

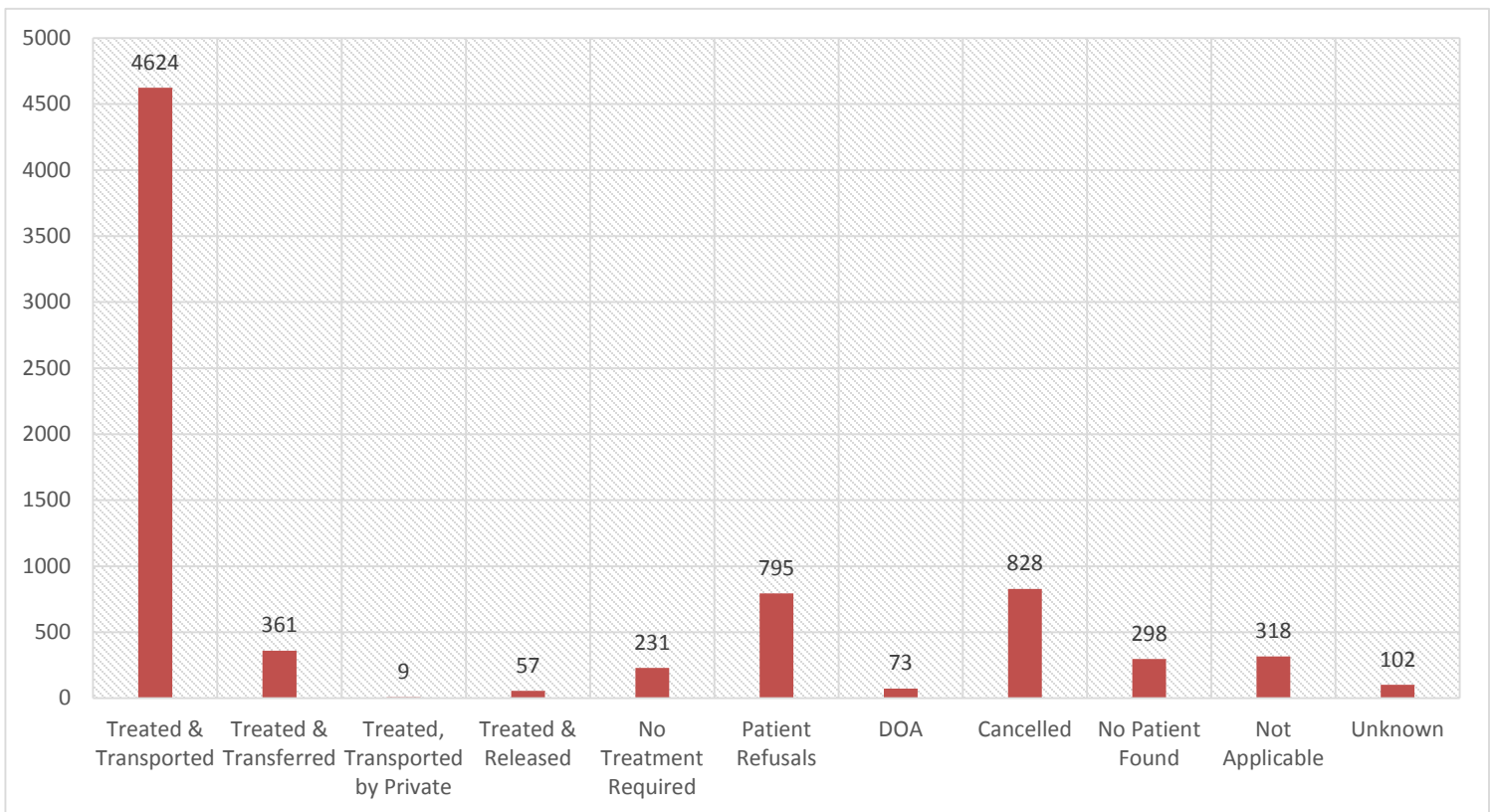


REMS Council Quality Improvement Committee

Incident Disposition Summary

FY2015 Quarter 4 (April - June, 2015)

1. Total number of reports filed (as reported)ⁱ: 8325
2. Total number of reports reviewed (as reported): 3219
3. Level of Careⁱⁱ:
 - a. ALS: 2606
 - b. BLS: 2918
 - c. N/A: 2075



4. Incident Disposition:

- | | |
|------------------------------------|--------------------------|
| a. Treated & Transported: 4624 | g. Dead on Scene: 73 |
| b. Treated & Transferred: 361 | h. Cancelled: 828 |
| c. Treated, Transported Private: 9 | i. No Patient Found: 298 |
| d. Treated & Released: 57 | j. Not Applicable: 318 |
| e. No Treatment Required: 231 | k. Unknown: 102 |
| f. Patient Refusal: 795 | |

