



Ambulance Patient Offload Time March 2018

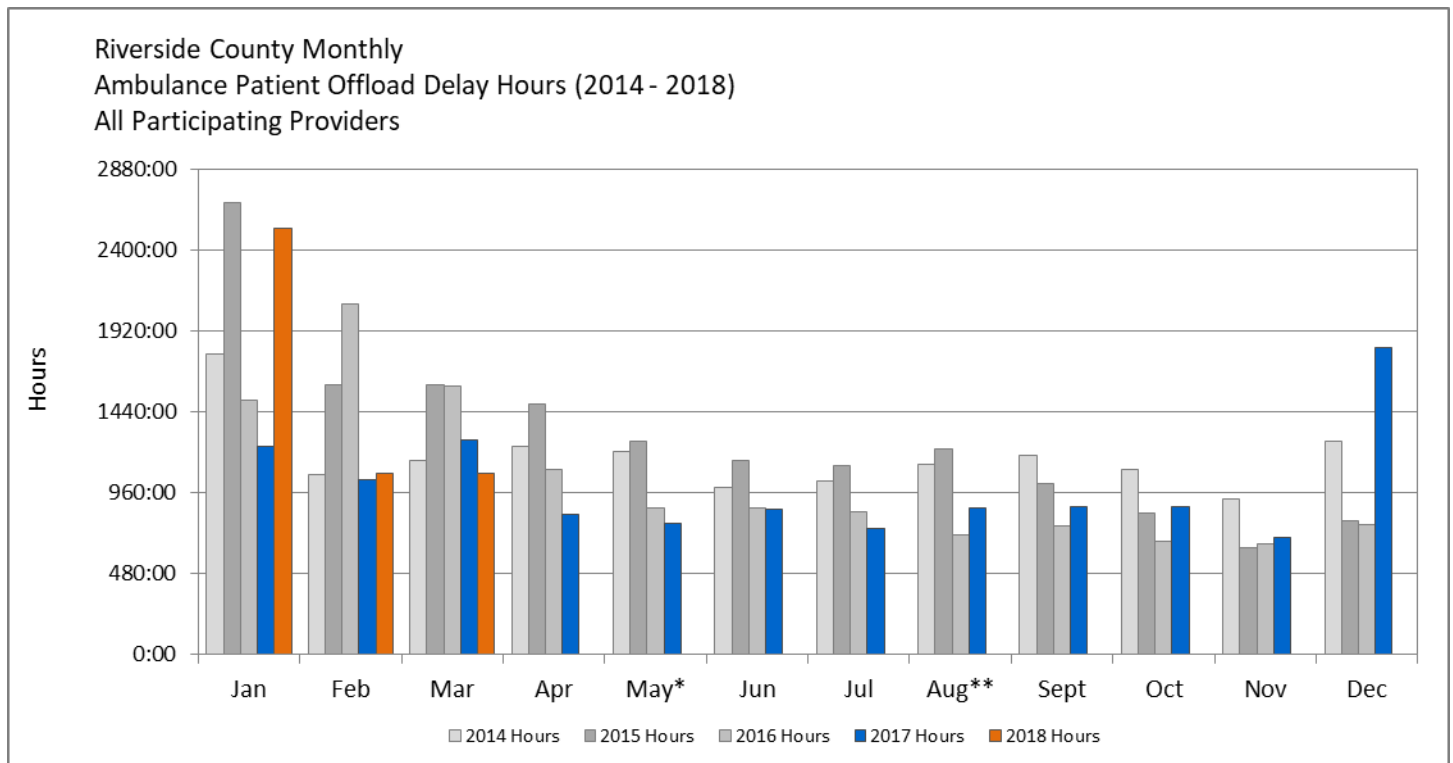
*Monthly
Report*

RIVERSIDE COUNTY AMBULANCE PATIENT OFFLOAD TIME

The data provided illustrates total ambulance patient offload delay time (hh:mm) by month for 2014 through March 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 providers (previously AMR only).**

