

Special Seasonal Report

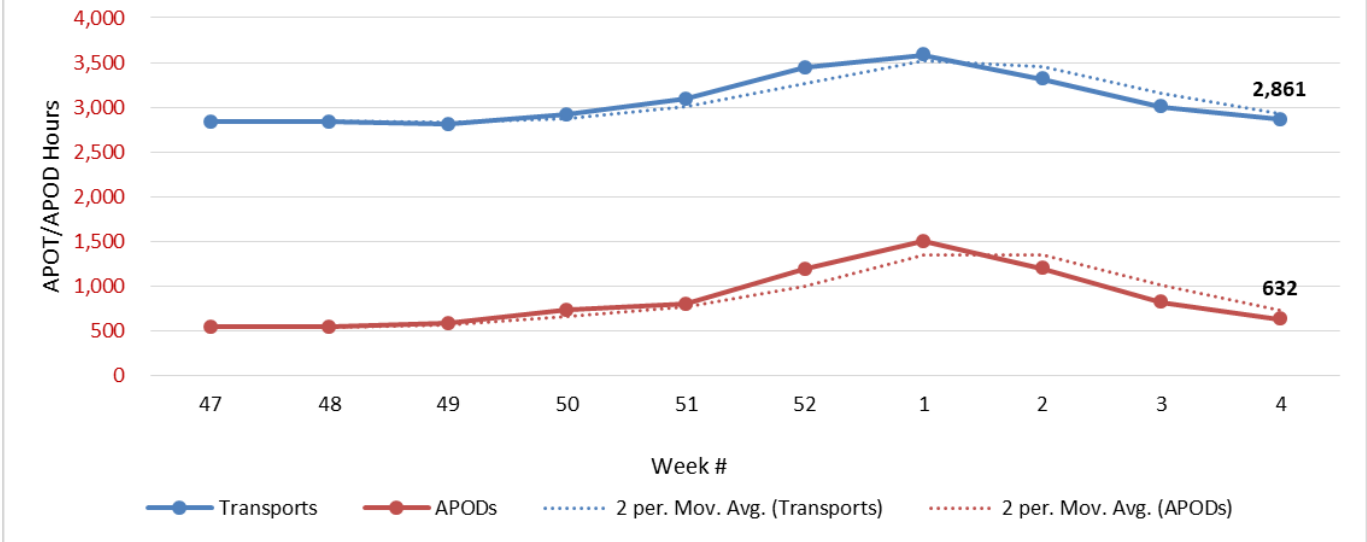


Ambulance Patient Offload Time
Week 4 (through 1/27/18)

