



Ambulance Patient Offload Time April 2018

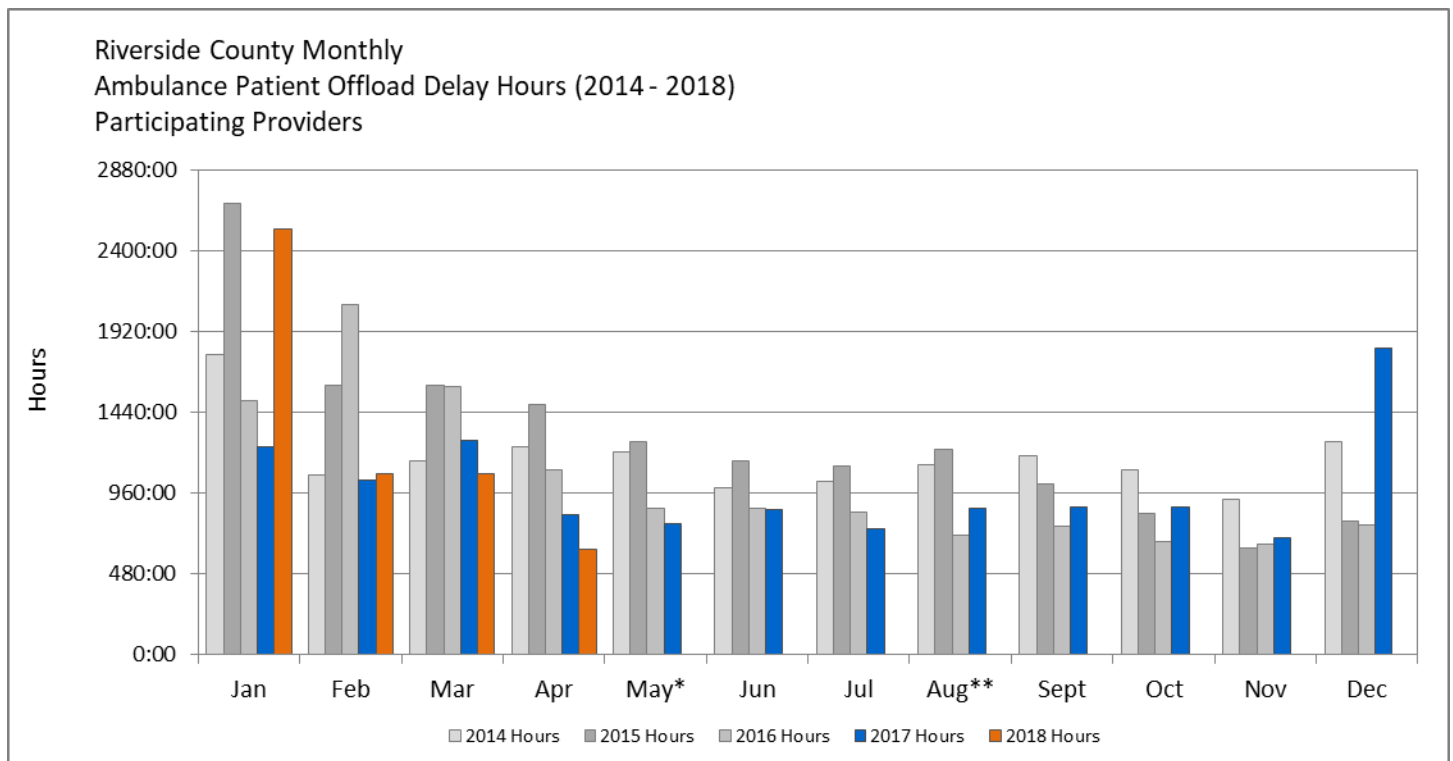
*Monthly
Report*

RIVERSIDE COUNTY AMBULANCE PATIENT OFFLOAD TIME

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

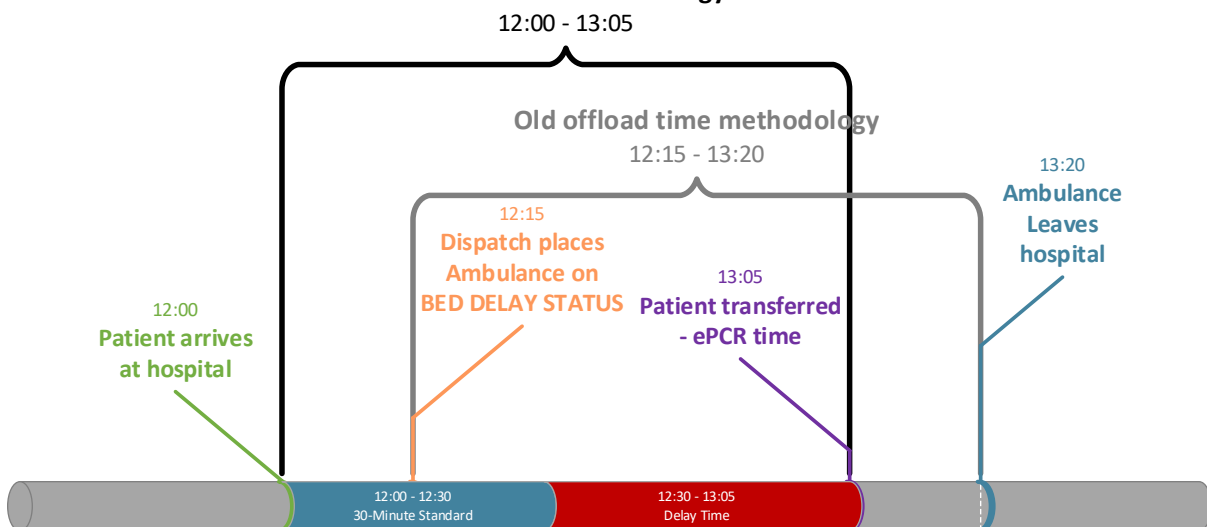
This chart represents the difference in the old vs. current by displaying the former time measurement/methodology in grayscale. The difference in methodology is illustrated in the timeline below.



*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.

Offload time methodology



AMBULANCE PATIENT OFFLOAD TIME BY HOSPITAL

April 2018 APOT by Hospital						
Hospital	Total ALS Transports	APOT	APOD Hours	APODs	APOD Compliance	APOT-1*
Corona Regional Med Ctr	646	277:58:59	65:31:03	171	73.5%	0:51:27
Desert Regional Med Ctr	1,027	259:01:56	22:27:03	80	92.2%	0:27:20
Eisenhower Health	1,138	209:50:50	4:11:18	22	98.1%	0:20:00
