

Contra Costa EMS Agency

Continuous Quality Improvement

Core EMS System Measures
Annual EMCC Report

2016

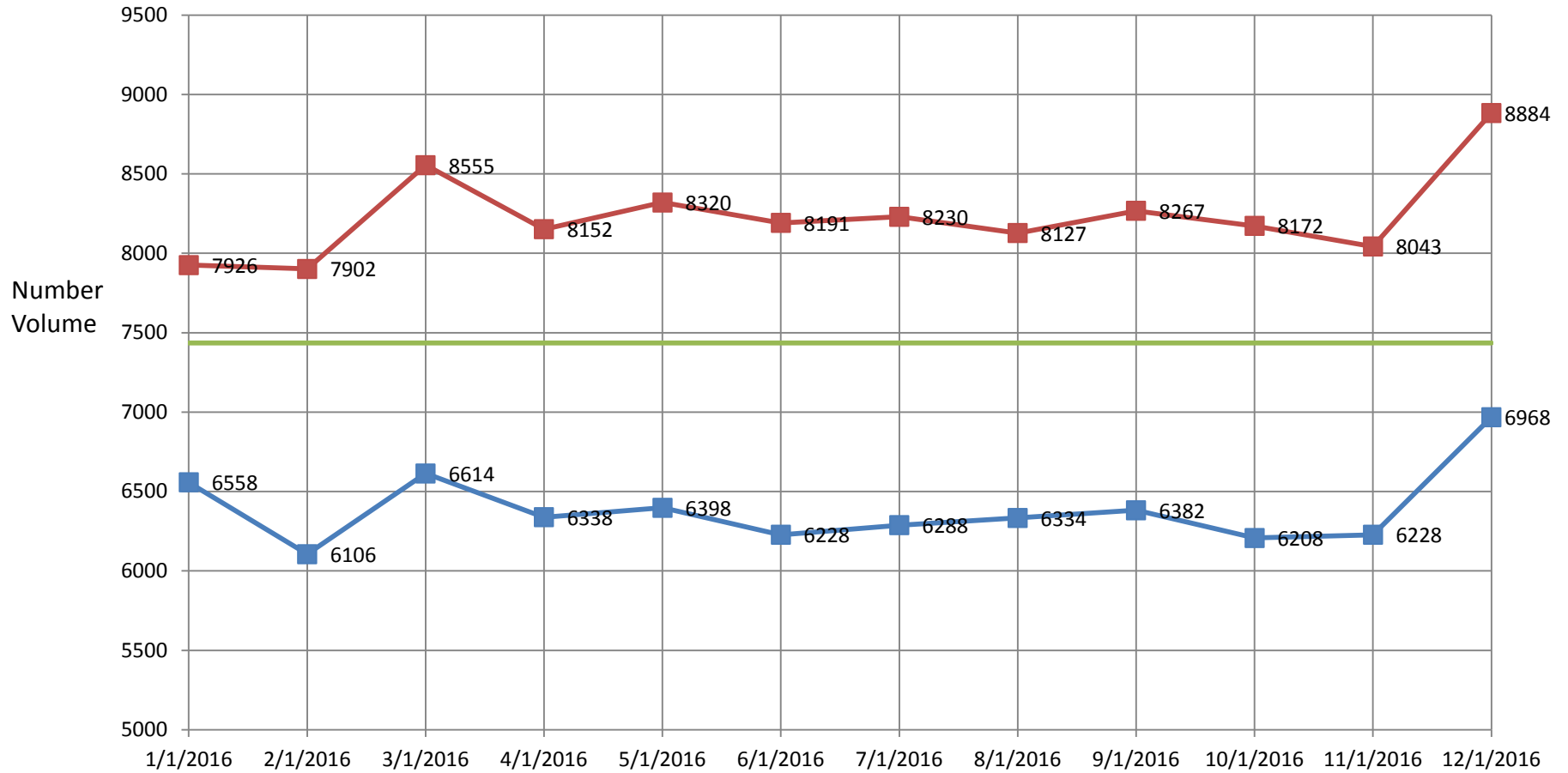
System Utilization 2016

Data Source: First Watch

Contra Costa County 911 Ambulance Response and Transport CQI Annual Report 2016

