatric trauma patients, etc.
4	Develop policy regarding facility access to a CHEMPACK and provide education to staff regarding usage.
5	Continue to establish image sharing capabilities with trauma centers.
6	Exercise the hospital's disaster plans more frequently and complete an after-action report (AAR) for each exercise, as well as for any real event.

Endorsement Consideration: Three (3) years (06/2024-06/2027) – conditional

Base Hospital (BH)

BH DQ Completed: 05/09/2024
Site Survey Conducted: 04/29/2024
Program Review Dates: 06/2021-06/2024

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 current redesignation.

RECOMMENDATIONS	
1	Continue to increase collaboration with Fountain Valley Fire and OCFA.

Endorsement Consideration: Three (3) years (06/2024-06/2027) – unconditional