

**3312****Assess and Refer****Provisional Policy**Last Reviewed: **October 4, 2022**Last Revised: **December 1, 2023****PURPOSE**

To establish standards for the identification of patients whose condition does not require transport by 9-1-1 emergency ambulance to an emergency department. All 9-1-1 calls for EMS will receive an appropriate response, timely assessment, and appropriate patient care. If it is determined that the patient is stable and does not require emergency department services, EMS field personnel will assess all patients and provide an appropriate recommendation to a non-acute care facility.

GENERAL CONSIDERATIONS

- Patients who require immediate medical attention will be transported to the closest most appropriate hospital.
- Patients who refuse referral to a non-acute care facility will be transported to the closest most appropriate hospital.
- Patients who accept a referral to a non-acute care facility are not required to sign Refusal of Treatment / Transport documentation on the electronic Patient Care Record (ePCR).

PARAMEDIC ASSESS AND REFER DECISION MAKING PRINCIPLES

- Does the patient, guardian, or parent have decision making capacity?
- Are EMS field personnel concerned with the patient's current medical condition?
- How likely is the patient to successfully navigate the provided referral?

ASSESS AND REFER CRITERIA

The patient, guardian, or parent must meet all the following criteria:

- Is an adult (18 years of age or over), or is legally emancipated if under 18 years of age?
- Has a Glasgow Coma Scale (GCS) of 15 or GCS is at patient's baseline?
- Exhibits no clinical evidence of:
 - Altered level of consciousness
 - Alcohol or drug ingestion that impairs decision making capacity
 - Abnormal or labored breathing or shortness of breath
 - Chest pain or discomfort of any kind
 - Hypoxia as indicated by low oxygen saturation of less than 94%
 - Significant tachycardia
 - Serious hemorrhage
- Exhibits evidence of decision-making capacity sufficient to understand the nature of the medical condition as well as the risks and potential consequences of not seeking additional medical care from the provided recommendation.
- The patient would benefit from the provided recommendation.
- The patient is likely to successfully navigate the provided recommendation.

If the patient presents with clinical evidence of a viral illness, in addition to the criteria above, they must also:

- Be older than two (2), but younger than sixty-five (65), years of age.
- Not have an underlying medical history.

For the COVID+ or PUI patient, assess for a referral to stay home, self-isolate, and seek follow-up treatment with a physician.

ASSESS AND REFER RECOMMENDATIONS TO THE PATIENT

If the patient's condition meets all criteria listed above, EMS field personnel will provide the following recommendation and the Referral Notification card (Appendix A): *"Our assessment indicates no evidence of any medical condition that requires immediate care in an emergency department. You should seek care with your regular healthcare provider or visit a local urgent care or clinic. If your symptoms persist or progress, you should seek medical help immediately or re-contact 9-1-1."*

DOCUMENTATION REQUIREMENTS

In addition to the minimum NEMSIS requirements, the following must be documented in the ePCR:

- Utilize "REMSA Assess and Refer" disposition in the ePCR.
- Physical exam.
- Treatment provided.
- Patient, parent, or guardian is alert, oriented, and acting appropriately for their age.
- Indications that there were no signs of significant impairment due to drugs, alcohol, organic causes, or mental illness.
- Any other observations that indicate that the patient, guardian, or parent had unimpaired decision-making capacity.
- Recommendation / referrals shall be documented utilizing the following four (4) step process:
 1. That a recommendation / referral was offered.
 2. What the recommendation / referral was that EMS field personnel provided.
 3. The patient's understanding of the recommendation / referral.
 4. The patient's plan based on the recommendation / referral of the EMS field personnel.
- The person(s), if any, who remained to look after the patient (the patient's "support system").
- The name of the interpreter utilized, if applicable.
- EMS field personnel will leave a referral card containing relevant community referral information with the patient.

CONTINUOUS QUALITY IMPROVEMENT

All assess and refer cases will undergo 100% CQI by the service providers.

REFERRAL NOTIFICATION

You have been assessed by paramedics from the 911 system and based on their assessment, your illness / injury does not meet the criteria for emergent transport by ambulance to an emergency department.