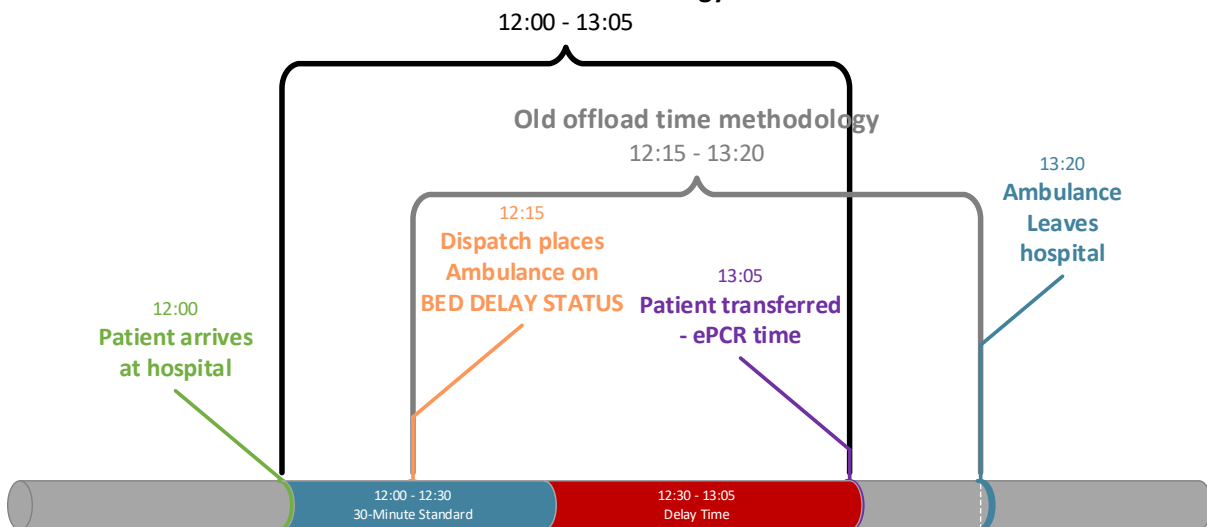
This chart represents the difference in the old vs. current by displaying the former time measurement/methodology in grayscale. The difference in methodology is illustrated in the timeline below.



*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

March 2018 APOT by Hospital						
Hospital	Total ALS Transports	APOT	APOD Hours	APODs	APOD Compliance	APOT-1*
Corona Regional Med Ctr	783	374:39:04	105:31:37	254	67.6%	1:00:00
Desert Regional Med Ctr	1,209	350:34:11	47:41:34	163	86.5%	0:35:08
Eisenhower Med Ctr	1,428	276:34:11	8:13:21	40	97.2%	0:20:28
Hemet Valley Hospital	1,319	703:51:36	201:43:12	574	56.5%	0:59:03
Inland Valley Med Ctr	866	293:49:27	52:35:48	159	81.6%	0:42:35
JFK Hospital	571	86:09:25	1:52:04	8	98.6%	0:18:16
Kaiser Hospital Riverside	543	180:56:50	21:30:54	94	82.7%	0:38:17
Loma Linda Univ Med Ctr Mur	632	350:14:56	136:28:51	218	65.5%	1:08:20
Menifee Med Ctr	345	117:02:55	24:11:33	62	82.0%	0:41:52
Moreno Valley Hospital	336	134:24:31	30:18:05	91	72.9%	0:50:20
Parkview Community Hospital	513	292:27:25	114:02:22	192	62.6%	1:10:44
Rancho Springs Med Ctr	483	133:20:34	12:25:52	57	88.2%	0:31:04
Riverside Community Hospital	1,588	807:17:35	194:15:05	650	59.1%	0:53:05
Riverside University Health System	1,293	500:59:50	81:23:41	306	76.3%	0:42:48
San Geronio Mem Hospital	575	146:57:01	9:09:58	55	90.4%	0:29:26
Temecula Valley Hospital	565	199:43:10	32:35:30	123	78.2%	0:41:45
Totals	13,049	4949:02:41	1073:59:27	3,046	76.7%	0:45:28

