

# Temporary Capacity Acceptance Plan

10/2/2025

Due to the increase in volume of transfer requests and limited physical bed capacity and to continue the mission of St. Francis Medical Center ("St. Francis"), the following criteria for the acceptance of patient transfers will be in effect until the capacity challenges have normalized.

St. Francis' capacity status and requested patient transfers will be reviewed every six (6) hours by service line directors and hospital administration, and notification of changes to this process will be made via email and in meetings with healthcare partners and agencies.

The most up-to-date Temporary Capacity Plan (TCP) is located at [www.stfran.com/access](http://www.stfran.com/access).

All patient transfers will be coordinated via the Transfer Center at (318) 966-4233. Coordinators will take information and will provide a capacity screen based on the criteria listed below. If the patient transfer meets criteria or patient access nurse/paramedic has questions, they will connect the sending provider with the listed Emergency Department provider in the following examples. Escalation to the CMO or designee physician is at times necessary in complex cases.

Transfers will be accepted based on hospital and Emergency Department bed availability (Capacity).

Based on the healthcare capacities in the State of Louisiana and the unique healthcare specialists at St. Francis, St. Francis will accept the following patient transfers under this temporary capacity plan:

1. Patients that have been concluded to require services provided only at St. Francis.
2. Complex patients that have had recent surgical or medical procedures (including wearable devices or monitors) at St. Francis and the continuum of care is vital to the healthcare of this patient. Defined as having had inpatient surgery confirmed by EPIC records
3. Patients that need medical-surgical capability as defined in this plan.

This notice excludes behavioral health patients, as St. Francis does not have an inpatient Behavioral Health unit. Labor and Delivery is separate and sending providers should contact the OB-ED for current St. Francis OB capacity.

### **Medical-Surgical Transfers/Admissions**

- If not accepting patient to the ED for medical surgical cases- will not be accepting direct admits. All efforts will be made to accommodate these patients with outpatient, informed emergency department referrals or other ways that limit acute inpatient bed utilization.
- Med-surgical classification of patients is determined by the sending physician/provider.

### **Intensive Care Transfers/Admissions**

If not accepting patient to the ED, evaluation of accepting the critical care patient for direct admit will be completed.

### **Neuroscience Patients**

Acceptance will depend on Neurology and Neurointerventional Radiology call coverage.

### **Cardiovascular Patients**

(Contact Emergency Medicine Physician for ED transfers involving vascular needs and the CV Surgeon on call for emergency CABG/Valve issues)

- ST Elevation Myocardial Infarction (STEMI)
- Urgent/Emergent CV Surgical Cases (CABG/Valve)
- Urgent Vascular Case(s)- non-traumatic

### **Direct Admits**

- Will follow the plan outlined above for direct admits.
- All efforts will be made to consider outpatient therapy, referral to home health or delayed admission.
- All direct admits will be reviewed by the hospitalist/critical care physician to ensure clinical criteria are met.

### **Outpatient - Wait and Return**

Inpatient/Observation or Emergency Department patients that need specialized medical care or procedure (GI, cardiac, orthopedic, etc.) and would require an overnight stay may be considered for acceptance to complete the procedure and recovery then returned to the referring hospital for recovery and discharge.