Please follow one of the recommendations below:

EMS Providers, check the box next to the recommendation that was provided:

- ☐ CONTACT YOUR MEDICAL INSURANCE PROVIDER'S NURSE ADVICE LINE
☐ FOLLOW UP WITH YOUR PRIMARY CARE PROVIDER / PERSONAL PHYSICIAN
☐ SEEK TREATMENT AT A LOCAL URGENT CARE OR CLINIC

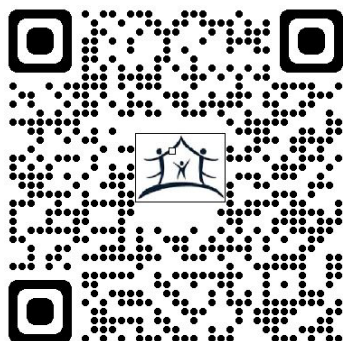
When calling a Nurse advice line, please be sure to say the following:

"I have already called 911 and have already been evaluated by paramedics. I do not require immediate care in an emergency department, and it was recommended that I should follow up with you."

NURSE ADVICE CONTACT LINES

Aetna (24/7)	1-800-556-1555	Anthem BlueCross	1-800-224-0336
Balance (by CCHP)	1-888-243-8310	Blue shield	1-800-609-4166
Healthnet	1-800-893-5597	IEHP	1-888-244-4347
Kaiser	1-833-574-2273	LA Care Health Plan	1-800-249-3619
Molina	1-888-275-8750	Sharp Health Plan (after hours and weekends only)	1-800-359-2002
Valley Health Plan	1-855-348-9119	Western Health Advantage	1-877-793-3655

If you do not have health insurance, the Riverside County Department of Public Social Services can help. Visit <https://rivcodpss.org/>, call 1-877-410-8827 (M-F, 8a to 5p) to schedule an appointment or scan the QR code below:



For all other types of assistance, contact 2-1-1, or visit the Inland SoCal United Way, here: <https://inlandsocaluw.org/>, or scan the QR code below:



NOTIFICACIÓN DE REFERENCIA

Ha sido evaluado por paramédicos del sistema 911 y, según su evaluación, su enfermedad / lesión no cumple con los criterios para el transporte en ambulancia a un departamento de emergencias del hospital.

Siga una de las recomendaciones siguientes:

Proveedores de EMS, marque la casilla junto a la recomendación que se proporcionó:

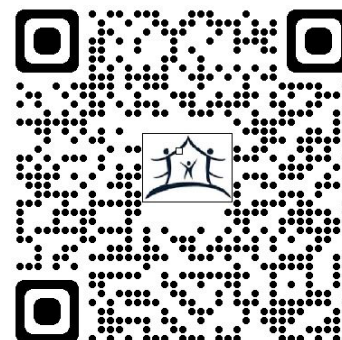
- ☐ PÓNGASE EN CONTACTO CON LA LÍNEA DE ASESORAMIENTO DE ENFERMERAS DE SU PROVEEDOR DE SEGURO MÉDICO
☐ SEGUIMIENTO CON SU PROVEEDOR DE CUIDADO PRIMARIO / MÉDICO PERSONAL
☐ BUSQUE TRATAMIENTO EN UNA CLÍNICA O ATENCIÓN DE URGENCIA LOCAL

Cuando llame a una línea de asesoramiento de enfermería, asegúrese de decir lo siguiente: **"Ya llamé al 911 y los paramédicos ya me evaluaron. No necesito atención inmediata en un departamento de emergencias del hospital, y se recomendó que hiciera consulta con usted."**

LÍNEAS DE CONTACTO DE ASESORAMIENTO DE ENFERMERAS

Aetna (24/7)	1-800-556-1555	Anthem BlueCross	1-800-224-0336
Balance (by CCHP)	1-888-243-8310	Blue shield	1-800-609-4166
Healthnet	1-800-893-5597	IEHP	1-888-244-4347
Kaiser	1-833-574-2273	LA Care Health Plan	1-800-249-3619
Molina	1-888-275-8750	Sharp Health Plan (solo después de horas y fines de semana)	1-800-359-2002
Valley Health Plan	1-855-348-9119	Western Health Advantage	1-877-793-3655

Si no tiene seguro médico, el Departamento de Servicios Sociales Públicos del Condado de Riverside puede ayudar. Visite <https://rivcodpss.org/>, llame al 1-877-410-8827 (lunes a viernes, 8am a 5pm) para programar una cita o escanear el código QR a continuación:



Para asistencia adicional, comuníquese con 2-1-1, o visite Inland SoCal United Way, aquí: <https://inlandsocaluw.org/>, o escanee el código QR a continuación:

