

# Ambulance Patient Offload Time December 2018

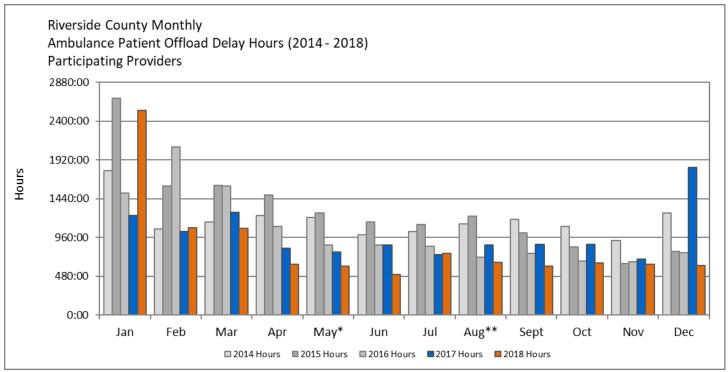
Monthly Report

## RIVERSIDE COUNTY AMBULANCE PATIENT OFFLOAD TIME

The data provided illustrates total ambulance patient offload delay time (hh:mm) by month for 2014 through December 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.

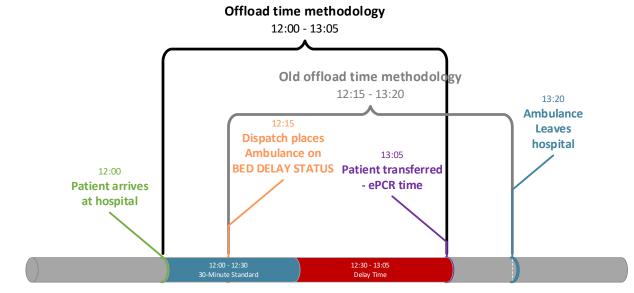
Beginning January 2017, offload times represented are measured using time of patient arrival at hospital (eTimes.11) until the time of patient transfer (eTimes.12) as represented on the ePCR (electronic patient care report). This represents a different methodology in offload time measurement. Prior to 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.



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

<sup>\*\*</sup>Beginning August 2017, times represented include all participating providers. Prior to August, data included AMR responses only.



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December 2018 APOT by Hospital						
Hospital	Total ALS Transports	APOT	APOD Hours	APODs	APOD Compliance	APOT-1*
Corona Regional Med Ctr	710	277:33:02	57:54:00	174	75.5%	0:46:27
Desert Regional Med Ctr	1,055	215:09:14	6:15:47	34	96.8%	0:20:37
Eisenhower Health	1,303	220:50:37	2:34:44	21	98.4%	0:17:22
Hemet Valley Hospital	1,393	562:05:03	98:45:01	383	72.5%	0:45:00
Inland Valley Med Ctr	903	281:29:22	42:08:22	143	84.2%	0:36:42
JFK Hospital	496	82:23:58	1:34:47	12	97.6%	0:18:23
Kaiser Hospital Riverside	518	164:24:26	15:16:35	59	88.6%	0:31:53
Loma Linda Univ Med Ctr Mur	653	340:42:17	98:34:25	227	65.2%	0:56:58
Menifee Med Ctr	333	120:23:31	23:44:14	65	80.5%	0:43:35
Moreno Valley Hospital	321	93:54:59	9:17:23	30	90.7%	0:29:59
Palo Verde Hospital	149	18:42:13	1:23:54	6	96.0%	0:17:38
Parkview Community Hospital	426	158:40:28	29:41:39	78	81.7%	0:42:31
Rancho Springs Med Ctr	427	121:22:14	8:42:18	42	90.2%	0:30:02
Riverside Community Hospital	1,528	730:54:08	145:59:05	570	62.7%	0:49:47
Riverside University Health System	1,296	458:30:13	45:53:04	224	82.7%	0:36:20
San Gorgonio Mem Hospital	541	156:37:42	8:15:06	50	90.8%	0:29:23
Temecula Valley Hospital	533	166:06:50	14:01:32	72	86.5%	0:34:43
Totals	12,585	4169:50:17	610:01:56	2,190	82.6%	0:38:12

