

***COUNTY OF KERN
EMERGENCY MEDICAL SERVICES
DEPARTMENT***



***AMBULANCE PATIENT TRANSPORT DESTINATION -
HOSPITAL EMERGENCY DEPARTMENT
STATUS POLICIES & PROCEDURES***

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POLICY #4200.6500 AMBULANCE PATIENT TRANSPORT DESTINATION –

KERN COUNTY EMS DEPARTMENT
Effective Date: 07/01/91
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Ambulance Patient Transport Destination –
Hospital E.D. Status Policies & Procedures

Policy #: 4200.6500 - .6599

***HOSPITAL EMERGENCY DEPARTMENT STATUS POLICIES &
PROCEDURES***

I. INTENT:

- A. The intent of these policies and procedures is to ensure appropriate emergency medical care for the public of Kern County by ambulance transport of emergency patients to the most accessible emergency medical facility equipped, staffed and prepared to administer care appropriate to the needs of the patient(s).**

II. GENERAL PROVISIONS:

- A. This policy shall be used to manage prehospital ambulance patient transport within the County of Kern (County). This policy shall be used by and is applicable to ambulance services and hospital emergency departments in regard to prehospital ambulance patient transport destination within the County.**
- B. E.D. Saturation Status, E.D. Closure Status or E.D. Rotation Status shall only be applicable to areas served by two or more hospital emergency departments where reasonable and timely alternatives exist for hospital emergency department patient care authorized by the Kern County EMS Department (Department). Centralized Ambulance Routing Status or Hospital Disaster Closure Status may be implemented for any area of Kern County as determined by Department staff.**
- C. This policy shall not be applicable to general acute care hospital ambulance patient transfers under the provisions of Sections 1317, et al. of the California Health and Safety Code unless Hospital Disaster Closure Status due to internal or external disaster is placed into effect by Department staff.**
- D. The Department shall be responsible to maintain policy compliance within the EMS system. The Department may, at any time, inspect availability of emergency medical services within the system. In conjunction with ambulance providers and Hospital Emergency Departments, the Department may revise or modify this policy when necessary to protect public health and safety. Hospital E.D. Status categories shall not apply to mass casualty incidents or multi-casualty incidents when the Kern County Med-Alert system is activated.**
- E. Only the Department may authorize or cancel E.D. Closure Status, Centralized E.D. Routing Status, or Hospital Disaster Closure Status within the EMS system.**
- F. An emergency department shall not order or direct ambulance patient transport to another emergency department or facility. Ambulance patient transport destination shall be determined under the full authority of the ambulance patient attendant or as specified by Department staff.**
- G. At the time of ambulance communications with a hospital emergency department,**

the hospital emergency department may advise the transporting ambulance of unavailable services the hospital normally provides.

- H. The hospital emergency department shall be the responsible contact source for hospital emergency department status. The Department may contact the hospital emergency department or conduct an on-site inspection at any time to validate, clarify or update hospital emergency department status.
- I. Rotor-Wing Air Ambulance patient transport destination shall be in accordance with these policies for Hospital Emergency Departments that have a licensed helipad. Hospitals that do not have a licensed helipad shall not be used for Air Ambulance patient destination.
- J. Specific patient problems (Case Specific Hospitals) described in Section IV. B. 1. (Orthopedic, Cardiac, Pediatric Admission, Neurosurgical, Neonatal, Obstetrical, Sexual Assault, Psychiatric, Prisoner) shall be transported to one of the designated Hospital Emergency Departments on Open E.D. Status or E.D. Saturation Status (if all Case Specific Hospitals are on E.D. Saturation Status). Absolute patient refusals shall be coordinated by ambulance personnel. Department on-call staff may be contacted for directions in these cases.