Hemet Valley Hospital	1,217	568:02:15	119:08:17	470	61.4%	0:50:15
Inland Valley Med Ctr	799	233:20:27	26:31:07	103	87.1%	0:33:23
JFK Hospital	587	87:50:54	0:57:40	8	98.6%	0:16:53
Kaiser Hospital Riverside	491	166:20:56	19:15:08	82	83.3%	0:35:50
Loma Linda Univ Med Ctr Mur	548	228:20:40	47:25:55	155	71.7%	0:50:10
Menifee Med Ctr	281	86:36:47	12:31:40	42	85.1%	0:36:11
Moreno Valley Hospital	289	88:07:44	9:39:51	44	84.8%	0:33:42
Parkview Community Hospital	435	160:26:58	23:31:25	97	77.7%	0:39:01
Rancho Springs Med Ctr	405	105:33:20	6:44:26	32	92.1%	0:28:31
Riverside Community Hospital	1,441	763:33:59	200:29:32	643	55.4%	0:58:06
Riverside University Health System	1,209	434:18:24	49:53:14	235	80.6%	0:39:47
San Geronio Mem Hospital	528	130:39:42	7:51:22	51	90.3%	0:30:00
Temecula Valley Hospital	431	134:40:42	10:51:09	62	85.6%	0:33:51
Totals	11,472	3934:44:33	627:00:10	2,297	80.0%	0:40:05