*Special
Seasonal
Report*

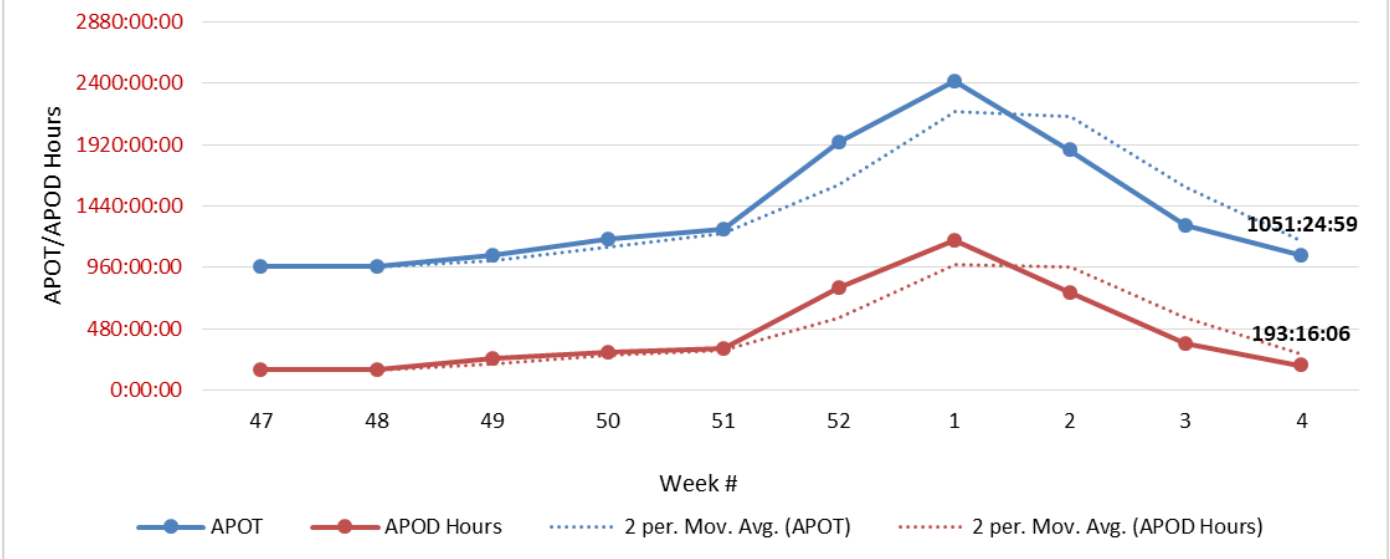
SPECIAL SEASONAL REPORT

Weekly Transports and APODs
2017 Week 47 through 2018 Week 4
(11/19/17 - 1/27/18)



- During week 4 (beginning 1/21/2018), there was a total of **2861 transports in Riverside County**—a 9.4% increase of the 2017 weekly average of 2,614 transports. (The 2018 weekly average is 3,067 transports.)
- The number of **APODs in week 4 was 632**, representing an increase of **14.8%** of the 2017 weekly average of 551. (The 2018 weekly average is 985 APODs.)

Weekly APOT & APOD Hours
2017 Week 47 through 2018 Week 4
(11/19/17-1/27/18)