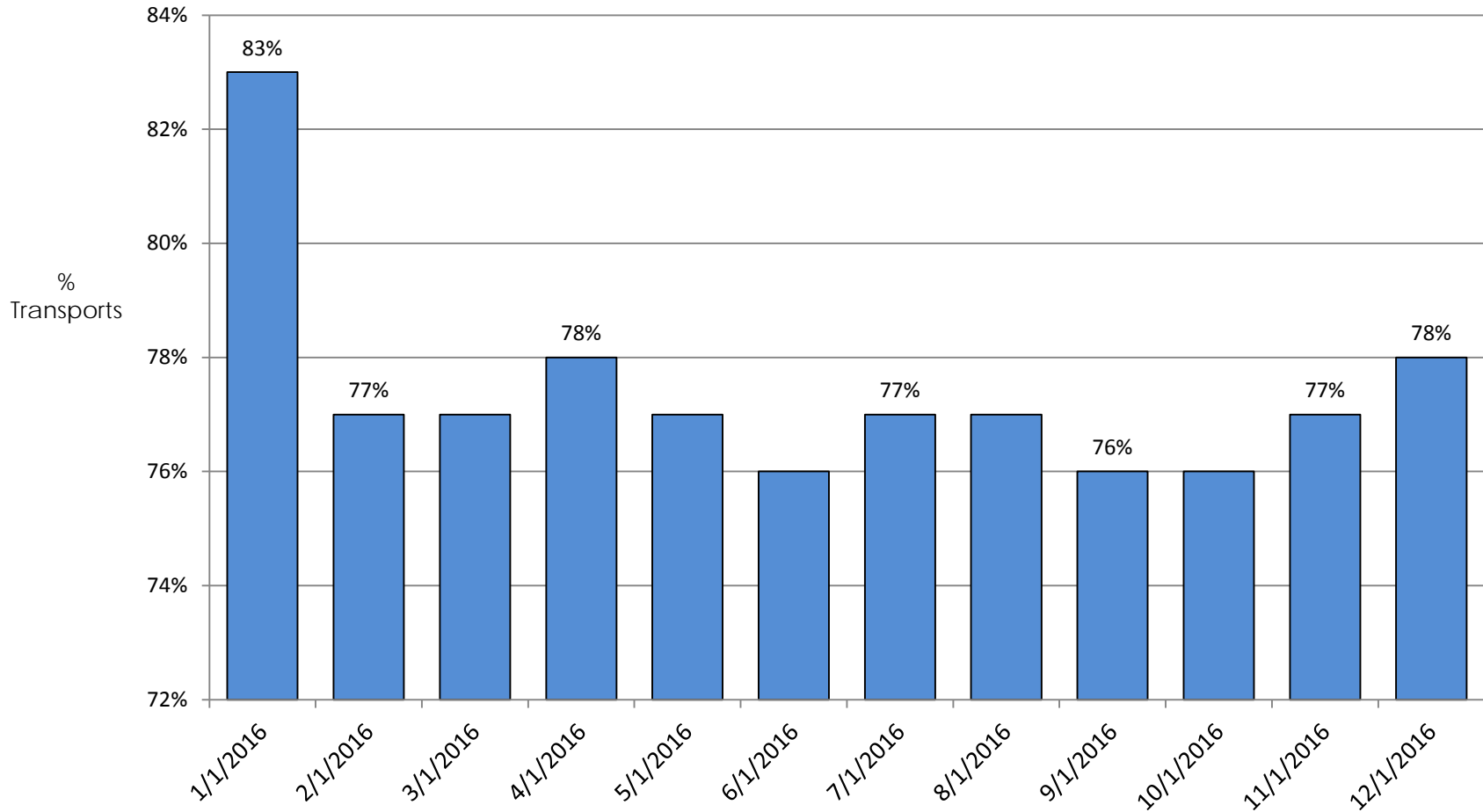
N= 99,769 Responses

N= 76,650 Transports

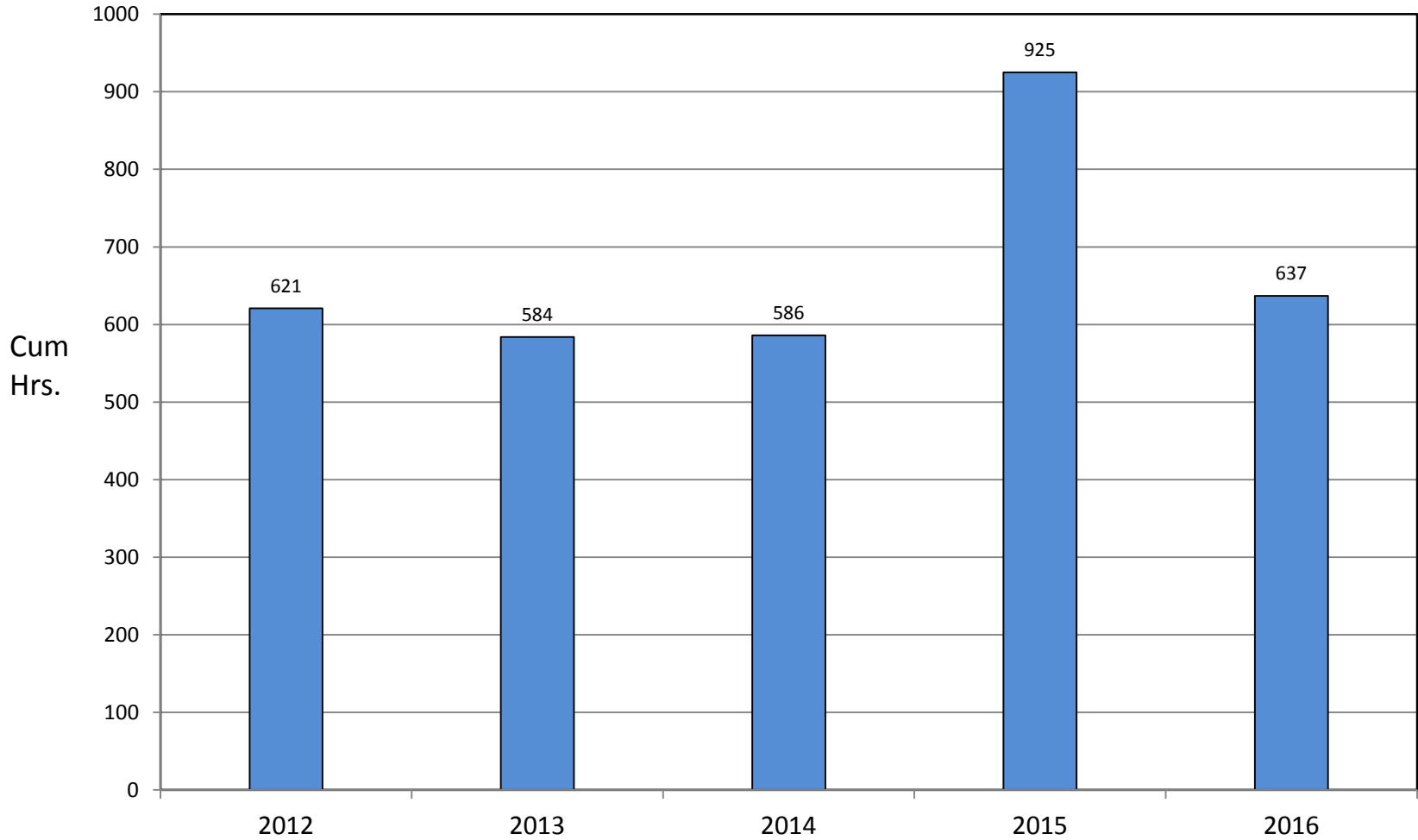


Contra Costa County 911 Ambulance % Transport per Response by Month CQI Annual 2016

