PREHOSPITAL MEDICAL ADVISORY COMMITTEE MEETING AGENDA (PMAC)

PMAC MEMBERS PER POLICY 8202:

Air Transport Provider Representative
11-Kent McCurdy

American Medical Response
5-Douglas Key

BLS Ambulance Service Representative
12-Vacant

Cathedral City Fire Department
5-Robert Williams

Corona Regional Medical Center
1-James Rhee, MD
4-Sharon Salle

County Fire Chiefs' Non-Transport ALS Provide
10-Art Durbin

County Fire Chiefs' Non-Transport BLS Provide
9-Phil Rawlings (Vice Chair)

Desert Regional Medical Center
1-Joel Stillings, D.O
4-Jessica Voigt

Eisenhower Medical Center
1-Frank Domzalski, MD
4-Shellee Fetters

EMT / EMT-P Training Programs
6-Maggie Robles

EMT-at-Large
13 David Olivas

Paramedic-at-Large
14-Paul Duenas

Hemet Valley Medical Center
1-Todd Hanna, MD
4-Victoria Moor

Idyllwild Fire Protection District
5-Patrick Reitz

Inland Valley Regional Medical Center
1-Reza Vaezazizi, MD
4-Daniel Sitar

JFK Memorial Hospital
1-Troy Cashatt, MD
4- Andy Billings

Kaiser Permanente Riverside
1-Jonathan Dyreyes, MD
4-Carol Fuste

The Next Meeting of PMAC is on:
Monday, January 25, 2016
9:00 AM to 10:30 AM
The Towers of Riverwalk
4210 Riverwalk Parkway, Riverside
First Floor Conference Rooms

1. **CALL TO ORDER & HOUSEKEEPING (3 Minutes)**
   Brian MacGavin (Sergeant-at-Arms)

2. **PLEDGE OF ALLEGIANCE (1 Minute)**
   Brian MacGavin

3. **ROUNDTABLE INTRODUCTIONS (5 Minutes)**
   Brian MacGavin

4. **EMS RECOGNITIONS (5 Minutes)**
   Bruce Barton & Dr. van Stralen

5. **APPROVAL OF MINUTES (3 Minutes)**
   November 9, 2015 Minutes—Dr. van Stralen (Attachment A)

6. **UNFINISHED / NEW BUSINESS (3 Minutes)**
   Board of Supervisors Approval of PMAC Prehospital Representative to EMCC—Brian MacGavin

7. **REPORTS & DISCUSSION (30 Minutes)**
   7.1. Training / Education—Shanna Kissel (Attachment B)
   7.2. Trauma System—Shanna Kissel (Attachment C)
   7.3. CQILT—Laura Wallin (Attachment D)
   7.4. Stroke System—Laura Wallin (Attachment E)
   7.5. STEMI—Laura Wallin (Attachment F)

8. **BREAK (10 Minutes)**
   Coffee and water will be provided in the break room. The meeting will recommence promptly after 15 minutes or by 10:45 depending on the availability of time. A two minute notice and the restarting of the meeting will be announced by the Sergeant-at-Arms.

9. **REPORTS & DISCUSSION CONTINUED (20 Minutes)**
   9.1. Data System—Scott Moffatt (Attachment G)
   9.2. APOD—Patrice Shepherd (Attachment H)
   9.3. EMSC—Misty Plumley
   9.4. Mask Ventilation Training—Dr. van Stralen

Loma Linda University MC Murrieta
1-Kevin Flaig, MD
4-Jennifer Orr

Menifee Valley Medical Center
1-Todd Hanna, MD
4-Janny Nelsen

Kaiser Permanente Moreno Valley
1-George Salameh, MD
4-Katherine Heichel-Casas

Palo Verde Hospital
1-David Sincavage, MD
4-Camelita Aquines

Parkview Community Hospital
1-Chad Clark, MD
4-Guillean Estrada

Rancho Springs Medical Center
1- Zeke Foster, MD
4-Marie Dempster

Riverside Community Hospital
1-Stephen Patterson, MD
4-Sabrina Yamashiro

Riverside County Fire Department
5-Scott Visyak
8-Tim Buckley

Riverside County Police Association
7-Sean Hadden

Riverside University Regional Medical Center
1-Melanie Randall, MD
4-Kay Schulz

San Gorgonio Memorial Medical Center
1-Richard Preci, MD
4-Trish Ritarita

Temecula Valley Hospital
1-Pranav Kachhi, MD
4-Jacquelyn Ramirez

Trauma Audit Comm. & Trauma Program Managers
2-Tito Gorski, MD
3-Shane McMurphy

Ex-officio Members
1-Cameron Kaiser, MD, Public Health Officer
2-Daved van Stralen, MD, REMSA Medical Director (Chair)
3-Bruce Barton, REMSA Director
4-Brian MacGavin, REMSA Assistant Director (Sergeant-at-Arms)
5-Jan Remm, Hospital Association of Southern California
6-Jeff Grange, MD, LLUMC
6-Phong Nguyen, MD, Redlands Community Hospital
6-Rodney Borger, MD, Arrowhead Regional Medical Center

10. ANNOUNCEMENTS & SERVICE RECOGNITIONS (10 Minutes)

10.1. Service Recognitions—Bruce Barton & Dr. van Stralen

10.2. Announcements—Brian MacGavin

This is the time/place that committee members and non-committee members can speak on items not on the agenda but within the purview of PMAC. Each announcement should be limited to two minutes unless extended by the PMAC Chairperson.

