

Admission Criteria for the Transfer of Patients to Saint Francis Hospital's Surge Unit (5 West)

Purpose: Saint Francis Hospital has been designated by the West Virginia Department of Health and Human Resources (DHHR) as the Coronavirus (COVID+) surge facility available for transfers from facilities designated by DHHR as an institution in crisis. Saint Francis is staffed to care for lower acuity and post-acute transfers awaiting a disposition to their next level of care (i.e. nursing home placement). Saint Francis Hospital is not equipped to handle acutely ill COVID+ patients. Those patients should be admitted to their hospital or transferred to a higher level of care facility.

Definitions

Surge Hospital: A hospital available for the decompression of another facility of their medically stable COVID+ patients to allow for the care of more acutely ill patients at their facility.

Crisis: Hospitals/Facilities where there is a lack of clinical staff or beds directly related to an outbreak of COVID making safe and effective patient care a concern for that facility. The transfer of eligible patients will allow the sending facility to open beds to care for more acutely ill patients.

Procedure

- 1. Transferring facility **must** be deemed as a facility in crisis by the DHHR
- 2. The patient must be awaiting discharge to home (nursing home patients) who have been diagnosed as COVID+ and medically stable (per the transfer criteria listed below)
- 3. The attending physician, patient (or medical power of attorney) and immediate family members <u>must all</u> be notified and approve of the transfer prior to initiating the transfer process
- 4. Transfer criteria
 - Patient requires transfer from an Acute
 Care facility due to the facility being
 deemed in crisis by the DHHR
 - b. Hemodynamically stable
 - i. SBP > 90 mm Hg
 - ii. HR > 60 bpm and < 120 bpm
 - iii. RR < 30 bpm
 - Able to independently maintain a patent airway
 - d. Patient must be able to follow simple commands and maintain isolation

- e. Oxygenation requirements < 40% FiO2
 - i. Home use of CPAP is acceptable (must be sent with patient)
- f. No Hemodialysis or Peritoneal Dialysis due to transportation
- g. Patient is not on any critical intravenous drips (Heparin, Cardizem, Dopamine, Nitroglycerine, Lasix, Amiodarone etc.) or telemetry

Other

Patients who have been evaluated in an Emergency Room setting, are medically stable, and their hospital is unable to care for the patient should follow their routine hospital diversion guidelines for referral and disposition of patients.

Saint Francis Hospital is not equipped to handle acutely ill COVID+ patients.

Social Services will be consulted on all patients prior to transfer, ensuring adequate resources are in place post-discharge and medical follow up has been identified.

Discharge planning must verify prior to the patients transfer to Saint Francis that the patient is eligible for disposition to a nursing home facility.

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