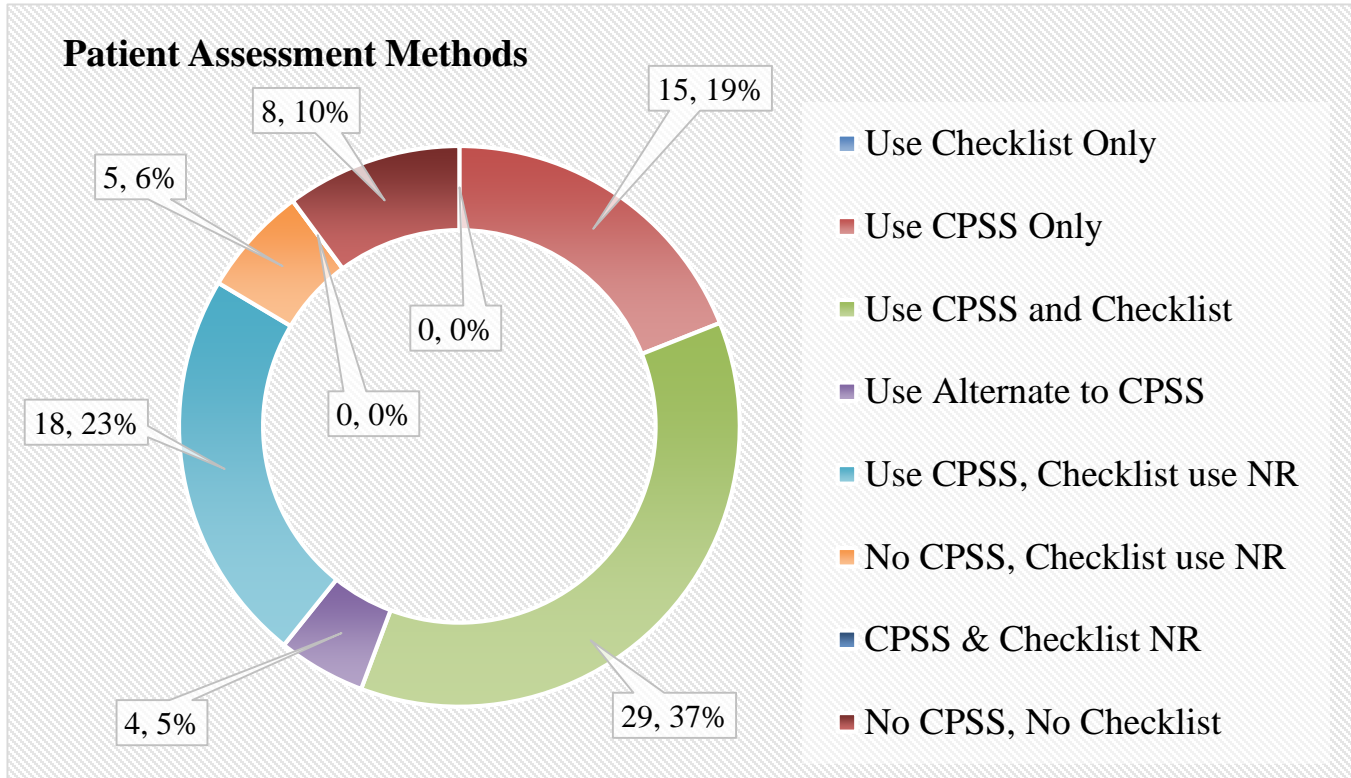
ⁱ This, of course, does not include non-compliant agencies and agencies which failed to complete this section of the data form.

ⁱⁱ As usual, these numbers do not all add up nicely. I believe that better instructions need to be issued regarding the completion of the data sheet until such a time that all of this information may be pulled from VPHIB.



REMS Council Quality Improvement Committee
 Medical Indicator Summary and Report
 FY2015 Quarter 4 (April – June, 2015)

AMS / Stroke Assessment & CPSS Use Survey: Assessment



Stroke Call / Patient Assessment Breakdown

- | | |
|---|----|
| 1. Total Stroke Calls: | 79 |
| 2. Total Uses of CPSS: | 62 |
| 3. Total Uses of Checklist: | 29 |
| 4. Total Uses of Alternate Measurement: | 4 |

The “Alternate Measurements” were the Face Arms Speech Time (FAST) assessment and the Chinese Ischemic Stroke Subclassification (CISS).



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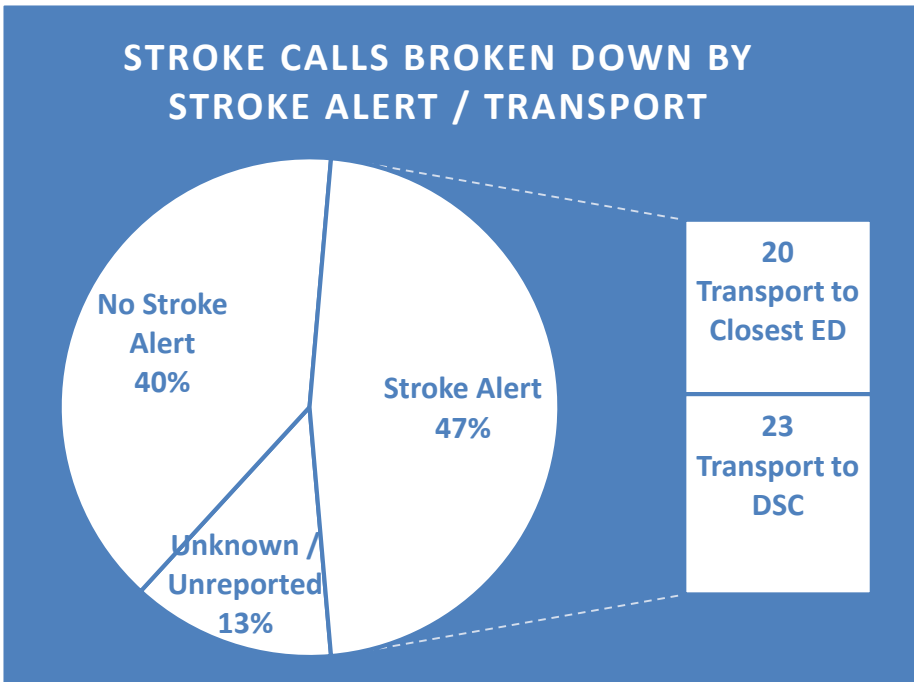
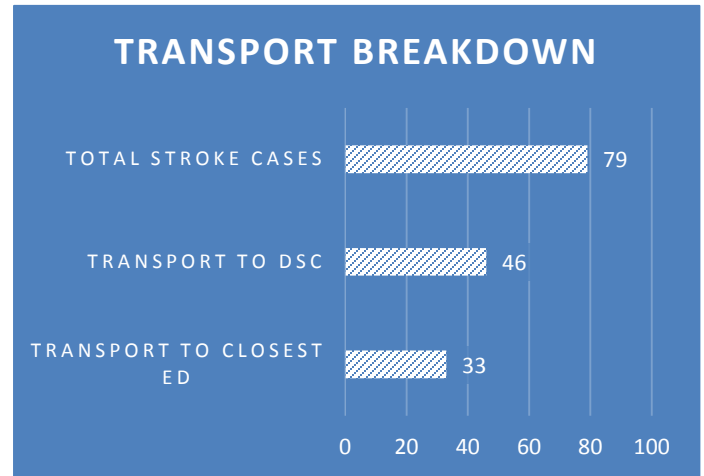
Medical Indicator Summary and Report

FY2015 Quarter 4 (April – June, 2015)

AMS / Stroke Assessment & CPSS Use Survey: *Transport*

1. Total Reported Stroke Cases 79
2. Destination Totals:
 - Closest Emergency Room 33 - 42%
 - Designated Stroke Center 46 - 58%

Many agencies listed the actual hospital the patient was transported to, rather than specifying DSC or closest ED. I made the distinction when entering the data into the spreadsheet. Others said that the patient was transported to the hospital of the family or patient's choosing.