III. HOSPITAL EMERGENCY DEPARTMENT STATUS CATEGORIES:

- A. The following hospital status categories shall be the only categories which may be activated within the EMS system:
 - 1. **E.D. Open Status:** The hospital emergency department is open and able to provide emergency department level patient care for ambulance patients. E.D. Open Status is activated by hospital emergency department staff through Control-5 and becomes effective when ambulance providers receive pager notification from Control-5.
 - 2. **E.D. Saturation Status:** E.D. Saturation Status is applicable when an emergency department is experiencing the inability to move patients through the emergency department, or patient acuity demands all of emergency department staff resources which results in an actual threat to the health and safety of any additional patients received by ambulance. E.D. Saturation Status is activated by hospital emergency department staff through Control-5 and becomes effective when ambulance providers receive pager notification from Control-5. Emergency Department Saturation Status shall mean that either or both of the following criteria are met:
 - a. Twenty percent (20%) or more licensed emergency

department beds are occupied by critical patients requiring complete commitment of all emergency department staff and resources; or

b. Twenty percent (20%) or more licensed emergency department beds are occupied by patients requiring in-hospital admission and the necessary admission beds are not available; and the remaining emergency department beds are filled to facility capacity with non-ambulatory patients causing overload of all emergency department resources.

3. **E.D. Rotation Status:** E.D. Rotation Status is automatically applied when all Bakersfield area hospital emergency departments are on E.D. Saturation Status at the same time. Each ambulance patient transport is directed to a specific hospital emergency department based on a specific hospital emergency department rotation sequence by ambulance service dispatch. Certain patient problem categories are routed to Case Specific Hospitals in accordance with these policies which does not affect the standard sequence of E.D. rotation. For ambulance providers based outside the Bakersfield area that are transporting to the Bakersfield area, the rotation sequence is not applicable.

4. **E.D. Closure Status:** E.D. Closure Status may only be authorized by EMS Department staff. The Department staff will assess the situation, conduct an on-site inspection if appropriate, and determine the need for E.D. Closure Status activation. E.D. Closure Status is not valid until authorized by Department staff. The Department reserves the right to deny a request for E.D. Closure Status or deactivate E.D. Closure Status based on current status of the EMS system, on-site inspection findings, or for other system needs. E.D. Closure Status only applies to ambulance patient transport to the Emergency Department and does not affect ambulance patient transport direct to other areas of the hospital.

5. **Centralized E.D. Routing Status:** During serious overload periods, the Department staff may decide to implement the Kern County Med-Alert System to conduct centralized routing of all ambulance patient transports to specific hospital emergency departments. A hospital emergency department shall not refuse to accept an ambulance patient routed through the Kern County Med-Alert System by Department staff. Upon activation, the Department staff will specify which ambulance services and hospital emergency departments will be involved in Kern County Med-Alert System centralized ambulance transport routing and the communication mechanism. The Department staff will assess on-going status of each hospital emergency department and direct ambulance patient transport destinations as appropriate.

6. **Hospital Disaster Closure Status:** An internal or external facility hazard that threatens the health or safety of emergency patients (fire, flood, power outage, bomb threat, or incident outside of emergency department entrance which would compromise safe patient receipt) or discontinuation of emergency services. Hospital Disaster Closure Status applies to the entire hospital facility. No ambulance patient transports are to be received to any area of the hospital. Hospital Disaster Closure Status must be authorized by Department staff to be placed into effect for the EMS system. The Department may deactivate Hospital Disaster Closure Status when appropriate.

7. **Temporary Hospital Service Advisories:** The Department may authorize issuance of certain temporary hospital service advisories to ambulance providers that may affect emergency department patient care capability for specific types of patients (example – E.D. C-T Scanner down). Temporary hospital service advisories are provided as information only, do not directly influence transport destination decisions, but will be considered in the transport destination decision process. Emergency departments shall advise Control-5 when the temporary hospital service advisory is no longer in effect.

