

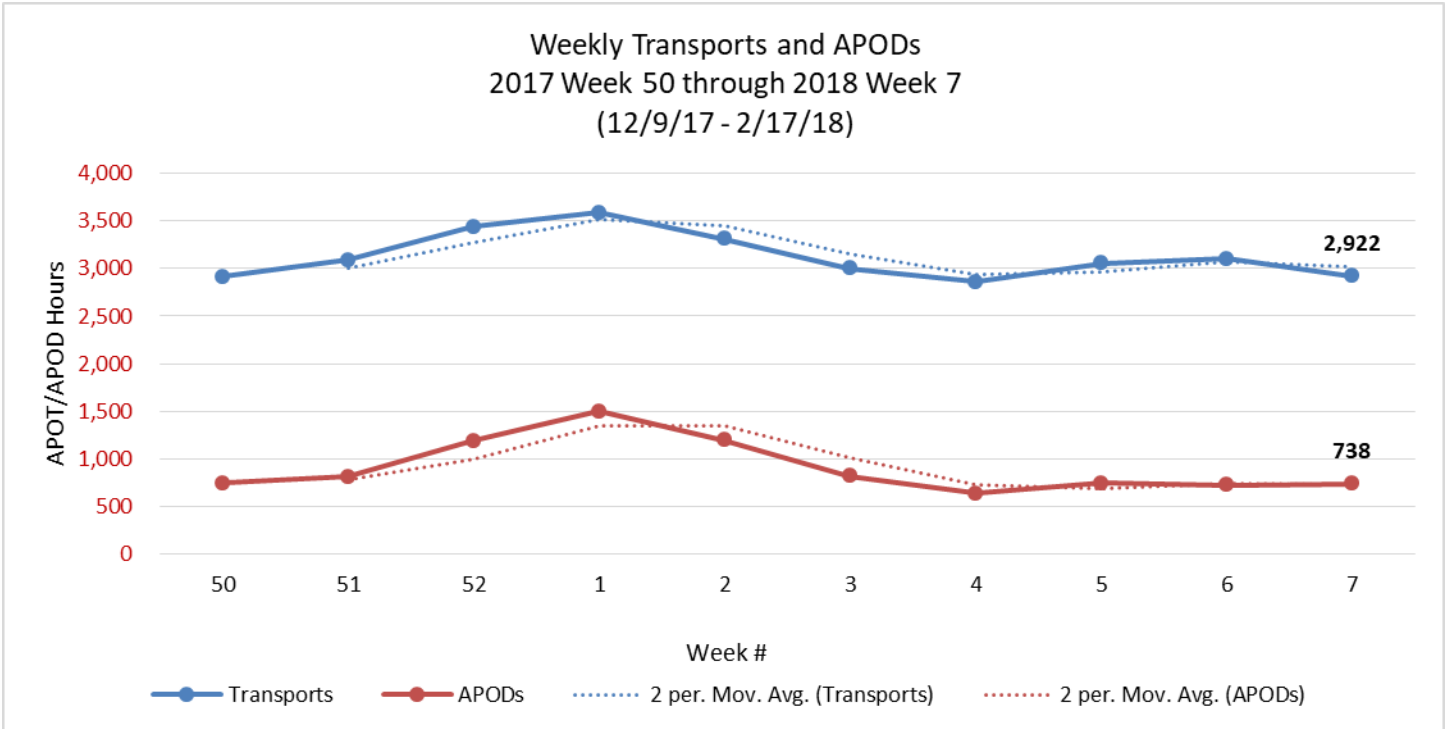
Special Seasonal Report



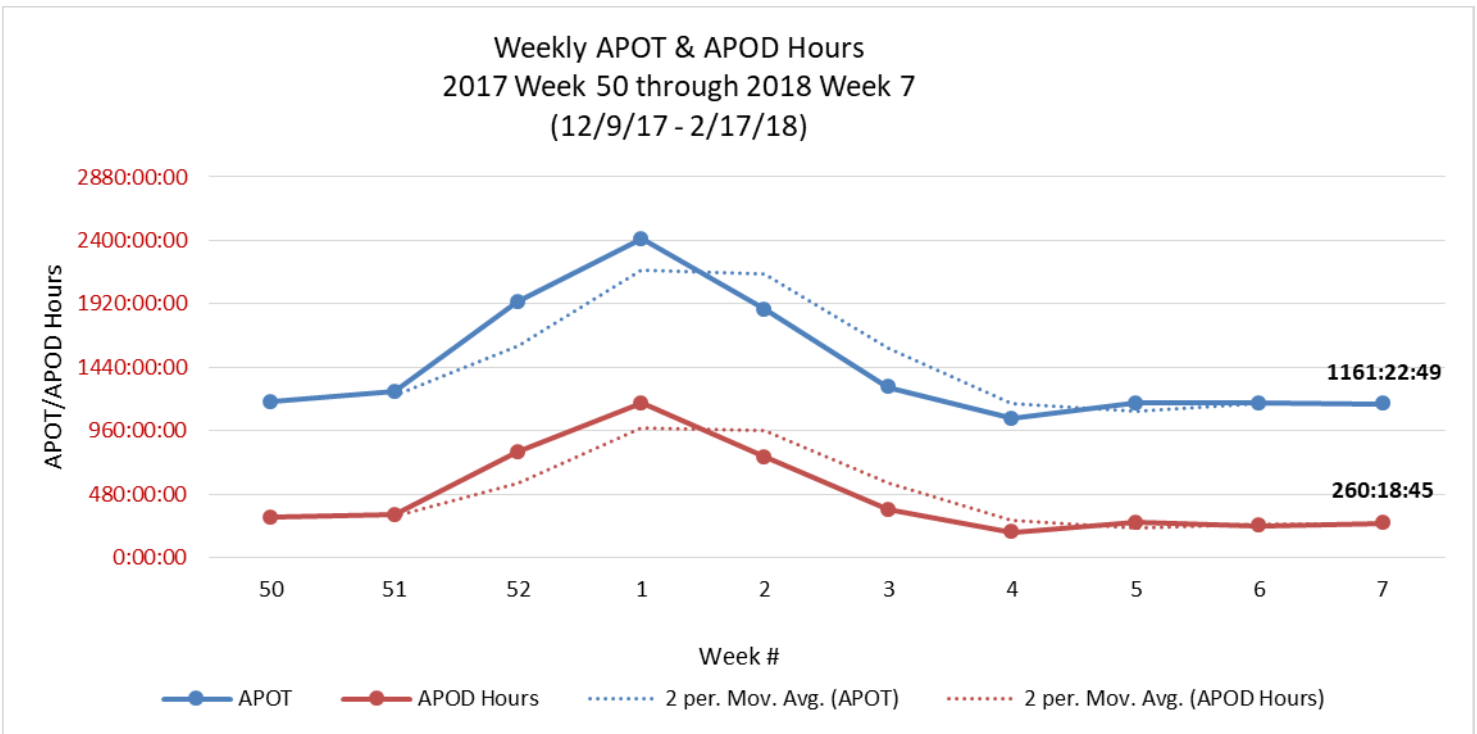
Ambulance Patient Offload Time
Week 7 (through 2/17/18)

*Special
Seasonal
Report*

SPECIAL SEASONAL REPORT



- During week 7 (beginning 2/11/2018), there was a total of **2922 transports in Riverside County**—an **11.8%** increase of the 2017 weekly average of 2,614 transports. The 2018 weekly average is 3051 transports.
- The number of **APODs in week 7 was 738**, representing an increase of **34%** of the 2017 weekly average of 551. The 2018 weekly average is 878 APODs.



