



Ambulance Patient Offload Time June 2018

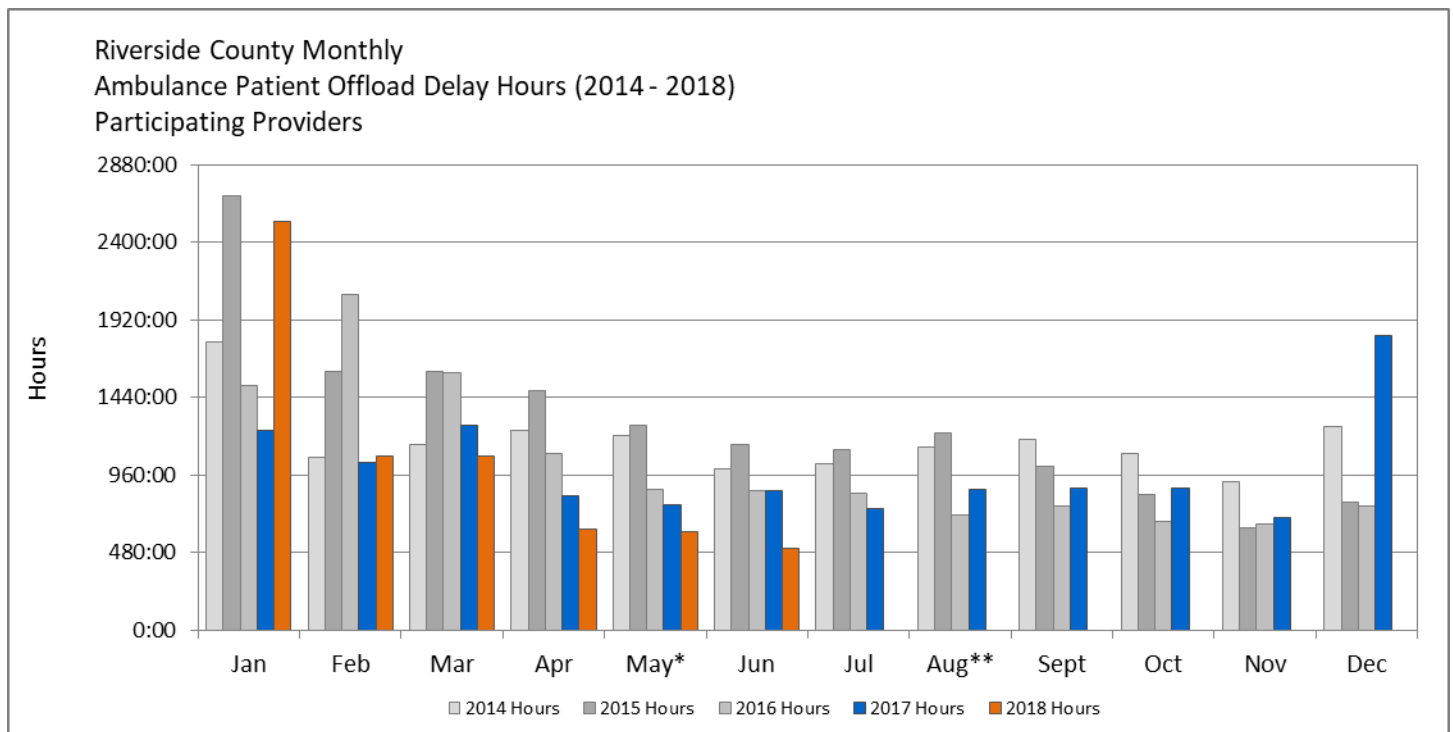
*Monthly
Report*

RIVERSIDE COUNTY AMBULANCE PATIENT OFFLOAD TIME

The data provided illustrates total ambulance patient offload delay time (hh:mm) by month for 2014 through June 2018 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. **As of August 2017, data represented includes all participating providers (previously AMR only).**