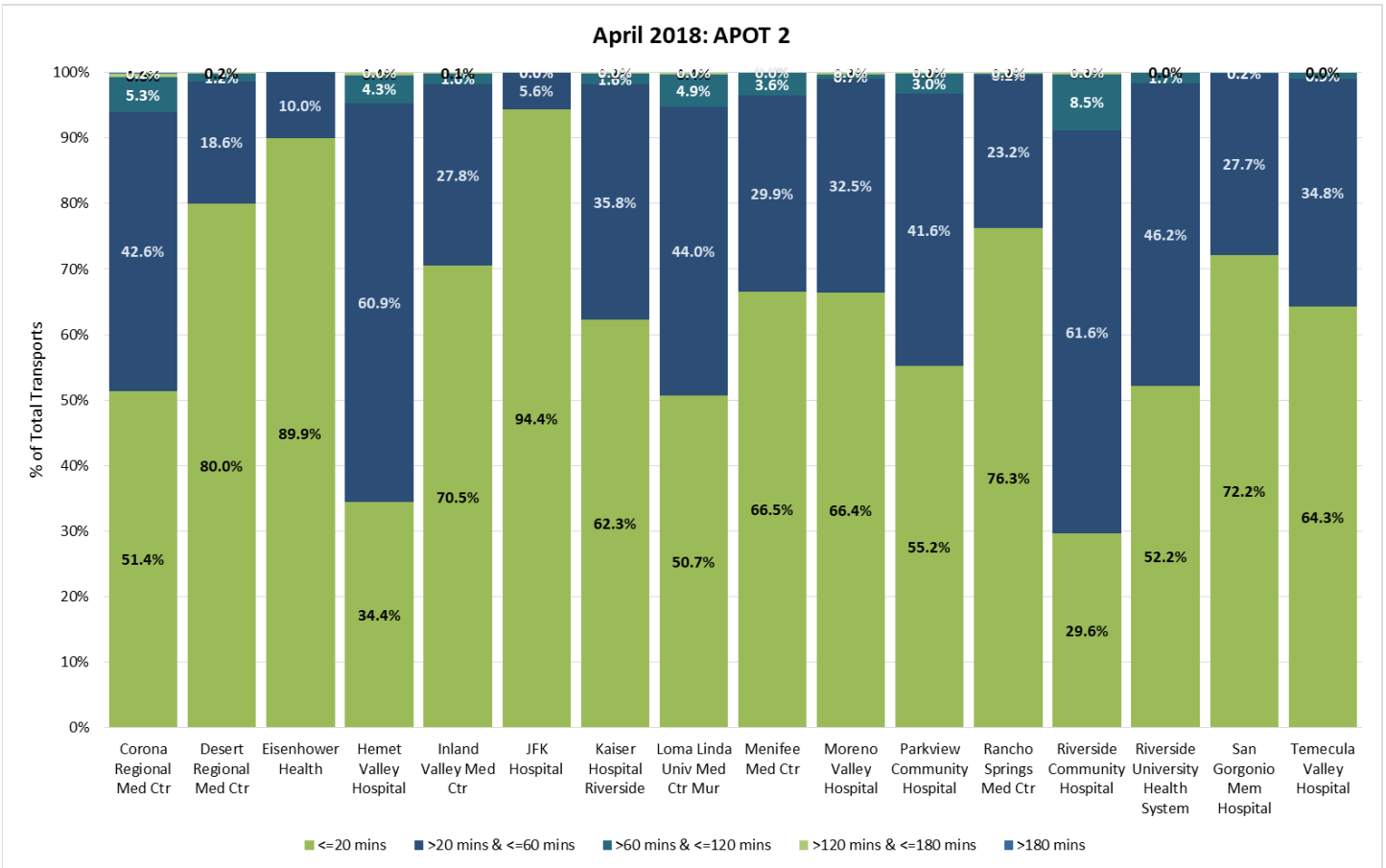
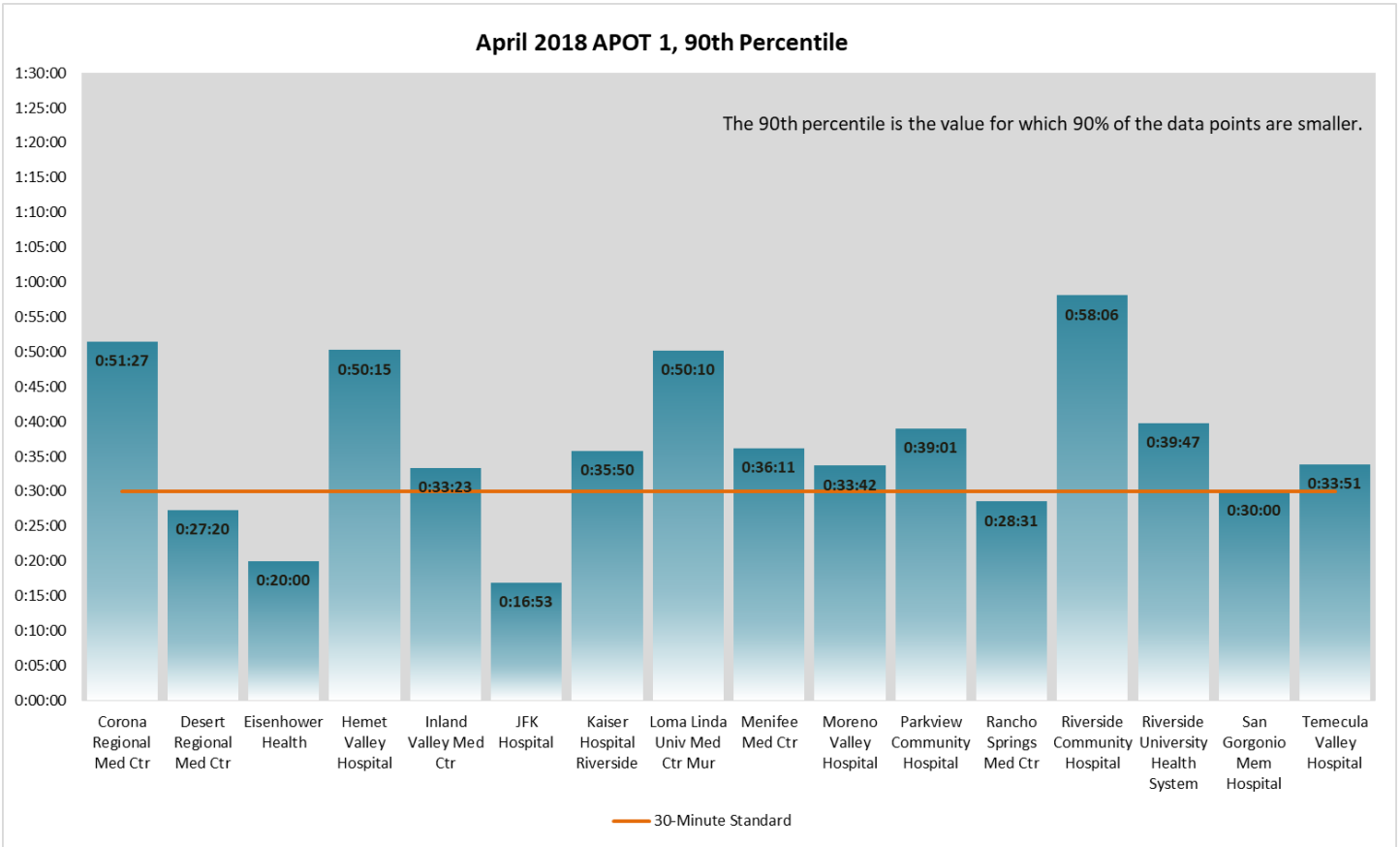
APOD hours do not include the first 30 minutes of each offload delay occurrence.

