

Ambulance Patient Offload Time May 2018

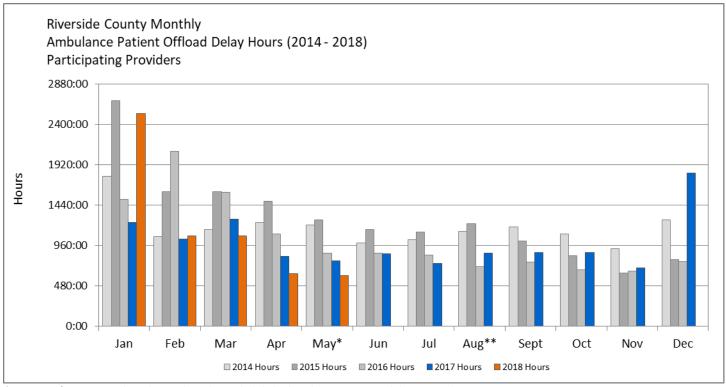
Monthly Report

RIVERSIDE COUNTY AMBULANCE PATIENT OFFLOAD TIME

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

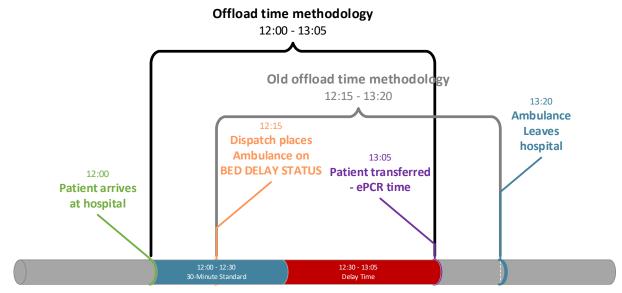
Beginning January 2017, offload times represented are measured using time of patient arrival at hospital (eTimes.11) until the time of patient transfer (eTimes.12) as represented on the ePCR (electronic patient care report). This represents a different methodology in offload time measurement. Prior to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



^{*}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.



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AMBULANCE PATIENT OFFLOAD TIME BY HOSPITAL

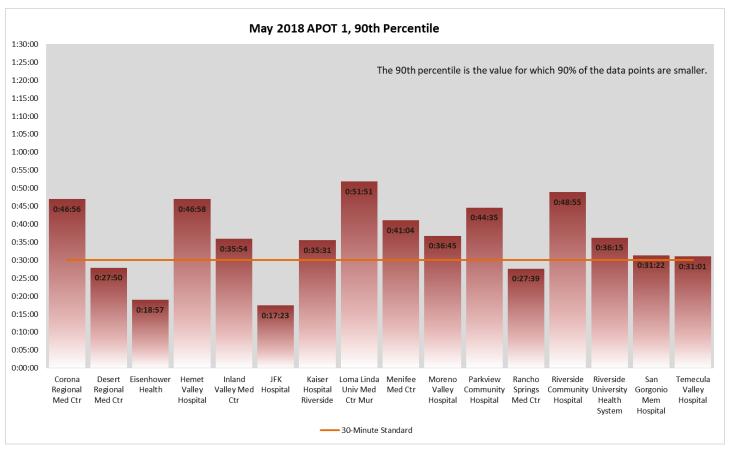
May 2018 APOT by Hospital										
Hospital	Total ALS Transports	АРОТ	APOD Hours	APODs	APOD Compliance	APOT-1*				
Corona Regional Med Ctr	785	317:17:24	61:36:23	198	74.8%	0:46:56				
Desert Regional Med Ctr	1,121	277:59:35	18:28:30	90	92.0%	0:27:50				
Eisenhower Health	1,222	217:38:06	2:42:11	17	98.6%	0:18:57				
Hemet Valley Hospital	1,320	580:26:41	109:14:10	451	65.8%	0:46:58				
Inland Valley Med Ctr	833	241:28:00	31:54:37	110	86.8%	0:35:54				
JFK Hospital	548	79:23:30	0:53:38	8	98.5%	0:17:23				
Kaiser Hospital Riverside	492	151:27:36	12:08:52	69	86.0%	0:35:31				
Loma Linda Univ Med Ctr Mur	600	255:22:13	64:19:39	158	73.7%	0:51:51				
Menifee Med Ctr	357	118:01:31	21:28:44	59	83.5%	0:41:04				
Moreno Valley Hospital	343	103:15:48	13:14:33	46	86.6%	0:36:45				
Parkview Community Hospital	482	195:05:13	37:20:52	113	76.6%	0:44:35				
Rancho Springs Med Ctr	433	106:33:01	6:52:14	34	92.1%	0:27:39				
Riverside Community Hospital	1,618	771:21:14	161:12:52	600	62.9%	0:48:55				
Riverside University Health System	1,160	395:26:25	36:54:00	214	81.6%	0:36:15				
San Gorgonio Mem Hospital	587	156:41:07	12:14:17	62	89.4%	0:31:22				
Temecula Valley Hospital	537	162:39:45	13:53:14	59	89.0%	0:31:01				
Totals	12,438	4130:07:09	604:28:46	2,288	81.6%	0:39:15				