IV. AMBULANCE PATIENT TRANSPORT DESTINATION PROCEDURES:

A. Entire Kern County Area:

1. Ambulance companies providing service within metropolitan Bakersfield shall maintain current hospital status information and shall be responsible to provide that status to ambulance personnel staffing basic life support (BLS) ambulances and advanced life support (ALS) ambulances.

2. Ambulance personnel providing service outside of the metropolitan Bakersfield area that are not notified of each hospital status change but may provide prehospital patient transport into the metropolitan Bakersfield area shall contact Control-5 regarding hospital status before beginning patient transport or as soon as possible after beginning patient transport.

3. BLS and ALS ambulance personnel shall initiate hospital emergency department communications as soon as possible.

4. The Paramedic attendant on a Paramedic Ambulance shall have the final decision in accordance with these policies and procedures in regard to ambulance patient transport destination unless ambulance patient transport destination is directed by Department staff. For transports to a hospital

emergency department outside the Bakersfield area, patients that meet ALS Extremis Criteria shall be transported to the closest hospital emergency department in travel time from the incident location. For transports to a hospital emergency department within the Bakersfield area, patients that meet ALS extremis criteria shall be transported to the most appropriate hospital emergency department based on the patient problem that is on Open Status or E.D. Saturation Status.

5. ALS Extremis Criteria shall include any one of the following:
 - a. Unmanageable airway or respiratory arrest;
 - b. Uncontrolled hemorrhage with signs of hypovolemic shock;
 - c. Cardiopulmonary arrest; or
 - d. Obstetrical Case transports to the Bakersfield area that meet ALS Extremis Criteria a., b., or c.; or have 2nd or 3rd trimester altered mental status, trauma with abdominal pain, respiratory distress, vaginal hemorrhage, history of pregnancy problems, or no pre-natal care shall be transported to Kern Medical Center or CHW-Bakersfield Memorial Hospital.
 - e. Patient transports to the Bakersfield area that meet Case Specific Hospital criteria (Orthopedic, Cardiac, Pediatric Admit, Neurosurgical, Neonatal, Sexual Assault, Psychiatric, Prisoners) that meet ALS Extremis Criteria a., b., or c. shall be transported to a Case Specific Hospital as listed in Section IV. B. 1.
6. Outside of the Bakersfield area, a BLS Ambulance is required to provide ambulance patient transport to the closest hospital emergency department from the incident location if a rural hospital emergency department is closest in travel time.
7. For BLS Ambulance patient transports to a hospital emergency department within the Bakersfield area, the EMT-1 attendant on the BLS Ambulance shall have the final decision in accordance with these policies and procedures in regard to ambulance patient transport destination unless ambulance patient transport destination is directed by Department staff. For BLS Ambulance patient transports into the Bakersfield area, the EMT-1 attendant may decide to bypass any hospital emergency department within the Bakersfield area to provide patient transport to a hospital that can provide more appropriate patient care based on the patient problem in accordance with destination criteria specified in Section IV. B. if applicable.

For BLS Ambulance transports to a hospital emergency department within the Bakersfield area, patients that meet BLS extremis criteria shall be transported to the most appropriate hospital emergency department based on the patient problem that is on Open Status or E.D. Saturation Status.

8. **BLS Extremis Criteria shall include any one of the following:**
 - a. **Unconscious, unresponsive;**
 - b. **Respiratory arrest;**
 - c. **Unmanageable airway;**
 - d. **Uncontrolled hemorrhage;**
 - e. **Cardiopulmonary arrest; or**
 - f. **Obstetrical Case transports to the Bakersfield area that meet BLS Extremis Criteria a., b., c., d., or e.; or have 2nd or 3rd trimester altered mental status, trauma with abdominal pain, respiratory distress, vaginal hemorrhage, history of pregnancy problems, or no pre-natal care shall be transported to Kern Medical Center or CHW-Bakersfield Memorial Hospital.**
 - g. **Patient transports to the Bakersfield area that meet Case Specific Hospital criteria (Orthopedic, Cardiac, Pediatric Admit, Neurosurgical, Neonatal, Sexual Assault, Psychiatric, Prisoners) that meet BLS Extremis Criteria a., b., c., d. or e. shall be transported to a Case Specific Hospital as listed in Section IV. B. 1.**