11. NEXT MEETING / ADJOURNMENT (1 Minute)

April 25, 2016—4210 Riverwalk Parkway First Floor Conference Rooms

Purpose of Discussion and Ground Rules:

Purpose: For EMS participants to articulate personal knowledge and experience while developing discussion skills

The Sergeant-at-Arms will display a yellow colored sign visible to the speaker indicating a two minute warning and a red colored sign indicates the speaker needs to stop talking. The Sergeant-at-Arms may have to remind participants of the ground rules.

All participants should ensure the following ground rules are observed:
1) Adhering to the time limits
2) No criticisms or offering advice
3) No interruptions—only one person speaks at a time
4) Explanations are accepted, not excuses
5) Ask or explain with “what, how or when” but not “why”
6) Speak from personal knowledge and experience; use anecdotes
7) Claims to supporting information, e.g., books, articles, etcetera must be available for review before the meeting

***Members need to sit at the table with name plates in order to identify members and ensure accurate counts of votes

Please come prepared to discuss the agenda items. If you have any questions or comments, call or email Brian MacGavin at (951) 358-5029 / bmacgavin@rivcocha.org. PMAC Agendas with attachments are available at: www.rivcoems.org. Meeting minutes are audio recorded to facilitate dictation for minutes.

PMAC Draft Minutes
November 9, 2015

TOPIC	DISCUSSION	ACTION
1. CALL TO ORDER & HOUSEKEEPING		Brian MacGavin commenced the meeting at 9:00 AM and announced housekeeping items.
2. PLEDGE OF ALLEGIANCE		Scott Visyak commenced the Pledge of Allegiance.
3. ROUNDTABLE INTRODUCTIONS		Self-introductions were conducted by Brian MacGavin.
4. APPROVAL OF MINUTES		Meeting minutes from the last PMAC meeting, September 21, 2015 were reviewed and accepted without changes.
5. UNFINISHED / NEW BUISINESS		
5.1. PMAC Prehospital Representative on EMCC Brian MacGavin	Brian MacGavin announced that, since the last PMAC meeting, nominations are being accepted for the prehospital PMAC representative on EMCC. Bret Offutt was the only nomination received.	PMAC elected Brett Offutt as their Pre-hospital provider representative to EMCC.
5.2. 2016 PMAC Meeting Dates Brian MacGavin	Proposed 2016 PMAC meeting dates were presented (Attachment B to the agenda). Typically PMAC has met five times a year. The attached schedule proposes that PMAC meets quarterly on the fourth Monday of the month at the beginning of each quarter.	PMAC approved of the 2016 meeting dates.
6. MEDICAL DIRECTOR'S VISION & TOPICS FOR DISCUSSION		Information only.
6.1. Medical Director's Vision "Doing Better"	Dr. van Stralen discussed the direction he wants for Riverside County EMS. Accepting criticisms to do better, applying practical wisdom and the importance of telling stories.	Information only.
6.2. Feedback Topic: PMAC Discussion on the feedback topics	There was discussion about whether PMAC would like to continue sharing personal experiences in this forum: It was a suggestion to have case study sessions lead by the Medical Director in a different forum. Another suggestion was to keep it in this forum while paramedic students were present. Another suggestion was to have case reviews after PMAC meetings and at base hospital meetings.	Dr. van Stralen decided that feedback topics, the sharing of personal stories, would no longer be part of PMAC. A case study feedback forum would be setup following PMAC meetings.
7. REPORTS & DISCUSSION		
7.1. EMCC – Brian MacGavin	At the last EMCC meeting on October 7, Bruce presented a letter from the State EMS Authority (EMSA) outlining deficiencies in REMSA's submission of the 2013 EMS Plan update. REMSA has concerns with changes requested by EMSA not vetted though an approval process. REMSA will be preparing a response to be shared with EMCC before its	Information only.

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PMAC Draft Minutes
November 9, 2015

	submission to EMSA. The EMS System Strategic Plan Implementation is being reported and discussed at EMCC meetings. If anyone wants further information they can review EMCC minutes and get information of REMSA's website. An update on the EMD formation and organizational changes were shared at the last EMCC meeting. SB 287 was signed by the Governor requiring AEDs to be placed in newly constructed commercial building after January 1, 2017.	
7.2. Training / Education **Misty Plumley**	Misty announced there will be a free online ICS courses, starting in January, offered by Texas A&M Engineering Extension Service (TEEX) https://teex.org/Pages/Class-Calendar There will be a free CE workshop after today's PMAC meeting in the Lemon and Line Conference Rooms. There will be two capnography classes offered by Riverside County Fire Department on November 19 & 20. Please RSVP with Tom Booth at (951) 906-9537 or email Tom at: Thomas.booth@fire.ca.gov.	Information only.
7.3. Trauma System **Misty Plumley**	There have been 53 patients involved with the TXA study with eight fallouts. Vital signs are needed to be taken during the administration of TXA. REMSA and ICEMA are working on bench marks for trauma care using the ACS Orange book and refining continuation of care	Information only.
7.4. CQILT **Laura Wallin**	Laura reminded everyone that improved compliance is needed in submitting data as required in CQI plans from all organizations. At the last CQILT meeting there was discussion on the process for policy review and updates.	Information only.
7.5. Stroke System **Laura Wallin**	At the last stroke committee meeting, on October 14, 2015, we discussed raising awareness of stroke symptoms. There was a brief explanation of the Frontier Trial.	Information only.
8. BREAK		10 minutes.
9. REPORTS & DISCUSSION CONT.		
9.1. Data System **Scott Moffatt**	REMSA is moving forward with ImageTrend and the Licensing Management System (LMS) is currently in use. EMS personnel are encouraged to log into LMS to update their contact information. Scott mentioned using	Information only.