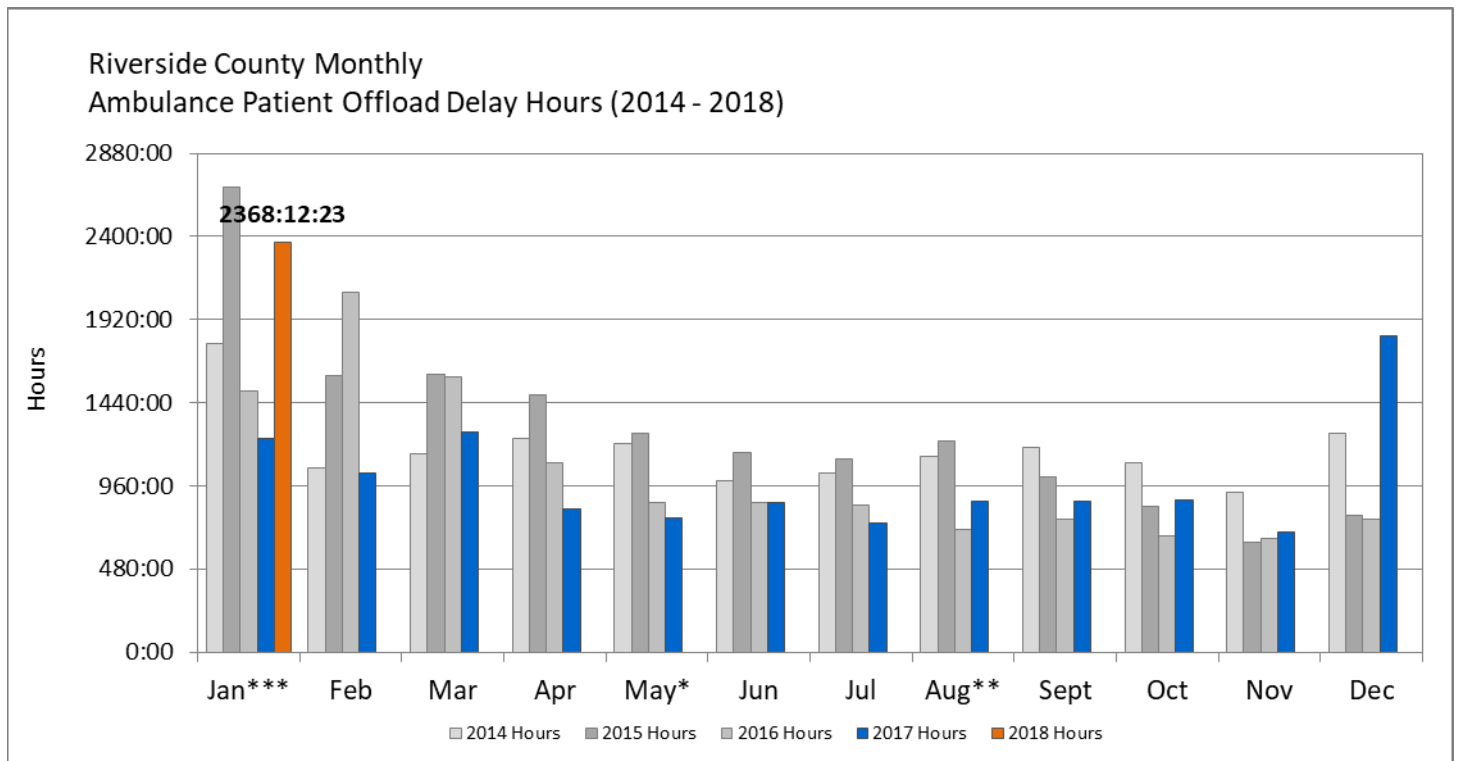
- During week 4, **APOT county-wide was over 1051 hours** total, an increase of **8.1%** over the 2017 weekly average of 973 hours. (The 2018 weekly APOT average is 1583 hours.)
- County-wide **APOD hours for week 4 totaled over 193**, which is **15.4% below** the 2017 weekly average of 228 hours. (The 2018 weekly APOD average is 592 hours.)

RIVERSIDE COUNTY AMBULANCE PATIENT OFFLOAD TIME

The data provided illustrates total ambulance patient offload delay time (hh:mm) by month for 2014 through **January 27, 2018 (week 4)** from hospitals within Riverside County. To qualify for this chart, the duration of offload delay must be greater than 30 minutes, and only the time period after the first 30 minutes is summed.

Beginning January 2017, offload times represented are measured using time of patient arrival at hospital (eTimes.11) until the time of patient transfer (eTimes.12) as represented on the ePCR (electronic patient care report). This represents a different methodology in offload time measurement. Prior to January 2017, offload times were calculated using CAD times, beginning with the time that dispatch placed the ambulance on bed delay status until the time the ambulance left the hospital.

This chart represents the difference in the old vs. current by displaying the former time measurement/methodology in grayscale. The difference in methodology is illustrated in the timeline below.