B. Ambulance Patient Transport to the Bakersfield area – Case Specific Hospitals:

1. **For all BLS and ALS Ambulance patient transports to a hospital emergency department within the Bakersfield area, the following patient problems shall be transported to one of the following hospital emergency departments on Open E.D. Status, E.D. Saturation Status or if E.D. Rotation Status is in effect:**
 - a. **Orthopedic: Patients with orthopedic injuries or problems shall be transported to one of the following hospital emergency departments (Bakersfield Heart Hospital can manage Orthopedic Extremity Fracture Cases that are simple, closed, without joint involvement or neurovascular compromise):**
 - 1) **CHW Mercy Hospital;**
 - 2) **Kern Medical Center;**
 - 3) **CHW Bakersfield Memorial Hospital; or**
 - 4) **San Joaquin Community Hospital.**
 - b. **Cardiac: Patients presenting with symptoms of unstable angina pectoris or acute myocardial infarction shall be transported to one of the following hospital emergency departments:**
 - 1) **CHW Bakersfield Memorial Hospital;**

- 2) San Joaquin Community Hospital; or
 - 3) Bakersfield Heart Hospital.
- c. **Pediatric Admission:** Patients under the age of 14 years that will likely require hospital admission shall be transported to one of the following hospital emergency departments:
- 1) CHW Bakersfield Memorial Hospital; or
 - 2) Kern Medical Center.
- d. **Neurosurgical:** Head injury patients with altered mental status shall be transported to one of the following hospital emergency departments:
- 1) Kern Medical Center;
 - 2) CHW Mercy Hospital; or
 - 3) San Joaquin Community Hospital.
- e. **Neonatal:** Neonatal patients (less than 1 month of age or under 5 kilograms body weight) shall be transported to one of the following hospital emergency departments:
- 1) CHW Bakersfield Memorial Hospital; or
 - 2) Kern Medical Center.
- f. **Obstetrical:** Obstetrical patients that do not meet a high risk obstetrical description in ALS or BLS Extremis criteria shall be transported to one of the following hospital emergency departments:
- 1) Kern Medical Center;
 - 2) CHW Bakersfield Memorial Hospital; or
 - 3) San Joaquin Community Hospital.
- g. **Sexual Assault:** Sexual assault patients shall be transported to one of the following hospital emergency departments:
- 1) CHW Bakersfield Memorial Hospital; or
 - 2) Kern Medical Center.

- h. **Psychiatric Hold:** Patients that have a psychiatric hold placed into effect by law enforcement that do not have an apparent emergency medical condition shall be transported to the following emergency department:
 - 1) **Kern Medical Center.**
 - i. **Local, State or Federal Prisoners:** Patients that are local, State or Federal prisoners shall be transported to the contracted hospital emergency department.
 - j. **For Orthopedic, Cardiac, Pediatric Admission, Neurosurgical, Neonatal, Obstetrical, Sexual Assault, Psychiatric Hold or Prisoner/Inmate cases,** if all specified hospital emergency departments for a specific patient problem have E.D. Saturation Status in effect, the ALS or BLS Ambulance shall provide patient transport to a specified E.D. on E.D. Saturation Status.
2. **If the specified hospital emergency department is on E.D. Closure Status or Hospital Disaster Closure Status,** the BLS or ALS Ambulance shall provide patient transport to an Open Status emergency department, or the most appropriate hospital emergency department on E.D. Saturation Status if all specified emergency departments are on E.D. Saturation, consistent with Section IV. B. 1. a. through i., or to the next specified emergency department in the E.D. rotation sequence if E.D. Rotation Status is in effect consistent with Section IV. B. 1. a. through i.
 3. **Upon activation of Centralized E.D. Routing Status,** the Department staff will specify which ambulance services and hospital emergency departments will be involved in centralized ambulance transport routing and the communication mechanism. The Department staff will assess on-going status of each emergency department and direct ambulance patient transport destinations as appropriate.