N= 96,769 Responses
N= 76,650 Transports
Mean % Transport per Response = 79 %

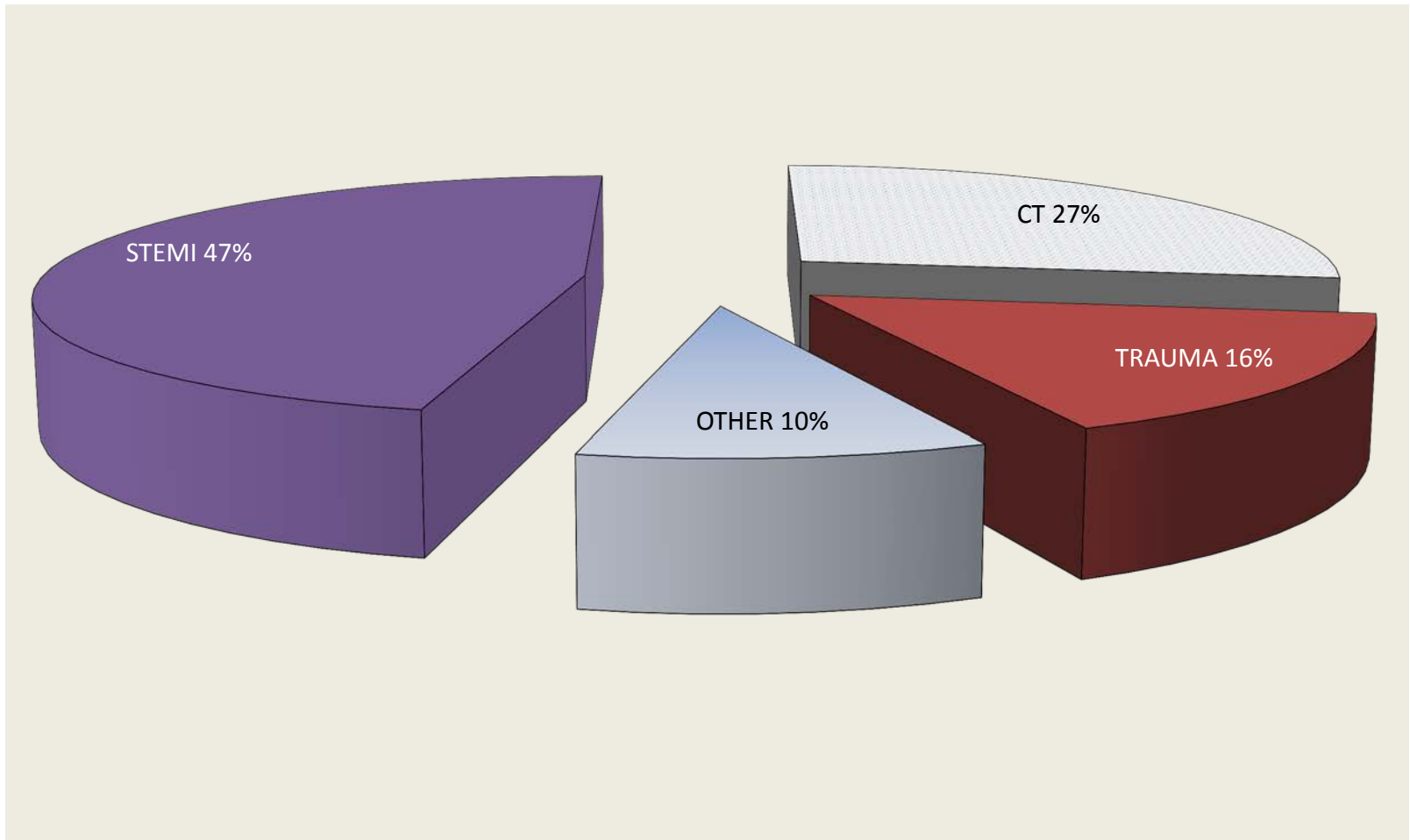


EMS Hospital Ambulance Diversion Cumulative Hours by Year 2012 -2016



Hospital Ambulance Diversions % by Type 2016