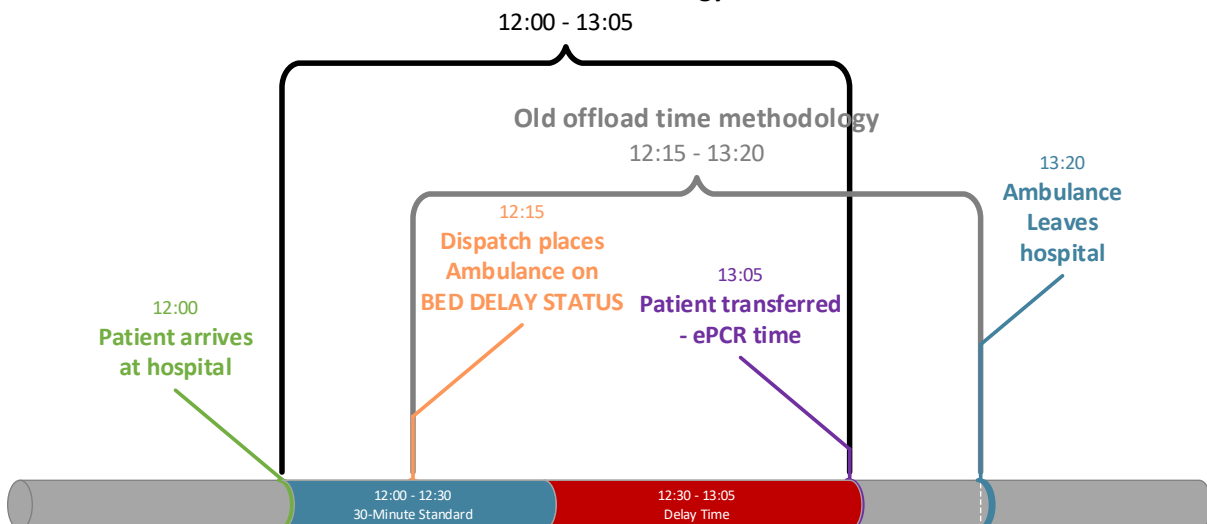


*For May of 2016, actual totals may have been slightly higher than are reported due to a 3-day CAD outage.

**Beginning August 2017, times represented include all participating providers. Prior to August, data included AMR responses only.

***January 2018 is a partial month.

Offload time methodology



AMBULANCE PATIENT OFFLOAD TIME BY HOSPITAL

The following table represents **CDC Week 4** (1/21/2018 through 1/27/18).

SPECIAL - Week 4 (1/21/2018 through 1/27/2018)						
Hospital	Total ALS Transports	APOT	APOD Hours	APODs	APOD Compliance	APOT -1
Corona Regional Med Ctr	142	88:59:43	35:14:30	61	57.0%	1:20:43
Desert Regional Med Ctr	251	57:58:21	2:34:28	14	94.4%	0:25:06
Eisenhower Med Ctr	286	50:57:32	0:38:06	4	98.6%	0:19:45
Hemet Valley Hospital	314	157:53:23	35:30:33	139	55.7%	0:52:53
Inland Valley Med Ctr	201	74:18:47	14:15:24	46	77.1%	0:45:16
JFK Hospital	140	22:55:12	0:56:01	5	96.4%	0:19:43
Kaiser Hospital Riverside	106	33:27:50	2:31:09	18	83.0%	0:37:21
Loma Linda Univ Med Ctr Mur	127	50:04:40	9:17:17	36	71.7%	0:48:30
Menifee Med Ctr	68	21:33:47	2:51:36	12	82.4%	0:39:07
Moreno Valley Hospital	74	23:48:12	2:42:44	14	81.1%	0:39:59
Parkview Community Hospital	126	58:12:11	15:52:03	39	69.0%	1:02:07
Rancho Springs Med Ctr	97	29:55:47	3:13:41	14	85.6%	0:38:16
Riverside Community Hospital	334	184:07:17	50:03:03	136	59.3%	1:00:09
Riverside University Health System	328	117:06:45	9:21:51	57	82.6%	0:35:12
San Geronio Mem Hospital	143	40:03:35	2:40:47	17	88.1%	0:31:59
Temecula Valley Hospital	124	40:01:57	5:32:53	20	83.9%	0:38:13
Grand Total	2,861	1051:24:59	193:16:06	632	77.9%	0:43:16

The following table represents **2018 YTD**: January 1 through January 27, 2018.

