## NORTHERN VIRGINIA EMERGENCY DEPARTMENT DIVERSION/RE-ROUTE POLICY

Approved by the Northern Virginia EMS Council Implementation Date: October 1, 2001

There are times when emergency departments have a shortage of resources that render them temporarily unable to care for additional patients. During those times, it may be in the best interests of the patient to be transported to another hospital. Final determination of the patient's destination must rest with the **provider** actually caring for the patient and the on-line medical control **physician**. Patients determined to be unstable by EMS provider should be transported to the closest, most appropriate hospital, regardless of hospital re-route status.

## **DEFINITIONS**

Definitions reflect the status fields in the current Virginia Hospital Alerting & Status System (VHASS) [a.k.a. Hospital WebEOC]:

VHASS Status Category	Definition		
OPEN	ED is open and available to EMS traffic.		
FULL	Synonymous with ED Re-Route. i.e., the emergency department of a hospital is temporarily unable to accept any more patients due to limitations in the emergency department.		
SPECIAL DIVERSION	ED is open and available to EMS traffic but indicates that specific services or capabilities may be unavailable or are being utilized to maximum capacity. When a hospital is on SPECIAL DIVERSION the specific service or capabilities that are on SPECIAL DIVERSION will be indicated in the "COMMENTS" field. Examples of services / capabilities that could be on SPECIAL DIVERSION include: "PICU; NICU; OR; ICU; CT-SCAN down, etc"		
DISASTER ALERT	The hospital has activated its disaster plan for an internal or external emergency. May indicate that the ED is closed for EMS traffic because of potential life / safety issues. EMS advised to monitor the exact nature of the disaster alert in order to determine if transport to that hospital is advised. Specific incident or type of emergency will be detailed in the "COMMENTS" field. Examples of DISASTER ALERT could include: "Fire in Emergency Department; ED Violence / Security Lockdown; HAZMAT event in ED, etc"		

## **PROCEDURE**

A hospital must go on re-route PRIOR to an ambulance calling in with patient information. The process for a Northern Virginia hospital to go on re-route would be as follows:

- 1) The hospital ED and administration makes an internal decision to declare re-route.
- 2) The hospital representative contacts the "home" 911 Center for their EMS system and <u>requests a period of re-route</u>.
- 3) Based upon local procedure, the 911 Center will indicate if reroute can be currently accepted or the 911 Center will forward the information to the person in their organization with the authority to make the decision.

If EMS cannot honor re-route at this time due to circumstances such as weather, call volume, major incident in progress, etc., then the 911 Center will notify the hospital when the request may be honored.

4) The hospital representative inputs the information into the Virginia Hospital Alerting & Status System (VHASS)." The system can be accessed by EMS on the public URL located at:

https://www.vhha-mci.org/index.cfm?fuseaction=integratedStatus.diversion&lkupRegionID=4

VHASS refreshes itself every minute. It will make an audible alert tone anytime there is a status change.

- 5) The re-route status is automatically canceled at the end of the specified time frame unless extended by the hospital.
- Regardless of re-route status, medical control will continue to be provided by the emergency department. The emergency department will accept decisions made by EMS personnel in the field to override the re-route status due to the medical condition of the patient. Questionable decisions shall be referred to the quality assurance process for review.



## NORTHERN VIRGINIA QUALITY ASSURANCE REPORT FOR EMERGENCY DEPARTMENT RE-ROUTE ISSUES

Incident Number	Date	Ambulance/Medic Unit		
Patient Name	Communications RN N	Communications RN Name		
Hospital	Accepting RN Name	Accepting RN Name		
Name of Person Submitting Report	Charge MD Name	Charge MD Name		
Arrival to Triage Time	Witness Name (If Applicable)			
If applicable, indicate below the original destine Additionally, indicate each hospital's status at	-	al to which the patient was diverted.		
Original Hospital Destination	ED Re-Route	ED Closed		
Final Hospital Destination	ED Re-Route	ED Closed		
Please describe the events in detail (using back patient's condition. You may also attach a sep		re to include a brief summary of the		

Confidential: Prepared for review by EMS Agency and Hospital Supervisors functioning primarily to review adequacy or quality of professional services.

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NOT PART OF MEDICAL RECORD

When you have completed this form, please attach a photocopy of your Patient Care Report, including any

relevant documents, and forward to the appropriate EMS or Hospital ED Supervisor.