V. **E.D. OPEN STATUS AND E.D. SATURATION STATUS:**

- A. **E.D. Open Status:** The hospital emergency department is open and able to provide emergency department level patient care for ambulance patients. E.D. Open Status is activated by hospital emergency department staff through Control-5 and becomes effective when ambulance providers receive notification from Control-5.

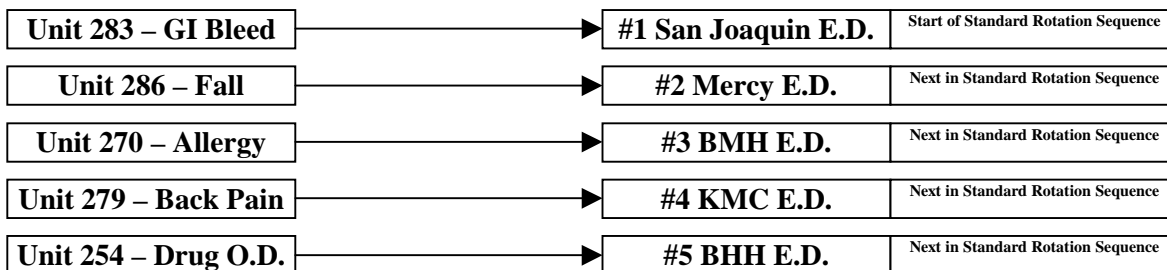
- B. E.D. Saturation Status: E.D. Saturation Status is applicable when an emergency department is experiencing the inability to move patients through the emergency department, or patient acuity demands all of emergency department staff resources which results in an actual threat to the health and safety of any additional patients received by ambulance. E.D. Saturation Status is activated by hospital emergency department staff through Control-5 and becomes effective when ambulance providers receive notification from Control-5. Emergency Department Saturation Status shall mean that either or both of the following criteria are met:**
- 1. Twenty percent (20%) or more licensed emergency department beds are occupied by critical patients requiring complete commitment of all emergency department staff and resources; or**
 - 2. Twenty percent (20%) or more licensed emergency department beds are occupied by patients requiring in-hospital admission and the necessary admission beds are not available; and the remaining emergency department beds are filled to facility capacity with non-ambulatory patients causing overload of all emergency department resources.**
- C. Hospital emergency departments shall maintain accurate E.D. status through Control-5. When E.D. Saturation Status criteria are no longer applicable, the hospital emergency department shall change to Open E.D. Status.**
- D. Control-5 will notify the Department on-call staff of any status change in accordance with agreed upon procedures. The affected ambulance services will be notified of the change in status. The Department and Control-5 will maintain status of all hospital emergency departments.**
- E. Ambulance services shall provide current hospital emergency department status updates to ambulance personnel upon confirmation that patient transport is to be provided.**
- F. When one or more Bakersfield area emergency departments are on Open Status, ambulance patients will be transported to emergency departments in accordance with Section IV. of these policies.**
- G. Patients in BLS or ALS Extremis shall be transported to the most appropriate Open E.D. Status or E.D. Saturation Status hospital emergency department in accordance with Section IV. Obstetrical Case transports to the Bakersfield area that meet ALS Extremis Criteria a., b., c., or d.; or BLS Extremis Criteria a., b., c, d., e., or f. shall be transported to Kern Medical Center or CHW-Bakersfield Memorial Hospital.**
- H. During Kern County Med-Alert System operations, the Department may direct**

ambulance patient transport to a hospital emergency department on E.D. Saturation Status.

