COUNTY OF VENTURA		HEALTH CARE AGENCY
EMERGENCY MEDIC	CAL SERVICES	POLICIES AND PROCEDURES
	Policy Title:	Policy Number
	Receiving Hospital Standards	420
APPROVED	14/11	
Administration:	Me Ca	Date: September 1, 2018
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APPROVED	DZ = 1, ms	
Medical Director:	105 d) ms	Date: September 1, 2018
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Origination Date:	April 1, 1984	
Date Revised:	August 9, 2018	Effective Date: September 1, 2018
Date Last Reviewed:	August 9, 2018	
Review Date:	August 31, 2021	

- I. PURPOSE: To define the criteria, which shall be met by an acute care hospital in Ventura County for Receiving Hospital (RH) designation.
- II. AUTHORITY: Health and Safety Code, Division 2.5, Sections 1798, 1798.101, 1798.105, 1798.2 and California Code of Regulations, Title 22, Section 100175.

#### III. POLICY:

- A. A RH, approved and designated by the Ventura County, shall:
  - 1. Be licensed by the State of California as an acute care hospital.
  - Meet the requirements of the Health and Safety Code Sections 1250-1262 and Title 22, Sections 70411, 70413, 70415, 70417, 70419, 70649, 70651, 70653, 70655 and 70657 as applicable.
  - Be accredited by a CMS accrediting agency.
  - 4. Operate an emergency department (ED) that is designated by the State Department of Health Services as a "Comprehensive Emergency Department," "Basic Emergency Department" or a "Standby Emergency Department."
  - 5. Operate an Intensive Care Unit.
  - 6. Have the following specialty services available at the hospital or appropriate referral hospital (at the discretion of the Emergency Department Physician. and consultant Physician.) within 30 minutes:

Cardiology Anesthesiology Neurosurgery
Orthopedic Surgery General Surgery General Medicine

Thoracic Surgery Pediatrics Obstetrics

7. Have operating room services available within 30 minutes.

8. Have the following services available within 15 minutes.

X-ray Laboratory Respiratory Therapy

- Evaluate all ambulance transported patients promptly, either by RH Physician,
   Private Physician or other qualified medical personnel designated by hospital policy.
- 10. Have the capability at all times to communicate with the ambulances and the Base Hospital (BH).
- 11. Designate a ED Medical Director who shall be a physician on the hospital staff, licensed in the State of California and have experience in emergency medical care. The Medical Director shall:
  - a. Be regularly assigned to the ED.
  - b. Have knowledge of VCEMS policies and procedures.
  - c. Coordinate RH activities with BH, Prehospital Services Committee (PSC), and VCEMS policies and procedures.
  - d. Attend, or have designee attend, PSC meetings.
  - e. Provide ED staff education.
  - f. Schedule medical staffing for the ED on a 24-hour basis.
- 12. Agree to provide, at a minimum, on a 24-hour basis, a physician and a registered nurse (RN) that meets the following criteria:
  - a. All Emergency Department physicians shall:
    - 1) Be immediately available to the Emergency Department at all times.
    - 2) Be certified by the American Board of Emergency Medicine OR the American Osteopathic Board of Emergency Medicine OR be Board eligible OR have all of the following:
      - a) Have and maintain current Advanced Cardiac Life Support (ACLS) certification.
      - Have and maintain current Advanced Trauma Life Support (ATLS) certification.
      - c) Complete at least 25 Category I CME hours per year with content applicable to Emergency Medicine.
  - b. RH EDs shall be staffed by:
    - Full-time staff: those physicians who practice emergency medicine
       hours per month or more, and/or