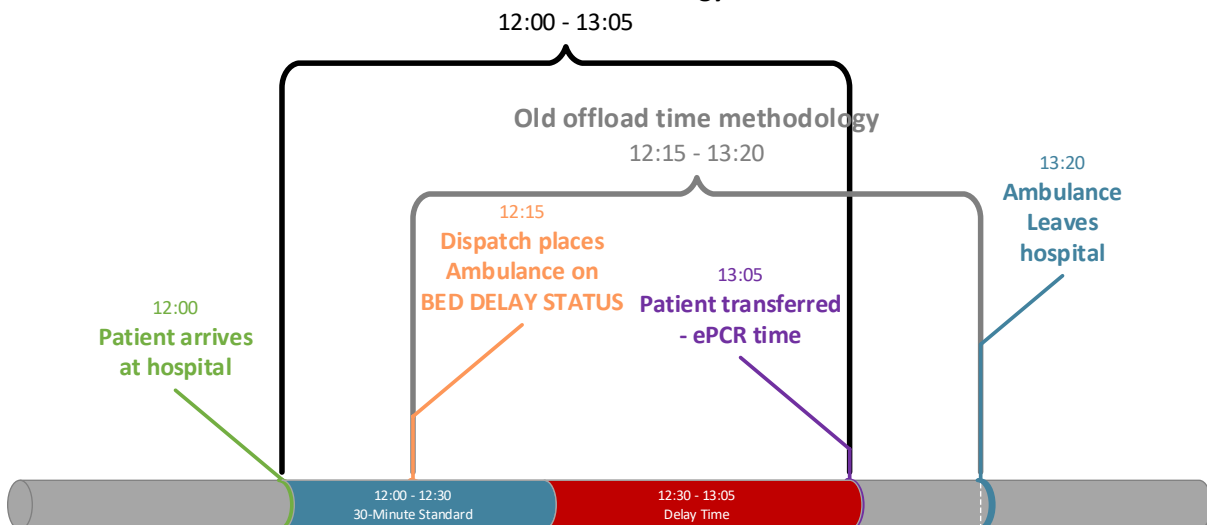
This chart represents the difference in the old vs. current by displaying the former time measurement/methodology in grayscale. The difference in methodology is illustrated in the timeline below.



*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.

Offload time methodology



AMBULANCE PATIENT OFFLOAD TIME BY HOSPITAL

June 2018 APOT by Hospital						
Hospital	Total ALS Transports	APOT	APOD Hours	APODs	APOD Compliance	APOT-1*
Corona Regional Med Ctr	701	259:44:46	41:15:11	143	79.6%	0:40:00
Desert Regional Med Ctr	1,033	224:57:58	5:47:33	36	96.5%	0:22:31
Eisenhower Health	1,150	203:02:21	1:36:19	17	98.5%	0:19:31
Hemet Valley Hospital	1,246	505:11:44	74:47:40	372	70.1%	0:43:39
Inland Valley Med Ctr	874	276:57:32	38:01:48	127	85.5%	0:36:06
JFK Hospital	541	73:50:11	1:11:36	7	98.7%	0:16:00
Kaiser Hospital Riverside	443	133:31:12	9:53:21	53	88.0%	0:32:25
Loma Linda Univ Med Ctr Mur	595	243:24:37	52:42:19	150	74.8%	0:47:00
Menifee Med Ctr	319	101:26:19	17:59:24	52	83.7%	0:39:54
Moreno Valley Hospital	304	100:06:32	14:01:58	46	84.9%	0:35:15
Parkview Community Hospital	441	143:36:50	16:36:20	63	85.7%	0:34:57
Rancho Springs Med Ctr	418	95:51:08	5:17:51	17	95.9%	0:24:00
Riverside Community Hospital	1,490	712:03:30	148:52:44	556	62.7%	0:49:58
Riverside University Health System	1,232	442:10:15	46:57:25	215	82.5%	0:37:31
San Geronio Mem Hospital	568	156:21:18	15:54:21	53	90.7%	0:30:00
Temecula Valley Hospital	501	147:01:20	10:42:40	53	89.4%	0:31:11
Totals	11,856	3819:17:33	501:38:30	1,960	83.5%	0:37:09