VI. E.D. ROTATION STATUS:

- A.** E.D. Rotation Status is automatically placed into effect when all Bakersfield area emergency departments have E.D. Saturation Status in effect. Upon receiving notification of all hospital emergency departments being on E.D. Saturation Status, the ambulance service dispatch center shall implement E.D. Rotation Status.
- B.** Other Ambulance Services transporting to a Bakersfield area emergency department shall transport ambulance patients to the most appropriate emergency department when E.D. Rotation Status is in effect and are not required to follow a sequence of E.D. Rotation Status. Other Ambulance Services transporting to a Bakersfield area emergency department shall have the final choice of ambulance patient transport destination in accordance with Section IV. of these policies.
- C.** The ambulance service dispatch center shall use the following E.D. Rotation Status sequence:
 - 1. San Joaquin Community Hospital E.D.
 - 2. CHW Mercy Hospital E.D.
 - 3. CHW Bakersfield Memorial Hospital E.D.
 - 4. Kern Medical Center E.D.
 - 5. Bakersfield Heart Hospital E.D.
- D.** During E.D. Rotation Status, patient transport destination shall be determined in accordance with Section IV. of these policies. Specialty patient transports in accordance with Section IV. B. of these policies (Orthopedic, Cardiac, OB, Pediatric Admit, Neonatal, Neurosurgical, Psychiatric Hold, or Prison Contracts) shall be transported to a specified hospital emergency department that is next in the rotation sequence. Afterward, the ambulance service dispatch center shall continue rotation from the last hospital emergency department used in the standard rotation sequence.

Example:



KERN COUNTY EMS DEPARTMENT

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**Ambulance Patient Transport Destination –
Hospital E.D. Status Policies & Procedures**

Policy #: 4200.6500 - .6599

Unit 279 – Ped Admit	→	#3 BMH E.D.	Specialty Transport – BMH E.D. Next in List of Preferred E.D.'s
Unit 283 – Nausea	→	#1 San Joaquin E.D.	Next in Standard Rotation Sequence
Unit 284 – Arm Fx	→	#2 Mercy E.D.	Next in Standard Rotation Sequence
Unit 271 – Cardiac	→	#3 BMH E.D.	Specialty Transport – BMH E.D. Next in List of Preferred E.D.'s – in Rotation
Unit 255 – Extremis	→	#1 San Joaquin E.D.	Specialty Transport – SJH E.D. Closest - Rotation Sequence Not Changed
Unit 283 – MVA	→	#4 KMC E.D.	Next in Standard Rotation Sequence
Unit 283 – GSW	→	#5 BHH E.D.	Next in Standard Rotation Sequence
Unit 264 – OB Extremis	→	#3 BMH E.D.	Specialty Transport – BMH E.D. Next in List of Preferred E.D.'s

- E. Patients in BLS or ALS Extremis shall be transported to the most appropriate hospital emergency department in accordance with Section IV. BLS or ALS Extremis patient transports shall not affect the sequence of E.D. Rotation Status. Obstetrical Case transports to the Bakersfield area that meet ALS Extremis Criteria a., b., c., or d.; or BLS Extremis Criteria a., b., c, d., e., or f. shall be transported to Kern Medical Center or CHW-Bakersfield Memorial Hospital.
- F. At the start of each E.D. Rotation Status period, the ambulance service dispatch center shall start at the beginning of the E.D. Rotation Status sequence. E.D. Rotation Status sequence shall be provided by ambulance service dispatch upon confirmation by the on-scene ambulance personnel that the patient is to be transported. Ambulance Service dry runs, patient transport refusals after an E.D. Rotation assignment is provided, ambulance patient transport for direct hospital admission, outpatient services, or other hospital services which do not involve patient transport to the hospital emergency department shall not be applicable to E.D. Rotation Status.
- G. Absolute patient or responsible party refusals of patient transport to an assigned hospital emergency department during E.D. Rotation Status shall be coordinated by ambulance personnel in accordance with the E.D. Rotation Status sequence and Case Specific Hospital criteria. Department on-call staff may be contacted for directions in these cases.
- H. During E.D. Rotation Status, Department staff may authorize E.D. Closure Status of only one emergency department at a time. When E.D. Closure Status is activated by Department staff, the E.D. shall be removed from the E.D. Rotation Status sequence by the ambulance service dispatch center and shall receive no ambulance patients to the E.D. unless directed by Department staff. When E.D. Closure Status

is cancelled by Department staff, the ambulance service dispatch center shall maintain the same E.D. Rotation Status sequence.

