

## Kingston Hospital Trust ED Redirect & Closure Policy Quick Reference Guide

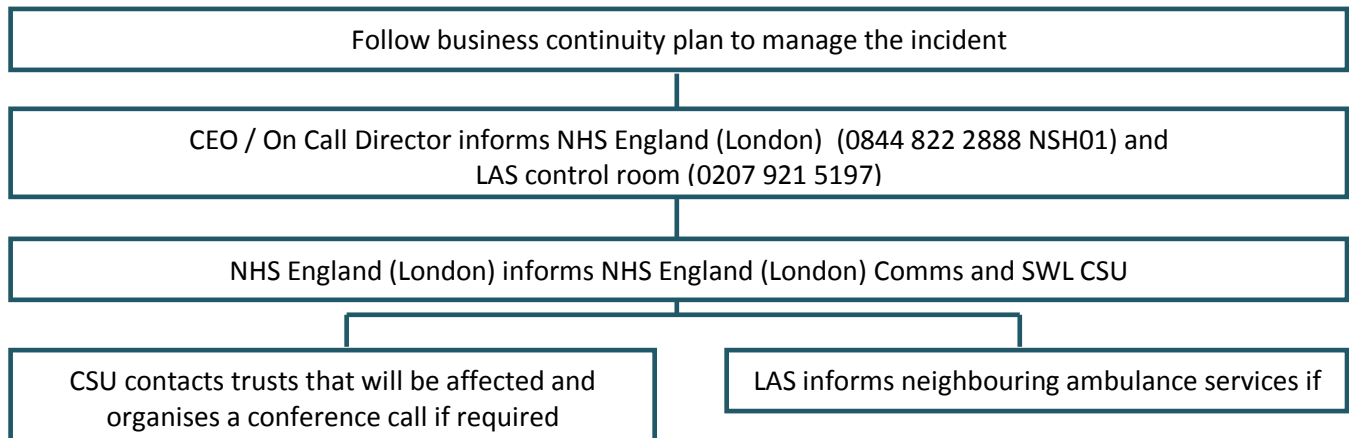
### **Requesting a divert should be a last resort based on clinical safety considerations**

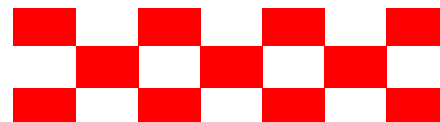
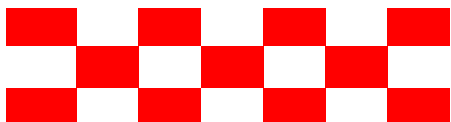
- Diverts should be the last escalation measure considered
- Diverts should not be requested if there is insufficient bed capacity to move patients on
- Diverts should be based on clinical safety concerns, not performance against targets
- CMS must be kept up to date to allow Clinical Commissioning Groups and Clinical Support Units to see the situation in the event of a divert
- The CSU should be involved in any discussions around building pressure situations
- Where a Trust outside of London needs to redirect or close, the receiving trust will need to agree. If it agrees, they will need to notify CSU. The ambulance service will inform LAS

|                  |   |
|------------------|---|
| <b>Re-Direct</b> | Self-presentations and blue lights still accepted                       |
| <b>Closure</b>   | Self-presentations redirected and blue and non-blue lights not accepted |