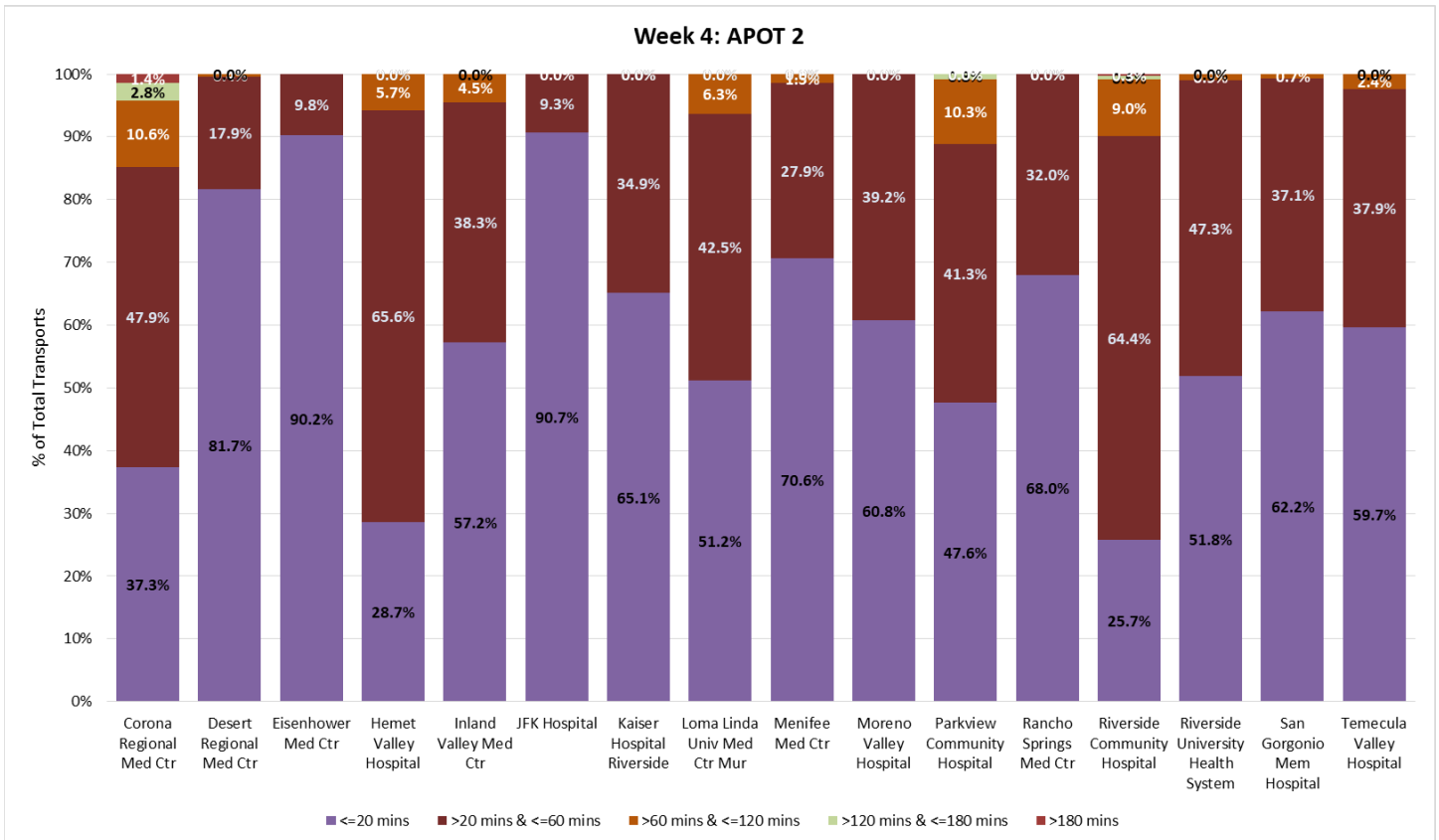
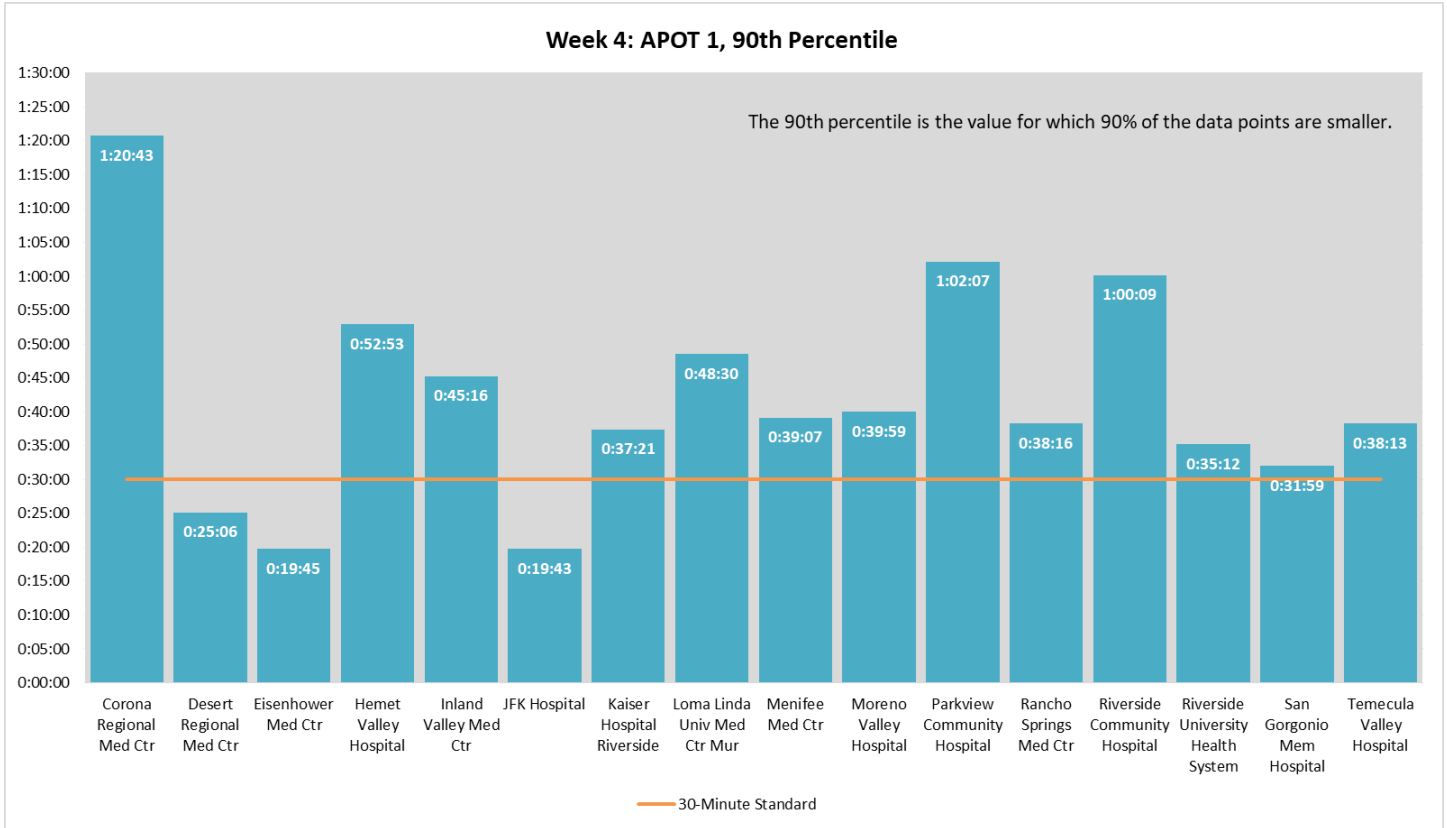
SPECIAL - January 1-27, 2018 APOT by Hospital/2018 YTD						
Hospital	Total ALS Transports	APOT	APOD Hours	APODs	APOD Compliance	APOT-1
Corona Regional Med Ctr	662	12:06:54	15:46:40	334	49.5%	2:04:05
Desert Regional Med Ctr	1,038	22:26:57	22:55:37	142	86.3%	0:36:37
Eisenhower Med Ctr	1,273	22:14:33	5:26:04	29	97.7%	0:19:31
Hemet Valley Hospital	1,301	17:40:28	23:38:32	720	44.7%	1:12:24
Inland Valley Med Ctr	895	13:29:15	16:56:52	268	70.1%	0:58:38
JFK Hospital	598	7:49:23	4:44:28	14	97.7%	0:20:06
Kaiser Hospital Riverside	524	23:29:55	13:09:39	173	67.0%	1:13:32
Loma Linda Univ Med Ctr Mur	591	14:17:40	7:44:33	287	51.4%	2:05:15
Menifee Med Ctr	341	14:19:51	21:29:07	121	64.5%	1:15:05
Moreno Valley Hospital	334	8:34:46	12:59:59	118	64.7%	1:19:16
Parkview Community Hospital	482	1:35:48	14:23:35	220	54.4%	1:56:24
Rancho Springs Med Ctr	454	7:25:31	13:55:46	111	75.6%	0:54:31
Riverside Community Hospital	1,430	16:03:54	3:05:00	804	43.8%	1:38:23
Riverside University Health System	1,236	16:13:33	16:24:02	353	71.4%	0:45:00
San Geronio Mem Hospital	584	14:42:30	11:57:17	112	80.8%	0:40:22
Temecula Valley Hospital	525	1:19:44	3:35:12	135	74.3%	0:52:54
Totals	12,268	6333:50:42	2368:12:23	3,941	67.9%	1:05:23

