DEPARTMENT OF HEALTH SERVICES  
COUNTY OF LOS ANGELES  

SUBJECT:  SOBERING CENTER (SC) STANDARDS  
REFERENCE NO. 328

PURPOSE:  To establish minimum standards for the designation of Sobering Centers (SC).

AUTHORITY:  Health & Safety Code, Division 5, Sections 1797.220, 1798  
Title 22, California Code of Regulations, Section 100170 (a)(5)

DEFINITIONS:

Alcohol Intoxication: A patient who appears to be impaired from alcohol, demonstrated by diminished physical and mental control with evidence of recent alcohol consumption (e.g., alcohol on breath, presence of alcoholic beverage container(s)) and without other acute medical or traumatic cause. Alcohol intoxication is typically associated with one of more of the following:

- Speech disturbance – incoherent, rambling, slurring
- Decline in cognitive function – confusion, inappropriate behavior, impaired decision-making capacity
- Imbalance – unsteady on feet, staggering, swaying
- Poor coordination – impaired motor function, inability to walk a straight line, fumbling for objects

Emergency Medical Condition: A condition or situation in which an individual has an immediate need for medical attention. The presence of abnormal vital signs (heart rate and rhythm, respiratory rate, blood pressure – except isolated asymptomatic hypertension, oxygen saturation) are also indications of an emergency medical condition. Patients who meet any criteria for Base Contact or Receiving Hospital Notification (Ref. No. 1200.2) are also considered to have an emergency medical condition.

Sobering Center (SC): A non-correctional facility designated by a city or county to provide a safe, supportive environment for intoxicated individuals to become sober. A SC shall be approved by the EMS Agency by meeting the requirements in this Standards.

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 Alcohol Intoxication.

POLICY:

I. General Requirements

A designated SC shall:

A. Be designated by a city or county to provide a safe, supportive environment for intoxicated individuals to become sober

B. Operate 24 hours a day, 7 days a week, 365 days a year
C. Provide and maintain adequate parking for ambulance vehicles to ensure access of SC

D. Appoint a SC EMS Liaison Officer to act as a liaison between the EMS Agency and the authorized EMS provider agency

E. Accept all patients who have been triaged by paramedics regardless of the patient’s ability to pay (see Inclusion Criteria in Ref. No. 528, Intoxicated (Alcohol) Patient Destination)

F. Maintain General Liability Insurance as follows:
   1. General aggregate $2 million
   2. Products/completed operations aggregate $1 million
   3. Personal and advertising injury $1 million
   4. Each occurrence $1 million
   5. Sexual Misconduct $2 million per claim and $2 million aggregate
   6. Worker’s Compensation and Employers Liability $1 million per accident

II. SC Leadership and Staffing Requirements

A. SC EMS Liaison Officer

   1. Responsibilities:
      a. Implement and ensure compliance with the SC Standards
      b. Maintain direct involvement in the development, implementation and review of SC policies and procedures related to receiving patients triaged by paramedics to the SC
      c. Serve as the key personnel responsible for addressing variances in the care and sentinel events as it relates to patients triaged by paramedics to the SC
      d. Liaison with EMS Provider Agencies and law enforcement agencies
      e. Serve as the contact person for the EMS Agency and be available upon request to respond to County business

B. A physician licensed in the State of California shall be on-call at all times.

C. A registered nurse licensed in the State of California shall be on-site at all times.

D. Staffing may be augmented by licensed nurse practitioners, licensed vocational nurses, social workers, and other mental health professionals.
E. All medical and nursing staff shall have current certification on Cardiopulmonary Resuscitation (CPR) through the American Heart Association or Red Cross.

III. Policies and Procedures

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 non-911 ambulance provider(s)

C. Immediate transfer of patients with emergency medical condition to the most accessible 9-1-1 receiving facility/emergency department

D. Record keeping of EMS Report Forms

E. Data reporting requirements established by the EMS Agency

F. Procedure for notifying the EMS Agency of patient transfers from SC requiring 9-1-1 transport for an emergency medical condition within six hours of admission to the SC; notification shall be provided as soon as possible, but not to exceed 72 hours after such transport(s)

IV. Equipment and Supplies

A. Dedicated telephone line to facilitate direct communication with EMS personnel

B. ReddiNet® capability to communicate SC’s real-time capacity status

C. 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

V. Procedure for Approval to be a designated SC

A. Submit a written request to the Director of the EMS Agency to include:

1. The rationale for the request to be a designated SC

2. A document verifying that the facility has been designated by a city or county 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 required in Section III
5. Proposed Staffing

6. Hours of operation

B. Site Visit

1. Once all General Requirements are met, the EMS Agency will coordinate a site visit to verify compliance with all the requirements.

2. Administrative and field personnel from local EMS provider agencies will be invited to exchange contact information, and become familiar with the physical layout of the facility.

C. SC Designation/Re-Designation

SC initial designation and re-designation is granted for a period of three years after a satisfactory review by the EMS Agency.

VI. Other Requirements

A. The EMS Agency reserves the right to perform scheduled site visits or request additional data from the SC at any time.

B. The SC shall immediately (within 72 hours) provide written notice to the Director of the EMS Agency if unable to adhere to any of the provisions set forth in the SC Standards including structural changes or relocation of the SC.

C. The SC shall provide a 90-day, written notice to the EMS Agency Director of intent to withdraw as a designated SC.

D. The SC shall notify the EMS Agency within 15 days, in writing of any change in status of the SC Program Coordinator by submitting Ref. No. 621.2, Notification of Personnel Change Form.

CROSS REFERENCES:

Prehospital Care Manual:

Ref. No. 328.1, Designated Sobering Center (SC) Roster
Ref. No. 528, Intoxicated (Alcohol) Patient Destination
Ref. No. 621.2, Notification of Personnel Change Form