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DEACTIVATION OF HOSPITAL-INITIATED EMERGENCY DEPARTMENT AMBULANCE DIVERSION

The county's emergency healthcare delivery system is experiencing significant stress, intensified by staffing shortages, increases in COVID and non-COVID patient volumes and acuities, and an escalating pandemic surge. These conditions have placed extreme demands on the county's entire healthcare continuum. To preserve critical resources and the ability to provide emergency healthcare to the county's residents and visitors, the County of San Diego EMS Medical Director has temporarily deactivated hospital-initiated ambulance diversion for Emergency Department (ED) saturation.¹

County EMS has implemented multiple strategies and tactics to manage healthcare system strain, facilitate load leveling, and to provide optimal patient care. These include:

- referring stable patients to alternate sources of care rather than transporting to the ED
- safe and rapid handoffs upon emergency department arrival, and
- managing ambulance patient destinations.

Based on accelerating COVID-19 case numbers and the projected hospitalizations that will follow, health system strain is likely to increase. Over the last two weeks, ED diversion hours have more than doubled. Since December 20, 2021, County EMS has issued more than thirty alerts advising that fewer than 50% of county emergency departments were available to receive ambulance patients. On several occasions, County EMS has already suspended ED ambulance diversion because nearly all EDs placed themselves on diversion simultaneously. Given the unprecedented increase in the number of patients seeking emergency care at all ED facilities, combined with healthcare personnel shortages, and prolonged EMS Transfer of Care times, County EMS expects in the near-term to repeatedly suspend diversion.

Historically, emergency department ambulance diversion has been useful to address a timelimited surge in resource needs that is specific to a particular facility. With a short period of ambulance diversion, an individual emergency department is able to decompress and return to baseline operations. When multiple emergency departments simultaneously experience

¹ Per <u>County EMS Policy S-010</u>, ED saturation is defined as "a sudden, unanticipated, temporary inability to receive any additional 9-1-1 patients due to critical lack of ED capacity."

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increased patient loads and initiate ambulance diversion, this results in excessive resource demands on the few facilities not diverting incoming ambulances.

To mitigate these health system stresses, effective 0800 January 13, 2022, hospital-initiated emergency department ambulance diversion is deactivated for 14 days as an option in the electronic Local EMS Information System (LEMSIS). This deactivation may be extended, as needed. Other elements of County EMS Policy S-010 including specialty diversion, internal disaster diversion, and Duty Officer-initiated ambulance diversion remain in full force and effect.

Thank you to <u>all</u> our healthcare partners for the outstanding care you provide to our patients, day in and day out. We recognize and appreciate your dedication during the special conditions of this pandemic.

Respectfully,

Kristi L. Koenig, MD, FACEP, FIFEM, FAEMS, Medical Director

San Diego County Emergency Medical Services Office

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