	Total
Stroke Cases	79
Stroke Alerts	43
Alerts to Designated SC	23
Alerts to Closest ED	20

It is notable that for the section inquiring whether or not a Stroke Alert was identified, some agencies responded that, as prehospital providers, they are unable to diagnose, call codes, or alerts. Because I feel this response was due to misunderstanding the instructions, I counted those "no" responses as "unknown/unreported."

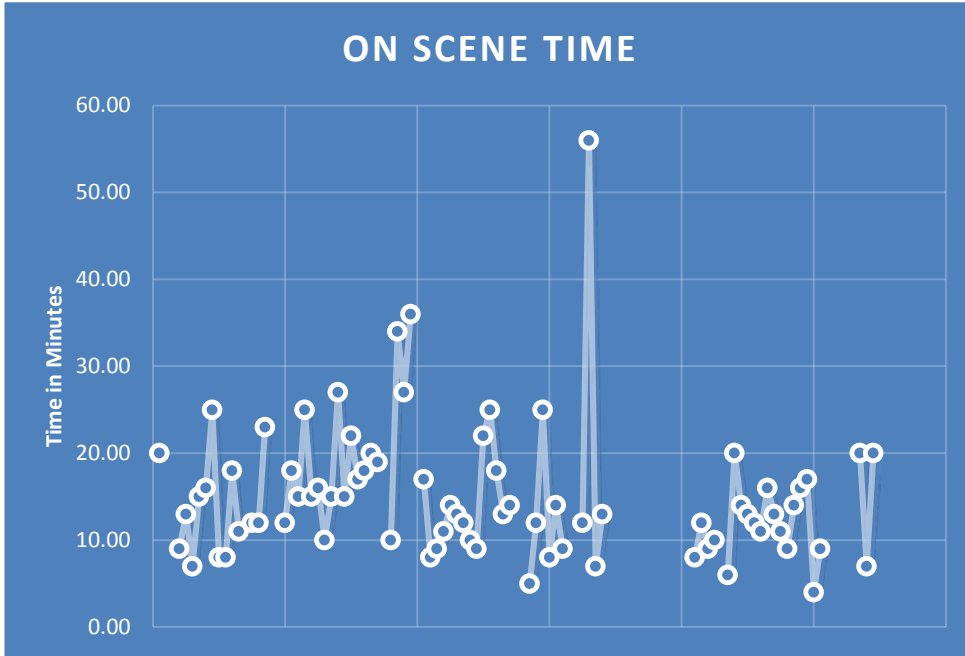


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Medical Indicator Summary and Report

FY2015 Quarter 4 (April – June, 2015)

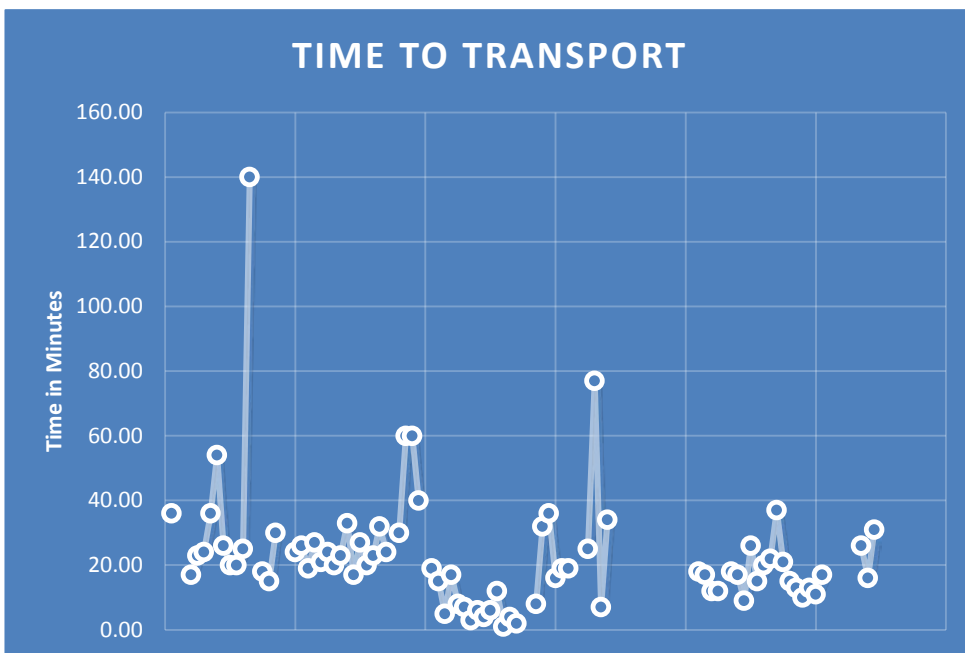
AMS / Stroke Assessment & CPSS Use Survey: Time



On-Scene Time (in minutes)

Average	15.13
Mode	12.00
Median	13.00

The average on-scene time is slightly inflated by three events: one case with 20 minutes on scene due to delayed entry; one with 20 minutes on scene due to an initially negative CPSS result; and one with 56 minutes due to medic unit becoming stuck, requiring another to be sent.



Time to Transport (mins)

