



PATIENT DESTINATION

PURPOSE

To provide guidelines for determining the appropriate destination of patients transported within the Yolo County Emergency Medical Services Agency (YEMSA) Region. It is the intent of this policy to ensure, to the extent possible, that individual patients receive appropriate medical care while protecting the interests of the community-at-large by making maximum use of available emergency medical care resources.

AUTHORITY

Health & Safety Code, Division 2.5, Chapter 2, §§ 1797.67, 1797.88

Health & Safety Code, Division 2.5, Chapter 6, Article 1, § 1797.106 (b)

Health & Safety Code, Division 2.5, Chapter 6, Article 2.5, § 1798.165

Health & Safety Code, Division 2.5, Chapter 6, Article 3, § 1798.170

California Code of Regulations, Title 13, Division 2, Chapter 5, Article 1, § 1105 (c)

California Code of Regulations, Title 22, Division 9, Chapter 4, Article 7, § 100169

California Code of Regulations, Title 22, Division 9, Chapter 7, Article 1, § 100243

POLICY

- I. Patient destination shall be governed by California Code of Regulations, Title 13, Division 2, Chapter 5, Article 1, § 1105 (c) and shall be "In the absence of decisive factors to the contrary" . . . "the most accessible emergency medical facility equipped, staffed, and prepared to administer care appropriate to the needs of the patients."

GUIDELINES

- I. "Most Accessible Facility" shall ordinarily be the destination for patients requiring transport from the scene of a call for emergency services and shall be the licensed health facility maintaining an Emergency Department (ED) with the shortest travel time from the scene of the call. Consideration of the appropriate staffing, equipment and preparation to provide care for the needs of the patient shall be determined by:
 - A. Base Hospital Direction:
 1. The Base Hospital may direct that the patient be transported to a further acute care hospital equipped, staffed, and prepared to receive emergency cases that, in the judgment of the Base Hospital Physician, is more appropriate to the medical needs of the patient. Such direction shall take into consideration the Paramedic Provider Agency's stated and reasonable time and/or travel limitations. Examples may include but are not limited to:
 - a. Pediatric Patients
 - b. Burn Patients
 - c. "Specialty" Care Patients when the closest Specialty Care hospital is not Designated in YEMSA protocol
 - B. Designated Specialty Care Facilities



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Revised Date: May 29, 2024

1. YEMSA protocols establishing the appropriate receiving facility for "Specialty Care Patients" shall be followed for:
 - a. ST Elevation Myocardial Infarction (STEMI) Patients
 - b. Acute Cerebrovascular Accident (Stroke) Patients
 - c. Patients meeting Trauma Activation Criteria
- C. Multiple Casualty Incidents (MCI)
 1. When the YEMSA MCI Plan is activated and patients must be distributed amongst hospitals to prevent the overwhelming of resources at any one hospital:
 - a. Patient Destinations should be determined by the on-scene Paramedic personnel or their designee, as described in the YEMSA MCI Plan, and in consultation with the Base Hospital as needed.
 - b. Patient Destination decisions should still account for indicated Specialty Care services to the extent possible.
- II. "Decisive Factors to the Contrary" include, but are not limited to, the following:
 - A. Patient Requests
 1. When a person or their legally authorized representative requests emergency transportation to a hospital other than the most accessible acute care hospital, the request should be honored so long as the condition of the patient permits such transport; except when the Paramedic Provider Agency determines that such transport would unreasonably remove the transport unit from the area. In such cases:
 - a. Arrangements shall be made for alternative transport appropriate to the medical needs of the patient.
 - b. If such transport cannot be obtained without delay, the patient may be transported to the nearest hospital capable of treating him or her.
 - B. Prepaid Health Plans
 1. A member of a group practice prepayment healthcare service plan should be transported to a hospital that contracts with the plan so long as the condition of the patient permits such transport. However, when the Paramedic Provider Agency determines that such transport would unreasonably remove the transport unit from the area, the member may be transported to the nearest hospital capable of treating the member.
 - C. Private Physician's Request
 1. When a private physician requests emergency transportation to a hospital other than the most accessible acute care hospital, the request should be honored unless:
 - a. The condition of the patient does not permit such transport. In such cases, the patient should be transported to the nearest hospital capable of treating the patient. In the event of a conflict, the Base Hospital should be contacted. If communication with the requesting physician is feasible, the Base Hospital should contact the requesting physician.
 - b. The Ambulance Provider Agency determines that such transportation would unreasonably remove the unit from the area. In such cases:



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- i. Arrangements should be made for alternate non-emergency transportation appropriate to the medical needs of the patient.
 - ii. If alternate transportation cannot be arranged without unacceptable delay for the patient's condition, and the private physician is immediately accessible, the patient may be transported to a mutually agreed-upon alternate destination.
 - iii. If alternate transportation cannot be arranged without unacceptable delay for the patient's condition, and the private physician is not immediately accessible, the patient should be transported to the nearest hospital capable of treating him or her.
 - III. "Unreasonably Removing Transport Unit from the Area" may be cause for the Ambulance Provider Agency or YEMSA EMS Duty Officer to decline a request for transport to a hospital that would negatively impact the availability of transport units for emergency calls within the county when an appropriate level of emergency care is at a closer more accessible facility.
 - A. Conditions that may lead to the denial of transport to a requested hospital may include:
 1. Five (5) or fewer emergency transport units are available in the county
 2. Any unit on Ambulance Patient Offload Delay (APOD) of greater than (>) 30 minutes at the requested destination hospital
 3. Transportation time of > 30 minutes out of county and other appropriate facilities are closer
 - B. In no case shall a transport destination be denied when the destination is indicated for emergency "Specialty" care.
 1. Patients requiring non-emergency specialized services at an out-of-area hospital should be transported to the closest appropriate facility for emergency stabilization and subsequent transfer in consultation with Base Hospital Direction.
 - C. When declining a requested destination, the Ambulance Provider Agency must make efforts to ensure the patient is transported to an alternative destination capable of providing comparable care, and with consideration for the patient's preferences based on the availability of the patient's medical records or contracted services for patient's healthcare service plan.