



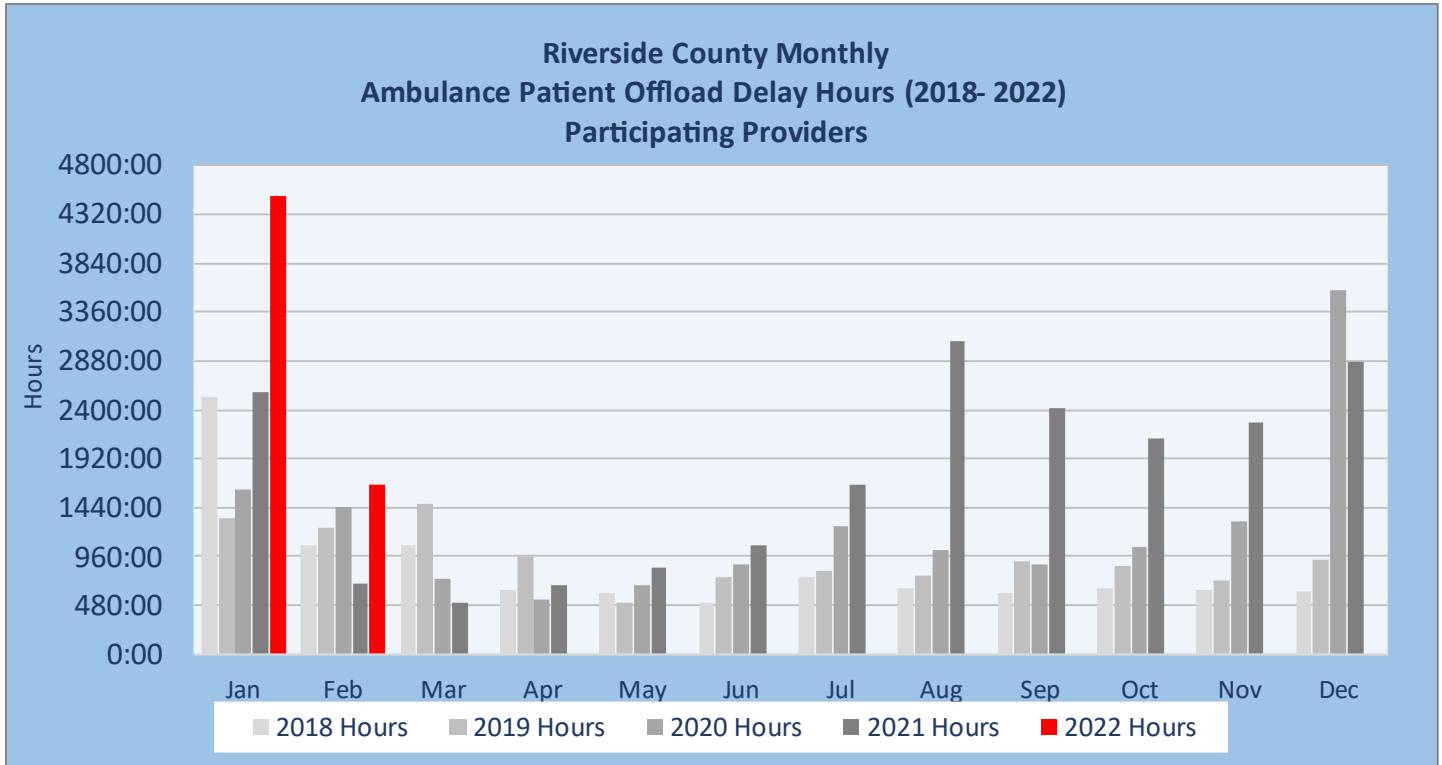
Ambulance Patient Offload Time

February 2022

*Monthly
Report*

RIVERSIDE COUNTY AMBULANCE PATIENT OFFLOAD TIME

These charts represent total ambulance patient offload times (APOT) and delays (APOD) from hospitals within Riverside County. APOD includes delays greater than 30 minutes, and only the time after the first 30 minutes has passed.