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

2018 Year-to-Date							
Hospital	Total ALS Transports	АРОТ	APOD Hours	APODs	APOD Compliance	APOT-1*	
Corona Regional Med Ctr	8,698	4145:34:20	1242:48:01	2,604	70.1%	0:57:10	
Desert Regional Med Ctr	12,934	3139:02:21	244:41:57	846	93.5%	0:25:22	
Eisenhower Health	15,078	2688:10:00	40:14:50	261	98.3%	0:18:54	
Hemet Valley Hospital	16,017	7582:22:13	1841:27:33	5,958	62.8%	0:52:25	
Inland Valley Med Ctr	10,405	3200:07:10	481:08:42	1,503	85.6%	0:36:02	
JFK Hospital	6,544	952:28:27	14:04:26	86	98.7%	0:17:02	
Kaiser Hospital Riverside	6,254	2071:42:18	285:32:19	950	84.8%	0:35:40	
Loma Linda Univ Med Ctr Mur	7,322	3624:57:39	1132:16:20	2,268	69.0%	0:58:12	
Menifee Med Ctr	3,974	1527:30:50	387:54:55	804	79.8%	0:45:48	
Moreno Valley Hospital	3,881	1360:39:01	264:45:48	690	82.2%	0:40:46	
Palo Verde Hospital	1,897	169:32:47	13:23:46	40	97.9%	0:13:12	
Parkview Community Hospital	5,574	2399:46:36	627:45:38	1,311	76.5%	0:48:14	
Rancho Springs Med Ctr	5,280	1479:30:02	175:21:47	511	90.3%	0:29:45	
Riverside Community Hospital	18,558	9710:49:21	2535:06:00	7,718	58.4%	0:55:24	
Riverside University Health System	14,898	5496:43:26	661:45:42	3,019	79.7%	0:38:46	
San Gorgonio Mem Hospital	6,855	1950:54:01	152:48:26	732	89.3%	0:30:43	
Temecula Valley Hospital	6,350	2020:00:00	207:52:52	928	85.4%	0:34:48	
Totals	150,519	53519:50:32	10308:59:02	30,229	79.9%	0:41:43	

<sup>\*</sup>APOT-1 is the offload time represented at the 90th percentile. See page 6 of this report for complete definitions.

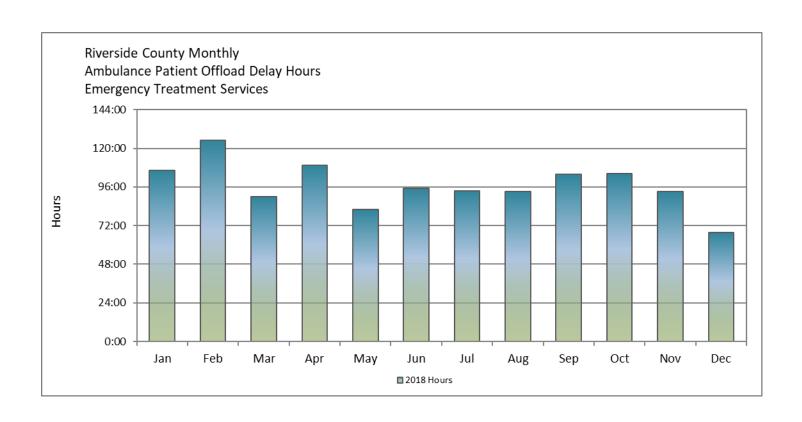
Key: High Low/E	Best
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#### **EMERGENCY TREATMENT SERVICES**

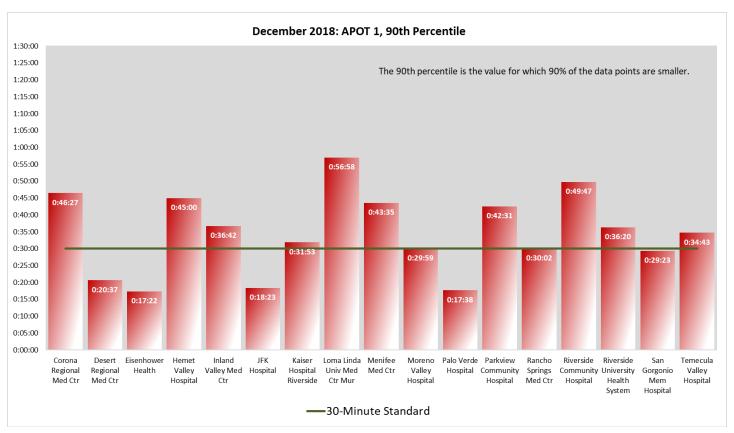
The following table includes all transports during December 2018 to Emergency Treatment Services (ETS). Since transports to ETS do not meet the EMSA definitions for APOT (see page 6 of this report), they are not being included with the APOT aggregates. Comprising over 3% of overall transports in 2018, the number of transports to ETS is significant enough to impact the EMS system and, therefore, warrants reporting.

