Division: Emergency Medical Services Agency

## POLICY #151: DESTINATION

## I. PURPOSE

A. To define the patient destination criteria in the County of San Luis Obispo (SLO) Emergency Medical Services (EMS) system and assure patient transportation to the closest hospital or approved Specialty Care Center for their immediate needs, regardless of their ability to pay.

## II. DEFINITIONS

- Multi-casualty Incident (MCI)
  - MCI LEVEL I 5-10 patients
     A suddenly occurring event that has the potential to overwhelm any part of the EMS system and/or the number of patients is greater than can be handled by the usual initial response.
  - MCI LEVEL II > 11 patients
     A suddenly occurring event that has the potential to overwhelm any part of the
     EMS system and/or has the need for additional resources requested within the
     Operational Area from neighboring counties.
- III. POLICY
  - A. This policy determines the hospital destination of all patients served by ALS personnel accredited or recognized by the EMS Agency. It is operative at all times during the usual operations of the EMS system, except for a declared Multi-Casualty Incident in which case EMS Agency Multi-Casualty Field Incident Operation's Policy #210 must be initiated.
  - B. Specialty Care destination policies must be followed in determining destinations of patients meeting those criteria.
  - C. EMS Aircraft destination must follow the guidelines in EMS Agency Policy EMS Helicopter Operations #155.
  - D. Exceptions to destination made by patient request must follow EMS Agency Patient Refusal of Treatment and/or Transport Policy #203.
  - E. MedCom must be notified in an incident where it is determined by the EMS responders that a MCI Level I or Level II is initiated. MedCom must contact the receiving hospitals via radio, Reddinet or other means of communication to determine the number and category of patients each hospital can receive and must communicate this information back to the scene to assist with the determination of patient destination.

- F. The primary responsibility for implementation of this policy lies with the Incident Commander, ALS providers and the designated Specialty Care Center or Base Hospital. However, this policy also defines the responsibilities of the EMS Agency and the Receiving Hospitals for the establishment, revision, monitoring and education regarding its provisions.
- G. ALS Personnel are responsible for:
  - 1. Obtaining pertinent patient clinical assessment data.
  - 2. Determining closest Receiving Hospital or approved Specialty Care Center
  - 3. Considering and determining appropriateness of the patient's stated hospital preference for the patient's immediate medical needs.
- H. A Base Hospital or Specialty Care Center is responsible for confirming/clarifying patient assessment data to determine the most appropriate hospital destination. In the event of unusual circumstances or uncertainty about patient assessment or destination, ALS personnel must consult with the designated Base Hospital or Specialty Care Center for destination.
- I. The provider agencies, the Base Hospitals, Specialty Care Centers and all other Receiving Hospitals are responsible for educating and training their staff in compliance with this policy and its revisions.
- J. Quality Improvement Consistent with Chapter 12 of Title 22 of the California Code of Regulation, EMS Agency and other EMS system participants will participate in periodic reviews of this policy as outlined in EMS Agency Policy #100: Continuous Quality Improvement.
- IV. AUTHORITY
  - California Health and Safety Code, Division 2.5, Sections 1797.204, 1797.206, 1797.220, 1797.222, 1798. (a), 1798.100, 1798.102, 1798.2, and 1798.3.
  - California Code of Regulations, Title 22, Sections 100167 (b) 3 and 100168.