



FACILITIES ADVISORY COMMITTEE
ORANGE COUNTY EMS FACILITY DESIGNATIONS
November 4, 2025

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.

Garden Grove Hospital and Medical Center

Emergency Receiving Center (ERC)

ERC DQ Completed: 01/12/2026
Site Survey Conducted: 02/19/2026
Program Review Dates: 02/2023-02/2026

Criteria Deficiencies:

The following conditions must be completed to satisfy criteria for designation as an Orange County Emergency Receiving Center.

	CONDITION	DESCRIPTION	CORRECTIVE ACTION	DUE DATE
1	APOT not to exceed 30 minutes per state and county regulation.	Garden Grove’s 90 th percentile for 2023-2025 was 46:43, 43:50, and 45:49 minutes.	Hospital will submit corrective action plan, including protocol/policy, to decrease APOT in compliance with OCEMS policy #310.96 which states, “the APOT standard for OCEMS is set at 30 minutes” and Assembly Bill 40.	06/01/2026
2	ReddiNet Response Rate for MCI drills, HAvBED, and Patient Census must be >90% compliance. H.E.A.R. response must be >90% compliance.	Garden Grove had an average response rate to MCIs in 2023 and 2024 of 60%, and 2025 of 75%. HAvBED response in 2025 was 86% and Patient Census was 79%. H.E.A.R. response in 2025 was 86%.	Hospital will submit a corrective action plan to maintain compliance of >90% on all ReddiNet MCI drills, HAvBED, Patient Census and H.E.A.R. response.	06/01/2026
3	Compliance with OCEMS policy #600.00 section X. B.	Facility shall have “A communicable disease exposure policy for evaluation and treatment of emergency medical services personnel following a reported/known exposure, with timely notification to the EMS provider’s Designated Officer an Orange County Public Health”.	Hospital will submit a written communicable disease exposure policy regarding EMS personnel as described in policy.	06/01/2026



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The following are recommendations for improvement. Action is expected; however, current redesignation is not contingent on these actions.

RECOMMENDATIONS	
1	Continue efforts to improve Pediatric Readiness, including continued collaboration with the CCERC.
2	Complete after-action reports (AARs) on all events, both real events and drills.
3	Review and edit surge and evacuation policies to ensure they are clear, concise, and easily understood by all stakeholders.
4	Decontamination process needs to be strengthened to ensure efficiency and be made more readily accessible for staff.
5	Develop policy regarding facility access to a CHEMPACK and provide education to staff regarding usage.
6	Collaborate with trauma centers to provide staff education on the care of patients with traumatic and burn injuries.

Endorsement Consideration: Three (3) years (02/2026-02/2029) – conditional