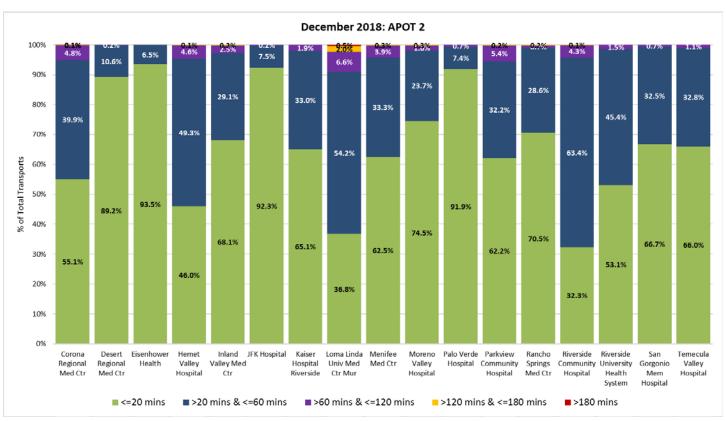
December 2018 ETS						
<b>Destination</b> –	ETS	<b>Total Offload</b>	APOD	APODs	APOD	90th
	Transports	Time	Hours	APODS	Compliance	Percentile
Emergency Treatment Services	478	262:52:49	67:42:46	222	53.6%	0:56:45
<b>Grand Total</b>	478	262:52:49	67:42:46	222	53.6%	0:56:45

ETS 2018 Year-to-Date							
Destination	ETS	<b>Total Offload</b>	APOD	ADODa	APOD	90th	
	Transports	Time	Hours	APODs	Compliance	Percentile	
<b>Emergency Treatment Services</b>	4,992	3222:33:35	1095:28:12	2,779	44.3%	1:08:01	
Grand Total	4,992	3222:33:35	1095:28:12	2,779	44.3%	1:08:01	



# 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. 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. 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 90<sup>th</sup> 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.<sup>4</sup>

# 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.<sup>5</sup> 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.<sup>6</sup>

#### Data Definitions

Data in this report includes all transports to the 17 hospitals monitored by REMSA in the respective month relative to the date and time the incident originates (eTimes.03--Dispatch Notified Date/Time). For example, if an incident originates on June 30, and the patient is subsequently transferred to the care of an emergency department on July 1, that incident will be included in the month of June.

Canceled calls, calls for which both arrival and transfer times are not present, and calls with erroneous/negative offload times are excluded. Certain incidents with offload times exceeding six hours and 12 hours are verified for accuracy, and incidents are excluded if the timeline cannot be validated.

Data for this report has been collected from ePCRs (electronic patient care reports) from 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.

<sup>&</sup>lt;sup>1</sup> Health and Safety Code Division 2.5, Chapter 3, Article 1, Section 1797.120(b)

<sup>&</sup>lt;sup>2</sup> Ambulance Patient Offload Time (APOT) Standardized Methods for Data Collection and Reporting, approved by EMS Commission 12/14/2016.

<sup>&</sup>lt;sup>3</sup> Ibid., APOT-1 Specifications.

<sup>&</sup>lt;sup>4</sup> Ibid., Definitions.

<sup>&</sup>lt;sup>5</sup> REMSA Policy 9101.6. http://www.remsa.us/policy/9101.pdf

<sup>&</sup>lt;sup>6</sup> REMSA Policy 4204, Transfer of Patient Care. <a href="http://www.remsa.us/policy/4204.pdf">http://www.remsa.us/policy/4204.pdf</a>