- 2) Regular part-time staff: those physicians who see 90 patients or more per month in the practice of emergency medicine.
  - a) Formula: Average monthly census of acute patients divided by 720 hours equals average number of patients per hour. This figure multiplied by average hours worked by physician in emergency medicine equals patients per physician per month.
  - b) Physicians working in more than one hospital may total their hours.
  - Acute patients exclude scheduled and return visits, physicals, and patients not seen by the ED Physician.
  - d) During period of double coverage, the whole shall be met if one of the physicians meets the above standards.
- c. All RH RNs shall:
  - 1) Be regular hospital staff assigned solely to the ED for that shift.
  - 2) Maintain current ACLS certification.
- d. All other nursing and clerical personnel for the Emergency Department shall maintain current Basic Cardiac Life Support certification.
- e. Sufficient licensed personnel shall be staffed to support the services offered.
- Cooperate with and assist the PSC and EMS Medical Director in the collection of statistics for program evaluation.
- 14. Agree to maintain all prehospital data in a manner consistent with hospital data requirements and provide that the data be integrated with the patient's chart. Prehospital data shall include the Ventura County Electronic Patient Care Report (VCePCR), Paramedic Base Hospital communication form (from the BH), and documentation of a BH telephone communication with the RH.
- 15. Participate with the BH in evaluation of paramedics for reaccreditation.
- 16. Permit the use of the hospital helipad as an emergency rendezvous point if a State-approved helipad is maintained on hospital premises.
- B. There shall be a written agreement between the RH and EMS indicating the commitment of hospital administration, medical staff, and emergency department staff to meet requirements for ALS program participation as specified by EMS policies and procedures.
- C. EMS shall review its agreement with each RH at least every two years.

- D. EMS may deny, suspend, or revoke the approval of a RH for failure to comply with any applicable policies, procedures, or regulations. Requests for review or appeal of such decisions shall be brought to the Board of Supervisors for appropriate action.
- E. The EMS Medical Director may grant an exception to a portion of this policy upon substantiation of need by the PSC that, as defined in the regulations, compliance with the regulation would not be in the best interests of the persons served within the affected local area.
- F. A hospital that applies to become a RH in Ventura County must meet Ventura County RH Criteria and agree to comply with Ventura County regulation.
  - Application:
     Eligible hospital shall submit a written request for RH approval to the VCEMS, documenting the compliance of the hospital with the Ventura County RH.
  - Approval:
     Program approval or denial shall be made in writing by EMS to the requesting RH within a reasonable period of time after receipt of the request for approval and all

required documentation. This period shall not exceed three (3) months.

- G. ALS RHs shall be reviewed every two years.
  - 1. All RH shall receive notification of evaluation from the EMS.
  - 2. All RH shall respond in writing regarding program compliance.
  - 3. On-site visits for evaluative purposes may occur.
  - 4. Any RH shall notify the EMS by telephone, followed by a letter within 48 hours, of changes in program compliance or performance.
- H. Paramedics providing care for emergency patients with potentially serious medical conditions, and are within the catchment area of a hospital with a standby emergency department, shall make immediate base contact for destination determination. Examples of these patients would include, but are not limited to, patients with:
  - 1. Patients with seizure of new onset, multiple seizures within a 24-hour period, or sustained alteration in level of consciousness
  - 2. Chest pain or discomfort of known or suspected cardiac origin
  - 3. Sustained respiratory distress not responsive to field treatment
  - 4. Suspected pulmonary edema not responsive to field treatment
  - 5. Potentially significant cardiac arrhythmias
  - 6. Orthopedic emergencies having open fractures, or alterations of distal neurovascular status

- 7. Suspected spinal cord injury of new onset
- 8. Burns greater than 10% body surface area
- Drowning or suspected barotrauma with any history of loss of consciousness, unstable vital signs, or respiratory problems
- 10. Criteria that meet stroke, STEMI, or trauma criteria for transport to a specialty care hospital
- I. A RH with a standby emergency department only, offering "standby emergency medical service," is considered to be an alternative receiving facility. Patients may be transported to a standby emergency department when the use of the facility is in the best interest of patient care.
  - Patients that require emergent stabilization at an emergency department may be transported to a standby emergency department if a basic emergency facility is not within a reasonable distance. These would include patients:
    - a. In cardiac arrest with NO return of spontaneous circulation (ROSC) in the field
    - b. With bleeding that cannot be controlled
    - c. Without an effective airway
  - During hours of peak traffic, the Base Hospital MICN should make destination determinations based on predicted travel time and patient condition.
     Patients who meet criteria for trauma, stroke, or STEMI in the absence of a condition that meets I.1. above, will be directed to the appropriate destination.
  - A RH with a standby emergency department shall report to Ventura County EMS
     Agency any change in status regarding its ability to provide care for emergency patients.