DRAFT

PMAC Draft Minutes
November 9, 2015

	ImageTrend's NFRS for fire reporting and Hospital Hub for hospital reporting. The NEMSIS 3 data set is proving to be more complicated than imaged requiring more time to complete ePCRs.	
9.2. Mask Ventilation Training **Dr. van Stralen**	Dr. van Stralen gave an update on the mask ventilation trainings. He emphasized its importance and encouraged others to take the training and collect data on mask ventilation incidents.	Information only.
9.3 Comments for ECG Monitor Specifications **Misty Plumley**	The cardiac monitor specification comment period is over and two comments were received. The specifications set requirements for cardiac monitors regardless of who manufactures it. The comments and the specifications were reviewed for PMAC.	Information only.
9.4. Comments for Policy Changes **Misty Plumley**	Misty reviewed comments and changes to policy 3301 Drug and Equipment List and 4403 Ventricular Assist Devices. REMSA will be adhering as much as possible to the federal guidelines for EMSC equipment. There were no comments received on the changes to Policies: 5401 STEMI Receiving Centers, 5701 Stroke Centers and 4503 Suspected Stroke.	Information only.
9.5. APOD Report **Patrice Shepherd**	APOD overall hours have decreased for September and October has a similar trend. Volume has been slightly up for these months as well. The APOD redirect pilot program will continue in Riverside County. There will be discussions, this Thursday, to determine if ICEMA will continue the redirect pilot in San Bernardino County. The APOD Regional TF is still promoting the use of the Transfer of Care Module (TOC) only a few hospitals are using part of the time.	Information only.
10. ANNOUNCEMENTS	Dr. van Stralen announced that he was at the research meeting for trauma at Riverside University Hospital. The orthopedic surgeon said they had eight patients with unstable cervical spine fractures within a month period that had to go to surgery and only two of them had spinal cord involvement. Karen Petrilla stated that EMS personnel should log into the License Management System (LMS) to update their profiles. However, they cannot complete an application unless they are within six months of their credential's expiration date. The	Information only.

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November 9, 2015

	applications submitted through LMS still need to be processed and approved by REMSA. Brian MacGavin announced for everyone to update their contact information on the sign-in sheet. Laura Wallin announced that there will be a HIE Summit on April 19 & 20, 2016 in Garden Grove. Bob Fontaine suggested having student representation on PMAC Misty Plumley announced that there are flyers for the capnography classes in the back of the room.	
11. NEXT MEETING / ADJOURNMENT	January 25, 2016	Information only.

DRAFT

FOR CONSIDERATION BY PMAC

DATE: January 11, 2016

TO: PMAC

FROM: Misty Plumley, EMS Specialist

SUBJECT: 2016 Protocol/Policy Training Update

Protocol and Policy Update training has been started, with our first training session on January 13, 2016.

Training curriculum available at: http://remsa.us/documents/programs/education/. All prehospital receiving centers ED staff are encouraged to review the training materials. Additionally ED staff are welcome to attend training courses with various providers throughout 1st quarter 2016.

Protocol Update Courses (PUC) consist of training on Mechanical Circulatory Support (REMSA 4403); Stroke Assessment and Care (REMSA 4503 and 5701) and Physician's Orders for Life Sustaining Treatment (POLST) law changes/form updates. The TXA Trial Study results thus far are also being reviewed and discussed.

ACTION: Informational only, no action required.

FOR CONSIDERATION BY PMAC

DATE: January 11, 2015

TO: PMAC

FROM: Shanna Kissel, REMSA Trauma Nurse Coordinator

SUBJECT: Trauma Program

1. TXA Study Update- June 1, 2015- January 5, 2016

   59 Patients received TXA within criteria

   10 Missed opportunities for TXA

   4 Patients received TXA out of criteria

   - Regional TXA meeting scheduled For January 28th to review first 6 months of data

   - TXA update will be included with PUC. No new regional education coming out.

2. 2015 HEMS call volume update

ACTION: PMAC should be prepared to receive the information and provide feedback to REMSA.

FOR CONSIDERATION BY PMAC

DATE: January 11, 2016

TO: PMAC

FROM: Laura Wallin, RN IV, CEN, EMS Specialty Center Coordinator

SUBJECT: CQILT

CQILT has decided that we will continue monitoring the same indicators in 2016 as we did in 2015 to ensure that valid, reliable data is submitted and that we have a good baseline. Indicators being monitored include:

- Missed STEMIs
- Scene time for suspected STEMI patients
- Glucose testing for suspected stroke patients
- Scene time for suspected stroke patients
- Direct transport to designated stroke centers for suspected stroke patients
- Cincinnati Stroke Scale performed on suspected stroke patients
- % of cardiac arrest patients transported to a hospital
- Prehospital cardiac arrest patients with ROSC (Utstein criteria)
- Prehospital cardiac arrest survival to ED discharge (transfer or admission to hospital)
- Prehospital cardiac arrest survival to hospital discharge
- Prehospital cardiac arrest survival to hospital discharge with a CPC score of 1 or 2
- Number of community CPR classes offered (include Hands-Only CPR)
- Number of people trained in the community CPR classes
- Number of times a BLS/CCT unit ran Code 3 and notified REMSA

In quarter 1, 65.2% of base hospitals, ALS transport providers, ALS and BLS First Responders and BLS CCT transport organizations submitted data. In quarter 2, 69.70% submitted data. In quarter 3, 90% submitted data. At this point, we have reached out to our Prehospital Receiving Centers to request data from them on these indicators as well, giving us a better overall idea of our entire EMS system. Data will be reported only at the CQILT meetings until we are able to get reliable, valid data from all providers and hospitals.

