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

Mission Hospital Mission Viejo

Emergency Receiving Center (ERC)
ERC DQ Completed: **09/29/2026**
Site Survey Conducted: **11/3/2026**
Program Review Dates: **11/2023-11/2026**

Criteria Deficiencies:

No deficiencies identified.

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

	RECOMMENDATIONS
1	Increase clinical staff involvement with full scale disaster drills that utilize supplies and equipment, including decontamination.

Endorsement Consideration: Three (3) years (11/2026-11/2029) – **unconditional**

Comprehensive Children's Emergency Receiving Center (CCERC)
ERC DQ Completed: **09/29/2026**
Site Survey Conducted: **11/3/2026**
Program Review Dates: **11/2023-11/2026**

Criteria Deficiencies:

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

	CONDITION	DESCRIPTION	CORRECTIVE ACTION	DUE DATE
1	Noncompliance with OCEMS Policy #680.00 section VI. D. 1. "The hospital will designate a medical director for the Comprehensive Children's Emergency receiving Center who is board certified in pediatric emergency medicine or pediatrics".	Current CCERC Medical Director is board eligible and in process of certification.	Provide proof of Board Certification when completed.	ASAP

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

	RECOMMENDATIONS
1	Continue to increase pediatric education opportunities for clinical staff, EMS personnel, and community hospital partners.
2	Continue enhancing pediatric quality improvement plans through the development of meaningful, data-driven metrics.
3	Continue collaborating with the Rady Mission Operations Manager to expand pediatric capabilities and reduce transfers to Rady Orange whenever clinically appropriate.

Endorsement Consideration: Three (3) years (11/2026-11/2029) – **conditional**

Base Hospital (BH)
BH DQ Completed: **09/29/2026**
Site Survey Conducted: **11/3/2026**
Program Review Dates: **11/2026-11/2029**

Criteria Deficiencies:

No deficiencies identified.

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

	RECOMMENDATIONS
1	Continue implementing corrective action plans to strengthen physician onboarding processes and improve compliance with required education and meeting attendance.

Endorsement Consideration: Three (3) years (11/2026-11/2029) – **unconditional**

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Cardiovascular Receiving Center (CVRC)
BH DQ Completed: **09/29/2026**
Site Survey Conducted: **11/3/2026**
Program Review Dates: **11/2026-11/2029**

Criteria Deficiencies:

No deficiencies identified.

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

	RECOMMENDATIONS
1	Increase physician participation and engagement in County STEMI CQI meetings to support ongoing system collaboration and quality improvement efforts.

Endorsement Consideration: Three (3) years (11/2026-11/2029) –**unconditional**

Stroke-Neurology Receiving Center (SNRC)
BH DQ Completed: **09/29/2026**
Site Survey Conducted: **11/3/2026**
Program Review Dates: **11/2026-11/2029**

Criteria Deficiencies:

No deficiencies identified.

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

	RECOMMENDATIONS
1	Increase physician participation and engagement in County Stroke CQI meetings to support ongoing system collaboration and quality improvement efforts.

Endorsement Consideration: Three (3) years (11/2026-11/2029) – **unconditional**