- I. E.D. Rotation Status shall continue until one or more area emergency departments change to Open E.D. Status or Centralized E.D. Routing Status is activated.

VII. E.D. CLOSURE STATUS:

A. E.D. Closure Status may only be authorized by EMS Department staff. The Department staff will assess the situation, conduct a rapid on-site inspection if appropriate, and determine the need for E.D. Closure Status activation. E.D. Closure Status is not valid until authorized by Department staff. The Department reserves the right to deny a request for E.D. Closure Status or deactivate E.D. Closure Status based on current status of the EMS system, on-site inspection findings, or for other system needs. A Bakersfield area hospital emergency department may request “E.D. Closure Status” authorization through Department staff when all of the following are applicable:

- 1. The volume of critical patients has completely overwhelmed the ability of the Emergency Department to provide emergency patient care services which creates a dangerous environment for any additional patients;
- 2. The emergency department has made a maximum effort to call in additional staff, activate additional emergency department bed capacity and other resources to mitigate the situation;
- 3. The hospital has made a maximum effort to staff and activate additional Hospital admission beds in intensive care, medical/surgical or other areas to mitigate the situation; and
- 4. The emergency department has contacted and advised hospital administration of intent to request E.D. Closure Status through the Kern County EMS Department.

B. The emergency department may request E.D. Closure Status through Control-5. All E.D. Closure Status requests shall be referred to Department staff for the final decision to authorize or deny the request.

C. The Department will contact the emergency department requesting E.D. Closure Status, assess the situation and conduct an assessment of other area emergency departments. The assessment process is as follows:

- 1. Number of ICU, CCU, DOU, telemetry and medical/surgical admission patients being held in the emergency department awaiting admission with no available admission beds;

2. Number of emergency department patients requiring 1:1 care due to acute condition;
 3. Volume of ambulance patient transports to the emergency department over the past hour;
 4. Status of emergency department Physician, R.N., LVN and auxiliary staffing;
 5. Number of emergency department waiting room patients;
 6. Number of patients in the emergency department that are non-admission cases;
 7. Number of additional beds brought to the emergency department (beyond the standard E.D. bed volume);
 8. Emergency department efforts to call in additional staff;
 9. Estimated time needed on E.D. Closure Status; and
 10. Status of other area Hospital Emergency Departments.
- D. The Department shall not permit more than one E.D. to be on E.D. Closure Status at one time. If another area emergency department has a similar level of patient overload as the requesting emergency department, E.D. Closure Status shall not be authorized. Based on E.D. assessment, the Department may deactivate E.D. Closure Status when another E.D. has a more serious patient overload situation.
- E. When E.D. Closure Status is authorized by Department staff, the emergency department will be withdrawn from receiving all ambulance patient transports to the emergency department. When E.D. Closure Status is in effect, the emergency department shall receive no ambulance patients, unless directed to the E.D. through the Kern County Med-Alert System by Department staff. Ambulance services based outside the Bakersfield area shall not transport a patient to an emergency department on E.D. Closure status unless directed through the Kern County Med-Alert System by Department staff.
- F. E.D. Closure Status shall only affect ambulance transports to the emergency

department and shall not include ambulance transports to another area of the hospital, transfers for direct admission to another area of the hospital, or for tests/procedures not involving the emergency department.

