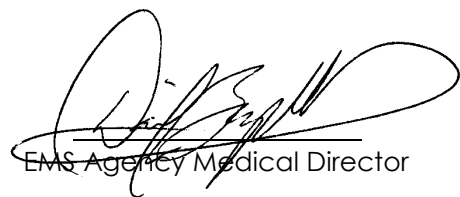


EL DORADO COUNTY EMS AGENCY ADMINISTRATIVE POLICIES

Effective: July 1, 2017



EMS Agency Medical Director

DOWNGRADE OR CLOSURE OF HOSPITAL EMERGENCY SERVICES

AUTHORITY:

California Health and Safety Code, Division 2, Section 1300.

PURPOSE:

To establish policy and procedures for the evaluation of potential impacts on El Dorado County's Emergency Medical Services system due to the downgrade or closure of local hospital emergency services.

DEFINITIONS:

Closure – The elimination of basic emergency services by an acute care facility.

Downgrade – A significant reduction in emergency services by an acute care hospital affecting its current licensing for Basic Emergency Services by the State Department of Health Services.

EMS Agency - El Dorado County EMS Agency.

Impact Evaluation – Written report by the EMS Agency regarding possible impacts of proposed emergency services changes by a local hospital.

POLICY:

- 1) Any hospital proposing a reduction or elimination of emergency services in their facility shall notify in writing the State Department of Health Services, the El Dorado County EMS Agency, and all health service plans under contract with the hospital no later than 90 days prior to implementation of any such change.
- 2) The hospital implementing a change in emergency services subject to this policy shall provide for public notification of the proposed changes no less than 90 days prior to implementing any changes. The notification shall be such as to inform a significant number of residents within the hospital's service area, and be in terms likely to be understood by a person with no special knowledge of hospital operations or services. 3) Upon receipt of notification, the EMS Agency will conduct an impact evaluation review of the proposed changes. The review shall include, but is not limited to, the following areas:
 - a. **Geography:** Service area population, travel time and distance to the next nearest facility, number and type of other available emergency services, availability of prehospital EMS resources.
 - b. **Level of Care:** Assessment of level of emergency services provided, i.e., basic, standby, and next nearest availability.
 - c. **Specialty Services:** Neurosurgery, obstetrics, pediatric, trauma, and next nearest availability for these services.
 - d. **Base Hospital Designation:** anticipated impacts on patient care, online medical control, prehospital personnel, and other base hospitals.
 - e. **Patient Volume:** Number of patients seen annually, including ambulance transports and walk-ins.
 - f. **Availability of Prehospital Care:** Availability of ALS level prehospital care and air ambulance resources.

- g. **Public and Emergency Personnel Comments:** Obtained thru local EMS committees and public hearing(s).
 - h. **Recommendations:** Should include a determination of whether the request for downgrade or closure should be approved or denied based upon the above criteria, and any other recommendations to be considered by the Department of Health Services in its review of the licensed facility's request..
- 3) As part of the impact evaluation review, the EMS Agency will conduct at least one public hearing within 60 days from receipt of notification to receive comments from the general public regarding the proposed downgrade or closure.
 - 4) The EMS Agency will coordinate with the local hospital council and EMS transport contractors to develop a system to be used for determining impact on EMS services.
 - 5) The EMS Agency will complete the impact evaluation report within 60 days from receipt of notification. The report will include recommendations.
 - 6) The EMS Agency will submit the impact evaluation report to the State Department of Health Services and the State EMS Authority within three days after the completion of the report. A copy will also be forwarded to the County Board of Supervisors.