

# EMS STEMI Receiving Center Designation

## I. PURPOSE

This policy defines the requirements for designation as a Contra Costa County STEMI Receiving Center (SRC) for patients transported via the 9-1-1- system with ST-elevation myocardial infarction (STEMI) who may benefit by rapid assessment and percutaneous coronary intervention (PCI).

## II. APPLICATION PROCESS

To apply for designation as an EMS SRC for Contra Costa County patients, an interested hospital shall:

- A. Submit a Contra Costa EMS designation application to the Contra Costa EMS Agency (LEMSA).
- B. Pay applicable initial application fee and annual designation fee to cover initial and ongoing County costs to support the STEMI program.

## III. DESIGNATION CRITERIA

- A. Current California licensure as an acute care hospital providing basic emergency medical services.
- B. Ability to enter into a written agreement with Contra Costa County identifying SRC and County roles and responsibilities.
- C. Meets SRC designation criteria as defined in the STEMI designation application. The criteria include:
  1. Hospital Services
    - a. The hospital shall have established protocols for triage, diagnosis, and Cath lab activation following field notification.
    - b. The hospital shall have a process in place for the treatment and triage of simultaneously arriving STEMI patients.
    - c. The hospital shall maintain STEMI team and Cardiac Catheterization Team call rosters.
    - d. STEMI receiving centers shall comply with the requirement for a minimum volume of procedures for designation required by the local EMS agency.
    - e. The hospital shall have job descriptions and organizational structure clarifying the relationship between the STEMI medical director, STEMI program manager, and the STEMI team.
    - f. A STEMI receiving center shall have reviews by local EMS agency or other designated agency conducted every three (3) years.
    - g. Special permit for cardiac catheterization (cath) laboratory.
    - h. Intra-aortic balloon pump capability.
    - i. Additional requirements may be stipulated by the local EMS agency medical director.
    - j. Special permit for cardiovascular surgery service.
      - i. The LEMSA Medical Director may waive this requirement for patient or system needs.
      - ii. Conformance with the American College of Cardiology/American Heart Association/Society for Cardiovascular Angiography and Intervention (ACC/AHA/SCAI) guidelines for centers without backup cardiovascular surgery will be evaluated in consideration of the waiver.



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- k. Continuous availability of PCI resources twenty-four (24) hours/seven (7) days a week.
- 2. Hospital Personnel
  - a. SRC Medical Director
  - b. SRC Program Manager
  - c. Cardiac Cath Lab Manager/Coordinator
  - d. Intra-aortic balloon pump technician(s)
  - e. Appropriate cardiac cath nursing and support personnel
  - f. Physician Consultants
    - i. Cardiology Interventionalist
    - ii. CV Surgeon
- 3. Clinical Capabilities
  - a. ACC/AHA/SCAI guidelines for activity levels of facilities and practitioners for both primary PCI and total PCI events are optimal benchmarks.
  - b. Performance (timeliness) and outcome measures will be assessed initially in the survey process and will be monitored closely on an ongoing basis.
- D. Appropriate internal (hospital) policies including:
  - 1. Cardiac Interventionalist activation
  - 2. Cardiac cath lab team activation
  - 3. STEMI contingency plans for personnel and equipment
  - 4. Coronary angiography
  - 5. PCI and use of fibrinolytic
  - 6. Interfacility transfer STEMI policies/protocols
- E. Performance Improvement Program
  - 1. Participation in EMS system SRC QI Committee
    - a. LEMSA Medical Director
    - b. LEMSA Quality Improvement (QI) Coordinator
    - c. Designated cardiologist from each SRC
    - d. Designated QI representative from each SRC
  - 2. Meetings to be held at the discretion of the LEMSA and at the request of the SRCs.
  - 3. Written internal quality QI/program description for STEMI patients shall include appropriate evidence of an internal review process. The plan/program description is made available to the LEMSA as requested.
  - 4. Participation in prehospital STEMI-related educational activities.
- F. Data Collection, Submission and Analysis
  - 1. Participation in Get with the Guidelines- Coronary Artery Disease “GWTG-CAD”
  - 2. Participation in EMS system data collection.



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## IV. DESIGNATION

- A. SRC designation will be awarded to a hospital following satisfactory review of written documentation and an initial site survey by LEMSA staff.
- B. SRC designation period will coincide with the period covered in the written agreement between the SRC and the County.

## V. BASIS FOR LOSS OF DESIGNATION

- A. Inability to meet and maintain SRC designation criteria
- B. Failure to provide required data
- C. Failure to participate in STEMI system QI activities
- D. Other criteria as defined and reviewed by the SRC QI Committee

## VI. LIST OF STEMI CENTERS

Contra Costa County STEMI Centers	Out-of-County STEMI Centers
John Muir Medical Center – Concord	Kaiser Permanente Medical Center - Oakland
John Muir Medical Center – Walnut Creek	Summit Medical Center - Oakland
Kaiser Permanente Medical Center – Walnut Creek	Kaiser Permanente Medical Center - Vallejo
San Ramon Regional Medical Center – San Ramon	Kaiser Permanente Medical Center – San Rafael
Sutter Delta Medical Center - Antioch	Marin General - Greenbrae
	ValleyCare Medical Center - Pleasanton

