



HOSPITAL DIVERSION POLICY

PURPOSE

The purpose of this policy is to establish a procedure for receiving hospitals to request diversion of Advanced Life Support (ALS) units.

AUTHORITY

Health & Safety Code, Division 2.5, Chapter 4, § 1797.220
California Code of Regulations, Title 13, § 1105(c)

PRINCIPLES

- I. A receiving hospital may request to divert 9-1-1 ALS units away from its emergency department when temporarily not staffed, equipped, or prepared to care for additional patients. Basic Life Support (BLS) units may not be diverted. Diversion requests will be honored depending on available system resources and authorization from the EMS Administrator.

DIVERSION REQUEST CATEGORIES

- I. **Emergency Department (ED) Saturation** – Hospital's ED has an overload of patients who require immediate attention and, therefore would not be able to free staff or space should it receive an additional patient requiring immediate intervention resulting in patient safety concerns.
- II. **CT scanner** – Hospital is unable to provide appropriate diagnostic measures due to a non-functioning CT scanner.
- III. **Internal Disaster** – Hospital cannot receive any patients because of a physical plant breakdown, fire, bomb threat, power outage, etc. This category does not apply to work actions.

DIVERSION

- I. All hospitals are required to communicate diversion request via a phone call to the on-call EMS staff at (530) 321-3620 and via EMResource.
- II. When a receiving hospital is on diversion, the on-call EMS Agency staff at their discretion, may:
 - A. Inquire about the status of the ED and its ability to treat critically ill patients;
 - B. Inquire if the hospital has initiated its internal diversion/disaster policy;
 - C. As well as what actions are being taken to return to open status;
 - D. Request names of administrative staff that were contacted to assess and to attempt to rectify the diversion situation.
- III. On-call EMS staff should be notified immediately when going off of diversion status, and EMResource will be updated.



Yolo County Emergency Medical Services Agency

Service Provider

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QUALITY ASSURANCE

- I. The EMS Agency shall conduct its own review of hospital diversion activity and will report to the Emergency Medical Care Committee (EMCC) and Physician Advisory Committee (PAC) on the following diversion activity quality indicators:
 - A. Unusual events
 - B. Receiving hospital is on diversion for an average of more than 15% during any consecutive three (3) month period
 - C. Receiving hospital is on diversion for 30% during any single month
 - D. Any request for diversion not covered in this policy