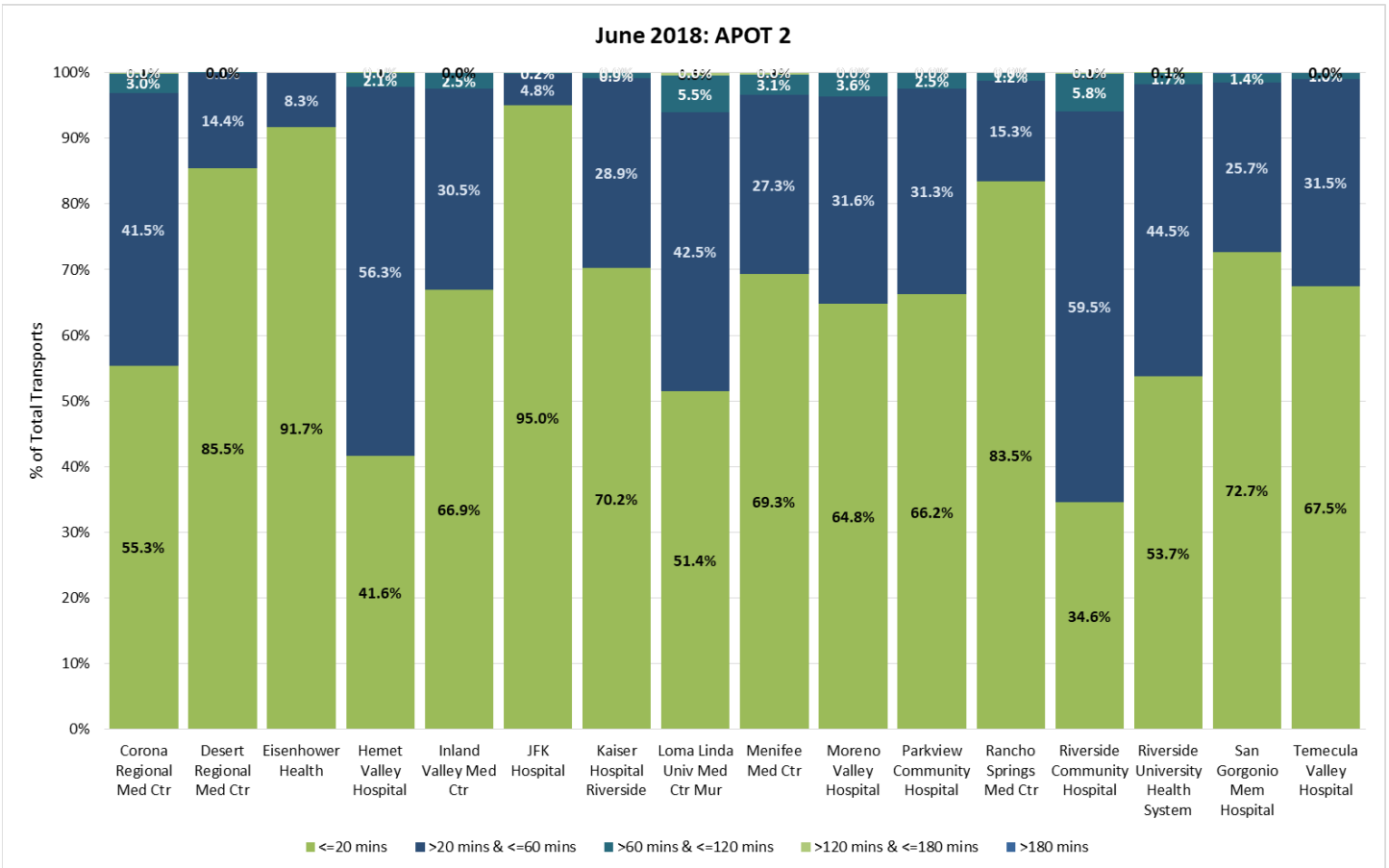
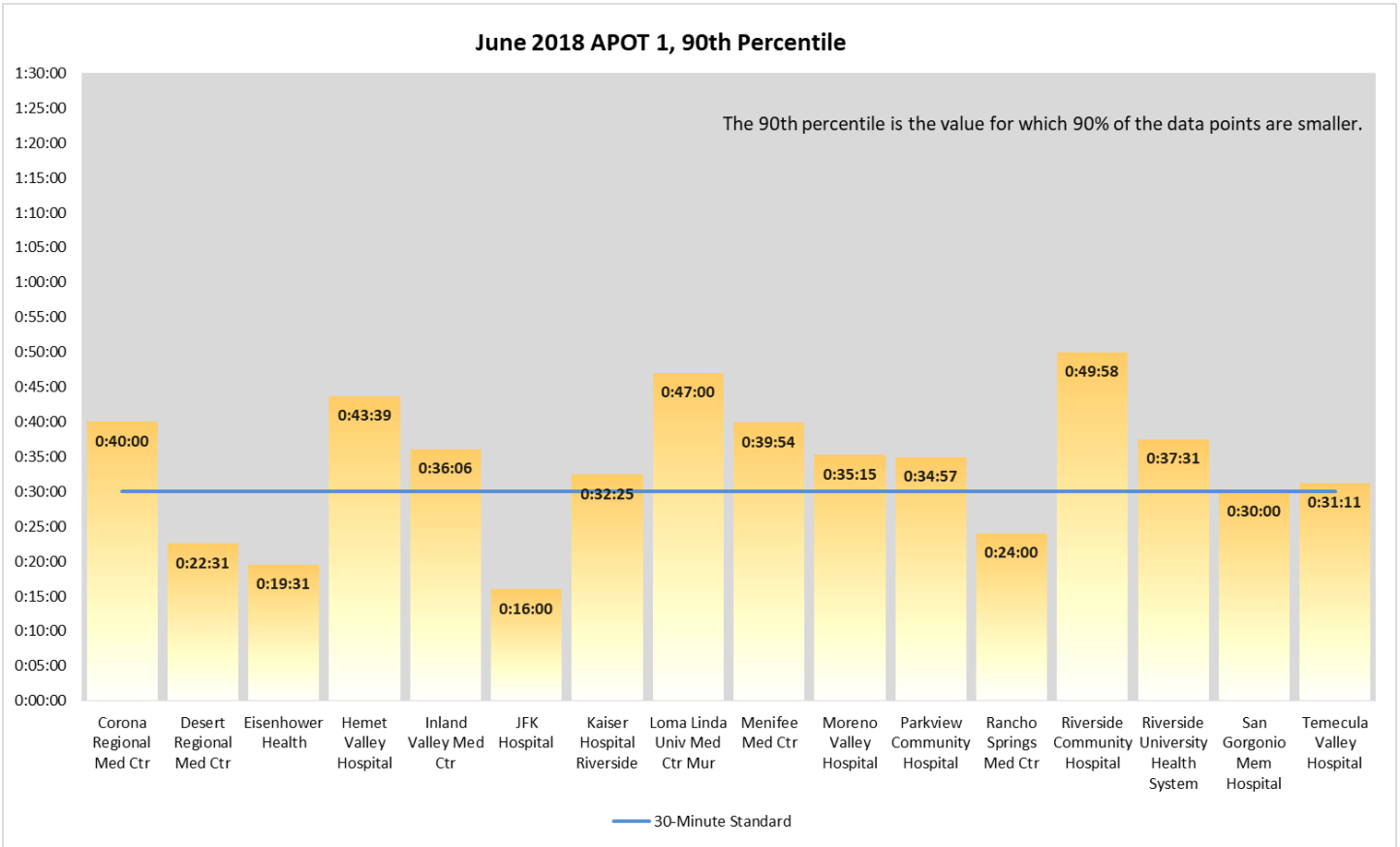
APOD hours do not include the first 30 minutes of each offload delay occurrence.