ACTION: PMAC should be prepared to receive the information and provide feedback to the EMS Agency.

FOR CONSIDERATION BY PMAC

DATE: January 11, 2016

TO: PMAC

FROM: Laura Wallin, RN IV, CEN, EMS Specialty Center Coordinator

SUBJECT: Stroke System

All 11 of the Riverside County EMS Agency designated Stroke Centers have achieved certification as Primary Stroke Centers from The Joint Commission. This is a very difficult certification to achieve, and we would like to congratulate all of our Stroke Centers for their accomplishment. REMSA designated Stroke Centers include the following:

- Primary Stroke Center:
  - Corona Regional Medical Center
  - Inland Valley Medical Center
  - Kaiser Moreno Valley Medical Center
  - Kaiser Riverside Medical Center
  - Parkview Community Hospital
  - Rancho Springs Medical Center
  - Riverside Community Hospital
  - Riverside University Health System
  - Temecula Valley Hospital
- Interventional Stroke Center:
  - Desert Regional Medical Center
  - Eisenhower Medical Center

ACTION: PMAC should be prepared to receive the information and provide feedback to the EMS Agency.

FOR CONSIDERATION BY PMAC

DATE: January 11, 2016

TO: PMAC

FROM: Laura Wallin, RN IV, CEN, EMS Specialty Center Coordinator

SUBJECT: STEMI System

STEMI data from the 2nd and 3rd quarter of 2015 will be presented. The data can be accessed on Friday, January 22, 2015 at http://www.remsa.us/documents/programs/stemi/20160125-STEMI-Data .

The STEMI System Committee met on January 21, 2015. A report from the meeting will also be given at the PMAC meeting.

ACTION: PMAC should be prepared to receive the information and provide feedback to the EMS Agency.

FOR CONSIDERATION BY PMAC

DATE: January 07, 2016

TO: PMAC

FROM: Scott Moffatt, EMS Specialist

SUBJECT: EMS Data System

Image Trend'sLicense Management System (LMS) has been implemented for credentialing purposes at:

https://ca.emsbridge.com/remsa/

Elite (NEMSIS 3 ePCR), and additional ImageTrend modules such as Hospital Hub and the NFIRS tab are being prepared for system wide implementation. Please see the County's contract with ImageTrend at:

http://rivcocob.org/proceeds/2015/p2015_06_16_files/03-39001.pdf

A month to month extension of the Sansio contract can be viewed

at: http://rivcocob.org/proceeds/2015/p2015_06_16_files/03-

38001.pdf

If you have not already done so please identify a single point of contact at your agency/service/hospital that is able to coordinate communications regarding: prehospital personnel and their credentials, prehospital vehicles, CAD integration with ePCR, ePCR hardware/training/use/administration, critical care transport ePCR needs, and use of EMS data for reporting and CQI purposes. This person should establish communication with Dana Diaz at the EMS Agency.

ACTIONS:

Advise your staff to "Claim Your Account" (personnel that are or have been credentialed by REMSA) or "Create Account" (personnel that are new to REMSA)
at https://ca.emsbridge.com/remsa/.

Contact Dana Diaz at REMSA to officially identify your organization's single point of contact for EMS data system implementation.

Assign staff to review the ePCR setup in our Test Agency and communicate these assignments to Dana Diaz.

FOR CONSIDERATION BY PMAC

DATE: January 11, 2016

TO: PMAC

FROM: Patrice Shepherd, REMSA

SUBJECT: Ambulance Patient Offload Delay Report

ATTACHMENT: Ambulance Patient Offload Delay Report (the following five pages)

The current Ambulance Patient Offload Delay Report contains data through the end of December 2015. Data by month for the last three months is available for each hospital on the last page of the report. As the report continues to be refined and improved, some graphs and data analysis methods may change.

ACTION: PMAC should be prepared to receive the information and provide feedback to the EMS Agency.