### **CLOSURE DUE TO INFRASTRUCTURE FAILURE**

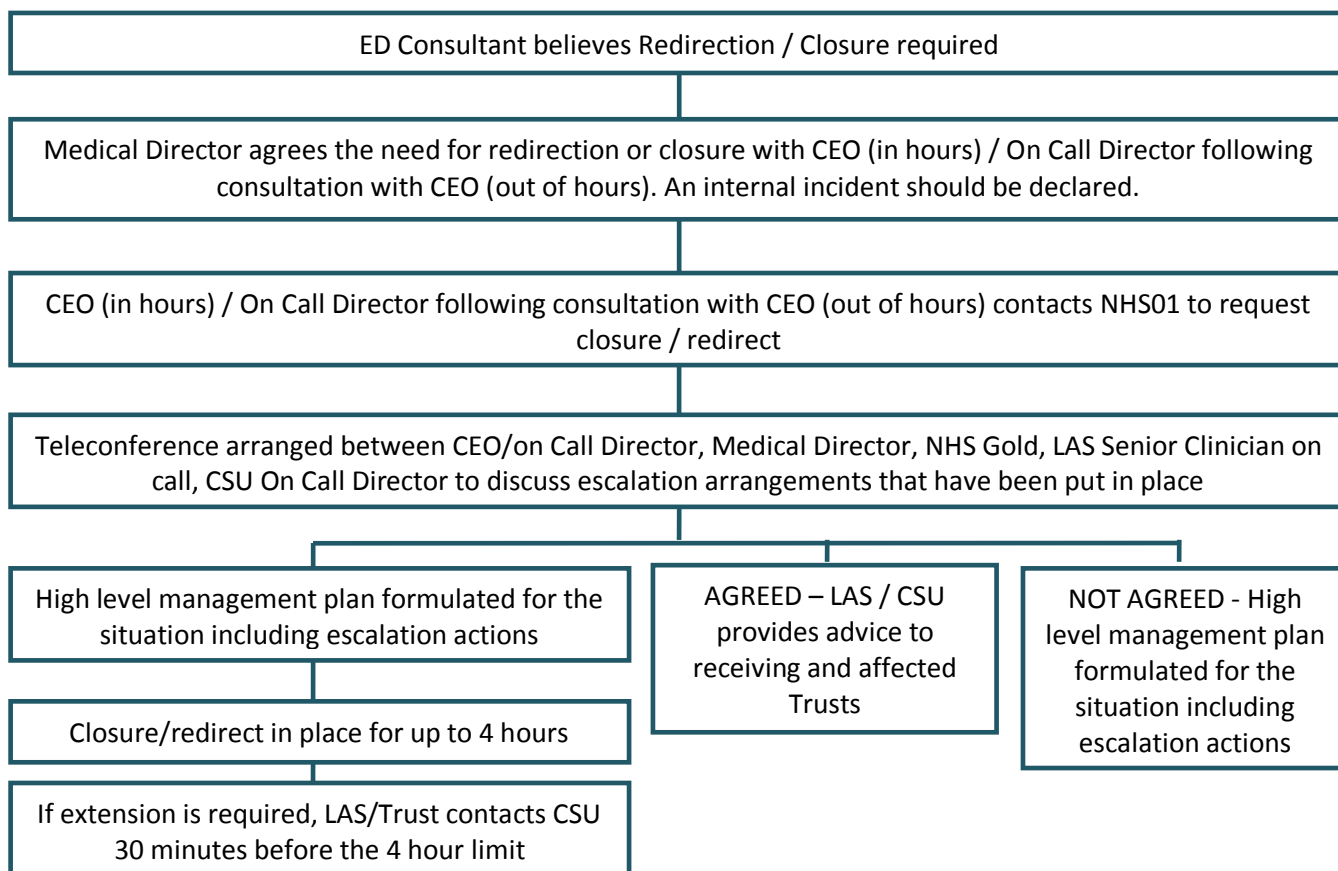
|   |   |
|---|---|
| <b>Closure – Infrastructure Failure</b> | Only be considered as a last resort if the trust is unable to provide ED and resus facilities due to infrastructure failure, for example fire, flood, major electrical failure etc and should be for the shortest duration possible |
|   | It is likely an internal incident will be declared  |

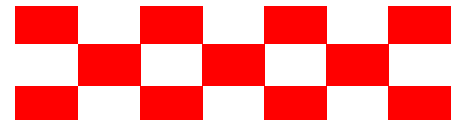
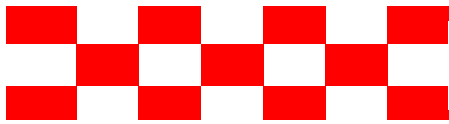




**CLOSURE / REDIRECT DUE TO PATIENT SAFETY CONCERNS**

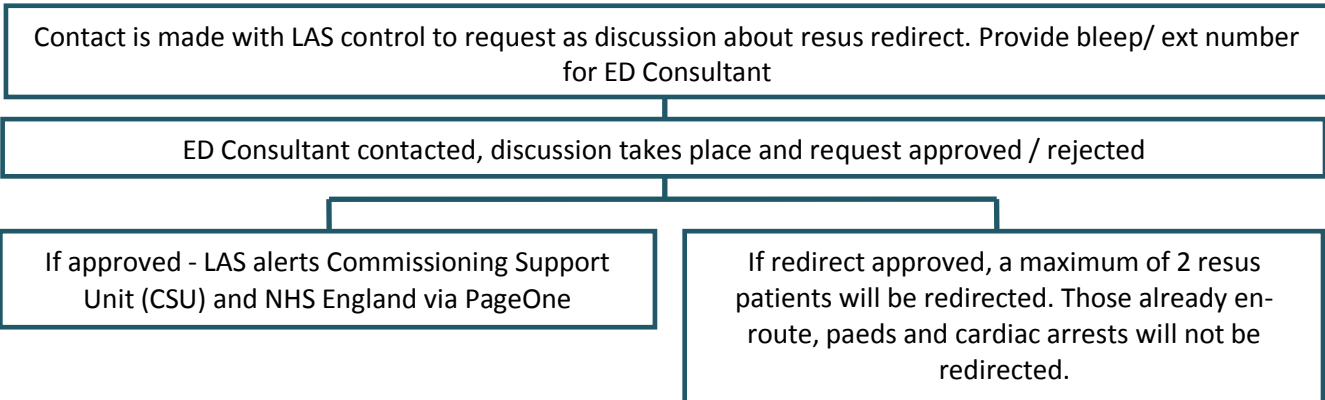
|   |   |
|---|---|
| <b>Closure / redirect – Safety Concerns</b> | Only to be considered as a last resort where patient safety may be put at risk due to severe capacity shortages within ED and resus and where all other escalation measures have been taken |
|   | The Trust will need to make arrangements for self-presenters to be redirected or treated at alternative emergency departments   |
|   | Will not normally last more than 4 hours  |