2018 Year-to-Date						
Hospital	Total ALS Transports	APOT	APOD Hours	APODs	APOD Compliance	APOT-1*
Corona Regional Med Ctr	4,333	2265:16:31	773:22:55	1,409	67.5%	1:04:20
Desert Regional Med Ctr	6,654	1744:02:56	187:25:26	584	91.2%	0:28:41
Eisenhower Health	7,740	1432:59:07	24:38:52	152	98.0%	0:19:41
Hemet Valley Hospital	7,866	3963:59:44	1047:32:34	3,228	59.0%	0:55:00
Inland Valley Med Ctr	5,218	1780:58:08	329:54:54	968	81.4%	0:41:28
JFK Hospital	3,455	515:36:24	10:36:49	57	98.4%	0:17:46
Kaiser Hospital Riverside	3,105	1127:27:51	199:09:54	586	81.1%	0:40:12
Loma Linda Univ Med Ctr Mur	3,621	1899:18:09	684:21:38	1,172	67.6%	1:06:00
Menifee Med Ctr	2,012	805:55:57	231:37:27	438	78.2%	0:48:13
Moreno Valley Hospital	1,996	793:52:29	197:49:33	452	77.4%	0:48:32
Parkview Community Hospital	2,884	1424:58:02	466:22:54	846	70.7%	0:59:03
Rancho Springs Med Ctr	2,693	810:58:19	131:37:54	309	88.5%	0:31:40
Riverside Community Hospital	9,278	5092:44:29	1489:24:39	4,016	56.7%	0:59:23
Riverside University Health System	7,391	2803:00:57	384:03:12	1,647	77.7%	0:40:47
San Geronio Mem Hospital	3,507	1004:33:06	108:15:32	438	87.5%	0:33:00
Temecula Valley Hospital	3,147	1065:08:12	145:03:00	544	82.7%	0:38:44
Totals	74,900	28530:50:21	6411:17:13	16,846	77.5%	0:45:00

**APOT-1 is the offload time represented at the 90th percentile. See page 5 of this report for complete definitions.*

Key: High Low/Best

AMBULANCE PATIENT OFFLOAD TIME BY HOSPITAL (CONT'D)



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

Data for this report has been collected from ePCRs (electronic patient care reports), which are available after they have been completed by the provider. There is, therefore, an inherent latency to the availability of these records. Due to this latency, subsequent reports may feature higher aggregate numbers than earlier reports for the same reporting period. The difference is insignificant (averaging less than .07%) and does not impact overall compliance.

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>