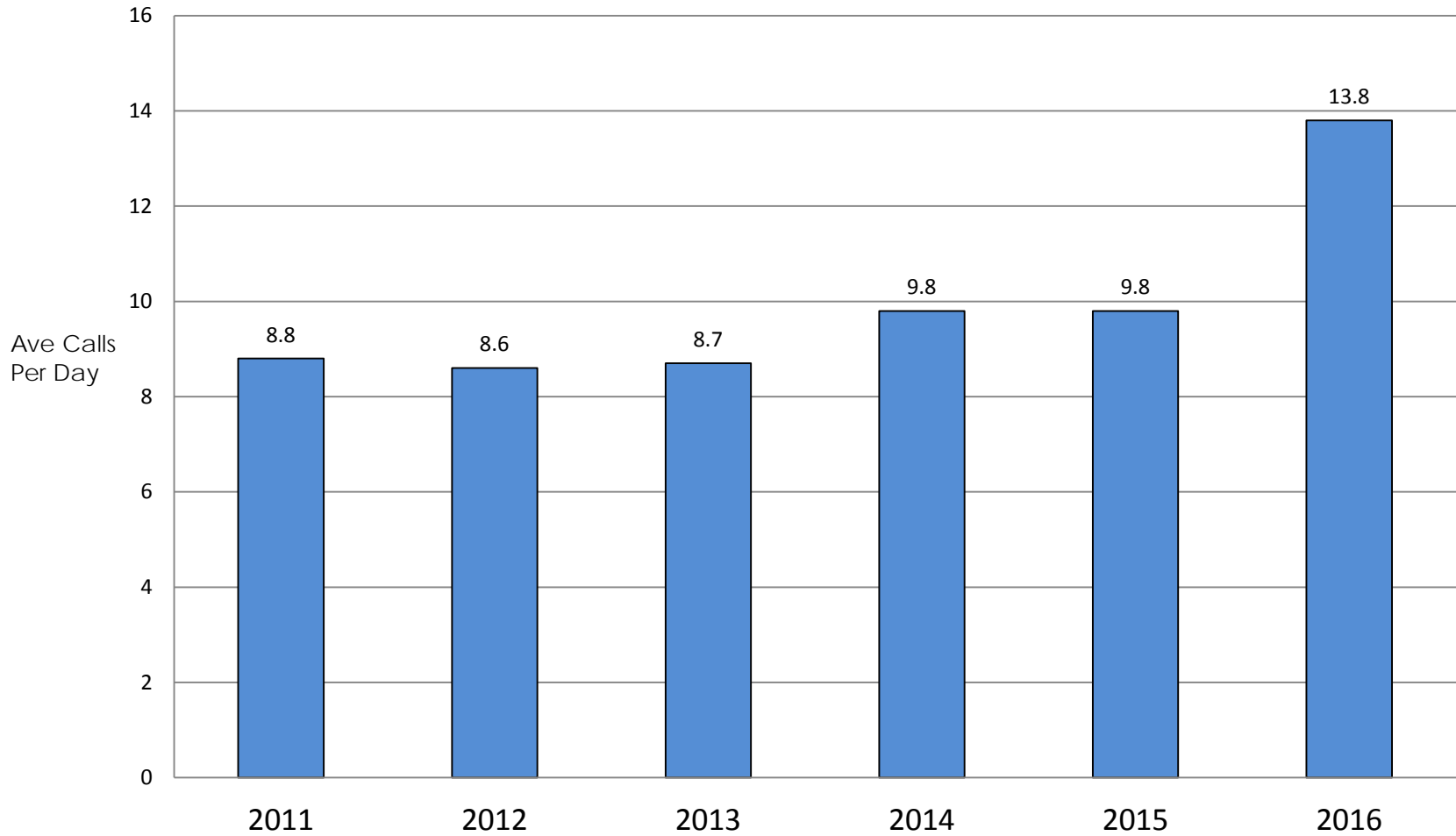
N= 637



Base Hospital
Annual 2016

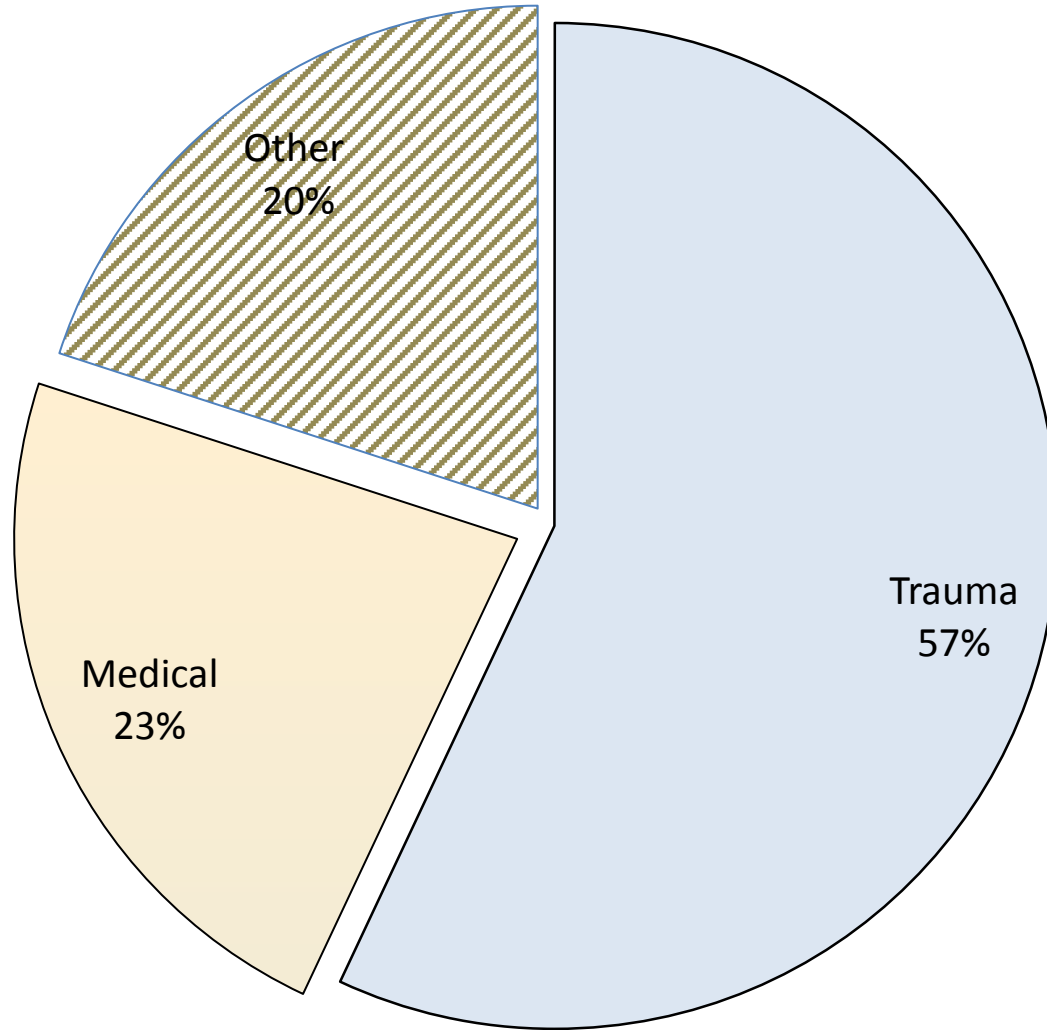
Base Hospital Average Daily Medical Control/Advisory Calls Received By Year 2011-16