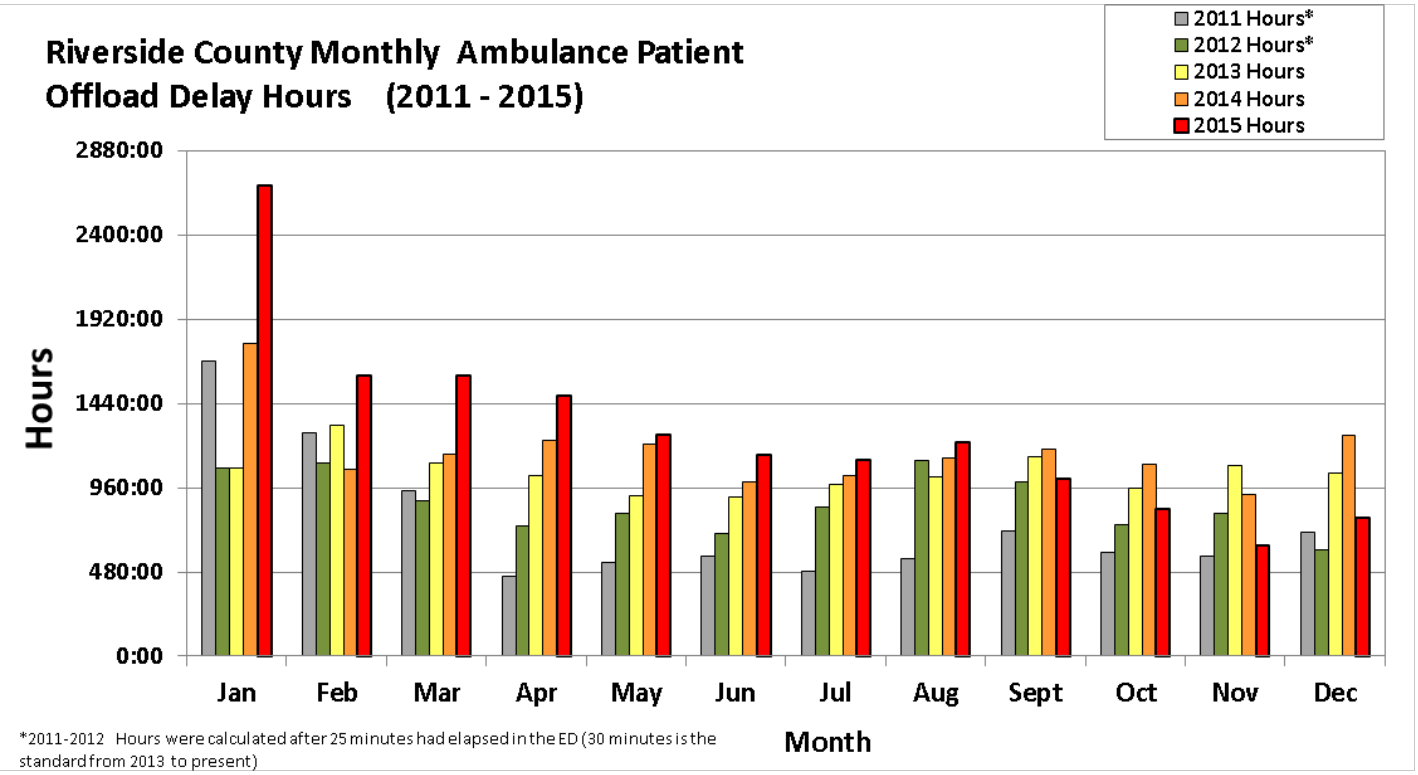
AMBULANCE PATIENT OFFLOAD DELAYS

January 7, 2016

RIVERSIDE COUNTY AMBULANCE PATIENT OFFLOAD DELAYS

HISTORICAL COMPARISON

Data provided illustrates total ambulance patient offload delay time (hh:mm) by month for 2011-2015(present month) from hospitals within Riverside County. To qualify for this chart, the duration of offload delay must be greater than 30 minutes (2013 and forward) and only the time period after the first 30 minutes is summed. Prior to 2013, offload delay data used a 25-minute standard.



Total Annual Hours* and Ambulance Patient Offload Delays by hospital, 2011 to 2014

	2011		2012		2013		2014	
Hospital	Total Hours*	Offload Delays	Total Hours*	Offload Delays	Total Hours*	Offload Delays	Total Hours*	Offload Delays
RCH	1571:42:46	3352	2198:41:11	3953	2712:32:25	5978	2984:29:25	7488
Kaiser	173:06:25	559	151:16:22	472	196:02:59	496	201:38:58	748
Parkview	1371:19:18	2435	1881:03:47	2833	1171:41:25	2037	1694:56:01	2887
RCRMC	545:44:19	1535	892:20:22	2276	1107:06:11	2375	1007:19:37	2547
Corona	1539:56:42	2550	1694:56:09	2803	1717:47:56	2522	1845:33:25	2912
Moreno Valley	285:04:10	824	268:19:32	809	420:59:39	888	545:55:06	1259
Menifee	568:04:22	1210	322:28:21	791	725:38:26	1158	733:35:51	1383
LLUMC- Murrieta	61:57:57	179	265:40:04	675	888:15:15	1411	963:34:24	1756
Inland Valley	879:15:32	1671	949:05:59	2134	643:33:09	1307	432:21:44	1112
Rancho Springs	577:15:19	1209	136:57:10	417	137:27:11	326	76:31:30	247
Temecula Valley					10:07:03	28	139:03:35	446
Hemet	1060:21:22	2980	1081:16:55	2720	2535:17:35	4151	3112:04:15	5387
San Gorgonio	215:17:12	568	222:07:47	595	127:45:02	298	157:47:22	483
Eisenhower	33:56:41	171	64:56:15	320	54:56:39	241	24:15:55	149
Desert	122:26:14	562	233:06:47	788	68:47:04	347	40:12:27	213
JFK	65:48:08	296	81:16:43	337	58:37:55	252	79:52:57	337
Totals	**9,071:16:27**	**20,101**	10,443:33:24	**21,923**	12,576:35:54	**23,815**	14,039:12:32	**29,354**

*Total Hours do not include the first 25 minutes of each offload delay (2011-2012), or the first 30 minutes (2013- present)

AMBULANCE PATIENT OFFLOAD DELAYS AND OVERALL COMPLIANCE

This data includes 2014 and 2015 Ambulance Patient Offload Delays, hours of delay, total time the ambulances and patients were delayed, ALS transports received by each hospital, compliance, and average delay time per occurrence. "Delay Hours" include any time after the initial 30 minutes in the ED have passed; "Total Delay Time" sums both the delay and the initial 30 minutes. "Compliance" represents the percentage of ALS ambulance transports that were not held on Offload Delay.