Average	22.94
Mode	17.00
Median	20.00

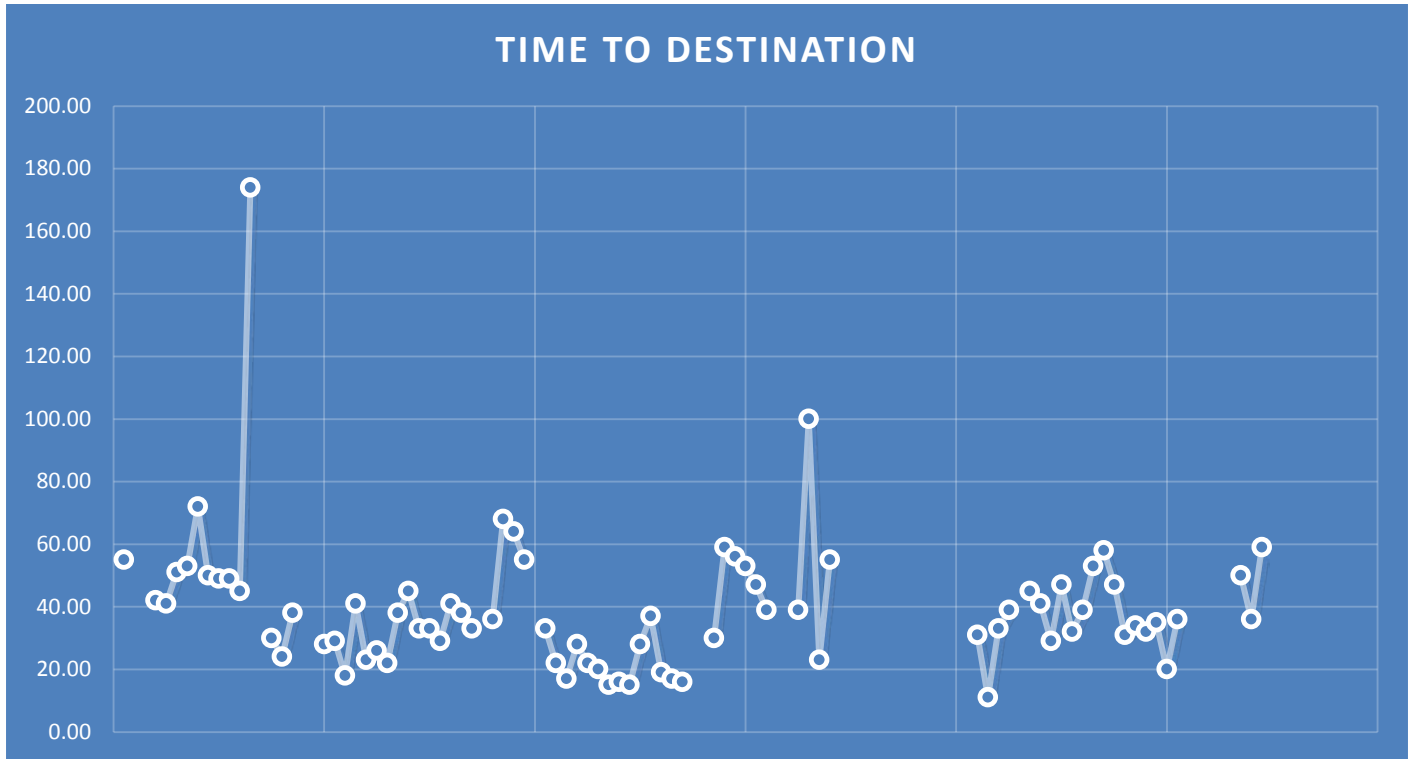


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Medical Indicator Summary and Report

FY2015 Quarter 4 (April – June, 2015)

AMS / Stroke Assessment & CPSS Use Survey: *Time*



Time to Destination

Average	39.46
Mode	33
Median	36.00

The average time to destination is inflated by some 40+ minute times due to transport from rural areas as well as the exceptions listed in the section regarding on-scene time. No agency reported a patient transfer.

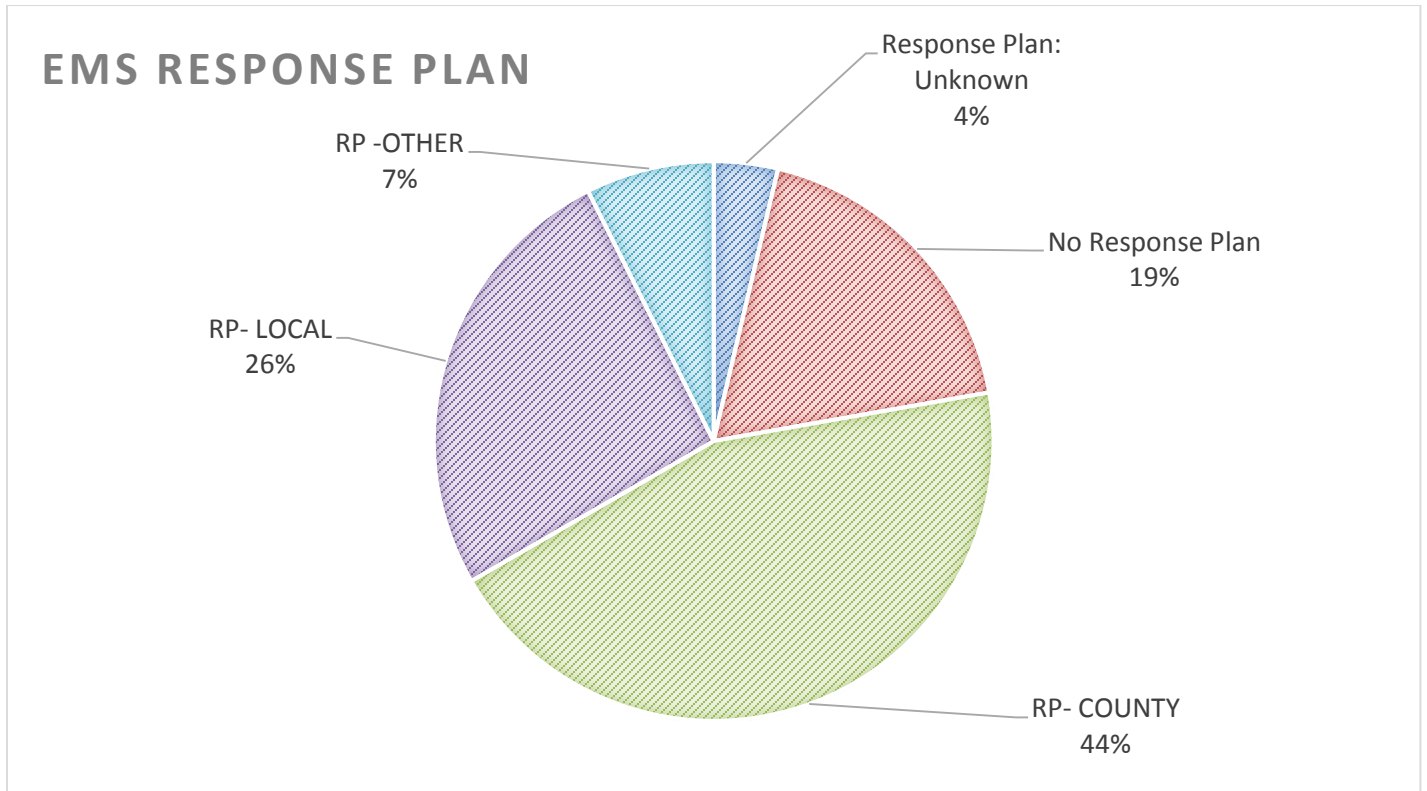


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System Indicator Summary and Report

