PURPOSE

To provide Alameda County ReddiNet System users guidelines for the purpose of communication and coordination of hospital diversion status, multi-casualty incidents (MCI) including patient tracking, disaster assessment polls, messages and HAvBED/Census reporting activities.

PRINCIPLES:

1. The ReddiNet System is the designated emergency and disaster communications and management system established for the Alameda County 911 receiving hospital and 911 paramedic provider systems.

2. The ReddiNet System may be utilized by hospitals, paramedic provider agencies, non-emergency permitted providers, law enforcement agencies, non-hospital health care facilities clinics, 911 dispatch and the Emergency Medical Services (EMS) Agency to communicate electronically.

3. It is the responsibility of each individual facility or organization to ensure its ReddiNet System is maintained per the ReddiNet Users Master Agreement and to ensure that it remains online at all times.

4. The ReddiNet visual and audible alarms are to be maintained at an adequate level to alert staff within a facility at all times. The System shall be placed in a location easily accessible to emergency department personnel within each facility.

5. The use of the Reddinet dedicated satellite unit computer is limited to operation of the ReddiNet system and access to EMS educational materials only. Accessing the internet or other applications on this system is not recommended.

6. Each facility is responsible to properly train its personnel and have at least one staff member who is knowledgeable in the use of the ReddiNet system on duty at all times.

7. Release of protected health information (PHI) shall be in accordance with each facility’s internal policies.

POLICY

I. Emergency Department Diversion Status

Hospitals will utilize the ReddiNet System to update all status pursuant to Alameda County Extended Wall Times/Bypass and Rerouting Policies.

II. Management of Multi-Casualty (MCI) Incidents

Once an MCI alert is received, Alameda County Regional Emergency Communications (911 dispatch) will “Initiate an MCI” under the ReddiNet MCI module and “send ED Capacity poll and general notification” to the hospitals in Alameda County.

For the duration of the MCI, the Transport Group Supervisor under ICS should coordinate patient destination activities and notify receiving facilities of the number of incoming patients immediately via ReddiNet and pursuant to Alameda County MCI Policy.
III. Bed Availability

Health facilities will follow the guidelines for reporting bed availability pursuant to Alameda County Patient Census/Bed Availability Policy.

IV. Assessment Polls

To assist with the coordination of emergency resource management, the Alameda County Regional Emergency Communication Center (ACRECC) and/or EMS sends assessment polls to acute health care facilities to complete and return. Assessment polls ask hospitals specific questions and require an immediate response via Reddinet.

In the event of a Countywide or regional disaster, health care facilities should anticipate the initiation of a Reddinet disaster assessment poll from ACRECC/911 Dispatch and/or EMS.

When the facility receives the Assessment poll, the requested information must be submitted promptly to help ensure the resource management activities are optimized.

V. Messages

All facilities are expected to utilize the Reddinet messages function to communicate appropriate information about their facility to other hospitals, the EMS Agency and ACRECC.

All messages that are appropriate for dissemination to other staff are to be printed or otherwise shared with affected staff.

Users are to limit sent messages and message replies to affected parties only.

Messages and message replies should be short, concise and relevant.

Since the Reddinet network contains hospitals, health care facilities (ie. clinics), EMS, Public Health agencies, fire, ambulance, law enforcement and other related agencies, each Reddinet user is expected to be very selective when sending messages, as not all messages are intended for all network users.

Replies to messages should be limited to the creator of the message unless absolutely necessary to copy others. If copies are deemed necessary, users need to open the menu selections and individually select recipients from other recipient list.

Note: Overflowing the Reddinet System with unwanted and unnecessary message may cause transmission delays which could affect the prompt delivery of time sensitive critical messages.

All communications exchanged via the Reddinet messages function contain protected health information (PHI) must complete with Health insurance Portability and Accountability ACT (HIPAA) privacy rules.
Bioterrorism and Health Surveillance

Alameda County EMS may initiate disease surveillance programs utilizing ReddiNet. These will be in the form of Assessment polls that ask for specific information.

Each facility is to ensure that these assessments are answered in a timely manner; this will likely require involvement of Infectious/Communicable Disease staff at each facility. This does not replace the obligation of health care providers to report certain diseases on a Confidential Morbidity Report (CMR) Pursuant to Title 17, California Code of Regulations Section 2500 (re. 1996)

Each 911 receiving facility must provide daily value data to EMS which includes: Total ED Visits, Total Admission, Total ICU Admission and Total Deaths.

VI. ReddiNet System Failure or Disruptions

If the Reddinet System is not functioning for whatever reason facilities are to utilize the following procedure:

Attempt to resolve the problem at the computer. Check for correct power and internet connections as well as correct log-in and password.

Notify the facility ReddiNet Coordinator or IT Department according to facility policy.

Access the 24-hour ReddiNet Help Line number at 1-800-440-7808 as needed.

Notify other hospitals, ACRECC and the EMS Agency of the status of the ReddiNet System and the anticipated return to service. Updates should be provided every 4 hours until the system is functional. Facilities should make arrangements with ACRECC/911 Dispatch to notify ReddiNet System participants of the disruption as well as perform any function in ReddiNet on their behalf as described in the above section of this policy, until service is restored.

Notify ACRECC, other hospitals and the EMS Agency when the ReddiNet System is fully operational via the Message module.

VII. MCI Reported Patients

During multi-casualty incidents and disasters, ReddiNet has the capacity for hospitals receiving patients to report the patients that are at their facility under the MCI module “reported patients screen”. During an incident, hospitals can enter the following data, patient’s first and last name, gender, age, status and disposition. This function is to aid hospitals with family reunification actively locating patients. This data is considered PHI and for HIPAA purposes.

The exchange of PHI between hospitals and counties for disaster relief purposes would be permitted under HIPAA without express patient authorization. However, this exception still requires the covered entity to provide the individual an opportunity to agree or object to such disclosure unless, under the circumstances, in the exercise of profession judgment, the covered entity determines that trying to get such consent would interfere with its ability to respond to the emergency.
In the absence of a situation invoking the disaster relief authority of the county, it is permissible for the hospitals to share information that would otherwise be in the hospital's facility directory. Assuming the patient does not object the information would include their name, location and general condition. If the patient is deceased, that fact may also be disclosed. The information regarding the patient’s gender and age would generally not be subject to disclosure except, in the professional judgment of the covered entity, when it is necessary to aid in the identification of the patient by a family member.

When accessing the Reported Patients Information, the following is recommended:

1. Request the patient’s permission whenever possible
2. Solicit identifying information for the calling party instead of giving information to the calling party to the extent that allows confirmation of the victim’s location as enter in the Reported Patients Screen.

Each facility’s Reported Patient screen will show all data fields for that facility’s data entry; however the condition will be suppressed for other facilities’ patients entered on the screen. Only name, gender, age and location for patients in other facilities will be visible (confirm)

VIII. **Non-Hospital Health Care Facilities (HCFs) ReddiNet Users (including Clinics and Long Term Care)**

HCFs (including clinics) with ReddiNet access shall incorporate ReddiNet communications into their facility disaster and emergency response plans.

In the event of a Countywide or regional disaster, community clinics should anticipate the initiation of a ReddiNet disaster Assessment poll from ACRECC/911 Dispatch and/or EMS.

When the Assessment poll is received by the HCFs, the requested information must be submitted promptly to ACRECC to help ensure that resource management activities are optimized.

*** ACRECC/911 Dispatch shall alert the Alameda County EMS Duty Officer in the event of unusual or significant issues (e.g. Active Shooter, HaZ-MAT incidents, notifications of shelter in place/evacuation, civil unrest, etc.)