N=5058 total 2016



% Base Hospital Medical Control/Advisory Calls Received by Type

N=5058 calls

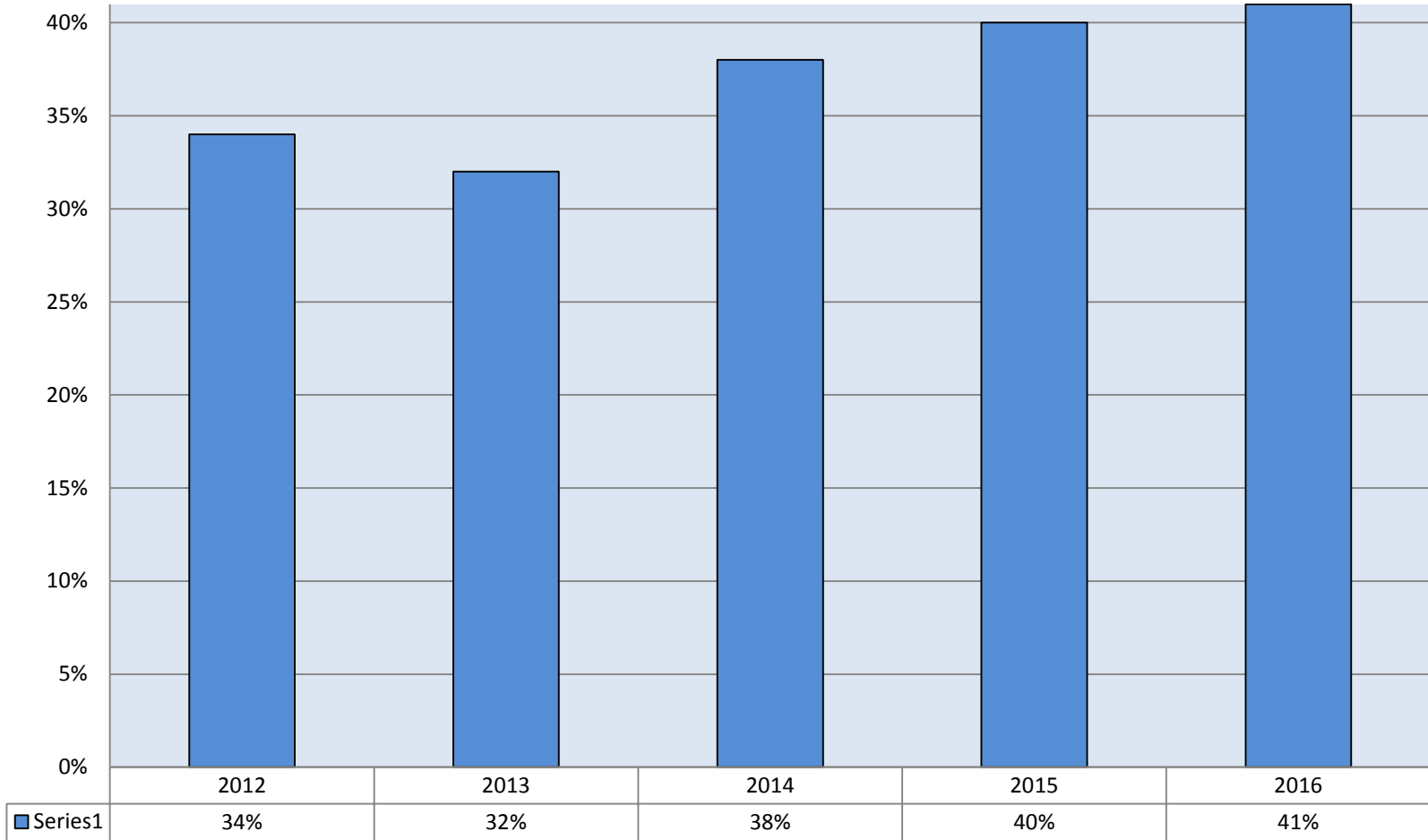


CQI Report
Annual 2016
Systems of Care
Cardiac Arrest

% Bystander CPR by Year 5 year Comparison

N= 668

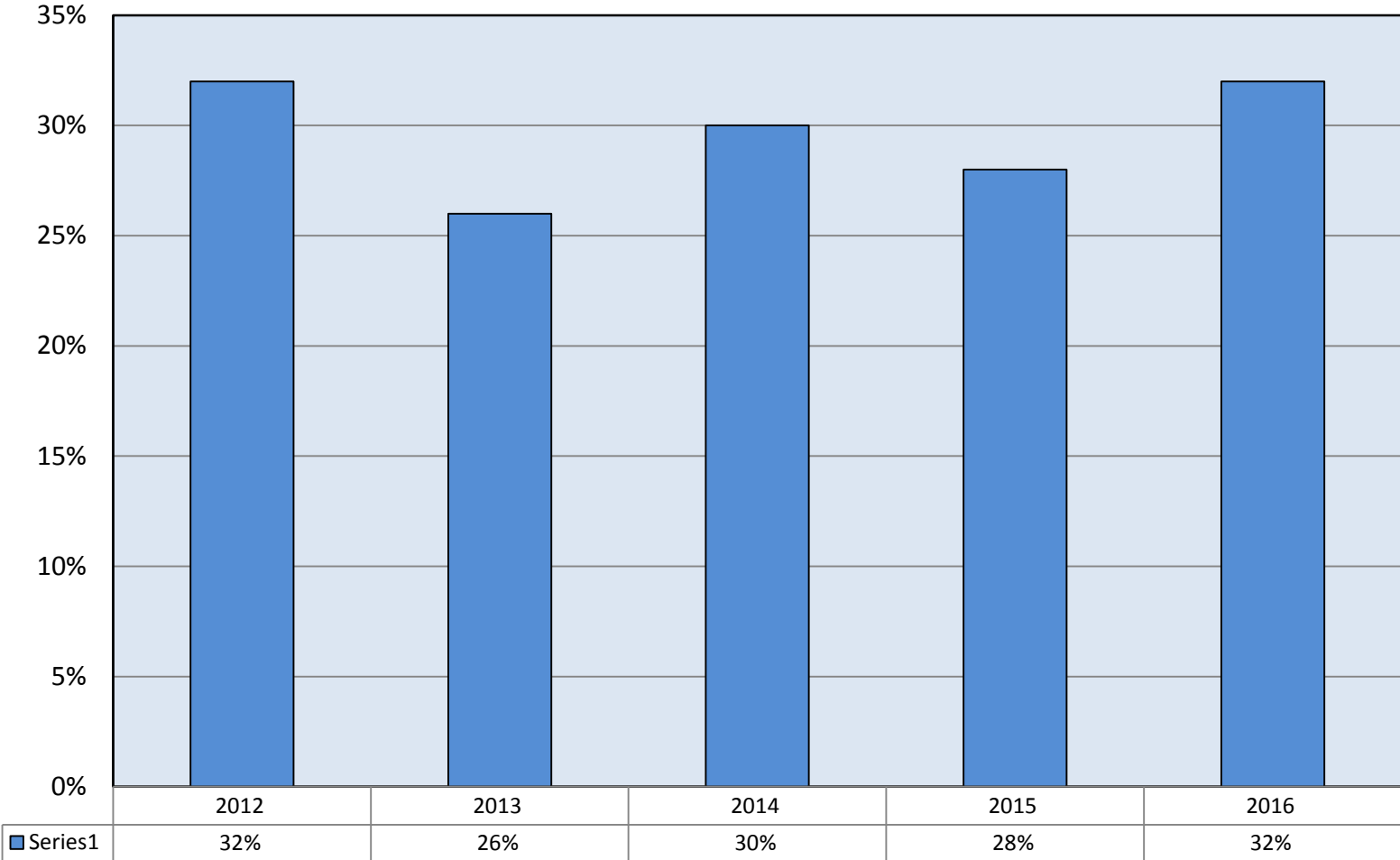
(Inclusion Criteria: all out of hospital cardiac arrest where resuscitation was attempted by 911 responder)All
Cardiac Arrests for 2016)



Cardiac Arrest Survival Utstein Survival by Year

5 Year Comparison
2012-2016

N=7270 (2016 Total Utstein Cases)