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# COUNTY OF VENTURA EMERGENCY MEDICAL SERVICES

# RECEIVING HOSPITAL CRITERIA COMPLIANCE CHECKLIST

Receiving Hospital:		Date:
Э.		

			YES	NO
A.	Recei	ving Hospital (RH), approved and designated by the Ventura		
	Count	y , shall:		
	1.	Be licensed by the State of California as an acute care		
		hospital.		
	2.	Meet the requirements of the Health and Safety Code		
		Section 1250-1262 and Title 22, Sections 70411, 70413,		
		70415, 70417, 70419, 70649, 70651, 70653, 70655 and		
		70657 as applicable.		
	3.	Be accredited by a CMS accrediting agency		
	4.	Operate an Intensive Care Unit.		
	5.	Have the following specialty services available at the hospital (at the discretion of the Emergency Department (ED		
		Physician.) within 30 minutes:	) Physician, and	a consultant
		Cardiology		
		9.		
		Anesthesiology     Neurosurgery		
		Neurosurgery     Orthopodia Surgery		
		Orthopedic Surgery		
		General Surgery  Congret Medicine		
		General Medicine  There is Course and the cour		
		Thoracic Surgery		
		Pediatrics		
		Obstetrics		
	6.	Have operating room services available within 30 minutes.		
	7.	Have the following services available within 15 minutes.		
		• X-Ray		
		• Laboratory		
		Respiratory Therapy		
	8.	Evaluate all ambulance transported patients promptly,		
		either by RH Physician, Private Physician or other qualified		
		medical personnel designated by hospital policy.		
	9.	Have the capability at all times to communicate with the		
	10.	ambulances and the BH.  Designate an Emergency Department Medical Director who	chall ha a physi	cian on the
	10.	hospital staff, licensed in the State of California and have exp		
		medical care. The Medical Director shall:	penence in enie	rigorioy
		a. Be regularly assigned to the Emergency		
		Department.		
		b. Have knowledge of VC EMS policies and		
		procedures.		

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			YES	NO
	C.	Coordinate RH activities with Base Hospital,		
		Prehospital Services Committee (PSC), and		
		VCEMS policies and procedures.		
	d.	Attend or have designee attend PSC meetings.		
	e.	Provide Emergency Department staff education.		
	f.	Schedule medical staffing for the ED on a 24-hou	ır	
		basis.		
11.		e to provide, at a minimum, on a 24-hour basis, a		
		ician and a registered nurse that meets the following	)	
	criter			
	a.	All Emergency Department physicians shall:		
		<ol> <li>Be immediately available to ED at all time</li> </ol>	S.	
		<ol><li>Be certified by the American Board of</li></ol>		
		Emergency Medicine OR the American		
		Osteopathic Board of Emergency Medicin	е	
		OR be Board eligible OR have all of the		
		following:		
		a). Have and maintain current		
		Advanced Cardiac Life Support		
		(ACLS) certification.		
		b) Have and maintain current		
		Advanced Trauma Life Support		
		(ATLS)certification.		
		c) Complete at least 25 Category I		
		CME hours per year with content		
		applicable to Emergency Medicine		
	b.	RH EDs shall be staffed by:		
		Full-time staff: those physicians who		
		practice emergency medicine 120 hours p	er	
		month or more, and/or		
		2) Regular part-time staff: those physicians		
		who see 90 patients or more per month in		
		the practice of emergency medicine.		
		a) Formula: Average monthly census	3	
		of acute patients divided by 720		
		hours equals average number of		
		patients per hour. This figure		
		multiplied by average hours worke	d	
		by physician in emergency medicir		
		equals patients per physician per		
		month		
		b) Physicians working in more than		
		one hospital may total their hours		
		c) Acute patients exclude scheduled		
		and return visits, physicals, and		
		patients not seen by the ED		
		Physician		