Ambulance Patient Offload Delay Data, 2015 – Transports and Occurrences - ALS Units Only

Hospital	*Offload Delay Hours*	*Total Delay Time**	Total ALS Transports	Offload Delay Occurrences	*Compliance%***	Avg Delay/ Occurrence*
RCH	2773:05:19	6079:35:19	18111	6613	63.5%	0:55:10
Kaiser	338:51:33	862:51:33	6060	1048	82.7%	0:49:24
Parkview	1408:38:48	2589:08:48	6161	2361	61.7%	1:05:48
RCRMC	1051:28:27	2460:58:27	14341	2819	80.3%	0:52:23
Corona	2652:21:07	4265:51:07	6968	3227	53.7%	1:19:19
Moreno Valley	451:34:23	1025:04:23	3500	1147	67.2%	0:53:37
Menifee	824:27:25	1490:27:25	4594	1332	71.0%	1:07:08
LLUMC –Murrieta	946:18:08	1812:18:08	5717	1732	69.7%	1:02:47
Inland Valley	714:29:18	1568:59:18	9929	1709	82.8%	0:55:05
Rancho Springs	79:13:52	206:43:52	4571	255	94.4%	0:48:39
Temecula Valley	411:05:43	956:05:43	4952	1090	78.0%	0:52:38
Hemet	3153:42:33	5660:12:33	14614	5013	65.7%	1:07:45
San Gorgonio	374:17:20	910:17:20	6970	1072	84.6%	0:50:57
Eisenhower	39:07:26	141:37:26	4775	205	95.7%	0:41:27
Desert	50:21:13	207:51:13	10124	315	96.9%	0:39:35
JFK	116:46:03	310:16:03	3498	387	88.9%	0:48:06
Totals	**15,385:48:38**	**30,548:18:38**	**124,885**	**30,325**	**75.7%**	**1:00:27**

* Includes the first 30 minutes of each Offload Delay.

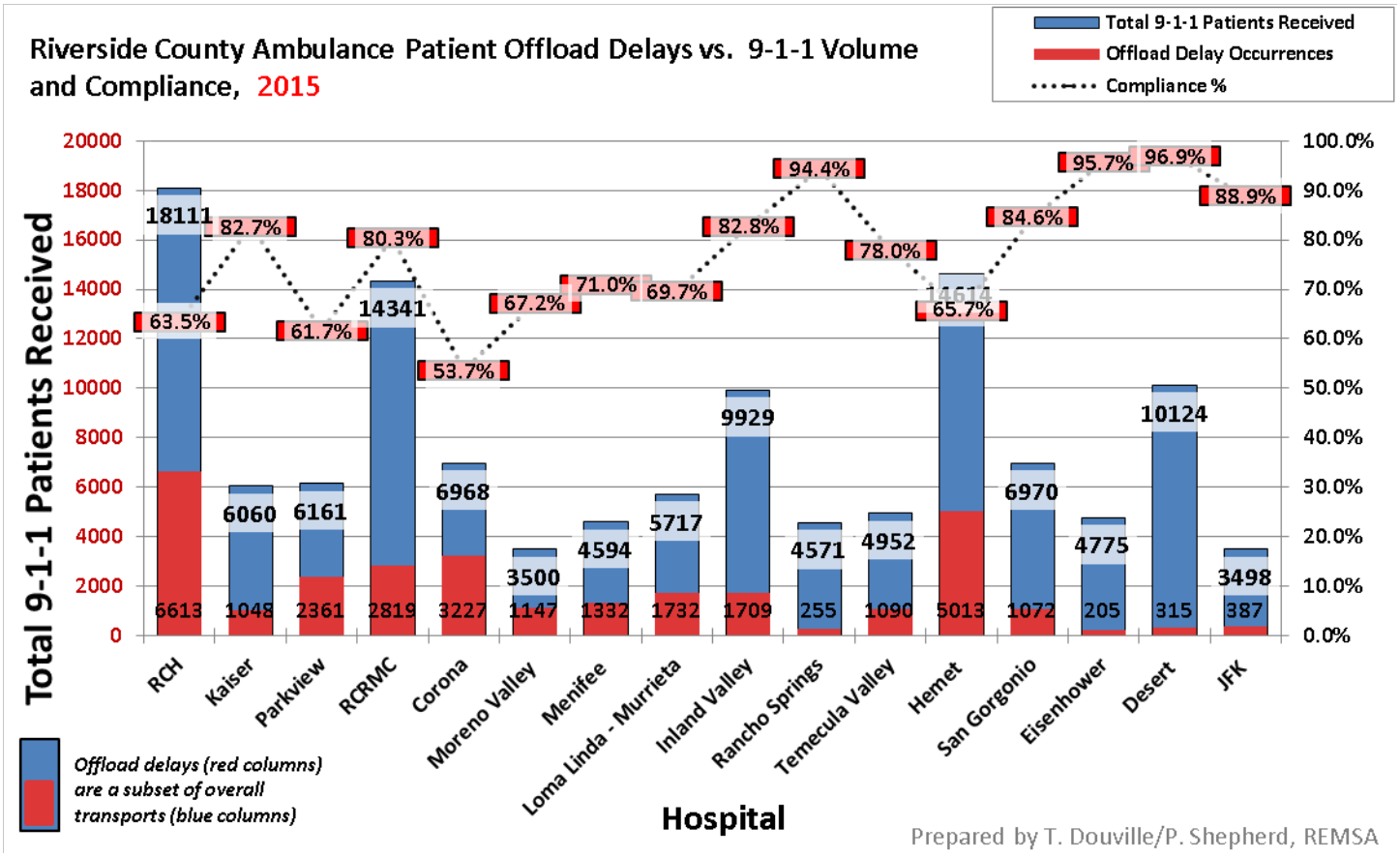
** Compliance % represents the percentage of ALS ambulance transports not on Offload Delay (data includes only 9-1-1 contractual provider).