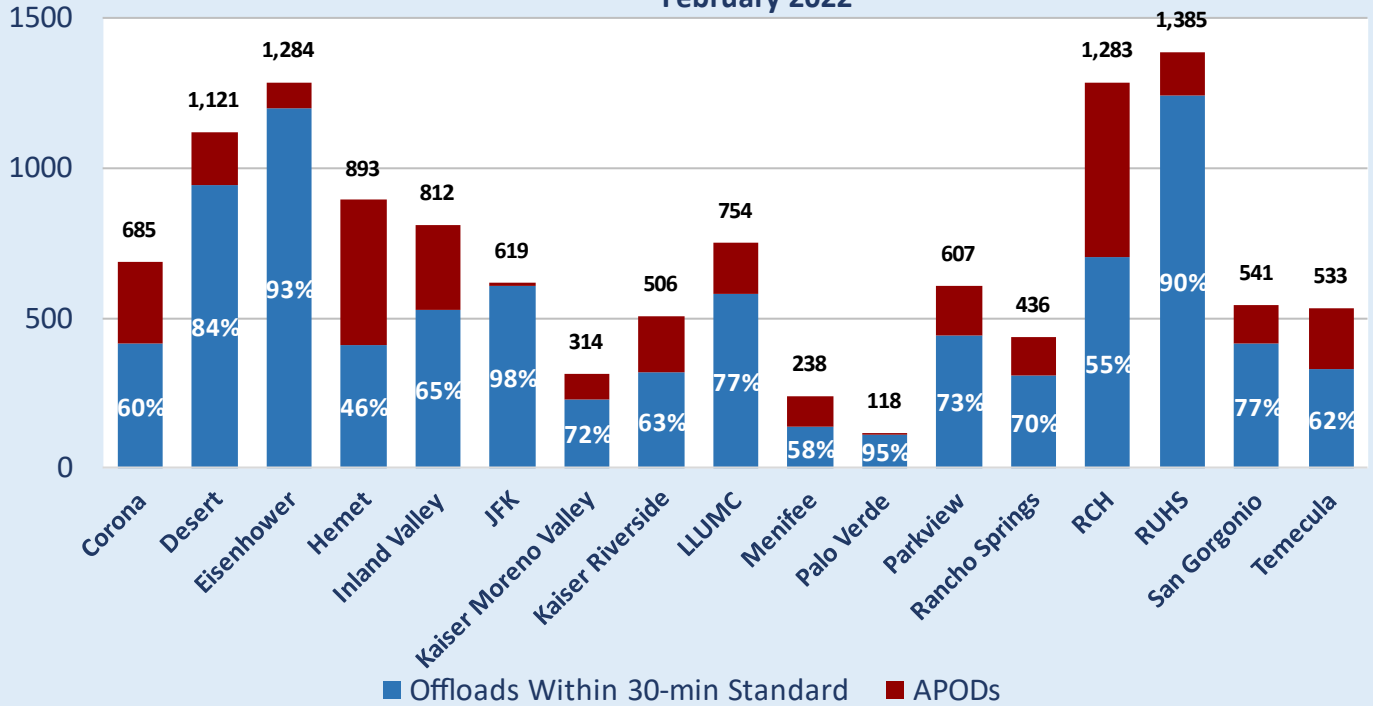


**Beginning August 2017, times represented include all participating providers. Prior to August, data included AMR responses only.

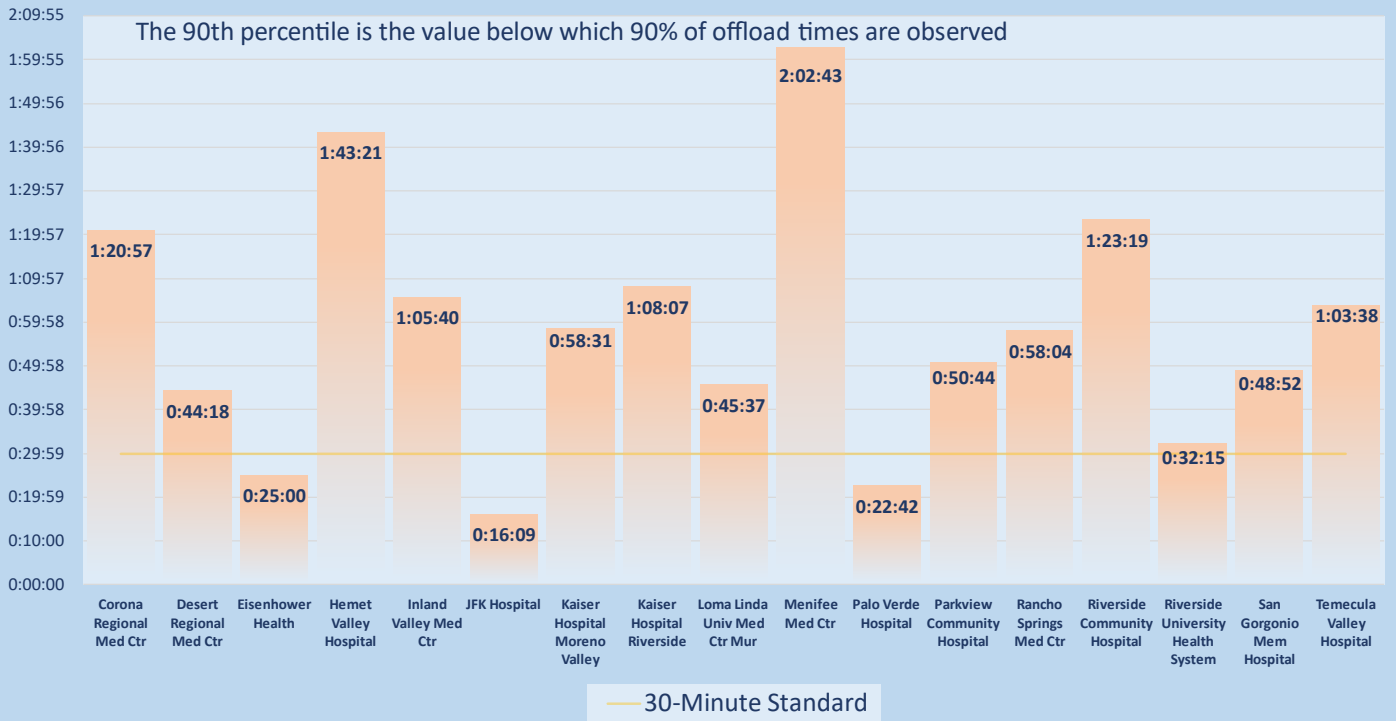
February 2022						
	ALS Transports	APOT	APOD Hours	APODs	POD Compliance	APOT - 1
Corona Regional Med Ctr	685	429:22:03	170:17:02	272	60.3%	1:20:57
Desert Regional Med Ctr	1,121	375:38:26	90:50:42	179	84.0%	0:44:18
Eisenhower Health	1,284	320:26:33	43:26:19	86	93.3%	0:25:00
Hemet Valley Hospital	893	711:10:23	330:04:07	481	46.1%	1:43:21
Inland Valley Med Ctr	812	398:49:58	136:35:14	284	65.0%	1:05:40
JFK Hospital	619	86:59:38	3:10:49	12	98.1%	0:16:09
Kaiser Hospital Moreno Valley	314	146:34:24	39:35:45	88	72.0%	0:58:31
Kaiser Hospital Riverside	506	289:00:35	101:20:37	185	63.4%	1:08:07
Loma Linda Univ Med Ctr Mur	754	309:35:17	55:45:39	171	77.3%	0:45:37
Menifee Med Ctr	238	183:50:10	87:44:01	99	58.4%	2:02:43
Palo Verde Hospital	118	21:42:11	2:33:00	6	94.9%	0:22:42
Parkview Community Hospital	607	275:24:10	59:56:28	166	72.7%	0:50:44
Rancho Springs Med Ctr	436	205:07:37	57:22:29	129	70.4%	0:58:04
Riverside Community Hospital	1,283	830:23:26	321:03:52	582	54.6%	1:23:19
Riverside University Health System	1,385	447:47:22	18:22:10	144	89.6%	0:32:15
San Geronio Mem Hospital	541	229:50:54	48:25:31	124	77.1%	0:48:52
Temecula Valley Hospital	533	279:57:20	91:15:54	205	61.5%	1:03:38
Grand Total	12,129	5541:40:27	1657:49:39	3213	73.5%	0:56:17