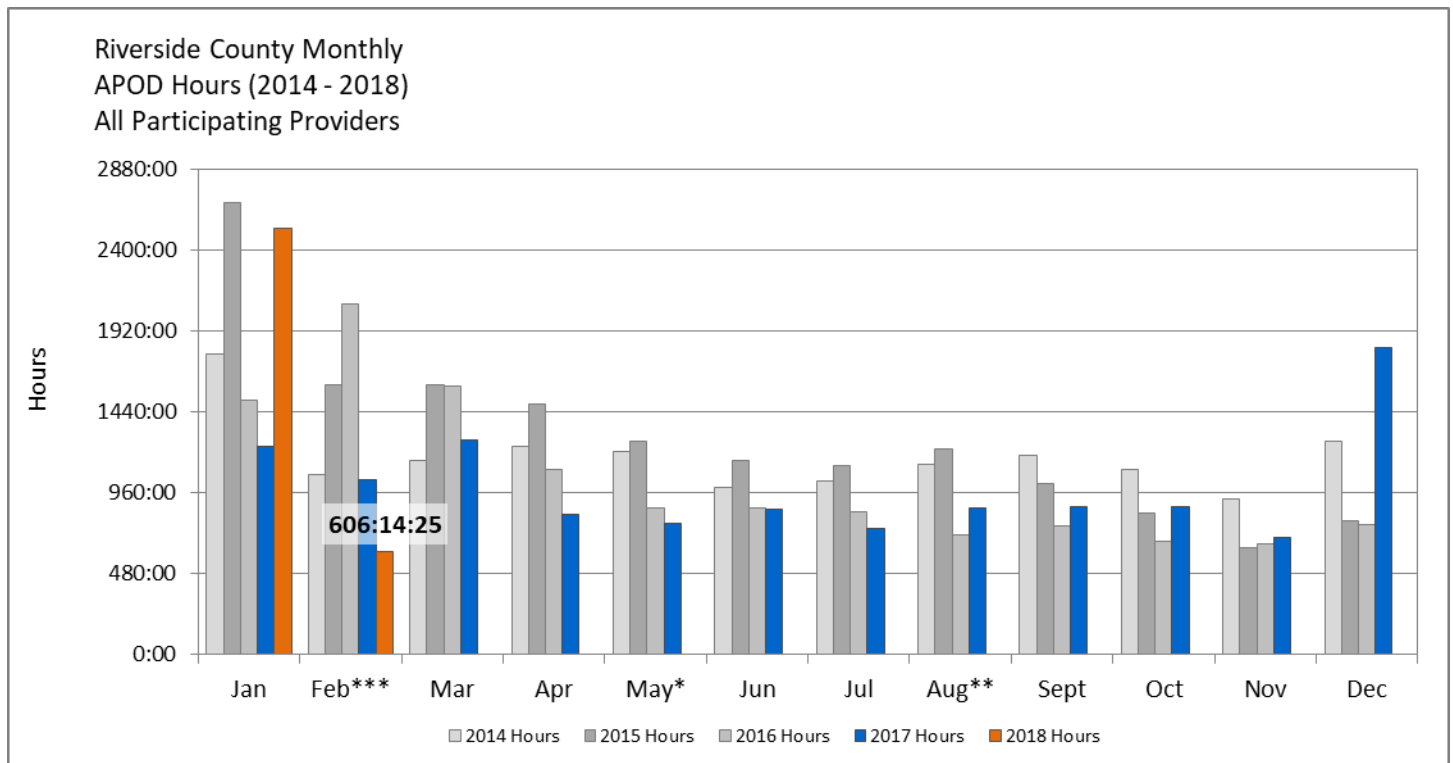
- During week 7, **APOT county-wide was over 1161 hours** total, an increase of **19.4%** over the 2017 weekly average of 973 hours. The 2018 weekly APOT average is 1404 hours.
- County-wide **APOD hours for week 7 totaled over 260**, which is an increase of **14% over** the 2017 weekly average of 228 hours. The 2018 weekly APOD average is 447 hours.

RIVERSIDE COUNTY AMBULANCE PATIENT OFFLOAD TIME

The data provided illustrates total ambulance patient offload delay time (hh:mm) by month for 2014 through **February 17, 2018 (week 7)** 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.

