

## **Guidelines for Acceptance to an Alternate Care Site from Triage, Emergency Department, Post-hospital Discharge, or Other Referral Sites**

1. Is this for “triage or emergency room adult patients” or “hospitalized/skilled nursing facility patients”?
  - a. Triage or emergency room adult patients: continue to question 2
  - b. Hospitalized/skilled nursing facility patients: continue to question 3
2. Does the patient have high-risk or rapidly worsening symptoms requiring hospital admission (\*\*see next page for what high-risk clinical features may include)?
  - a. Yes: Acute care admission
  - b. No: Continue to question 4
3. Is the patient stable for transfer to a low-acuity alternative care center? Is the patient hemodynamically stable, oxygen stable and less than 2 liters of nasal cannula, no cardiac/heart monitoring or cardiogenic pulmonary oedema? No high-risk or rapidly worsening symptoms? (\*\*see next page for what high-risk clinical features may include)?
  - a. Yes: Continue to question 4
  - b. No: Ongoing hospitalization or remain at referral site
4. Can the patient be safely discharged from home? Does the patient have a safe place to stay and isolate with adequate home support? Are they able to call 911 if worsening?
  - a. Yes: Home with guidance
  - b. No: Continue to next question
5. Is the patient confirmed or presumed to be Coronavirus Disease 2019 positive?
  - a. Yes: Continue to next question
  - b. Not an alternative care site candidate unless facility has ability to separate care
6. Does the patient meet all criteria for a Low-Acuity Alternate Care Site? The criteria is the following:
  - Coronavirus Disease 2019 positive
  - Hemodynamically stable
  - Oxygen saturation less than 90% on less than 2 liters of nasal cannula
  - Heplocked peripheral intravenous, if needed
  - No clostridium difficile infection
  - No more than two person assist
  - No severe dementia or delirium
  - No acute severe mental illness
  - Low safety risk (falls, wandering, elopement)

- a. Yes: Transfer to Low-Acuity Alternative Care Site
- b. No: Other dispo (rehab, skilled nursing facility, admission)

**\*\*High risk clinical features may include, but are not limited to:**

- Escalating oxygen needs, heart rate greater than 115 base points below baseline, or arrhythmia
- Age is equal to or greater than 65
- Asthma, chronic obstructive pulmonary disease, or other lung disease
- Heart failure or other cardiovascular condition
- Immunocompromised (human immunodeficiency virus, high-dose steroids, immune suppressants, and immune modulators, etc.)
- Current solid organ or hematologic malignancy
- End-stage renal disease or end-stage liver disease
- Active alcohol use disorder with prior withdrawal, delirium tremors, or seizures
- Other concerning or undifferentiated symptoms

\*An **Alternate Care Site** is a nontraditional care site that provides care for low-acuity, semi-ambulatory patients when hospitals are at or past capacity.

Indications may include:

- Patients with no safe place to stay or quarantine
- Patients requiring low-acuity clinical care (less than 2 liters of nasal cannula)
- Patients requiring extended observation due to:
  - High-risk comorbidities
  - Inadequate home support
  - Barriers to returning to the emergency room or calling 911