Key High Low

Riverside County Hospitals Transports, APODs and % Compliance February 2022



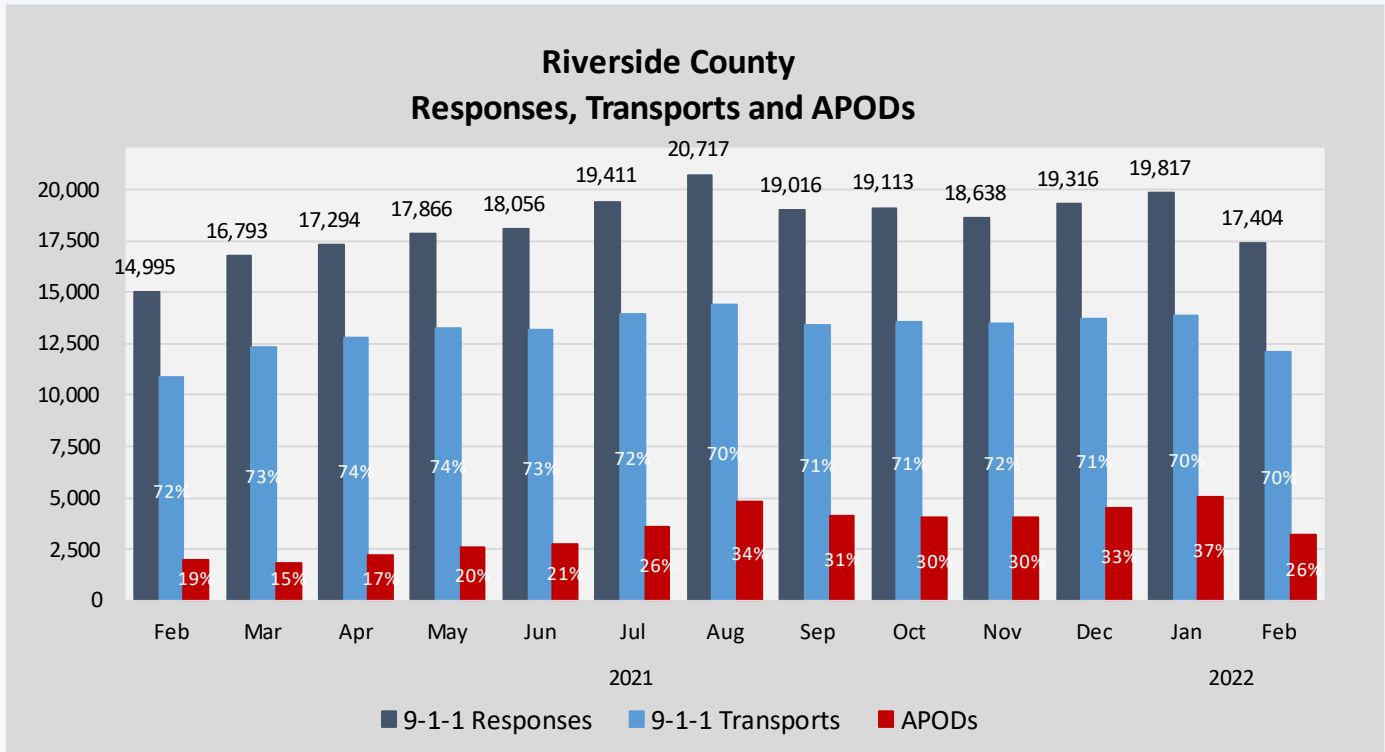
Riverside County Hospitals APOT-1, 90th Percentile February 2022