FY2015 Quarter 4 (April – June, 2015)

EMS Response Plan / Responding Time Standard Survey



EMS Response Plan:

Total Respondants	27
No Response Plan	5
County/City Response Plan	12
Local Response Plan	7
“Other” Response Plan	2
Response Plan “Unknown”	1

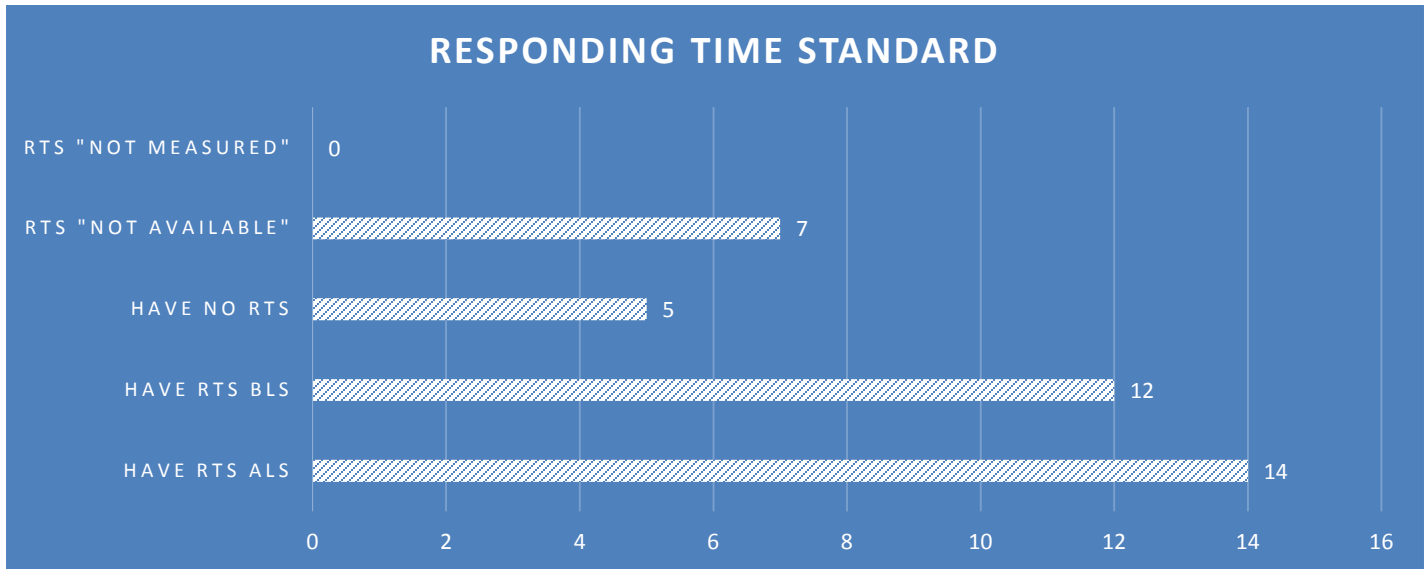


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System Indicator Summary and Report

FY2015 Quarter 4 (April – June, 2015)

Responding Time Standard

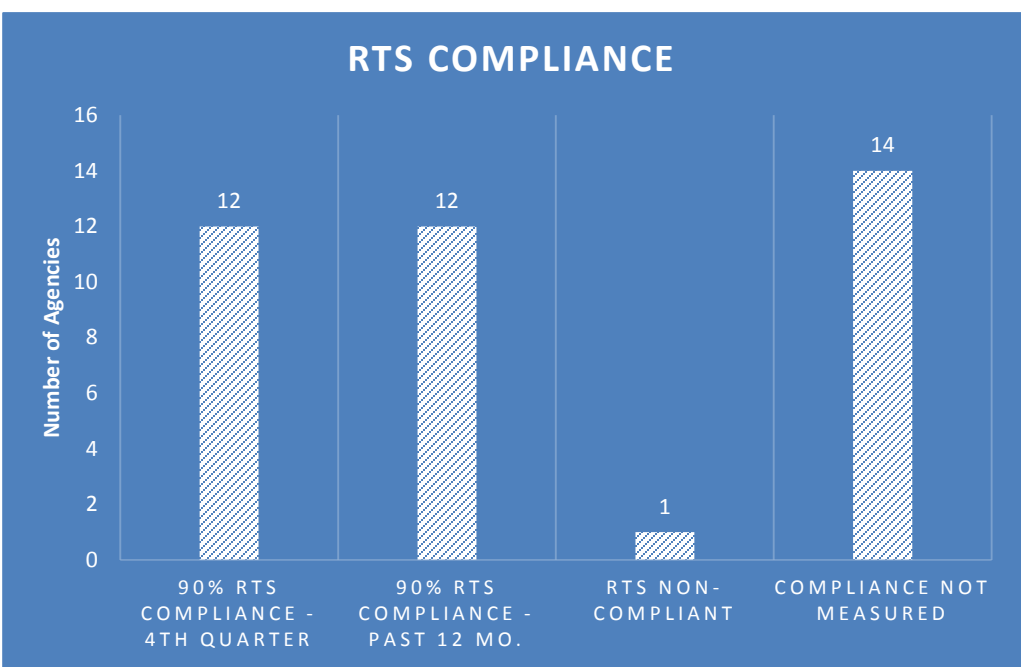


Total Agency Response:	27
Total Agencies with RTS:	14
Total Agencies with Different ALS & BLS RTS:	5
Total Agencies Listing RTS NA:	7
Total Agencies Without RTS:	5
Total Listed "Unknown":	1

A number of agencies listed their Responding Time Standard as "Not Available." This may be due to staff error—there was space to specify an RTS on the Word format form, but not the PDF. Agencies completing the PDF form were contacted regarding their RTS. That data was included. Agencies that did not specify an RTS, but did specify that they do NOT have a written response

plan were included in the number of agencies without an RTS rather than with the "Not Available" category, even if the agency form said "NA".