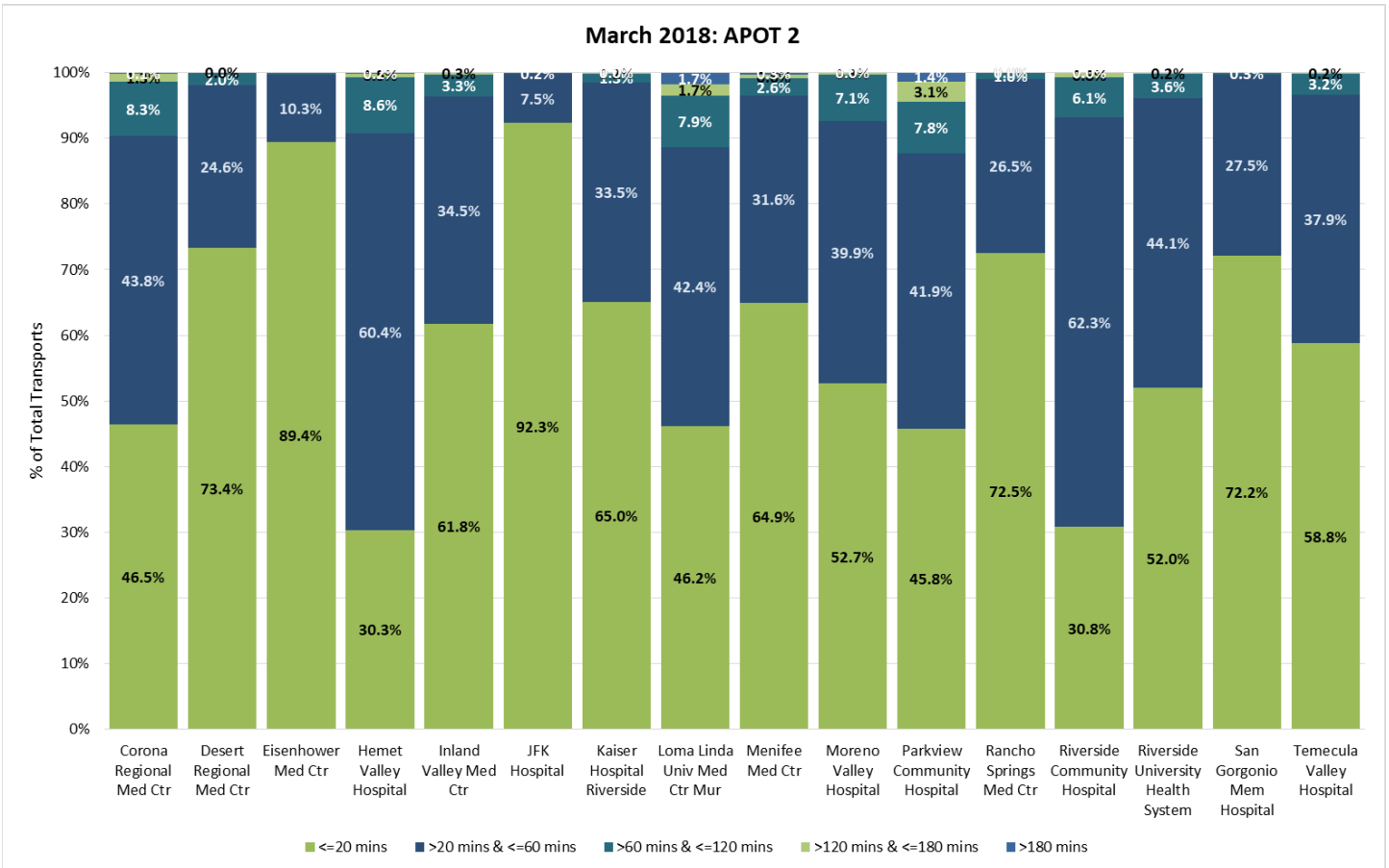
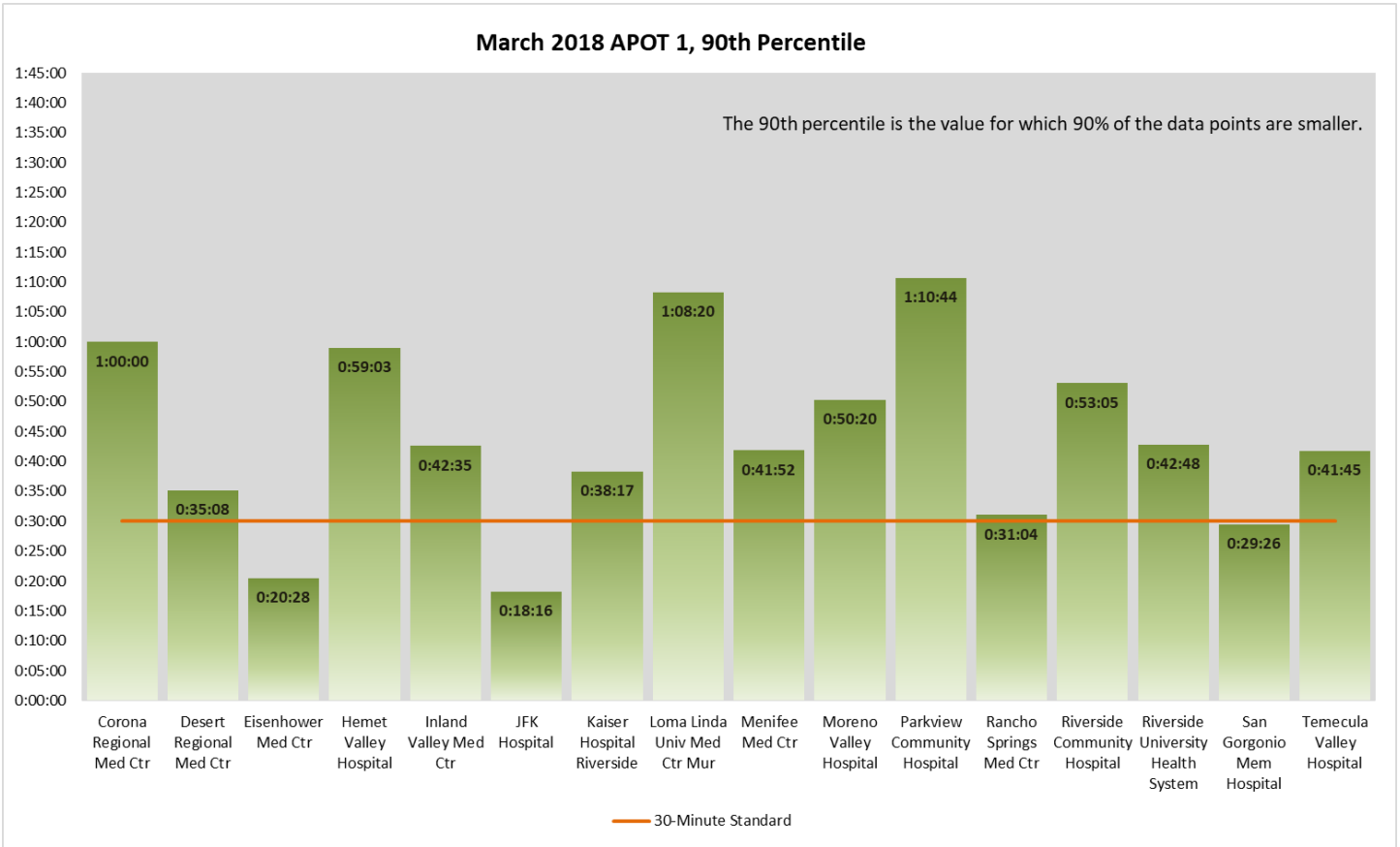
APOD hours do not include the first 30 minutes of each offload delay occurrence.