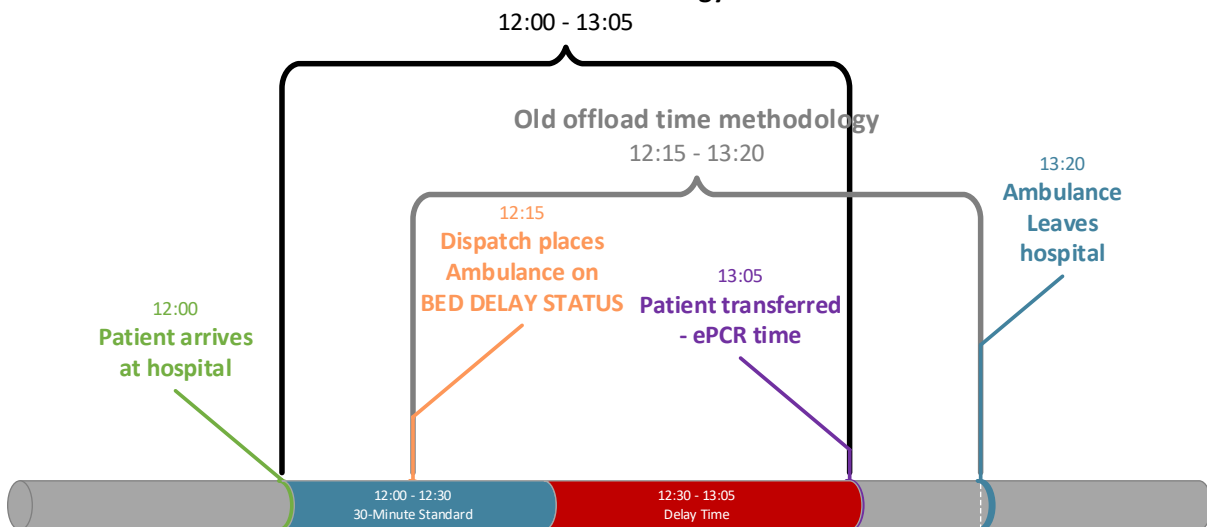


*For May of 2016, actual totals may have been slightly higher than are reported due to a 3-day CAD outage.

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

***February 2018 is a partial month.

Offload time methodology



AMBULANCE PATIENT OFFLOAD TIME BY HOSPITAL

The following table represents **CDC Week 7** (2/11/2018 through 2/17/18).

SPECIAL - Week 7 (2/11/2018 through 2/17/2018)						
Hospital	Total ALS Transports	APOT hh:mm:ss	APOD hh:mm:ss	APODs	APOD Compliance	APOT -1
Corona Regional Med Ctr	184	99:23:55	32:59:35	72	60.9%	1:11:52
Desert Regional Med Ctr	259	62:57:31	2:07:16	12	95.4%	0:26:19
Eisenhower Med Ctr	305	57:14:22	0:18:42	6	98.0%	0:20:21
Hemet Valley Hospital	311	151:02:39	36:30:46	133	57.2%	0:56:00
Inland Valley Med Ctr	190	70:10:06	15:16:11	39	79.5%	0:51:18
JFK Hospital	102	15:02:33	0:02:00	1	99.0%	0:18:00
Kaiser Hospital Riverside	115	40:57:00	5:55:54	22	80.9%	0:42:19
Loma Linda Univ Med Ctr Mur	157	86:12:22	31:53:48	60	61.8%	1:11:08
Menifee Med Ctr	87	43:48:12	15:49:37	27	69.0%	1:07:20
Moreno Valley Hospital	82	45:57:59	17:57:34	28	65.9%	1:10:53
Parkview Community Hospital	116	59:15:49	19:58:27	37	68.1%	1:03:05
Rancho Springs Med Ctr	119	43:16:17	7:58:34	22	81.5%	0:39:20
Riverside Community Hospital	372	181:19:58	37:35:43	153	58.9%	0:50:49
Riverside University Health System	283	119:24:24	23:18:34	77	72.8%	0:45:15
San Geronio Mem Hospital	129	40:59:43	4:55:31	21	83.7%	0:39:58
Temecula Valley Hospital	111	44:19:59	7:40:33	28	74.8%	0:45:59
Grand Total	2,922	1161:22:49	260:18:45	738	74.7%	0:48:48

The following table represents **2018 YTD**: January 1 through February 17, 2018.