Data for this report has been collected from ePCRs (electronic patient care records) via FirstWatch® and 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.

APOT AND APOD TRENDS: *ROLLING ANNUAL REVIEW*

The first chart represents a summary of Riverside County's total 9-1-1 ambulance (ALS) responses, transports, and total transports resulting in patient offload delay (APOD) for a rolling 12-months compared to the current month.



TRANSPORT VOLUME. Transport volume for each hospital over a 12 month period compared to the current month is described below. Each hospital can be categorized as a low to high volume facility relative to all facilities in the county. Hospitals are color coded ranging from low to high based on an average transports of the last 12 months.

Hospital	Transport Volume												2022 Feb	2022 Monthly Avg
	<div style="display: flex; justify-content: space-between; width: 100%;"> Low High </div>													
	2021 Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan		
Corona Regional Med Ctr	606	680	624	757	747	832	800	735	792	812	771	680	685	732
Desert Regional Med Ctr	969	1242	1406	1417	1395	1424	1346	1262	1247	1281	1263	1311	1121	1,283
Eisenhower Health	1051	1272	1273	1220	1112	1187	1286	1213	1299	1348	1402	1484	1284	1,264
Hemet Valley Hospital	1006	1229	1286	1339	1302	1256	1214	1135	1199	1037	1045	744	893	1,130
Inland Valley Med Ctr	733	829	847	943	910	946	953	886	958	882	926	850	812	883
JFK Hospital	520	574	577	639	627	639	670	634	634	658	694	707	619	630
Kaiser Hospital Moreno Valley	266	308	310	263	309	342	363	332	344	339	334	369	314	323
Kaiser Hospital Riverside	459	507	505	523	540	517	579	519	527	550	578	603	506	532
Loma Linda Univ Med Ctr Mur	546	630	589	652	639	730	666	694	658	714	769	871	754	686
Menifee Med Ctr	204	237	249	241	269	341	359	311	286	319	341	318	238	286
Palo Verde Hospital	128	110	147	148	143	169	162	157	168	176	176	176	118	152
Parkview Community Hospital	384	442	486	537	526	630	668	674	653	677	730	872	607	607
Rancho Springs Med Ctr	449	454	462	503	500	536	611	567	563	530	548	552	436	516
Riverside Comm Hospital	1242	1406	1544	1456	1511	1546	1560	1461	1506	1454	1406	1236	1283	1,432
Riverside Univ Health System	1240	1388	1415	1514	1476	1607	1804	1619	1516	1529	1552	1825	1385	1,528
San Geronio Mem Hospital	541	507	575	566	602	640	697	628	632	622	603	630	541	599
Temecula Valley Hospital	504	505	537	525	539	631	664	595	596	559	591	611	533	568
Riverside County Total	10848	12320	12832	13243	13147	13973	14402	13422	13578	13487	13729	13839	12129	13150

COMPLIANCE. Compliance is a frequency comparison between the total number of transports and those resulting in APOD. The table below shows compliance by hospital for the last 12 months compared to the current month.

