Hospital resources, including emergency services, may occasionally be overwhelmed and may not be able to provide optimal patient care. Factors contributing to this problem include a shortage of qualified health care providers, lack of hospital-based resources, and ongoing hospital and emergency volume in response to COVID19 community transmission.

While many hospitals have attempted to respond to ED overcrowding by diverting incoming ambulances to other hospitals, diversion creates its own problems, delays patient care, and further reduces our EMS systems ability to respond to calls for emergency assistance in a timely fashion.

A patient’s choice of hospital or other facility should be complied with unless contraindicated by state, regional or system/service protocol or the assessment by a certified EMS provider shows that complying with the patient's request would be injurious or cause further harm to the patient. Patient transfer can be arranged following emergency care and stabilization.

HOSPITAL DIVERSION REQUESTS

A hospital may notify the EMS system of a temporary inability to provide care in the emergency department (ED) and request ambulances divert patients to an alternate hospital facility.

A request to divert to another facility may be honored by EMS providers when patient condition and EMS system status allow.

A diversion request does not mean the hospital ED is closed, but usually means the current emergency patient load exceeds the Emergency Department's ability to treat additional patients promptly.

If the patient's condition is unstable and the hospital requesting diversion is the closest appropriate hospital, ambulance service personnel should notify the hospital of the patient's condition and to expect the patient's arrival.

This procedure should also be followed when a patient demands transport to a facility on diversion.

A hospital declaring diversionary status for EMS patients is simply a request for EMS to consider an alternate hospital destination. The hospital may not refuse care for a patient presented to their facility and is subject to EMTALA rules and regulations.