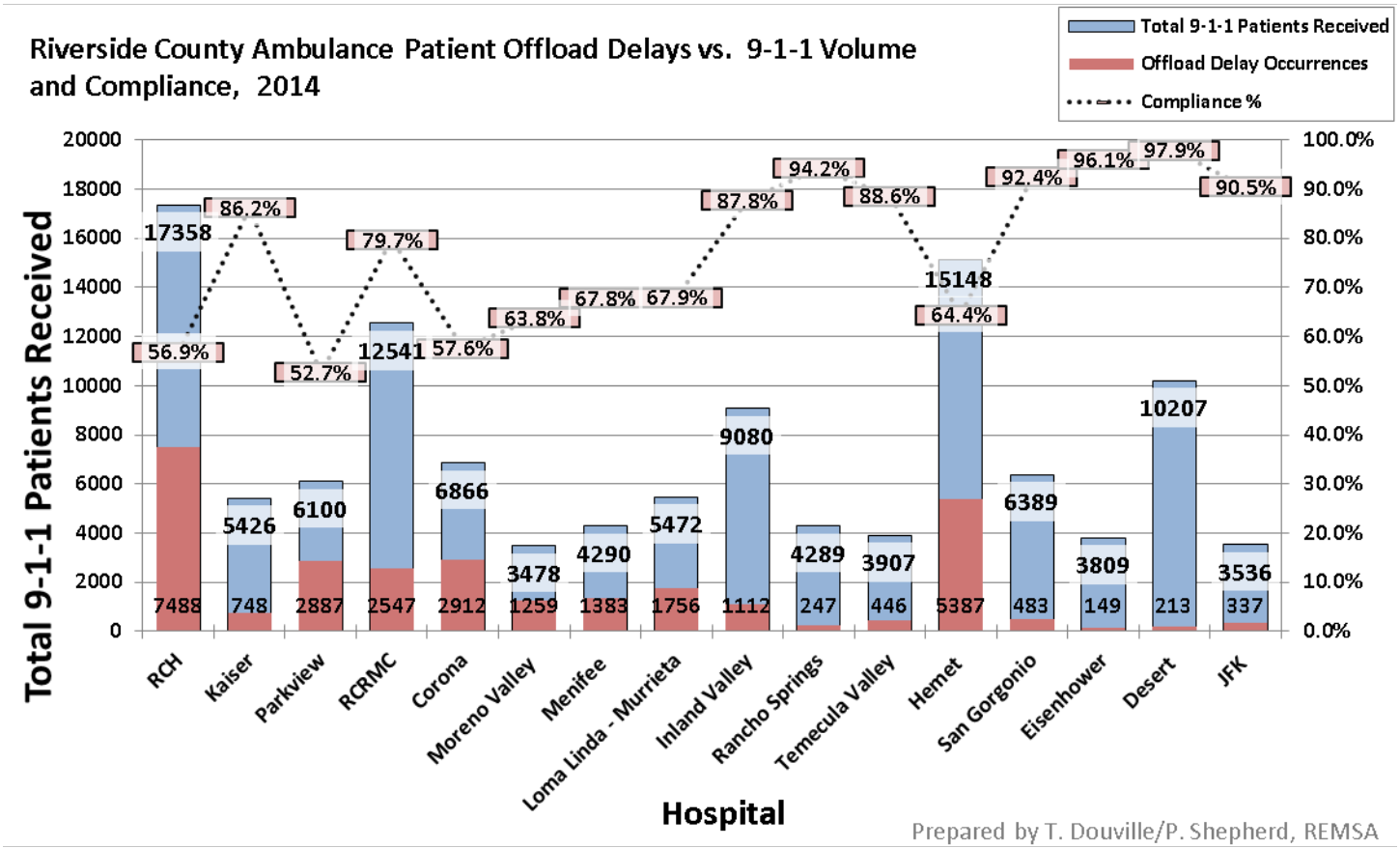
Ambulance Patient Offload Delay Data, 2014 – Transports and Occurrences - ALS Units Only

Hospital	*Offload Delay Hours*	*Total Delay Time**	Total ALS Transports	Offload Delay Occurrences	*Compliance%***	Avg Delay/ Occurrence*
RCH	2984:29:25	6728:29:25	17358	7488	**56.9%**	0:53:55
Kaiser	201:38:58	575:38:58	5426	748	**86.2%**	0:46:11
Parkview	1694:56:01	3138:26:01	6100	2887	**52.7%**	1:05:14
RCRMC	1007:19:37	2280:49:37	12541	2547	**79.7%**	0:53:44
Corona	1845:33:25	3301:33:25	6866	2912	**57.6%**	1:08:02
Moreno Valley	545:55:06	1175:25:06	3478	1259	**63.8%**	0:56:01
Menifee	733:35:51	1425:05:51	4290	1383	**67.8%**	1:01:50
LLUMC –Murrieta	963:34:24	1841:34:24	5472	1756	**67.9%**	1:02:55
Inland Valley	432:21:44	988:21:44	9080	1112	**87.8%**	0:53:20
Rancho Springs	76:31:30	200:01:30	4289	247	**94.2%**	0:48:35
Temecula Valley	139:03:35	362:03:35	3907	446	**88.6%**	0:48:42
Hemet	3112:04:15	5805:34:15	15148	5387	**64.4%**	1:04:40
San Gorgonio	157:47:22	399:17:22	6389	483	**92.4%**	0:49:36
Eisenhower	24:15:55	98:45:55	3809	149	**96.1%**	0:39:46
Desert	40:12:27	146:42:27	10207	213	**97.9%**	0:41:20
JFK	79:52:57	248:22:57	3536	337	**90.5%**	0:44:13
Totals	**14,039:12:32**	**28,716:12:32**	**117,896**	**29,354**	**75.1%**	**0:58:42**