	Compliance														
	High													Low	
	APOT % Compliance by Hospital for the last 12 months														
	2021												2022		Monthly Average
	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb		
Corona Regional Med Ctr	72%	75%	75%	73%	74%	76%	54%	67%	70%	67%	62%	42%	60%	67%	
Desert Regional Med Ctr	91%	88%	89%	85%	90%	92%	82%	84%	85%	88%	79%	78%	84%	86%	
Eisenhower Health	99%	99%	98%	97%	98%	98%	96%	95%	94%	94%	93%	91%	93%	96%	
Hemet Valley Hospital	53%	69%	70%	64%	62%	51%	49%	47%	48%	41%	39%	40%	46%	52%	
Inland Valley Med Ctr	80%	88%	85%	85%	82%	66%	52%	60%	61%	64%	63%	51%	65%	69%	
JFK Hospital	99%	99%	99%	98%	97%	98%	99%	97%	98%	98%	99%	98%	98%	98%	
Kaiser Hospital Moreno Valley	83%	85%	72%	72%	73%	56%	57%	66%	58%	56%	60%	57%	72%	67%	
Kaiser Hospital Riverside	80%	76%	71%	74%	63%	50%	53%	61%	58%	51%	56%	51%	63%	62%	
Loma Linda Univ Med Ctr Mur	76%	76%	74%	66%	69%	58%	52%	62%	62%	70%	66%	64%	77%	67%	
Menifee Med Ctr	67%	80%	75%	83%	72%	59%	51%	42%	54%	51%	46%	39%	58%	60%	
Palo Verde Hospital	99%	99%	100%	99%	100%	98%	99%	96%	95%	94%	97%	100%	95%	98%	
Parkview Community Hospital	80%	85%	77%	86%	78%	82%	68%	67%	72%	64%	62%	53%	73%	73%	
Rancho Springs Med Ctr	91%	93%	92%	94%	90%	84%	64%	69%	62%	70%	68%	51%	70%	77%	
Riverside Community Hospital	66%	80%	68%	56%	58%	54%	45%	46%	45%	46%	41%	41%	55%	54%	
Riverside University Health System	91%	92%	91%	89%	90%	82%	79%	80%	84%	85%	81%	76%	90%	85%	
San Geronio Mem Hospital	86%	86%	87%	85%	79%	80%	60%	74%	69%	66%	67%	55%	77%	75%	
Temecula Valley Hospital	87%	83%	84%	86%	86%	78%	63%	64%	76%	63%	59%	52%	62%	73%	
Riverside County Compliance	81%	85%	83%	80%	79%	74%	66%	69%	70%	70%	67%	63%	74%	74%	

APOT-1. APOT-1 is an Ambulance Patient Offload Time interval measure of the 90th percentile. This metric is a continuous variable measured in hours and minutes then aggregated and reported at the 90th percentile. The table below illustrates APOT-1 by hospital for the last 12 months compared to the current month

Hospital	APOT-1 (90th Percentile) for the last 12 Months														
	2021												2022		Avg APOT-1
	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb		
Corona Regional Med Ctr	0:48	0:45	0:44	0:44	0:49	0:44	1:29	1:02	0:53	1:03	1:16	2:51	1:21	1:06	
Desert Regional Med Ctr	0:30	0:34	0:32	0:40	0:31	0:29	0:48	0:42	0:40	0:33	0:53	1:00	0:44	0:39	
Eisenhower Health	0:14	0:16	0:18	0:19	0:18	0:18	0:21	0:21	0:24	0:24	0:26	0:29	0:25	0:21	
Hemet Valley Hospital	1:12	0:45	0:45	0:45	1:00	1:23	1:34	1:34	1:22	1:44	2:00	2:42	1:43	1:25	
Inland Valley Med Ctr	0:43	0:33	0:35	0:37	0:43	1:04	1:31	1:21	1:20	1:11	1:12	1:41	1:06	1:02	
JFK Hospital	0:16	0:18	0:16	0:17	0:18	0:17	0:17	0:17	0:18	0:16	0:16	0:16	0:16	0:16	
Kaiser Hospital Moreno Valley	0:37	0:41	1:00	1:02	1:07	1:34	1:42	1:16	1:12	1:22	1:10	1:25	0:59	1:09	
Kaiser Hospital Riverside	0:42	0:46	1:04	0:50	1:15	1:42	1:41	1:16	1:16	1:35	1:44	2:38	1:08	1:21	
Loma Linda Univ Med Ctr Mur	0:50	0:48	0:49	0:57	0:54	1:17	2:04	1:20	1:26	0:56	0:59	1:13	0:46	1:06	
Menifee Med Ctr	1:02	0:40	0:44	0:36	0:45	1:25	1:48	2:04	1:15	1:43	2:00	3:02	2:03	1:28	
Palo Verde Hospital	0:14	0:11	0:14	0:13	0:14	0:14	0:14	0:15	0:23	0:21	0:17	0:15	0:23	0:16	
Parkview Community Hospital	0:41	0:35	0:41	0:34	0:41	0:36	1:02	1:00	0:49	1:02	1:15	1:52	0:51	0:53	
Rancho Springs Med Ctr	0:29	0:26	0:27	0:26	0:29	0:37	1:18	1:06	1:30	1:16	1:09	2:35	0:58	0:58	
Riverside Comm Hospital	0:48	0:37	0:49	1:01	1:03	1:04	1:28	1:34	1:30	1:22	1:50	2:26	1:23	1:18	
Riverside Univ Health System	0:29	0:29	0:29	0:31	0:30	0:35	0:39	0:38	0:34	0:35	0:38	0:42	0:32	0:33	
San Geronio Mem Hospital	0:36	0:34	0:33	0:34	0:41	0:40	1:28	0:56	1:00	1:07	1:10	2:07	0:49	0:56	
Temecula Valley Hospital	0:34	0:37	0:37	0:33	0:34	0:42	1:01	0:57	0:44	1:05	1:10	1:41	1:04	0:52	
Riverside County Compliance	0:40	0:35	0:38	0:41	0:44	0:50	1:11	1:03	1:01	1:03	1:11	1:37	0:56	0:56	