While a total of 14 agencies reported a specific responding time standard, only 13 indicated that compliance with the RTS was consistently measured. Overall, a 92% compliance rate was reported, with a total of 5741 calls reviewed.

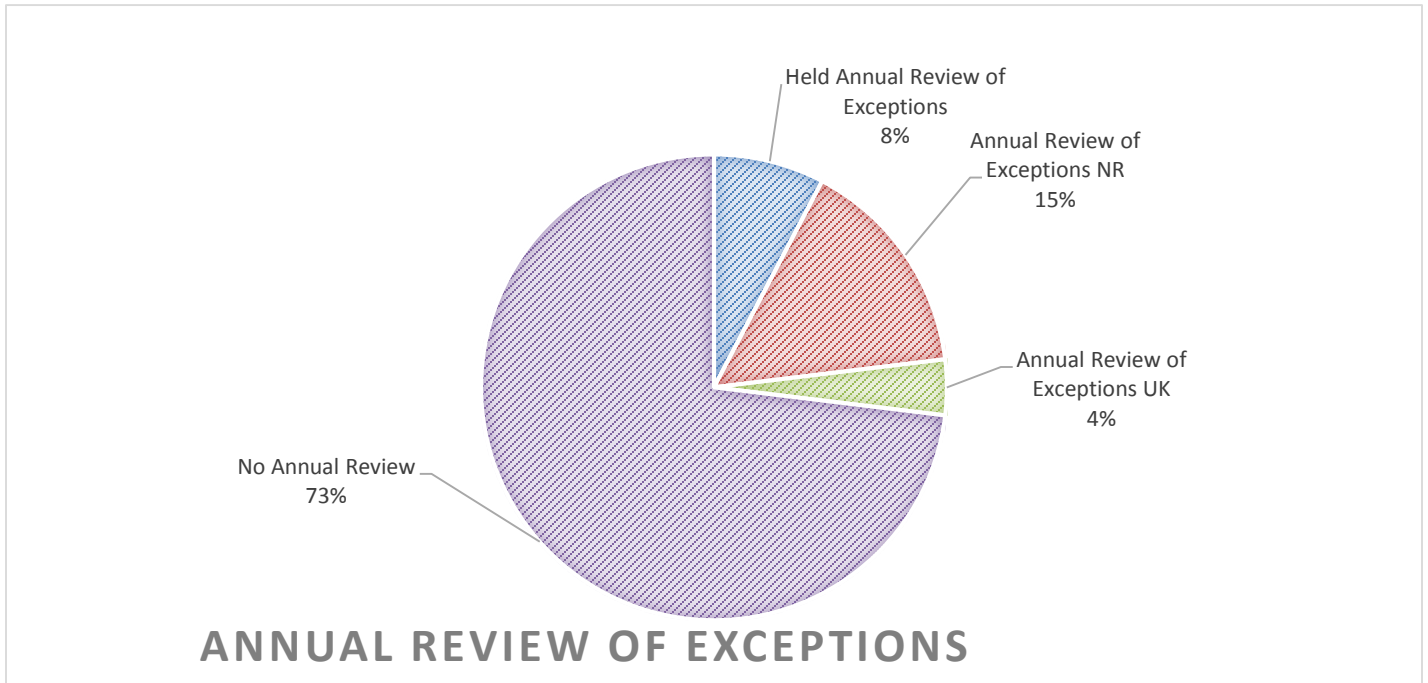




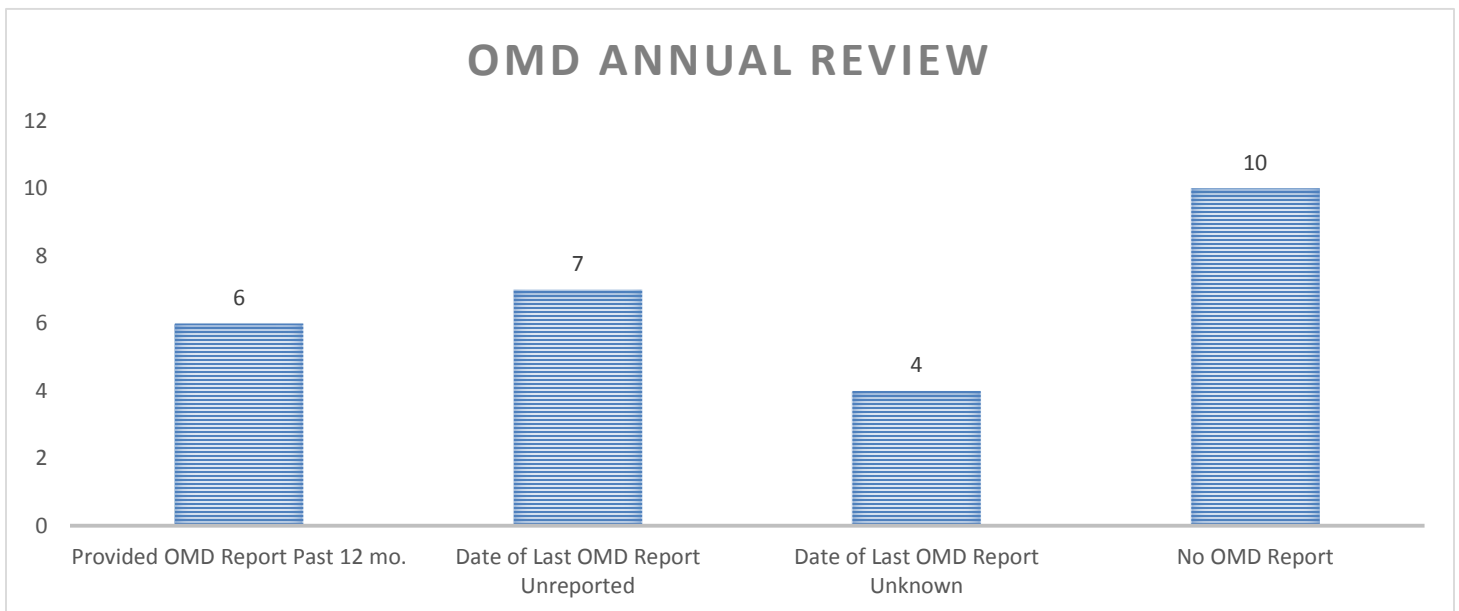
REMS Council Quality Improvement Committee

