EMERGENCY MEDICAL SERVICES
8300 Marine Way, Suite 200, Irvine, CA 92618

FACILITIES ADVISORY COMMITTEE
ORANGE COUNTY EMS FACILITY DESIGNATIONS
November 10, 2026

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

La Palma Intercommunity Hospital

Emergency Receiving Center (ERC)
ERC DQ Completed: **8/31/26**
Site Survey Conducted: **10/8/26**
Program Review Dates: **10/2023-10/2026**

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.	La Palma's 90th percentile for 2023 was 58:31 minutes, 2024 was 34:13 minutes, 2025 was 29:30 minutes, and Jan-Aug 2026 is 34:52 minutes.	To decrease APOT in compliance with OCEMS policy #310.96 which states, "the APOT standard for OCEMS is set at 30 minutes," hospital will submit corrective action plan to illustrate compliance with hospital's APOT mitigation policy.	01/04/2027
2	Compliance with OCEMS policy #600.00 section X. E. 4.	Facility must have "an institutional response for the evaluation and care of specific patient groups, to include patients identified as trauma victims"	Hospital will submit a written policy, protocol, or guideline which outlines the triage, management, and transfer of care for a traumatically injured patient.	01/04/2027

3	Compliance with OCEMS policy #310.20 section B.	"Any patient transfer between an ERC and specialty center or other ERC must be in compliance with EMTALA Rules and Regulations and California HSC Law."	Provide proof of 100% chart review for all HLOC 911 IFTs. Charts should be reviewed for appropriateness, accuracy, and compliance with all county, state and federal policies and regulations.	01/04/2027

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

	RECOMMENDATIONS
1	Continue work to maintain compliance with ReddiNet MCI drills, HAvBED, and patient census.
2	Update policies, as discussed, including Stroke policy and algorithm, Diversion Policy, Burn Policy and Prehospital Exposure Policy. Edit disaster policies to address specific hazards and considerations for pediatric patients and patients with Disability, Access, and Functional Needs (DAFN).
3	Increase clinical staff engagement in comprehensive disaster preparedness drills that promote full scale utilization with hands-on practice with supplies and equipment, decontamination procedures, and population-specific considerations for pediatric and DAFN patients.
4	Implement a process in which medical personnel are first contact for all ED patients in order to rapidly identify high acuity and time-sensitive disease processes.

Endorsement Consideration: Three (3) years (10/2026-10/2029) – **conditional**