AMBULANCE DIVERSIONS

REMSA Policy 6103 (<https://www.remsa.us/policy/6103.pdf>) describes ground and air ambulance diversions to facilitate safe transport of patients to the closest alternate facility. Ambulance Diversions described here are those activated as a result of unusual circumstances at a facility limiting access to emergency care (*Internal Disaster - INT*) or a temporary outage in Specialty Care services (*STEMI, Stroke, Trauma*). The following tables provide diversion history by count of occurrences and total hours/minutes by facility for a rolling 12 months compared to the current month. *Hospitals not listed had no diversions during this evaluation period.*

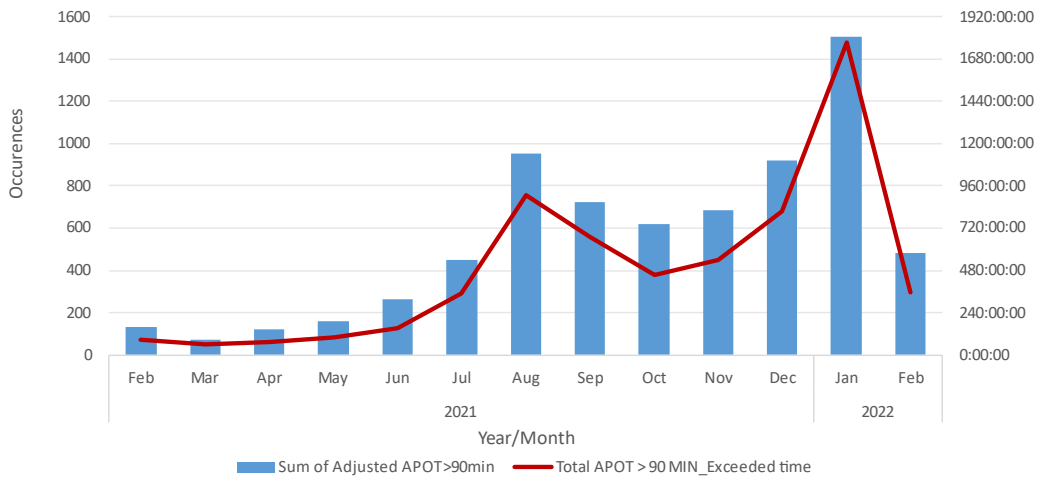
Diversions by Count	2021												2022		Total
	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb		
INT		1	1	1	2		1	1	2	2		1	1	13	
Corona Regional Medical Center									2					2	
Desert Regional Medical Center								1		1				2	
Menifee Valley Medical Center							1					1		2	
Riverside Community Hospital				1										1	
Inland Valley Medical Center		1								1				2	
Kaiser Permanente Moreno Valley Medical Center													1	1	
Eisenhower Health			1											1	
Palo Verde Hospital					2									2	
STEMI						1		2		1		1		5	
Desert Regional Medical Center								2		1				3	
Loma Linda University Medical Center--Murrieta						1						1		2	
Stroke						1	1							2	
Rancho Springs Medical Center						1								1	
Riverside University Health System							1							1	
Trauma	5	2	1	2	5	3	1	1	4	3	1	3	5	36	
Riverside Community Hospital				1	1	1			2					5	
Inland Valley Medical Center		1			2	1		1			1	2		8	
Riverside University Health System	5	1	1	1	2	1	1		2	3		1	5	23	
Total	5	3	2	3	7	5	3	4	6	6	1	5	6	56	

Diversions by HH:MM	2021												2022		Total
	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb		
INT	0:09	0:14	3:32	18:05			1:56	3:16	20:19	1:03		0:41	1:13		
Corona Regional Medical Center									20:19						
Desert Regional Medical Center								3:16		0:27					
Menifee Valley Medical Center							1:56					0:41			
Riverside Community Hospital				3:32											
Inland Valley Medical Center	0:09									0:36					
Kaiser Permanente Moreno Valley Medical Center													1:13		
Eisenhower Health		0:14													
Palo Verde Hospital					18:05										
STEMI						4:11		13:42		0:19		2:21			
Desert Regional Medical Center								13:42		0:19					
Loma Linda University Medical Center--Murrieta						4:11						2:21			
Stroke						0:17	0:01								
Rancho Springs Medical Center						0:17									
Riverside University Health System							0:01								
Trauma	8:15	2:42	0:51	1:48	7:58	9:52	0:11	0:53	2:23	4:36	0:19	4:15	5:54		
Riverside Community Hospital				0:51	3:42	5:01			1:03						
Inland Valley Medical Center		0:13			1:51	0:50		0:53			0:19	3:01			
Riverside University Health System	8:15	2:29	0:51	0:57	2:25	4:01	0:11		1:20	4:36		1:14	5:54		
Total	8:15	2:51	1:05	5:20	26:03	14:20	2:08	17:51	22:42	5:58	0:19	7:17	7:07		

