

	COUNTY OF SACRAMENTO EMERGENCY MEDICAL SERVICES AGENCY	Document #	5202.01
	<u>PROGRAM DOCUMENT:</u> Sobering Center Designation	Initial Date:	4/01/2025
		Last Approved Date:	4/01/2025
		Effective Date:	4/01/2025
		Review:	3/01/2027

 EMS Medical Director

 EMS Administrator

Purpose:

- A. To establish minimum standards for the designation of Sobering Centers (SC)

Authority:

- A. California Health and Safety Code, Division 2.5, Sections 1797.220, 1798, 1843, 1206 (b) 1317 (b).
- B. Title 22, California Code of Regulations, Section 100170 (a) (5).

Definitions:

- A. **Under the Influence of a mental status-altering substance:** A patient who appears to be impaired from a range of possible substances (alcohol, THC, stimulants, CNS depressants, etc.), demonstrated by diminished physical and mental control and without other acute medical or traumatic cause. Being “under the influence” is typically associated with one or more of the following:
 - 1. Speech disturbance – incoherent, rambling, slurring.
 - 2. Decline in cognitive function – confusion, inappropriate behavior, impaired decision-making capacity.
 - 3. Imbalance – unsteady on feet, staggering, swaying.
 - 4. Poor coordination – impaired motor function, inability to walk a straight line, fumbling for objects.
 - 5. Agitation (for stimulants) or CNS depression (alcohol, CNS depressants).
- B. **Emergency Medical Condition:** A condition or situation in which an individual immediately needs medical attention. Abnormal vital signs (heart rate and rhythm, respiratory rate, blood pressure—except isolated asymptomatic hypertension—and oxygen saturation) are also indications of an emergency medical condition.
- C. **SC EMS Liaison Officer:** A qualified administrative personnel appointed by the SC to coordinate all activities related to receiving patients triaged by paramedics whose primary provider impression is being under the influence of a mental status-altering substance.
- D. **Authorized Sobering Center (SC):** A non-correctional facility that is staffed at all times with at least one registered nurse (RN) that provides a safe, supportive environment for intoxicated individuals to become sober, that is identified as an alternated destination in a plan developed pursuant to Section 1843 of the Health and Safety Code, and that meets any of the following requirements in this policy.

Policy:

General Requirements:

A Designated SC Shall:

- A. Be a facility that is a federally qualified health center, including a clinic described in subsection (b) of Section 1206 of the Health and Safety Code.
- B. Be certified by the State Department of Health Care Services, Substance Use Disorder Compliance Division, to provide outpatient, nonresidential detoxification services.
- C. Accommodate private, commercially insured, Medi-Cal, Medicare, and uninsured patients.
- D. The SC is required to notify SCEMSA of changes in the status of the facility within twenty-four (24) hours.

A Designated SC May:

- A. Be designated by a city or county to provide a safe, supportive environment for intoxicated individuals to become sober.
- B. Operate twenty-four (24) hours a day, seven (7) days a week, three hundred sixty-five (365) days a year.
- C. Provide and maintain adequate parking for ambulances to ensure access to the SC.
- D. Appoint an SC EMS Liaison Officer to act as a liaison between SCEMSA and the designated SC.
- E. Accept all patients triaged by paramedics regardless of the patient's ability to pay.
- F. Maintain General Liability Insurance as follows:
 1. General aggregate: Two (2) Million Dollars.
 2. Products/completed operations aggregate: One (1) Million Dollars.
 3. Personal and advertising injury: One (1) Million Dollars
 4. Each occurrence: One (1) Million Dollars.
 5. Sexual misconduct: Two (2) Million Dollars per claim and Two (2) Million Dollars aggregate.
 6. Worker's Compensation and Employers Liability: One (1) Million Dollars per accident.

