

LOS ANGELES COUNTY DEPARTMENT OF HEALTH SERVICES HARBOR-UCLA MEDICAL CENTER

DIRECT ADMISSIONS - ACCEPTANCE AND TRANSFER OF ADULT SUBJECT: POLICY NO. 303

PATIENTS FROM OUTSIDE FACILITIES

CATEGORY: Provision of Care	EFFECTIVE DATE: 9/93
POLICY CONTACT: Joy LaGrone, RN, MSN	UPDATE/REVISION DATE: 6/21
REVIEWED BY COMMITTEE(S): Associate Medical Direct	ctor, Nursing Inpatient Services, Patient Access
Center, Patient Flow & Bed Control	

PURPOSE:

To define the requirements for direct admissions and acceptance and transfer of adult patients from outside facilities.

POLICY:

- 1. Sending facilities must call the Los Angeles County Medical Alert Center (MAC) at 1-866-940-4401 to transfer an acute non-emergency adult medical or surgical inpatient to a County hospital. MAC will coordinate the transfers with the receiving hospital.
- 2. For DHS-empaneled patients, a DHS Utilization Management liaison actively identifies prospective transfers at private facilities and directly contacts a DHS provider to arrange for repatriation transfers.
- 3. An Attending Physician or a Chief or Senior Resident may accept a transfer. Acceptance is dependent on the availability of a bed and the ability to provide the services required to care for the transferred patient.
- 4. Only an Attending Physician may deny transfers. However, the only acceptable reasons for denying a repatriation transfer for DHS-empaneled patients who are being cared for at a non-DHS facility are lack of clinical stability of the patient to tolerate the transfer, or inability to provide the needed care at the DHS facility.
- 5. MAC will not accept transfer requests to Harbor for inpatients if the hospital is closed to inpatient transfers. Prior to acceptance by a Harbor physician, a bed must be available. Admitting/Registration must pre-register the patient prior to arrival.
- 6. A physician of the accepting service will evaluate the patient and write admission orders within two hours of arrival on the ward. During the period before the admission orders are written, the assigned physician should be paged by the nursing staff for any clinical care questions.

REVISED: 1/89, 6/89, 10/92, 9/95, 12/98, 3/99, 2/02, 1/11, 2/14, 8/17, 12/19, 5/21, 6/21 REVIEWED: 9/86, 9/89, 10/92, 9/95, 12/98, 3/99, 2/02, 6/06, 4/14, 8/17, 12/19, 5/21, 6/21

APPROVED BY:

Chief Executive Officer

Chief Medical Officer

Joy LaGrone Chief Nursing Officer



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PROCEDURE:

1. Initiation of the Transfer

Transfers may be initiated either by the sending hospital working through the MAC, or by a DHS managed care liaison.

a. Private Hospital Physician and the Medical Alert Center (MAC)

Sending hospitals must call the MAC to arrange a non-emergency adult inpatient transfer to a County hospital. The MAC will determine LA County residency and if the County hospital within the appropriate catchment area is open to transfers.

If a bed is not available in the appropriate catchment area, the MAC will attempt to transfer the patient to another LA County DHS hospital. If unable to do so, the MAC will place the private hospital on a priority waiting list, PTIS, as outlined in the County Revised Transfer Procedure approved by the Board of Supervisors.

If a bed is available at Harbor, the MAC will notify the Bed Control Supervisor of the transfer request by calling extension 64010 or the Patient Flow Facilitator (PFF) pager at 310-501-0939. MAC will also directly connect the accepting Harbor physician to the sending physician at the outside facility.

b. DHS Utilization Management Liaison

When DHS-empaneled patients are identified as receiving care at private hospitals, a managed care services liaison directly contacts an appropriate local DHS provider and provides contact information for the primary physician at the private hospital to facilitate the transfer.

2. Patient Flow Facilitator Responsibilities

Upon receiving a call from MAC/DHS UM for a potential transfer, the Patient Flow Facilitator will:

- a. Obtain and document the following patient's information from the MAC:
 - Patient's name, gender and age.
 - Name of transferring hospital.
 - Patient's diagnosis, medical service requested, and reason for transfer.
 - · Name and telephone number of accepting physician.
- b. Confirm bed availability for the level of care required for the patient.
- c. If MAC does not have authorization for the transfer, then give MAC the name and pager number of the physician on call (accepting physician) for the requested service.
- d. MAC will call back with authorization, accepting physician and pager number.
- e. Once notified that the patient has been accepted, notify Bed Control of the pending transfer, and for patients going to monitored beds assign the bed in the online transfer portal.