AMBULANCE REDIRECTION

REMSA [Policy 6104](#) allows redirection of ambulances away from hospitals experiencing significant Ambulance Patient Offload Delays (APOD) to the next most appropriate facility. *Significant* APOD is defined as a patient remaining on an ambulance gurney for **90 minutes or greater after arrival at the hospital** (APOT > 90 min). Standard transfer of care is 30 minutes or less (APOT < 30 min). Until the transfer of care is complete (patient is removed from the gurney and hospital staff assume care of the patient), ambulance crews must remain at the hospital and continue care. While patients held on excessive APODs are generally those classified as lower acuity, approximately one-third of the County's ~600 daily 9-1-1 medical responses are determined by dispatch as critical, requiring immediate medical attention (e.g. cardiac arrest, stroke, traumatic injury). As a result, excessive, or multiple APODs within the same service area impact ambulance timeliness and availability in the field posing a direct risk to 9-1-1 patient safety. Ambulance redirection is one strategy to reduce the consequential backlog of EMS services which occurs when there are excessive ambulance delays at hospital emergency departments. Below is the countywide breakdown of APOD occurrences where ambulances were documented as held for greater than 90 minutes before the transfer of care for the last 12 months compared to the current month.

Patient Offload Delays Greater than 90 Minutes

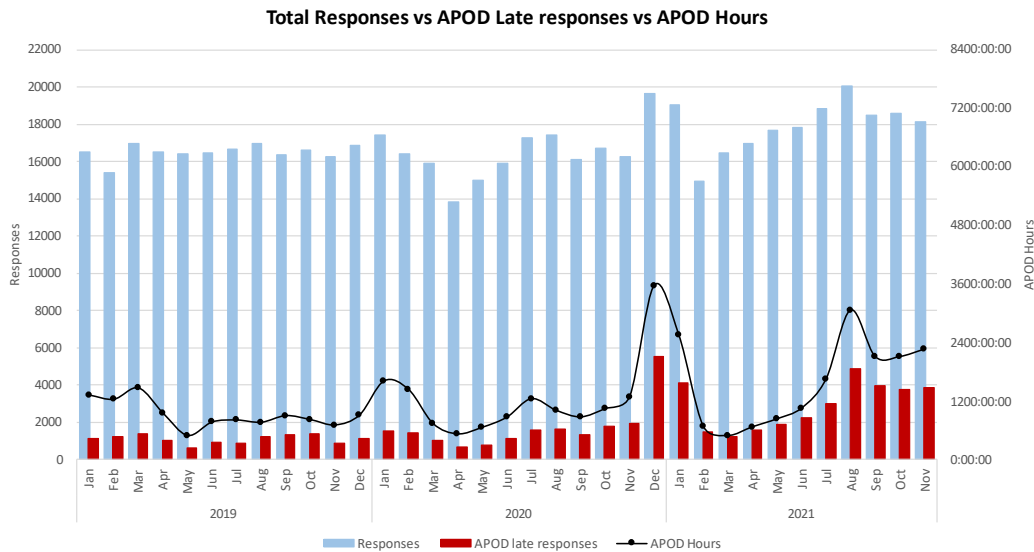


The table below shows the monthly count of ambulances held by facility for greater than 90 minutes. It also includes the total hours accumulated after the 90-minute threshold was met.

Facility	Total Time APOT > 90 min (HR: MM: S)	Total Incidents APOT > 90 min
Corona Regional Med Ctr	41:26:34	54
Desert Regional Med Ctr	15:36:14	24
Eisenhower Health	10:10:27	15
Hemet Valley Hospital	101:05:57	111
Inland Valley Med Ctr	16:19:21	37
JFK Hospital	0:05:00	1
Kaiser Hospital Moreno Valley	4:09:42	12
Kaiser Hospital Riverside	24:07:31	26
Loma Linda Univ Med Ctr Mur	4:41:12	11
Menifee Med Ctr	37:25:09	29
Palo Verde Hospital	0:00:00	0
Parkview Community Hospital	5:57:28	13
Rancho Springs Med Ctr	7:38:26	17
Riverside Community Hospital	69:32:37	100
Riverside University Health System	0:00:00	0
San Geronio Mem Hospital	5:40:18	10
Temecula Valley Hospital	13:00:29	20
Grand Total	356:56:25	480

APOD IMPACT ON 9-1-1 AMBULANCE RESPONSES

The graph below displays APOD hours, AMR responses, and AMR APOD late responses. A response is classified as an APOD late response when the response time is beyond the response time standard and APOD hours were a direct cause. The classification (exemption) process individually matches specific ambulances out-of-service on APOD to the specific APOD late responses. More reports can be found at: <https://www.rivcoems.org/Documents/Reports-Current>