"APOD Hours" represents the net delay after the first 30 minutes of each offload delay occurrence.

Key: High Low/Best

AMBULANCE PATIENT OFFLOAD TIME BY HOSPITAL (CONT'D)

The following charts represent **only CDC Week 4: January 21, 2018 through January 27, 2018.**



UNDERSTANDING APOD AND APOT

Ambulance Patient Offload Time (APOT)

The Time interval between the arrival of an ambulance patient at an ED and the time the patient is transferred to the ED gurney, bed, chair, or other acceptable location and the emergency department assumes the responsibility for care of the patient.¹ The Clock Start (eTimes.11) is the time of patient arrival at the destination (hospital), and the Clock Stop (eTimes.12) is time the care of the patient is transferred.² REMSA obtains both times from the ePCR.

APOT -1 Specifications

Criteria: All 911 transports to a hospital emergency department for which the patient arrival and transfer dates and times are “logical and present.”³

Method: Aggregate of all transfer times and reported at the 90th percentile (the value for which 90% of the times are shorter).

APOT -2

An ambulance patient offload time interval process measure. This metric demonstrates the incidence of ambulance patient offload times expressed as a percentage of total EMS patient transports within a twenty (20) minute target and exceeding that time in reference to 60, 120 and 180 minute time intervals.⁴

Ambulance Patient Offload Delay (APOD)

Any delay in ambulance patient offload time (APOT) that exceeds the local ambulance patient offload time standard of 25/30 minutes (Riverside County EMS Agency applies a 30-minute standard). This shall also be synonymous with “non-standard patient offload time” as referenced in the Health and Safety Code.⁵ If the transfer of care and patient offloading from the ambulance gurney exceeds the 30 minute standard, it will be documented and tracked as APOD.⁶

¹ Health and Safety Code Division 2.5, Chapter 3, Article 1, Section 1797.120(b)

² Ambulance Patient Offload Time (APOT) Standardized Methods for Data Collection and Reporting, approved by EMS Commission 12/14/2016.

³ Ibid., APOT-1 Specifications.

⁴ Ibid., Definitions.

⁵ REMSA Policy 9101.6. <http://www.remsa.us/policy/9101.pdf>

⁶ REMSA Policy 4204, Transfer of Patient Care. <http://www.remsa.us/policy/4204.pdf>