System Indicator Summary and Report

FY2015 Quarter 4 (April – June, 2015)



Agencies measuring compliance:	13
Agencies measuring compliance, but not performing annual review of exceptions:	10
Agencies that have provided their OMD with an annual review in the last 12 mo	6
Agencies that report the date of last review is “unknown” or date is unreported	11



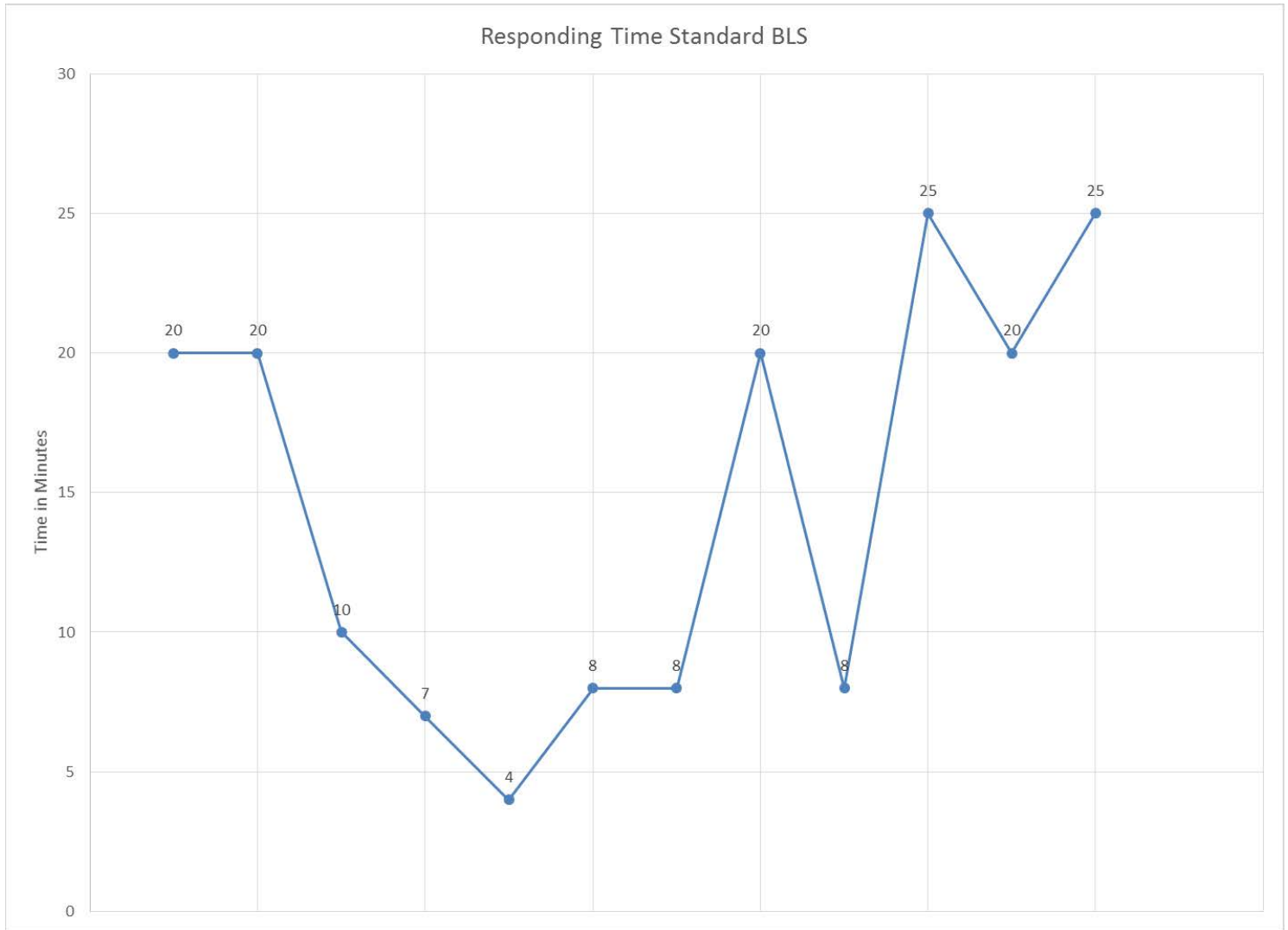
Some agencies indicated that their annual inspection served as an annual OMD report, so these numbers do not necessarily indicate a review of exceptions was provided. Agencies that did not specify a date, but did not indicate “unknown” or “no” were included as “unreported.”



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System Indicator Summary and Report

FY2015 Quarter 4 (April – June, 2015)



