



EMERGENCY RECEIVING CENTER CRITERIA

I. AUTHORITY:

California Health and Safety Code, Division 2, Chapter 2, Article 1, Section 1255.1; Division 2.5, Chapter 2, Sections 1797.67 and 1797.88, and Chapter 6, Article 3, Section 1798.170. California Code of Regulations, Title 22, Division 9, Chapter 7, Section 100243.

II. APPLICATION:

This policy defines the requirements that an acute care hospital must meet to be designated as an Orange County Emergency Receiving Center (ERC).

III. DESIGNATION:

A. Initial Designation

1. Hospitals applying for initial designation as an ERC must submit a request to Orange County Emergency Medical Services (OCEMS) and evidence of compliance to all criteria in this policy.
2. OCEMS will review the submitted material, perform a site visit, and meet with appropriate hospital personnel. Following review, OCEMS will provide its designation decision to the Facilities Advisory Subcommittee and the Emergency Medical Care Committee for endorsement or denial of endorsement of designation of up to three (3) years as an ERC.
3. An approved ERC will have a written agreement as described in Section X of this policy and pay the established Health Care Agency fee.

B. Continuing Designation

1. OCEMS shall review each designated ERC's compliance to criteria at least every three years, or more often if deemed necessary by the OCEMS Medical Director. ERCs will be required to submit specified written materials to demonstrate evidence of compliance to criteria. A site visit may be performed at the discretion of OCEMS.
2. OCEMS shall provide its designation decision to the Facilities Advisory Subcommittee and the Emergency Medical Care Committee for endorsement or denial of endorsement for continuing designation of up to three years.

C. Change in Ownership / Change in Executive or Management Staff

OCEMS shall be notified, in writing, at least 30 days prior to the effective date of any changes in hospital ownership. Change in hospital ownership may require redesignation by OCEMS. Personnel changes in chief executive staff, emergency department (ED) management (*i.e.*, ED physician group, nurse manager) shall be communicated in writing to OCEMS within 10 days.

D. Denial / Suspension / Revocation of Designation by OCEMS

1. OCEMS may deny, suspend, or revoke the designation of an ERC for failure to comply with any applicable OCEMS policy and procedure, state and/or federal laws.
2. The process for an Investigative Review Panel and/or appeal of suspension or revocation shall adhere to OCEMS Policy and Procedure #640.00 and #645.00.

E. Cancellation of Designation / Reduction or Elimination of Services by ERC



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1. Designation may be canceled by the ERC upon 30 days written notice to OCEMS.
2. Hospitals considering a reduction or elimination of emergency services must notify the California Department of Public Health and the Orange County Health Care Agency/EMS a minimum of 90 days prior to the planned reduction or elimination of services.

IV. HOSPITAL LICENSING and ACCREDITATION:

- A. Hospital shall possess a current California Department of Public Health permit for basic or comprehensive emergency service.
- B. Hospital shall maintain accreditation by an accreditation organization approved by the Centers for Medicare and Medicaid Services (CMS).
- C. Hospital shall notify OCEMS verbally and in writing any time the hospital is not in compliance with any applicable federal and/or state laws, and/or OCEMS policies, indicating the reason(s), date(s) and time(s) for non-compliance and corrective actions that are being taken. OCEMS shall determine whether the hospital may continue to receive 9-1-1 patients during the period that corrective actions are underway.

V. COMMUNITY RESOURCES:

- A. Hospital shall maintain a list of referral services and facilities as per state licensing requirements.
- B. The following resource listing (available through OCEMS), including address and telephone number, shall be available within the ED:
 1. Specialty Centers
 - a. OCEMS designated trauma receiving centers
 - b. OCEMS designated cardiovascular receiving centers
 - c. OCEMS designated stroke-neurology receiving centers
 - d. OCEMS designated comprehensive children's emergency receiving centers
 2. Emergency Receiving Centers and Base Hospitals
 - a. OCEMS designated emergency receiving centers
 - b. OCEMS designated comprehensive children's emergency receiving centers
 - c. OCEMS designated base hospitals
 3. Specialty Services
 - a. Burn centers
 - b. Hyperbaric chamber
 - c. Reimplantation centers
 - d. Neonatal intensive care unit



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- e. Pediatric intensive care unit

4. Services

- a. Ambulance transport service (for basic life support, interfacility transport paramedic and critical care transport)
- b. SIDS services
- c. Poison control
- d. Organ transplant center / tissue bank
- e. Child / elder / domestic abuse referral
- f. Sexual assault victim referral
- g. Psychiatric referral services (e.g., Evaluation and Treatment Services /ETS)
- h. HIV referral services

5. County Contacts

- a. OCEMS
 - During business hours
 - After business hours
 - Website
- b. Orange County Communications
- c. Health Care Agency, Public Health Services / Epidemiology

6. Other Resources

- a. Current / updated copy of OCEMS Policy and Procedure Manual.
- b. Current / updated copy of OCEMS ALS and BLS standing orders, clinical procedures and base guidelines.
- c. ALS and BLS provider agencies' designated officer contact information for disease exposure.

VI. MEDICAL PERSONNEL / STAFFING:

A. Medical Director, Emergency Department

1. The medical director shall be a physician:
 - a. Certified by the American Board of Emergency Medicine (ABEM), American Osteopathic Board of Emergency Medicine (AOBEM) or the equivalent as determined by the OCEMS Medical Director.
2. The medical director or his/her designee shall be responsible for:
 - a. Implementation of established policies and procedures.