

EMERGENCY SERVICES AND DIVERSION

Self-Assessment Questions	YES	NO	N/A	Date/Initials	Comments
<p>Note: Any hospital participating in Medicare regardless of whether the hospital has an emergency department must have the capability to provide basic emergency care interventions. A hospital may not rely on 9-1-1 services to provide appraisal or initial treatment.</p>					
<p>Does the hospital have policies and procedures to address the reporting of:</p> <p>a. communicable diseases</p> <p>b. notification of EMS personnel of exposure risk</p> <p>19 CSR 20-20.020 19 CSR 20-20.090</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>Are hospital policies and procedures governing medical care provided in the emergency service established by and the continued responsibility of the medical staff?</p> <p>A-1104 COP §482.55(a)(3)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>Are your emergency services integrated into the hospital-wide QA/PI program?</p> <p>A-1104 COP 482.55(a)(3)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>Are the emergency services:</p> <p>a. easily accessible?</p> <p>b. adequately equipped and staffed to assess and treat or transfer ill or injured persons?</p> <p>c. reviewed and evaluated on a regular basis for quality and appropriateness of emergency services?</p> <p>d. periodically assessed for likely demands for policies, procedures, staffing, training and other resources?</p> <p>A-1112 COP §482.55(b)(2)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>Is there coordination and communication between the emergency department and other hospital services/departments?</p> <p>A-1103 COP 482.55(a)(2)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>Is the length of time it takes to transport the emergency patient from the ED to another hospital department for interventions or diagnostic services within time frames that protect the health and safety of patients and within acceptable standards of practice?</p> <p>A-1103 COP 482.55(a)(2)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>Is the length of time it takes to deliver equipment or supplies or for the staff from other departments to travel to the ED in order to provide needed interventions, tests, care or services, within time frames that protect the</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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health and safety of patients and within acceptable standards of practice? A-1103 COP 482.55(a)(2)					
If you operate an urgent care clinic as part of the ED, is the urgent care clinic in compliance with the hospital emergency services CoP? Note: If urgent care clinic is part of the ED then EMTALA applies. A-1103 COP 482.55(a)(2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
If you operate an urgent care clinic as part of the outpatient department, is the urgent care clinic in compliance with the Outpatient Services CoP? A-1103 COP 482.55(a)(2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are hospital emergency services under the medical direction of a qualified member of the medical staff? A-1102 COP §482.55(a)(1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are hospital emergency services under the supervision of a qualified member of the medical staff during all times the hospital makes emergency services available? A-1110 COP §482.55(b)(1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the hospital have a single emergency services director responsible for the hospital's emergency services? A-1102 COP §482.55(a)(1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are emergency services sufficiently staffed with qualified medical and nursing personnel to meet the needs anticipated by your facility? A-1112 COP §482.55(b)(2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Did the medical staff establish criteria delineating the qualifications required for each category of emergency services staff? A-1111 COP §482.55(b)(2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are the staff knowledgeable of: a. parenteral administration of electrolytes, fluids, blood and blood components? b. care and management of injuries to extremities and central nervous system? c. prevention of contamination and cross infection? A-1112 COP §482.55(b)(2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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Diversion					
Does the hospital assure compliance with screening, treatment and transfer requirements as required by the EMTALA? 19 CSR 30-20.092(1)(C)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does your hospital have a written diversion plan that is reviewed and approved by the DHSS? 19 CSR 30-20.092(1) OR Is there a written, approved policy which states that the hospital will not go on diversion or resource diversion, except as defined in the hospital's disaster plan in the event of a disaster? (If yes, skip the remaining questions.) 19 CSR 30-20.092(1)(F)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does your hospital participate in a DHSS approved community-wide plan, which ensures that all necessary requirements, including policies addressing diversion, criteria used, community notification, etc., are fulfilled? 19 CSR 30-20.092(1)(G)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does your hospital's diversion plan: a. identify the individuals by title who are authorized to implement the diversion plan? b. define the diversion decision-making process? c. specify that the diversion plan will not be implemented until all actions that might prevent a diversion from occurring have been taken, including review and documentation by an authorized individual of the hospital's ability to obtain additional staff or open existing beds that may have been closed? d. include a statement that all ambulance services within a defined service area will be notified of the intent to implement the diversion plan upon the actual implementation? (An electronic notification system such as the EMResource® can be used to contact the ambulance services)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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e. include procedures for assessment, stabilization and transportation of patients in the event that services become unavailable or overburdened, including an evaluation of the services and resources that can still be provided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
f. include procedures for implementation of a resource diversion in the event that specialized services are overburdened or temporarily unavailable?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
g. include a provision that all other acute care hospitals within a defined service area will be notified upon the actual implementation of the diversion plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
h. include a statement that if your hospital is one of more than 2 hospitals in your service area and more than half of them are on diversion no hospital will be on diversion?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
i. include a statement that if your hospital is one of two hospitals in your service area and both are on diversion, neither will be considered on diversion? 19 CSR 30-20.092(1)(A)(1)(2)(3)(4)(5)(6)(7)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are ambulances that make contact with the hospital before the hospital has declared itself to be on diversion not redirected to other hospitals? 19 CSR 30-20.092(1)(A)(4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are minutes of the required QA review of each incident of diversion plan implementation available for review by the DHSS on request? 19 CSR 30-20.092(1)(B)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Upon actual implementation of the plan, does the hospital, or its designee, report to the department via the EMResource®:					
a. the time the plan will be implemented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
b. within eight hours of the termination of the diversion, with a termination report containing:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
– time the diversion plan was implemented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
– reason for the diversion?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
– name of the individual who made the determination to implement the diversion plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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<ul style="list-style-type: none"> – time the diversion status was terminated? – name of the individual who made the determination to terminate the diversion? 19 CSR 30-20.092(1)(D)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the triage methodology existing within the emergency department continue to apply during periods when the hospital diversion plan is implemented? 19 CSR 30-20.092(1)(E)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Do staff ensure incidences of child abuse including color photographs and radiological examinations are reported to the DSS Children’s Division as required by section 210.120, RSMo?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Helpful Hints

- Emergency Services is not the same as your emergency preparedness plan.

Key Resources and Links

- Duties of Medical Institution Staff Members in abuse cases: [210.120, RSMo](#)
- CMS Hospital Conditions of Participation-[Appendix A](#)-Emergency Services [EMResource®](#)