3. Bed Control Responsibilities

Upon notification from Patient Flow of an accepted transfer, Bed Control will:

- a. Obtain and document the following (patient's information) from the MAC online transfer list:
 - Patient's name, gender, age and date of birth.
 - Name of transferring hospital.
 - · Transferring hospital face sheet.
 - · Patient's diagnosis, medical service requested, and reason for transfer.
 - Name and contact number of accepting physician.



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- b. Upon learning from the Accepting Physician or the Patient Flow Facilitator that the patient has been accepted, Bed Control shall:
 - Notify Patient Access Center (PAC) (Scheduled Admissions ext. 64412 during business hours or Emergency Department Registration ext. 65083 after hours) of the accepted inpatient transfer. Record name and time of person taking information.
 - 2) Assign Med/Surg bed in the online transfer portal and notify MAC of assigned bed and phone number for nursing report.
 - 3) Upon notification from a nursing unit that a direct admission patient has arrived, activate the preadmit FIN in the Hospital Information System.

Notify PAC (Scheduled Admissions ext. 64412 during business hours and after-hours Emergency Department Registration ext. 65083 after hours) of the patient's arrival to the unit.

4. Accepting Physician Responsibilities

When contacted by MAC or managed care services liaison the Accepting Physician will:

- a. Discuss with the primary physician at the private hospital the clinical circumstances of the patient to determine required level of care and other required clinical management. For MAC transfers, the MAC will put the on-call physician in contact with the transferring physician.
 - Note: All communications with MAC and between transferring and accepting physicians are recorded and available for future reference.
 - <u>Note:</u> If the on-call accepting physician does not respond within the allotted time, the MAC has been instructed to call the appropriate Department Chair.
- b. Determine if a physician of another specialty/subspecialty should discuss the case with the sending physician, and if so, facilitate this discussion.
- c. Accepting Physicians may only accept a transfer to their patient care service (i.e., they cannot accept a patient onto a different patient care service).
- d. After discussion with the primary physician at the private facility, notify MAC or managed care or its designee whether the patient transfer is to be accepted/denied. Only Attending Physicians may deny transfers. If a Chief or Senior Resident believes that the transfer should be denied, they must discuss the case with their Attending Physician prior to denying the patient. Generally, transfers of DHS-empaneled patients may not be denied unless the patient is deemed unstable for transfer or the type of care the patient requires cannot be provided at Harbor.

Once the patient is accepted, the Accepting Physician will notify Patient Flow and supply all the necessary information.

5. The Medical Alert Center

Upon learning that the patient has been accepted for transfer, the MAC shall instruct the transferring hospital's Discharge Planner to:

- a. Call Harbor's (PAC) Scheduled Admissions (8:00A.M. to 5:00 P.M.) at extension 64412, or PAC Emergency Department Registration (after-hours, weekends and holidays) at extension 65083 and provide the necessary registration information.
- b. MAC will update accepting physician information on the online transfer portal.
- c. Inform the transportation to take the patient directly to the assigned bed.



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6. PAC Admitting/Registration Responsibilities

- a. Upon receiving a call from Bed Control of accepted inpatient transfer PAC Admitting/Registration staff shall:
 - Obtain face sheet and necessary registration information from Bed Control via fax to Scheduled Admissions at (310) 222-3922 during regular business hours, after-hours ED Registration at (310) 212-0116.
 - Register the patient information in the Hospital Information System (HIS) and create pre-admit FIN
- b. Upon arrival of the patient, PAC Admitting/Registration staff shall:
 - · Conduct face to face or telephonic interview with patient on nursing unit.
 - Validate patient's demographic information is correct, if not correct, PAC will update Hospital Information System (HIS) with updated information and notify inpatient nursing staff to print and replace patients' ID/arm band.
 - Obtain the patient's signature on all applicable forms (Conditions of Admissions and Notice of Privacy Practices (NOPP).

7. Inpatient Nursing Staff

- a. Page and notify the Admitting Physician of the patient's arrival.
- b. Notify Bed Control of the patient's arrival time in order to activate the pre-admit FIN.
- c. Record the following:
 - Patient's name.
 - Time the patient arrived on the nursing unit.
 - Time the physician arrived on the nursing unit to see the patient.
 - Place new ID/arm band on the patient after confirming demographic information (name and date of birth).

8. Problem Transfer Reports (To be Completed by a Physician)

Any patient not transferred in accordance with Los Angeles County Department of Health Services protocol must be documented and recorded on a Problem Transfer Report. (Refer to Policy No. 309).

Reviewed and Approved by: Medical Executive Committee – 6/2021

Inine R. E. Vintch, M.D.

President, Professional Staff Association