

EMERGENCY MEDICAL SERVICES Santa Ana, CA 92701



FACILITIES ADVISORY COMMITTEE ORANGE COUNTY EMS FACILITY DESIGNATIONS

November 12, 2024

The following hospitals have applied to Orange County Emergency Medical Services (OCEMS) for Emergency Receiving Center (ERC) and/or Specialty status (Trauma Center/TC, Pediatric Trauma Center (Ped TC), 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 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

Orange County Global Medical Center

Trauma Center

ACS PRQ Shared with OCEMS: 05/08/2024

ACS Site Survey Conducted: 06/04 – 06/05/2024

ACS Summary Report Received: 08/21/2024

Program Review Period: 03/01/23 – 02/29/24

Criteria Deficiencies: ACS identified two non-compliant standards resulting in an unverification with their

own corrective action plan to be completed prior to 06/06/2025.

	ACS	STANDARD	DESCRIPTION	OCEMS CORRECTIVE	DUE
	STANDARD	DEFINITION		ACTION	DATE
1	Non-Compliant	In Level I and	The ED has single	Re-configure the ED	05/01/2025
	with Standard	II trauma	physician coverage	coverage model or	
	4.8 (Emergency	centers, a	most of the time, and	re-configure the Code Blue	
	Department	board-certified	the ED physician is	coverage model to ensure	
	Physician	or board-	required to leave the ED	there is an ED physician in	
	Coverage)	eligible	to respond to in-house	the ED at all times, with no	
		emergency	Code Blue events. This	gaps in coverage.	
		medicine	leaves the ED without		
		physician must	an ED physician, an	Hospital to submit a	
		be present in	uncommon event but	written ED coverage plan,	
		the emergency	one the program	a signed & dated	
		department at	acknowledges has	contract, and six months	
		all times.	happened.	of call schedules	
				showing change.	
2	Non-Compliant	All trauma	The hospital spends a	Hospital to reduce trauma	01/01/2025
	with Standard	centers must	significant amount of	diversion to meet County	
	5.16 (Trauma	not exceed	time on diversion, a	standards for this	
	Diversion	400 hours of	total of 419 hours in the	conditional designation	
	Hours)	diversion	review year. The most	period and then to	
		during the	common causes are ED	continuously maintain this	
		reporting	and inpatient capacity	reduction throughout their	
		period.	issues, but there were	next review period.	
			also several cases of		
			diversion for equipment	Hospital to provide a	
			issues.	trauma diversion	
				reduction plan with	
				specific goals, including	
				action(s) to be taken	
				should the diversion	
				goals not be met.	



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In addition to the opportunities for improvement provided by the American College of Surgeons (ACS), OCEMS also recommends and reinforces the following. Action is expected; however, redesignation is not contingent on these actions.

<u>Recommendation 1:</u> Provide a formal one hour lecture on any Trauma related subject at a County-Wide meeting (such as: OCGMC Base REAC, No Fear Conference, Facilities Advisory Committee) once per year.

<u>Recommendation 2:</u> Provide a trauma report out which includes a case review at any other Base Hospital's REAC meeting twice per year.

Recommendation 3: Expand cardiothoracic surgery service coverage.

Recommendation 4: Expand trauma surgeon service coverage.

Recommendation 2: Expand anesthesiology service coverage.

Endorsement Consideration: Eight (8) months (10/01/2024 – 06/01/2025) – conditional.