CQI Report
Annual 2016

STEMI System

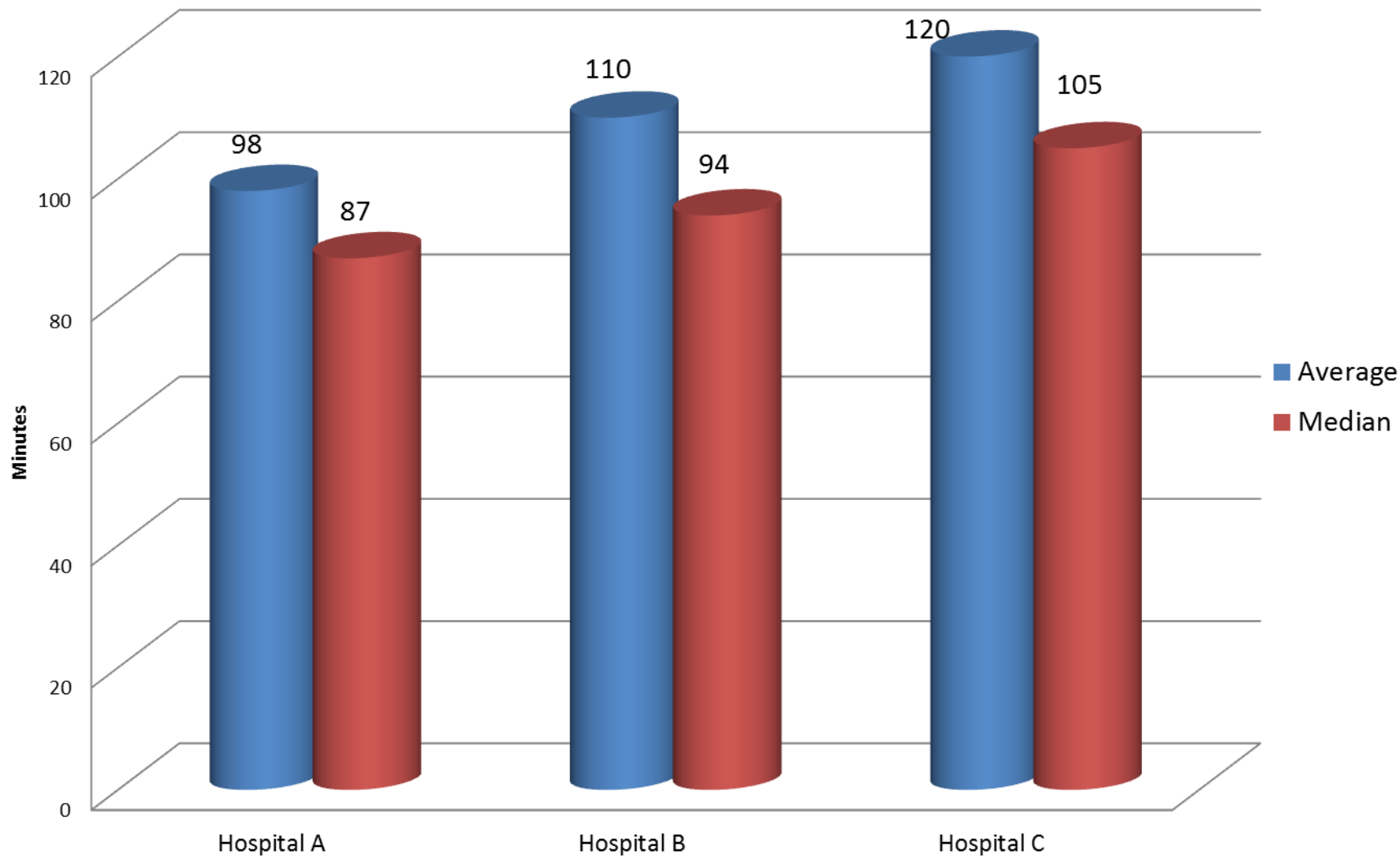
EMS Patient Care Performance				
	2013	2014	2015	2016
Aspirin Administration	90%	90%	94%	88%
12-Lead Acquired on STEMI Patients	98%	99%	99%	98%
Patient Identified as STEMI and Transported to SRC	100%	100%	100%	99%
Average Scene Time in Minutes	11	13	13	13