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			YES	NO
		d) During period of double coverage, the whole shall be met if one of the physicians meets the above standards.)		
		c. All RH RNs shall:		
		<ol> <li>Be regular hospital staff assigned solely to the ED for that shift.</li> </ol>		
		<ol><li>Maintain current ACLS certification.</li></ol>		
		<ul> <li>All other nursing and clerical personnel for the ED shall maintain current Basic Cardiac Life Support certification.</li> </ul>		
		e. Sufficient licensed personnel shall be utilized to support the services offered.		
	12.	Cooperate with and assist the PSC and EMS Medical Director in the collection of statistics for program evaluation.		
	13.	Agree to maintain all prehospital data in a manner consistent with hospital data requirements and provide that the data be integrated with the patient's chart. Prehospital data shall include the VCePCR, paramedic Base Hospital communication form (from the BH), and documentation of a BH telephone communication with the RH.		
	14.	Participate with the BH in evaluation of paramedics for reaccreditation.		
	15.	Permit the use of the hospital helipad as an emergency rendezvous point if a State-approved helipad is maintained on hospital premises.		
B.	indica staff, a	shall be a written agreement between the RH and EMS ting the commitment of hospital administration, medical and emergency department staff to meet requirements for syment as specified by EMS policies and procedures.		

#### COUNTY OF VENTURA EMERGENCY MEDICAL SERVICES

### RECEIVING HOSPITAL PHYSICIAN CRITERIA COMPLIANCE CHECKLIST

Physician Name:		Date:	
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All Emergency Department physicians shall:		YES	NO	
1.	<ol> <li>Be immediately available to the RH ED at all times.</li> </ol>			
2.	2. Be certified by the American Board of Emergency			
	Medicin	ne OR the American Osteopathic Board of		
	Emerge	ency Medicine OR be Board eligible OR have all of		
	the following:			
	<ul> <li>a. Have and maintain current ACLS certification.</li> </ul>			
	b.	Complete at least 25 Category I CME hours per		
		year with content applicable to Emergency		
		Medicine.		
	C.	Have and maintain current Advanced Trauma Life		
		Support (ATLS) certification.		

### The above named physician is:

1)	Full-time staff: A physician who practices emergency medicine	
	120 hours per month or more, and/or	
2)	Regular part-time staff: A physician who see 90 patients or more per month in the practice of emergency medicine (Average monthly census of acute patients divided by 720 hours equals average number of patients per hour. This figure multiplied by average hours worked by physician in emergency medicine equals patients per physician per month, Physicians working in more than one hospital may total their hours, Acute patients exclude scheduled and return visits, physicals, and patients not seen by the ED Physician)	

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#### COUNTY OF VENTURA EMERGENCY MEDICAL SERVICES

RECEIVING HOSPITAL STANDBY EMERGENCY DEPARTMENT ADDITIONAL CRITERIA COMPLIANCE CHECKLIST

Receiving Hospital w/Standby ED:	Date:

		EMS REVIEW	
The R	H with standby ED has:	YES	NO
A.	Medical staff, and the availability of the staff at various times to		
	care for patients requiring emergency medical services.		
B.	Ability of staff to care for the degree and severity of patient injuries		
	or condition.		
C.	Equipment and services available at the facility necessary to care		
	for patients requiring emergency medical services and the		
	severity of their injuries or condition.		
D.	During the current 2-year evaluation period, has reported to		
	Ventura County EMS Agency any change in status regarding its		
	ability to provide care for emergency patients.		
E.	Authorization by the Ventura County EMS Agency medical		
	director to receive patients requiring emergency medical services,		
	in order to provide for the best interests of patient care.		
COM	MENTS		