- G. Obstetrical cases over 20 weeks gestation may be transported direct to CHW-Bakersfield Memorial Hospital Labor/Delivery or Kern Medical Center Labor/Delivery if E.D. Closure Status is in effect and the case is directed to labor and delivery by the emergency department.

VIII. CENTRALIZED MED-ALERT ROUTING STATUS OPERATIONS:

- A. During serious overload periods, the Department staff may decide to implement Centralized E.D. Routing Status through the Kern County Med-Alert System to conduct centralized routing of all ambulance patient transports to specific emergency departments. An emergency department shall not refuse to accept an ambulance patient routed through the Kern County Med-Alert System by Department staff.
- B. Upon activation of Centralized E.D. Routing Status, the Department staff will specify which ambulance services and hospital emergency departments will be involved in centralized ambulance transport routing and the communication mechanism. The Department staff will assess on-going status of each emergency department and direct ambulance patient transport destinations as appropriate.
- C. All ambulance services shall comply with Department staff directions for ambulance transport destination to a specific emergency department. When Centralized E.D. Routing Status is activated, each ambulance shall contact Department staff when prepared for patient transport and provide each of the following:
 - 1. Patient age, sex, and chief complaint or problem;
 - 2. A brief overview of patient history/physical exam findings, signs, symptoms, vital signs and previous medical history; and
 - 3. Any patient request for a specific emergency department or ambulance crew recommendation.
- D. The Department staff will route the ambulance to a specific emergency department based on the information provided and current system status. The process will be maintained until deactivated by Department staff. Routing of ambulance transport destinations by Department staff will be primarily based on the objective to deliver patients to emergency departments to provide emergency care. When possible, patients will be routed to hospitals based on specific hospital care services. Based on the current system status, patient and/or ambulance crew

requests for transport to a specific hospital may be denied by Kern County EMS Department staff.

- E. During Centralized E.D. Routing Status, E.D. Closure Status shall not be applicable.

IX. HOSPITAL DISASTER CLOSURE STATUS:

- A. Hospital Disaster Closure Status may be activated by Department staff for an internal or external facility hazard that threatens the health or safety of patients (fire, flood, power outage, bomb threat, or incident outside of emergency department entrance which would compromise safe patient receipt). Hospital Disaster Closure Status applies to the entire hospital facility. No ambulance patient transports are to be received to any area of the hospital when Hospital Disaster Closure Status is in effect.

X. TRAINING AND MAINTENANCE:

- A. All existing and new ambulance service EMT-1 and Paramedic personnel in Kern County shall receive training consisting of policies review and practical exercises regarding patient transport and hospital E.D. status.
- B. All existing and new Bakersfield area ambulance service dispatch personnel shall receive training consisting of policies review and practical exercises regarding patient transport and hospital E.D. status.
- C. All existing and new Hospital Emergency Department nursing and physician personnel shall receive training consisting of policies review and practical exercises regarding patient transport and hospital E.D. status.
- D. The Department may specify on-going training requirements in hospital E.D. status for ambulance service or hospital emergency department personnel as needed.

XI. DOCUMENTATION, DATA & MEDICAL CONTROL:

- A. The Department shall maintain records of hospital emergency department status.
- B. Hospital emergency departments shall maintain records of hospital emergency department status defining conditions which cause any status change and shall make hospital emergency department status records available for Department review upon request.
- C. A valid copy of internal hospital emergency department status policies, procedures, protocols and any revisions regarding hospital emergency department status shall be maintained at the Department by each participating hospital.

- D. The Department should be immediately contacted regarding any incident or issue regarding ambulance patient transportation which indicates any threat or risk to public health and safety. A written complaint and related records must be submitted to the Department for investigation of any incident or issue related to this policy.**
- E. The Department may contact the California EMS Authority and/or California Department Health Services to provide information regarding Hospital Emergency Department status in Kern County as appropriate.**
- F. The Department is available on a continuous basis through Control-5 at (661) 868-4000.**

RB:POLICY:Amb Hosp ED Policy 08 11-99