2018 Year-to-Date						
Hospital	Total ALS Transports	APOT	APOD Hours	APODs	APOD Compliance	APOT-1*
Corona Regional Med Ctr	2,847	1688:14:21	670:31:21	1,068	62.5%	1:15:00
Desert Regional Med Ctr	4,500	1241:05:23	163:09:23	458	89.8%	0:30:16
Eisenhower Health	5,368	1012:18:40	20:20:22	118	97.8%	0:19:58
Hemet Valley Hospital	5,300	2878:21:19	863:30:44	2,405	54.6%	0:59:57
Inland Valley Med Ctr	3,511	1262:32:36	259:58:29	731	79.2%	0:45:18
JFK Hospital	2,366	362:22:43	8:31:35	42	98.2%	0:18:09
Kaiser Hospital Riverside	2,170	842:29:03	177:07:41	464	78.6%	0:43:29
Loma Linda Univ Med Ctr Mur	2,426	1400:31:19	567:19:40	864	64.4%	1:13:47
Menifee Med Ctr	1,336	586:28:07	192:09:19	327	75.5%	0:54:20
Moreno Valley Hospital	1,349	590:30:09	170:33:02	360	73.3%	0:53:12
Parkview Community Hospital	1,961	1086:15:59	412:25:42	670	65.8%	1:06:54
Rancho Springs Med Ctr	1,842	608:34:10	119:27:49	258	86.0%	0:35:56
Riverside Community Hospital	6,170	3609:19:45	1179:19:03	2,860	53.6%	1:05:00
Riverside University Health System	4,999	1965:24:17	300:11:47	1,218	75.6%	0:42:48
San Geronio Mem Hospital	2,352	691:30:41	80:06:54	323	86.3%	0:34:00
Temecula Valley Hospital	2,109	755:27:07	120:27:06	432	79.5%	0:41:52
Totals	50,606	20581:25:39	5305:09:57	12,598	75.1%	0:48:44

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

Key: High Low/Best

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.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>