

POLICY #: 3.11

SUBJECT: DIVERSIONS OF PATIENTS IN THE GREATER BRIDGEPORT AREA

POLICY:

When both St. Vincent's Medical Center and Bridgeport Hospital are on Diversion Status and they have determined that the demand for service exceeds their established criteria for safe patient management in any/all of the respective categories, Phase III Diversion Status will be implemented. The EMS services will transport Priority II and Priority III patients to Danbury Hospital, Milford Hospital (psychiatric and alcohol abuse patients will not be diverted to Milford Hospital), Griffin Hospital or Norwalk Hospital.

PROCEDURE:

These guidelines will enable the Emergency Departments of St. Vincent's Medical Center and Bridgeport Hospital to temporarily divert incoming ambulances for the following individual patient categories: **Cardiac, Trauma, Psychiatric, CT scan or General** (*all patient categories*).

In diversion situations there will be a designated contact person within St. Vincent's Medical Center and Bridgeport Hospital for clinical and administrative decisions. The Emergency Department Nurse Manager in concert with the Emergency Physician on duty will be responsible for contacting the appropriate person(s) at the prospective receiving hospital(s).

Operational Criteria

Phase I – Diversion Alert Status

This alert phase will be implemented when one hospital determines that the demand for service is **close** to exceeding their established criteria for safe patient management in any/all of the respective categories. During Diversion Alert Phase, each hospital, at intervals not to exceed four hours, will reconfirm bed availability and keep the other hospital apprised of its status. This function is the responsibility of the Nurse Manager or Nurse in-charge at each hospital.

(NOTE: During this phase, the hospital does not notify Southwest Regional Communications Center - C-Med).

Endorsed by: Administrative Council - Medical Resource Council

Date: 05/01/03

Phase II -- Diversion

Once St. Vincent's Medical Center or Bridgeport Hospital upgrades to Diversion, after determining that the demand for service **exceeds** their established criteria for safe patient management in any/all of the respective categories, the following procedure will be implemented:

1. The other Bridgeport area hospital shall be contacted to confirm their diversion status and bed availability.
2. The diverting hospital shall notify the Southwest Regional Communications Center (C-Med) of their diversion status.
3. The EMS crew will determine the patient's triage criteria based upon standard EMS policy and procedure.
4. A radio patch will be established with the medical control physician of the anticipated receiving hospital, via the C-Med radio prior to departure from the scene.
5. Diversion status will be re-evaluated by the diverting institution every four hours. Notification will be made to C-Med. at four-hour intervals. If notification is not received by C-Med., the diverting hospital will automatically be taken off diversion status and will receive all categories of patients.
6. If both St. Vincent's Medical Center and Bridgeport Hospital go on diversion under the same category in Phase II of diversion, and capacity or acuity exceeds the ability for both hospitals to provide safe care, one of the following must occur:
 - a. Both hospitals will come off of diversion and will work in conjunction with C-Med. to maintain a systematic distribution of patients to each hospital.
In general this will mean that a patient who has had previous care or is affiliated with a physician at a hospital and requests transport to that hospital the patient should be accommodated at that hospital. Unassigned patients, or those presenting with psychiatric or substance abuse issues should be assigned on an every other rotation basis.
 - b. Phase III, Regional Diversion of this plan will be implemented.

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Phase III—Regional Diversion

In the event that both St. Vincent's Medical Center and Bridgeport Hospital are on diversion and both are unable to accept any additional patients, **out of region diversion may be implemented once approval is granted by hospital administration.**

1. Both hospitals will work out a plan to contact Norwalk Hospital, Milford Hospital, Griffin Hospital and Danbury Hospitals to ascertain their ability to receive patients and inform them of the potential need to divert patients to their institutions. This information will then be communicated between both ED nurse managers or their designee.
2. The ED manager of both hospitals or their designee shall notify the Southwest Regional Communications Center (C-Med) of the need to regionally divert patients and what hospitals have agreed to accept diverted patients.
3. The EMS crew will determine the patient's triage criteria and category based on EMS policy and procedure.
4. **The Medical Control Physician will provide the EMS unit with the name of the hospital(s) which have agreed to accept diverted patients.** The EMS crew, in consultation with the patient, will decide the hospital destination.
5. The EMS crew will establish radio contact with the receiving hospital to inform them that they are coming to their facility and to communicate pertinent patient information. Medical Control will remain the responsibility of the JHPC.
6. In the event of radio/communication failure, the Medical Control Physician or his/her designee will be responsible for communicating all information to the receiving hospital.

NOTE: A hospital may elect to cancel diversion status at any time by re-contacting the other hospital(s) and advising them of their change in situation. Notification to the C-Med will be made by the hospital initiating the cancellation.

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Exceptions:

All patients who are designated Priority 1, as defined by the Southwest Regional Radio Traffic Category Guidelines, will be taken to the nearest hospital regardless of diversion status.

(Bridgeport Hospital does not divert pediatric or burn patients unless specified prior to upgrading to regional diversion status).

NO EMERGENCY DEPARTMENT WILL REFUSE TO TREAT ANY PATIENT WHO ARRIVES AT ITS FACILITY, REGARDLESS OF DIVERSION STATUS.

During Phase III Diversion Status the following procedure will be implemented:

1. Upon arrival at the scene the EMS crew will determine if the patient fits the diversion criteria (see attached). If so when the hospital on diversion is requested, or is the nearest facility, the EMS crew will establish a patch with Medical direction via EMCC radio contact. The patch should be made while on the scene, as soon as possible, for determination of patient destination.
2. The Medical Control Physician will provide the EMS unit with the name of the hospital(s) which have agreed to accept diverted patients. The EMS crew, in consultation with the patient, will decide the hospital destination.
3. The EMS crew will establish radio contact with the receiving hospital to inform them that they are coming to their facility and to communicate pertinent patient information. Medical Control will remain the responsibility of the JHPC.

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