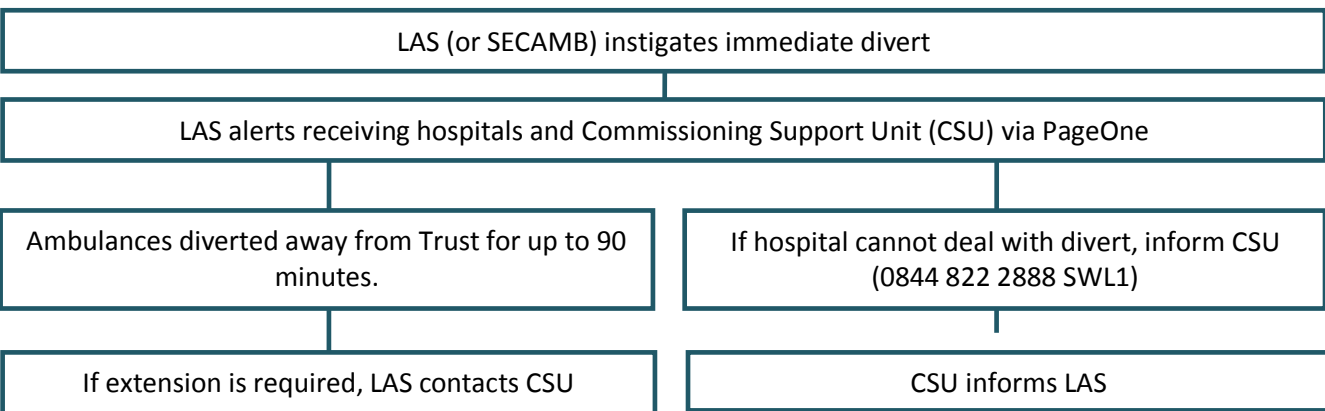
## RESUS REDIRECT

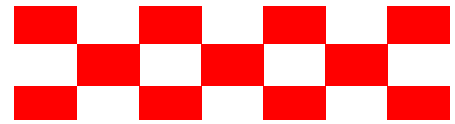
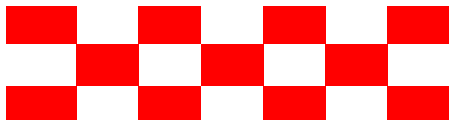
|                       |  |
|-----------------------|--|
| <b>Resus Redirect</b> | Where resus capacity is reached with on-going active cases |
|                       | Instigated by Ambulance Service                            |
|                       | Short term – 60 mins max                                   |



## IMMEDIATE REDIRECT

|                           |                                 |
|---------------------------|---------------------------------|
| <b>Immediate Redirect</b> | Instigated by Ambulance Service |
|                           | Short term – 90 mins max        |





### **PLANNED CLOSURE DUE TO TRUST INFRASTRUCTURE OR BUILDING WORKS**

\*Refer to the NHS England London Regional Office Emergency Department Capacity Management and Closure Policy for full details\*

- 1) If a Trust is planning to close the Emergency Department due to infrastructure or building works, it must work with the Clinical Commissioning Group (CCG) / SWL CSU and provide formal notification to them of the proposal with at least 4 weeks' notice.
- 2) The Trust should inform LAS and other local Trusts of the planned closure.
- 3) The CCG will assess the arrangements made in response to the closure, the Trust must provide the following details:
  - Time and date of proposed closure
  - Contingency plans in place
  - Expected number of patients to be affected
  - Mitigations measures implemented
  - Arrangements in place to reinstate the ED in the event of a Major Incident
  - On call arrangements are clear
  - Designated contacts within the organization are made with communication lines
  - Communication made with the public / will be made
- 4) If satisfactory, the CCG will agree the closure and seek permission from NHS England (London) to proceed.