* Includes the first 30 minutes of each Offload Delay.

** Compliance % represents the percentage of ALS Ambulance transports not on Offload Delay (data includes only 9-1-1 contractual provider).


Riverside County Ambulance Patient Offload Delays vs. 9-1-1 Volume and Compliance, 2015
Total 9-1-1 Patients Received
Offload Delay Occurrences
Compliance %
Total 9-1-1 Patients Received
Hospital
RCH 18111 6613 63.5% 82.7%
Kaiser 6060 1048 61.7%
Parkview 6161 2361
RCRMC 14341 2819 80.3%
Corona 6968 3227 53.7%
Moreno Valley 3500 1147 67.2%
Menifee 4594 1332 71.0%
Loma Linda - Murrieta 5717 1732 69.7%
Inland Valley 9929 1709 82.8%
Rancho Springs 4571 255 94.4%
Temecula Valley 4952 1090 78.0%
Hemet 14614 5013 65.7%
San Gorgonio 6970 1072 84.6%
Eisenhower 4775 205 95.7%
Desert 10124 315 96.9%
JFK 3498 387 88.9%
Offload delays (red columns) are a subset of overall transports (blue columns)
Prepared by T. Douville/P. Shepherd, REMSA


Riverside County Ambulance Patient Offload Delays vs. 9-1-1 Volume and Compliance, 2014
Total 9-1-1 Patients Received
Offload Delay Occurrences
Compliance %
Total 9-1-1 Patients Received
Hospital
RCH 17358 7488 56.9% 86.2%
Kaiser 5426 748 52.7%
Parkview 6100 2887
RCRMC 12541 2547 79.7%
Corona 6866 2912 57.6%
Moreno Valley 3478 1259 63.8%
Menifee 4290 1383 67.8%
Loma Linda - Murrieta 5472 1756 67.9%
Inland Valley 9080 1112 87.8%
Rancho Springs 4289 247 94.2%
Temecula Valley 3907 446 88.6%
Hemet 15148 5387 64.4%
San Gorgonio 6389 483 92.4%
Eisenhower 3809 149 96.1%
Desert 10207 213 97.9%
JFK 3536 337 90.5%
Prepared by T. Douville/P. Shepherd, REMSA

Ambulance Patient Offload Delays by Month: Offload Delay Time and Occurrences by hospital* - Oct. – Dec. 2015

Hospital	Oct. '15 Delay Hours	ALS 9-1-1 Trans.	*Oct'15 Offload Delays*	Nov. '15 Delay Hours	ALS 9-1-1 Trans.	*Nov. '15 Offload Delays*	Dec. '15 Delay Hours	ALS 9-1-1 Trans.	*Dec.'15 Offload Delays*
RCH	155:37:09	1572	*394*	105:00:58	1504	354	71:36:53	1598	281
Kaiser	13:07:44	518	*54*	13:03:05	463	47	20:17:38	514	67
Parkview	43:12:55	532	*113*	20:40:23	463	77	50:10:31	510	110
RCRMC	62:33:58	1258	*175*	76:53:45	1244	210	76:12:42	1256	204
Corona	139:14:42	541	*182*	95:44:34	585	191	155:23:14	610	198
Moreno Val.	27:08:58	280	*70*	19:42:17	291	69	16:33:32	290	58
Menifee	38:50:27	352	*64*	18:51:43	341	51	30:38:55	356	52
LLUMC –Murr.	56:50:16	448	*116*	43:31:09	467	101	76:10:33	461	146
Inland Valley	41:54:07	841	*125*	62:15:43	803	137	44:52:07	785	119
Rancho Spgs.	4:05:22	363	*17*	3:34:22	359	9	5:39:17	397	18
Temecula Val.	33:06:26	409	*87*	33:12:05	449	90	27:00:52	443	77
Hemet	173:48:43	1262	*339*	102:36:25	1261	271	159:12:09	1265	332
San Gorgonio	32:53:06	616	*101*	18:54:15	523	64	36:35:47	597	91
Eisenhower	4:20:29	310	*10*	1:39:57	348	12	4:39:14	397	23
Desert	2:01:00	870	*17*	3:43:58	858	23	4:44:03	912	32
JFK	11:38:11	293	*40*	13:12:37	271	30	9:35:29	316	23
Totals	840:23:33	10,465	*1,904*	632:37:16	10,230	*1,736*	789:22:56	10,707	*1,831*

*Monthly Delay Time does not include the first 30 minutes of each Offload Delay occurrence.

Data for this report was provided by American Medical Response (AMR) to the Riverside County EMS Agency for review and analysis. The data represents only AMR 9-1-1 ALS resources and does not include any other ambulance companies or BLS-level service.