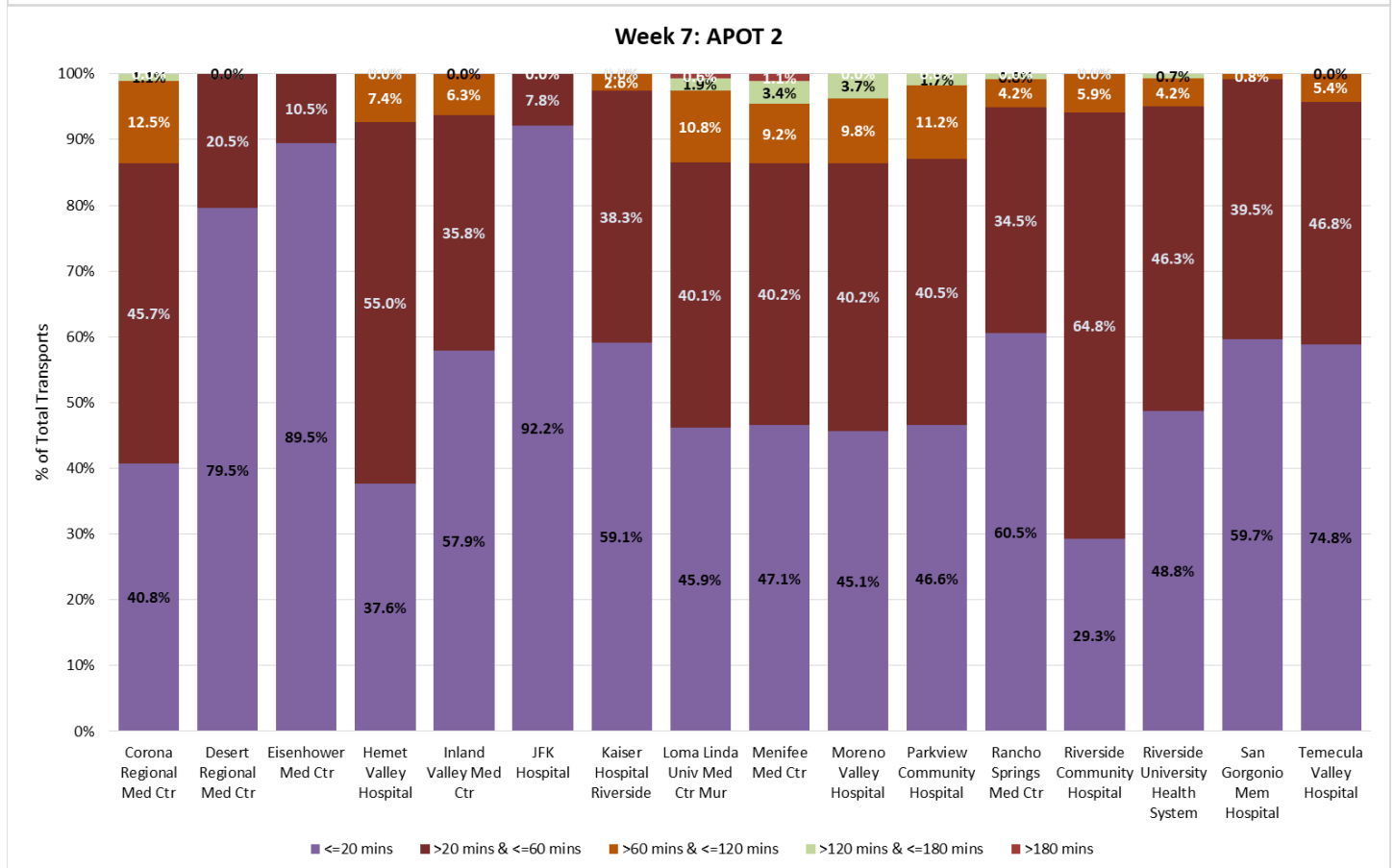
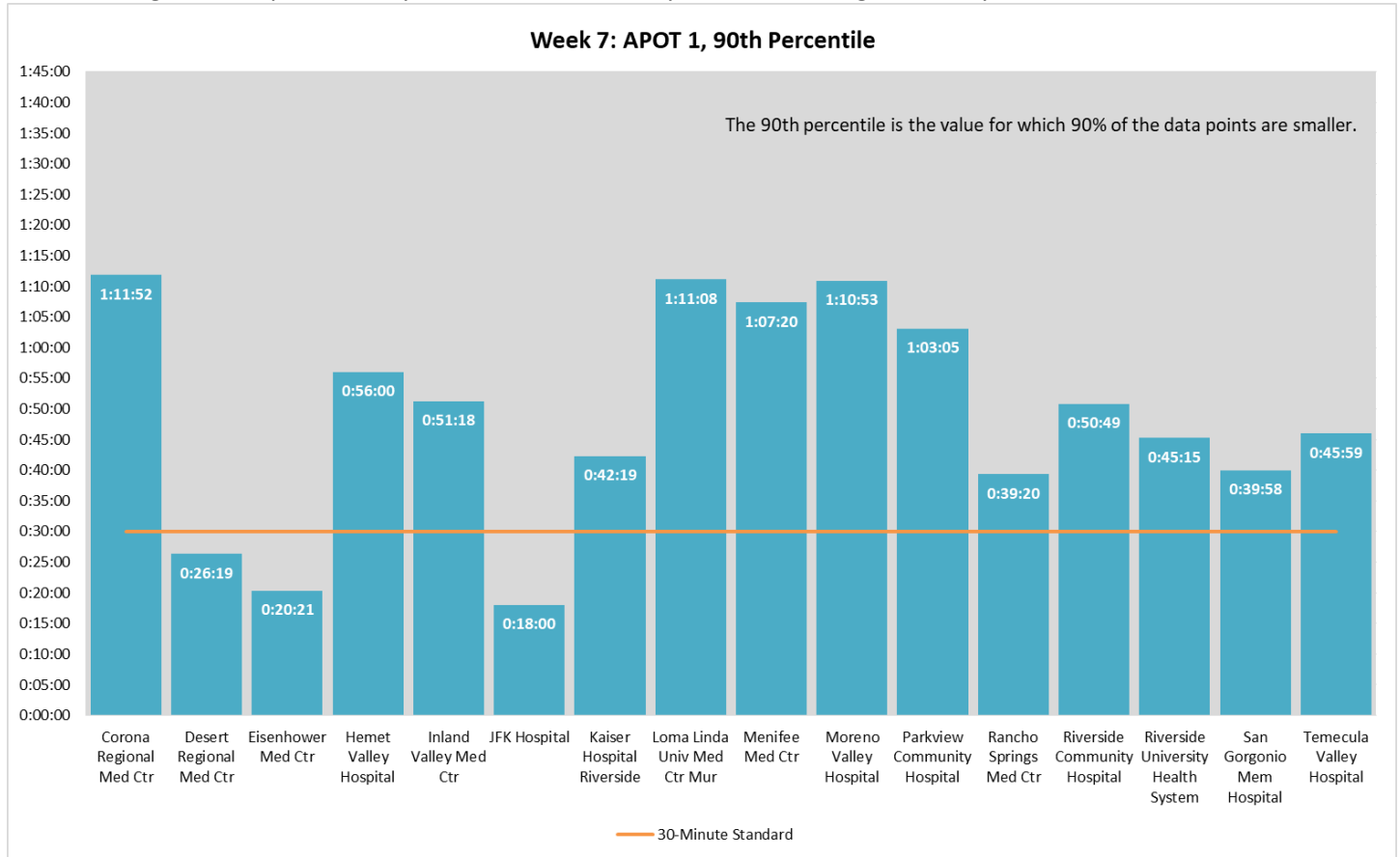
2018 Year-to-Date: January 1 through February 17						
Hospital	Total ALS Transports	APOT	APOD Hours	APODs	APOD Compliance	APOT-1
Corona Regional Med Ctr	1,167	856:10:53	410:58:42	535	54.2%	1:36:54
Desert Regional Med Ctr	1,861	522:58:01	77:05:27	175	90.6%	0:29:59
Eisenhower Med Ctr	2,260	423:49:19	6:56:56	46	98.0%	0:19:34
Hemet Valley Hospital	2,266	1363:13:22	479:48:45	1,160	48.8%	1:06:55
Inland Valley Med Ctr	1,545	635:42:36	164:33:01	420	72.8%	0:54:10
JFK Hospital	991	158:47:55	5:19:23	21	97.9%	0:18:59
Kaiser Hospital Riverside	912	419:02:04	124:30:55	248	72.8%	0:54:59
Loma Linda Univ Med Ctr Mur	1,025	722:09:53	354:28:36	435	57.6%	1:36:02
Menifee Med Ctr	588	336:10:38	144:29:03	196	66.7%	1:14:26
Moreno Valley Hospital	580	311:41:45	117:34:49	191	67.1%	1:07:40
Parkview Community Hospital	828	538:50:15	246:18:40	315	62.0%	1:25:09
Rancho Springs Med Ctr	780	321:50:50	97:22:44	151	80.6%	0:44:55
Riverside Community Hospital	2,548	1651:06:14	632:16:48	1,275	50.0%	1:15:45
Riverside University Health System	2,086	874:56:06	149:04:16	583	72.1%	0:45:00
San Geronio Mem Hospital	1,005	340:18:54	53:37:03	177	82.4%	0:39:38
Temecula Valley Hospital	908	354:32:17	70:34:48	221	75.7%	0:47:00
Totals	21,350	9831:21:02	3134:59:56	6,149	71.2%	0:56:46

"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 7: February 11, 2018 through February 17, 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

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>