

TRIAGE TO ALTERNATE DESTINATION

TAD-1007

TRIAGE PARAMEDIC PATIENT CARE DOCUMENTATION REQUIREMENTS

Date: TBD

Page 1 of 2

I. PURPOSE

To identify documentation standards for triage paramedic patient encounters and other patient care-related activities.

II. AUTHORITY: Health and Safety Code, Division 2.5, Sections 1797.202, 1797.204, and 1798. California Code of Regulations, Title 22, Sections 100170 and 100171. California EMS System Core Quality Measures (EMSA #166 – Appendix E). California Code of Regulations, Title 22, Division 9, Chapter 5, Section 100185.

III. DEFINITION(S)

County of San Diego, Local EMS Information System (CoSD LEMSIS): The County of San Diego EMS (CoSD EMS) has its own data system and local data standard for EMS as managed and defined by CoSD Local EMS Agency (CoSD LEMSA). This data standard includes the National Emergency Medical Services Information System (NEMSIS), California EMS Information System (CEMSIS), and LEMSA-specific data standards and elements.

Data Dictionary: A document that describes the content, format, and structure of a dataset. The CoSD LEMSIS Data Dictionary is available at www.sandiegocountyems.com.

Prehospital Care Record (PCR): An electronically generated record that is utilized by EMS field personnel to document and transmit patient care events at the time of service. This record in the CoSD LEMSA format is approved and required by CoSD EMS as stated by the California EMS Authority (EMSA) and further detailed in the LEMSA Data Dictionary.

IV. POLICY

A. Triage paramedics shall complete and submit electronic patient care records in accordance with policy S-601: Documentation Standards and Transferal of Prehospital Care Record (PCR) Information. PCR reports for triage paramedic activities are required for every patient encounter, as defined in policy S-601, regardless of the scope or service provided.

San Diego County Emergency Medical Services Office Policy / Procedure / Protocol

- **B.** Triage paramedic agencies shall document the destination facility with standardized facility codes per CEMSIS when available.
- **C.** Triage paramedic agencies shall exchange electronic patient health information (HIE) with healthcare providers and facilities.
 - EMSA may grant a one-time temporary waiver, not to exceed five years of this requirement for alternate destination facilities that are unable to immediately comply with the electronic patient health information requirement. A plan to establish HIE shall accompany any request for a waiver.
- **D.** Triage paramedic agencies that provide case management services to EMS high utilizers shall submit to CoSD EMS at minimum a quarterly summary of patient outcomes. These outcomes shall include the following:
 - 1. Ambulance patient offload times for every alternate destination facility.
 - 2. Total number of EMS transports for every alternate destination facility.
 - 3. Total number of patients diverted from every alternate destination facility.
 - 4. Total number of patients who require subsequent transfer to an emergency department from an alternate care facility.
 - 5. A summary of the primary reasons for turning away, diverting, or transferring patients to emergency departments instead of transporting to alternate care facilities.

Page 2 of 2