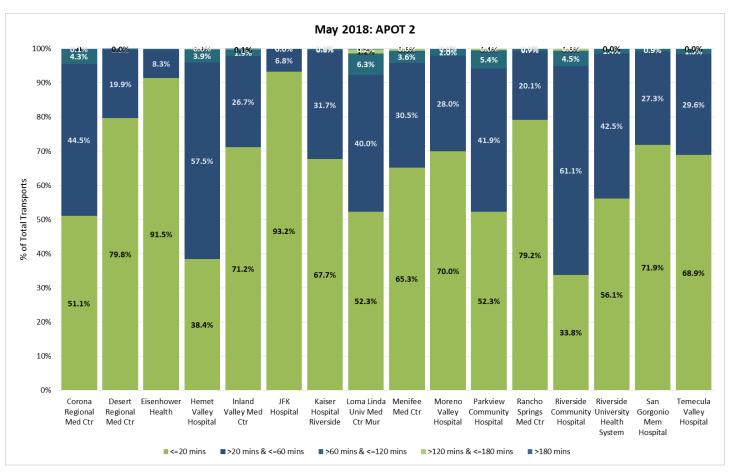
APOD hours do not include the first 30 minutes of each offload delay occurrence.

2018 Year-to-Date										
Hospital	Total ALS Transports	АРОТ	APOD Hours	APODs	APOD Compliance	APOT-1*				
Corona Regional Med Ctr	3,632	2005:31:45	732:07:44	1,266	65.1%	1:08:01				
Desert Regional Med Ctr	5,621	1519:04:58	181:37:53	548	90.3%	0:30:00				
Eisenhower Health	6,590	1229:56:46	23:02:33	135	98.0%	0:19:47				
Hemet Valley Hospital	6,620	3458:48:00	972:44:54	2,856	56.9%	0:57:29				
Inland Valley Med Ctr	4,344	1504:00:36	291:53:06	841	80.6%	0:42:58				
JFK Hospital	2,914	441:46:13	9:25:13	50	98.3%	0:18:00				
Kaiser Hospital Riverside	2,662	993:56:39	189:16:33	533	80.0%	0:41:27				
Loma Linda Univ Med Ctr Mur	3,026	1655:53:32	631:39:19	1,022	66.2%	1:08:31				
Menifee Med Ctr	1,693	704:29:38	213:38:03	386	77.2%	0:51:16				
Moreno Valley Hospital	1,692	693:45:57	183:47:35	406	76.0%	0:50:10				
Parkview Community Hospital	2,443	1281:21:12	449:46:34	783	67.9%	1:02:51				
Rancho Springs Med Ctr	2,275	715:07:11	126:20:03	292	87.2%	0:33:35				
Riverside Community Hospital	7,788	4380:40:59	1340:31:55	3,460	55.6%	1:01:37				
Riverside University Health System	6,159	2360:50:42	337:05:47	1,432	76.7%	0:41:21				
San Gorgonio Mem Hospital	2,939	848:11:48	92:21:11	385	86.9%	0:33:31				
Temecula Valley Hospital	2,646	918:06:52	134:20:20	491	81.4%	0:40:01				
Totals	63,044	24711:32:48	5909:38:43	14,886	76.4%	0:46:20				

^{*}APOT-1 is the offload time represented at the 90th percentile. See page 5 of this report for complete definitions.

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 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