I. AUTHORITY

Division 2.5, Chapter 6, Article 3, §1798.170, Health & Safety Code.

II. PURPOSE

Ambulance diversion is a management tool that can be used temporarily by local hospitals to ensure patient safety, when the patient load exceeds emergency department resources, in order to maintain continued access to good medical care for all. Diversion (RED) is to be considered a last resort alternative when emergency department resources continue to be overwhelmed after internal procedures for dealing with the situation have been maximized and are no longer effective.

III. FACILITY STATUS

The following facility status conditions apply to all Approved Receiving Facilities and Specialty Care Centers:

A. GREEN - Open to all patients

B. YELLOW - Service Limitation Advisory. A Service Limitation Advisory can be initiated for limitation on services normally available at a receiving facility, i.e.; inoperable CT scan or ED near overload. A census advisory (nearing ED overload) does not divert patients, but provides EMS personnel with additional information so that an educated destination decision can be made if the patient’s health plan does not define the receiving facility.

C. RED - Diverting all patients, except those in extremis. The receiving facility’s Emergency Department is no longer able to accept additional patients due to the number of acute patients currently being treated, a lack of available beds, and/or available staff.

IV. DIVERSION PROCESS

A. Approved facilities may use ambulance diversion (RED) only if the following process is used.
Medical Facilities

1. A facility has determined that it can no longer care for additional patients in the emergency department; and maintain patient safety and effective levels of care. *(Lack of in-patient or ICU beds is NOT a reason to consider diversion (RED)).* The diversion (RED) is in accordance with the facility's written diversion plan/policy as submitted to the Santa Clara County EMS Agency.

2. When a facility reaches an internal alert status, County Communications should be notified that the hospital is “YELLOW” because of pending overload.

   “Yellow - CT” Yellow will be used when a CT scanner is down. This will allow prehospital personnel to make a destination decision for patients having a need for immediate CT scans (i.e., new CVA, first-time seizure, new ALOC, isolated head injuries).

   “Yellow - Census” Yellow will be used when the Emergency Dept. is on the verge of becoming overloaded beyond available resources.

   “Yellow - CT/Census” Yellow will be used when both conditions (as above) exist.

   Dispatchers will notify the transporting EMS provider services by using one of three phrases: “Yellow-Census”
   “Yellow-CT”
   “Yellow-CT/Census”

3. Facilities should take steps to minimize time on diversion (RED); and should attempt to use no more than a total of 3 hours during a 24 hour period on “RED”

4. The facility shall notify County Communications of its diversion status (“RED”) as soon as possible after making the determination to close the emergency department.

5. Documentation of each “diversion” (RED) shall be forwarded to the EMS Agency by the **day after the incident** with the following information:
   a. The name of the person who authorized diversion
   b. Date and time of diversion
Medical Facilities

c. Description of problem causing diversion

d. In-house strategy used to handle crisis prior to calling diversion; if situation differed from facility internal plan.

e. Time that County Communications was notified

f. Time that County Communications was notified of reopening (“GREEN”)

6. The EMS Agency staff may perform unannounced site visits to hospitals to ensure compliance with these requirements.

7. Issues of noncompliance with this policy should be reported to the Emergency Medical Services Agency where they will be handled on an individual basis.

8. In the event of a declared local emergency, all facilities will remain open (“GREEN”).

9. All facilities may be directed to open by the Communications Center for at least sixty (60) minutes, if criteria in VI below applies or if the system is being negatively affected by diverting hospitals. (See VI below)

10. If a facility is on “YELLOW” or “RED” status at change of shift, County Communications will be contacted to reaffirm the advisory (“YELLOW”) or diversion (“RED”) status.

V. PATIENT TRANSPORT

A. A facility’s status at the time EMS begins patient transport will apply to that transport regardless of any subsequent status changes.

B. If a facility is diverting all ambulance traffic, no EMS team will communicate with the facility to determine their ability to accept a patient. EXCEPTION: An EMS team who is bringing a patient in extremis to a “closed/red” facility will notify that hospital of their pending arrival.

C. No EMS team (ALS, BLS, CCT or air ambulance) will transport a patient, other than pre-arranged interfacility transfers and in extremis patients, to a facility that is on diversion (“RED”).

D. Patients who are in extremis will be accepted by a facility regardless of their diversion (“RED”) status.
E. If a facility’s diversion status is not known, the transporting EMS team should contact Santa Clara County Communications Center for a status update.

VI. COMMUNICATIONS CENTER- The dispatchers will use the following criteria to determine when to instruct a facility to return to “green/open” status. **When a facility is directed by a dispatcher to open the emergency department; they will do so immediately.** If facility staff consider the direction inappropriate, they may discuss the situation with EMS Agency staff the following day.

A. Saint Louise and South Valley Hospitals may not be closed at the same time.

B. No **more than two** of the following facilities may be closed simultaneously:

   El Camino  
   Kaiser Santa Clara  
   San Jose Medical Center  
   Valley Medical Center  
   Santa Teresa  
   Alexian Brothers  
   O’Connor  
   Good Samaritan

C. Designated trauma centers, Columbia/San Jose Medical and Santa Clara Valley Medical Center **may not** close to **TRAUMA** simultaneously.

D. If the EMS system is being negatively impacted by facility diversion but the situations in A, B, or C above do not apply; the dispatcher will contact the on-call EMS Agency staff.