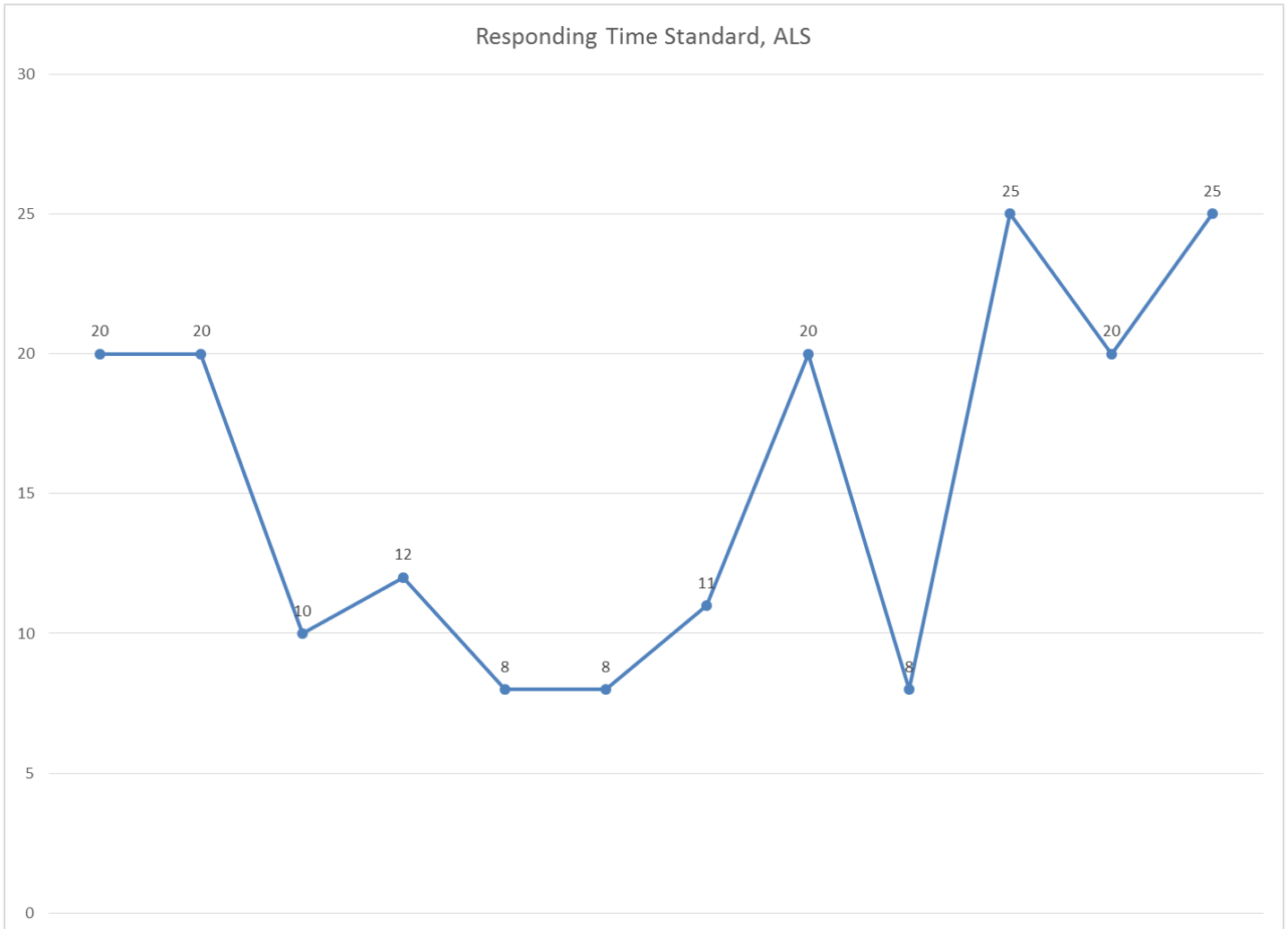
Three agencies reported different responding times for ALS than BLS. Those agencies provide more time for ALS response. Variances in RTS are typically due to geographical location of agencies: those in rural areas provide for longer responding times.



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System Indicator Summary and Report

FY2015 Quarter 4 (April – June, 2015)





REMS Council Quality Improvement Committee

Trauma Indicator Data Analysis

FY2015 Quarter 4

(April - June, 2015)

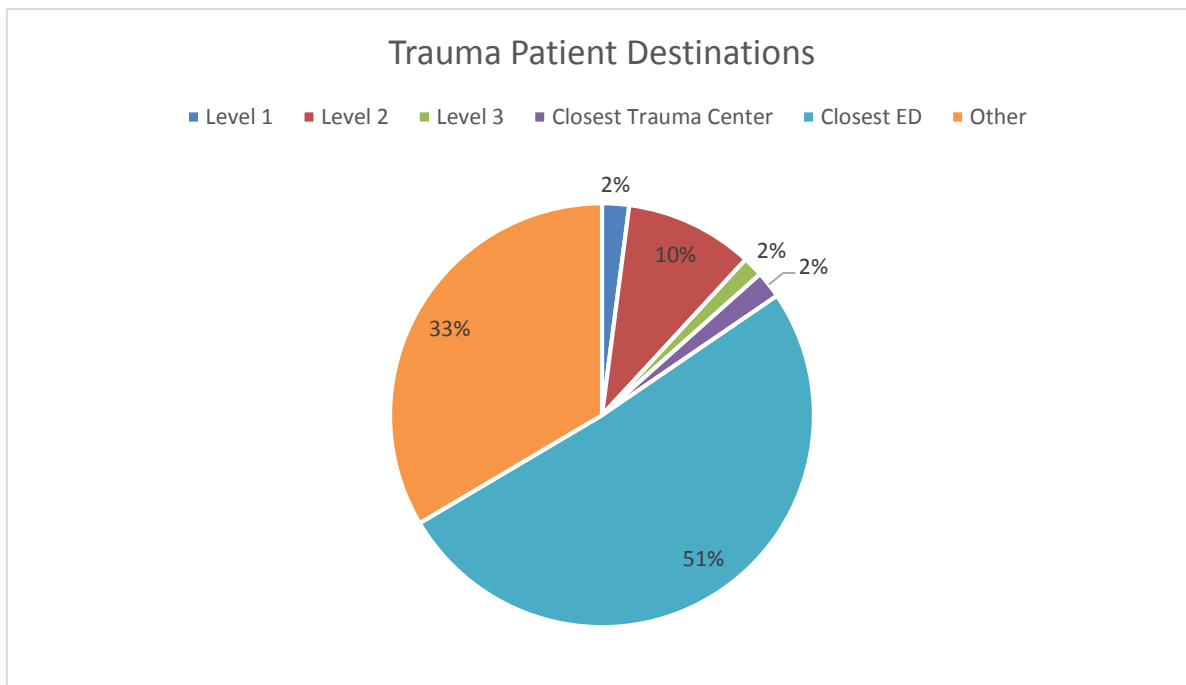
Trauma Triage Protocols and Trauma Activation Assessments

This quarter's indicator concerned the utilization of the Trauma Triage Plan and Protocols as they relate to Trauma Activation Assessments. After assessing the reports, it is evident that many QA representatives were confused by this survey, but did not contact the council with questions. Due to time limitations, clarifications on this volume of information was not possible.

Call-by-call analysis was reviewed in order to ascertain the destination of trauma patients. Data regarding methods of determining patient destination proved difficult to analyze; many agencies did not realize that the survey was intended for instances regarding a trauma activation only, or they did not realize that only one element was to be chosen under "Trauma Activation." Each agency reported a total for the number of trauma calls run. This number will not match the numbers reported for each type of destination, as some agencies listed the number of calls but only analyzed the calls involving a trauma activation.

Total Reported Trauma Calls: 373

Total Trauma Calls with Destination Data: 194



Calls listed as "Other" for destination included agencies who listed in the comments that the hospital was either patient or family choice or the patient was transferred. Only two calls required patient transfer (one air transport, one for a non-transport agency).