2018 Year-to-Date						
Hospital	Total ALS Transports	APOT	APOD Hours	APODs	APOD Compliance	APOT-1*
Corona Regional Med Ctr	2,201	1410:15:22	605:00:18	897	59.2%	1:23:22
Desert Regional Med Ctr	3,473	982:03:27	140:42:20	378	89.1%	0:31:19
Eisenhower Med Ctr	4,230	802:27:50	16:09:04	96	97.7%	0:19:56
Hemet Valley Hospital	4,083	2310:19:04	744:22:27	1,935	52.6%	1:03:00
Inland Valley Med Ctr	2,712	1029:12:09	233:27:22	628	76.8%	0:49:06
JFK Hospital	1,779	274:31:49	7:33:55	34	98.1%	0:18:25
Kaiser Hospital Riverside	1,679	676:08:07	157:52:33	382	77.2%	0:45:37
Loma Linda Univ Med Ctr Mur	1,878	1172:10:39	519:53:45	709	62.2%	1:24:11
Menifee Med Ctr	1,055	499:51:20	179:37:39	285	73.0%	0:59:25
Moreno Valley Hospital	1,060	502:22:25	160:53:11	316	70.2%	1:00:05
Parkview Community Hospital	1,526	925:49:01	388:54:17	573	62.5%	1:15:51
Rancho Springs Med Ctr	1,437	503:00:50	112:43:23	226	84.3%	0:37:44
Riverside Community Hospital	4,729	2845:45:46	978:49:31	2,217	53.1%	1:07:00
Riverside University Health System	3,790	1531:05:53	250:18:33	983	74.1%	0:43:41
San Geronio Mem Hospital	1,824	560:50:59	72:15:32	272	85.1%	0:35:37
Temecula Valley Hospital	1,678	620:46:25	109:35:57	370	77.9%	0:44:36
Totals	39,134	16646:41:06	4678:09:47	10,301	73.7%	0:51:36

**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>