SC Leadership and Staffing Requirements:

- A. SC EMS Liaison Officer Responsibilities:
 1. Implement and ensure compliance with the SC Standards.
 2. Maintain direct involvement in developing, implementing, and reviewing SC policies and procedures related to receiving patients triaged by paramedics to the SC.
 3. Serve as the key personnel responsible for addressing variances in care and sentinel events related to patients triaged by paramedics to the SC.
 4. Liaison with SCEMSA, designated Triage to Alternate Destination (TAD) EMS providers and law enforcement agencies.
 5. Serve as the contact person for SCEMSA and be available upon request to respond to county business.
- B. A registered nurse licensed in the State of California shall be on-site at all times.
- C. Staffing may be augmented by licensed nurse practitioners, licensed vocational nurses, social workers, and other mental health professionals.
- D. All medical and nursing staff shall have current Cardiopulmonary Resuscitation (CPR) certification through the American Heart Association or American Red Cross.

Develop, maintain, and implement policies and procedures that address the following:

- A. Receipt, immediate evaluation, short-term management, and monitoring of patients who meet SC triage inclusion criteria.
- B. Timely transfer of patients who require a higher level of care to an acute care hospital utilizing a non-911 ambulance provider is possible.
- C. Immediate transfer of patients with an emergency medical condition to the most accessible Advanced Life Support (ALS) receiving facility/emergency department.
- D. Record keeping of EMS Report Forms.
- E. Alternate destination facilities shall submit to SCEMSA, at minimum, a quarterly summary of patient outcomes with a California Emergency Medical Services Authority (EMSA) provided template, including but not limited to the following data:
 - 1. Total number of patients evaluated who were transported by EMS.
 - 2. The total number of patients admitted to another care facility.
 - 3. The total number of patients transferred to an acute care emergency department.
 - 4. The total number of patients admitted to another care facility.
 - 5. The total number of patients who experienced an adverse event resulting from services provided under this program.
- F. Procedure for notifying SCEMSA of patient transfers from SC requiring 911 transport for an emergency medical condition.

Equipment and Supplies:

- A. A dedicated telephone line to facilitate direct communication with EMS personnel.
- B. EMResource capability to communicate the facility's real-time capacity status.
- C. A public Access Device/Layperson Automated External Defibrillator on site with staff trained on its proper use.
- D. An up-to-date community referral list of services and facilities available to patients.

Procedure for Approval to be a designated alternate destination SC facility for a TAD program:

- A. Submit a written request to the Director of the TAD program to include:
 - 1. The rationale for the request to be a designated SC.
 - 2. A document verifying that a city or county has designated the facility to provide a safe, supportive environment for intoxicated individuals to become sober.
 - 3. The proposed date the SC will open to accept patients triaged by paramedics to the SC.
 - 4. Copies of the policies and procedures outlined in this policy.
 - 5. Proposed Staffing.
 - 6. Hours of operation.
- B. Site Visit:
 - 1. Once all General Requirements are met, the TAD program leadership will coordinate a site visit to verify compliance with all the requirements.
 - 2. Administrative and field personnel from SCEMSA provider agencies will be invited to exchange contact information and familiarize themselves with the facility's physical layout.

C. Other Requirements:

1. The agreement with the SC requires the facility to operate in accordance with Section 1317 of the Health and Safety Code, which states In no event shall the provision of emergency services and care be based upon, or affected by, the person's ethnicity, citizenship, age, preexisting medical condition, insurance status economic status, ability to pay for medical services, or any other characteristic.
2. The agreement shall provide that failure to operate in accordance with Section 1317 of the Health and Safety Code shall result in the immediate termination of the facility's use as part of the TAD destination program.
3. SCEMSA will approve, annually review and facilitate any necessary agreements with the SC within SCEMSA jurisdiction.
4. The TAD program Sacramento County EMS Agency staff reserves the right to perform scheduled site visits or request additional data from the SC at any time.

Cross References: PD# 4003 – EMS Liaison Officer
PD# 5200 – Triage to Alternate Destination Program Requirements
PD# 5203 – Transport Guidelines-Sobering Center
PD# 7600 – Quality Improvement Program