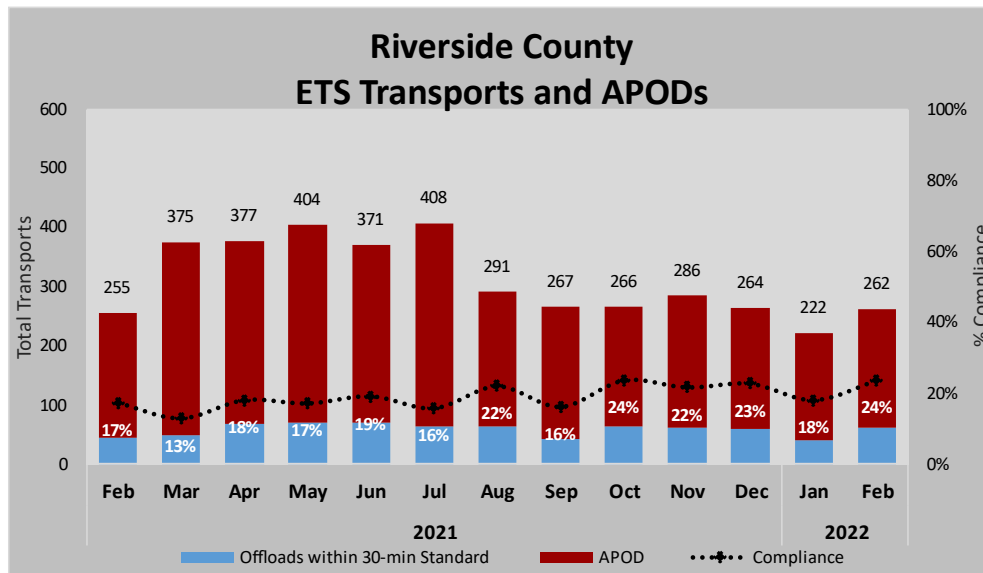


EMERGENCY TREATMENT SERVICES

Transports to Emergency Treatment Services (ETS) comprise over 3% of overall transports. This is significant enough to impact the EMS system and, therefore, warrants reporting. However, transports to ETS do not meet the EMSA definitions for APOT (see page 6); therefore, they are not included with the previous APOT aggregates.

February 2022 - Emergency Treatment Services					
	Transports to ETS	Total Offload Time	APOD Hours	APODs	APOD Compliance
Emergency Treatment Services	262	220:16:10	102:11:25	200	23.7%

The chart below represents Riverside County's total number of *ETS ambulance transports, patient offload delay (APOD), and percent compliance* for the current month and a rolling 12 months prior.



APOT AND APOD DEFINITIONS

9-1-1 Ambulance Response

For the purpose of reporting patient offload time and delays, only ground transport units responding to 9-1-1 incidents are included in this report. To avoid duplicate response counts, this excludes all records from First Responder Fire agencies also arriving on scene as part of Riverside County's dual 9-1-1 medical response system. It also excludes interfacility transports and other call types such as air ambulances.

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."¹

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

Ambulance Patient Offload Time (APOT)

The Time interval between the arrival of an 9-1-1 patient at an Emergency Department (ED) and the time that patient is transferred from the ambulance gurney to a bed, chair, or other acceptable location, and the ED assumes responsibility of care.² The Clock Start (eTimes.11) is the time of patient arrival at the destination (hospital), and the Clock Stop (eTimes.12) is the time patient care is transferred.³ REMSA obtains both times from the ePCR.

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.⁴ If the transfer of care and patient offload from the ambulance gurney exceeds the 30-minute standard, it will be documented and tracked as APOD.⁵ *The Riverside County ePCR system requires medics to enter an "APOD Reason" when APOT exceeds the 30-minute standard. While the number of APODs documented as non-ED-related is nominal, beginning in Week-1 of 2022, only delays identified as having an ED origin are counted against APOD compliance for a more precise metric.*

APOD Compliance

Frequency comparison between the total number of transports and those resulting in APODs with an ED-related origin.

¹ Ibid., APOT-1 Specifications.

² Health and Safety Code Division 2.5, Chapter 3, Article 1, Section 1797.120(b)

³ Ambulance Patient Offload Time (APOT) Standardized Methods for Data Collection and Reporting, approved by EMS Commission 12/14/2016. https://emsa.ca.gov/wp-content/uploads/sites/71/2017/09/APOT-Methodology_Guidance-2016.pdf

³ Ibid., APOT-1 Specifications

⁵ REMSA Policy 4109, Transfer of Patient Care. <https://www.remsa.us/policy/4109.pdf>

⁷ Calkins MM, Isaksen TB, Stubbs BA, Yost MG, Fenske RA (2016). Impacts of extreme heat on emergency medical service calls in King County, Washington, 2007-2012: relative risk and time series analyses of basic and advanced life support. *Environ Health*. doi: 10.1186/s12940-016-0109-0

⁸ Sheridan SC, Kalkstein AM, Kalkstein LS (2009). Trends in heat-related mortality in the United States, 1975–2004. *Natural Hazards* 50:1, 145-160

⁹ Guo Y, Gasparrini A, Armstrong BG (2017). Heat Wave and Mortality: A Multicountry, Multicommunity Study. *Environ Health Perspect*. 2017;125(8):087006. doi:10.1289/EHP1026