Average/Median DIDO to Intervention by Referral Center

Source: SRC

Goal: DIDO2I < 120 minutes

N=72

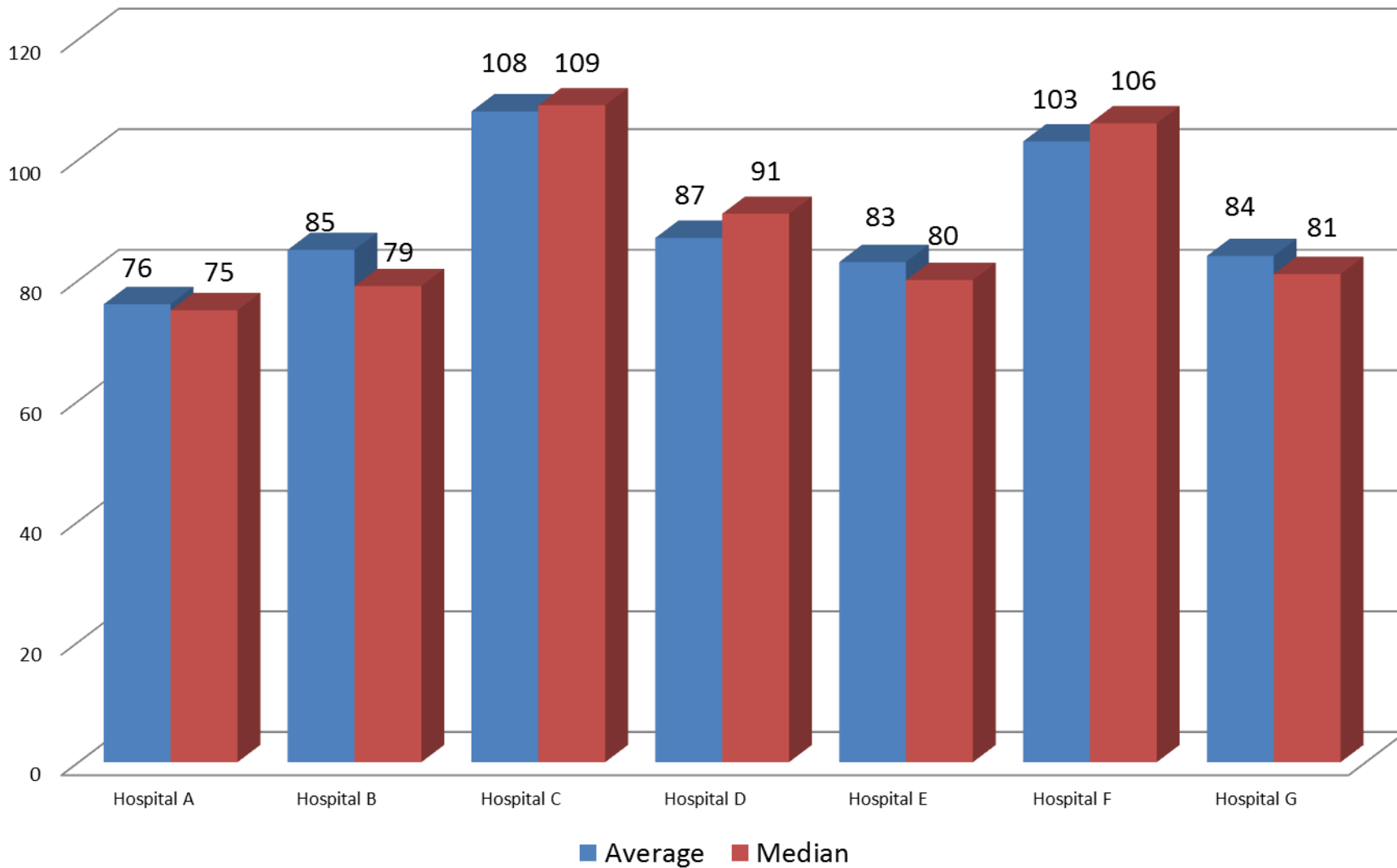


Average/Median FMC to Intervention by STEMI Receiving Center

Source: SRC

Goal: FMC to Intervention < 90 minutes

n=95



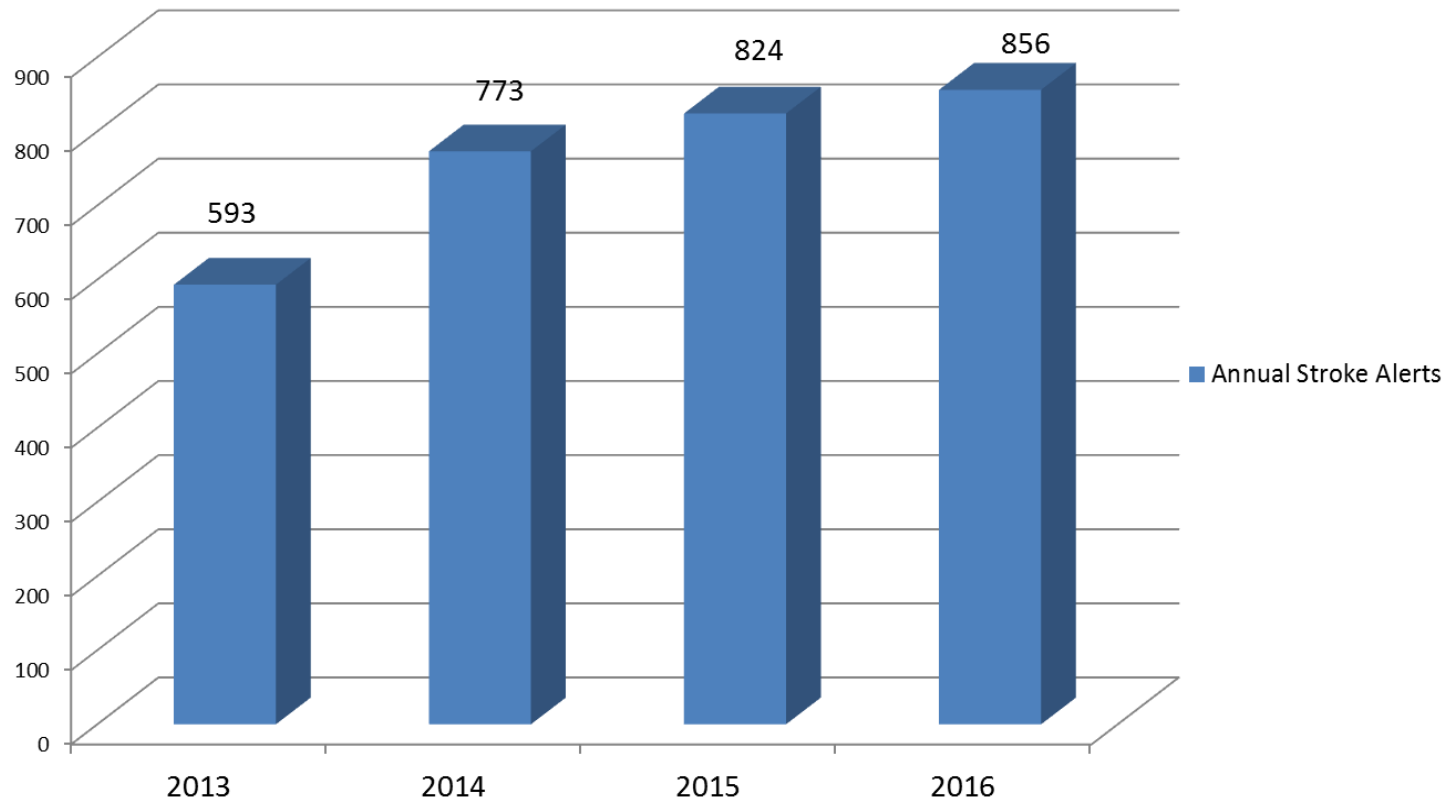
CQI Report
Annual 2016

Systems of Care
Stroke System

Stroke System 2016

Annual Stroke Alerts

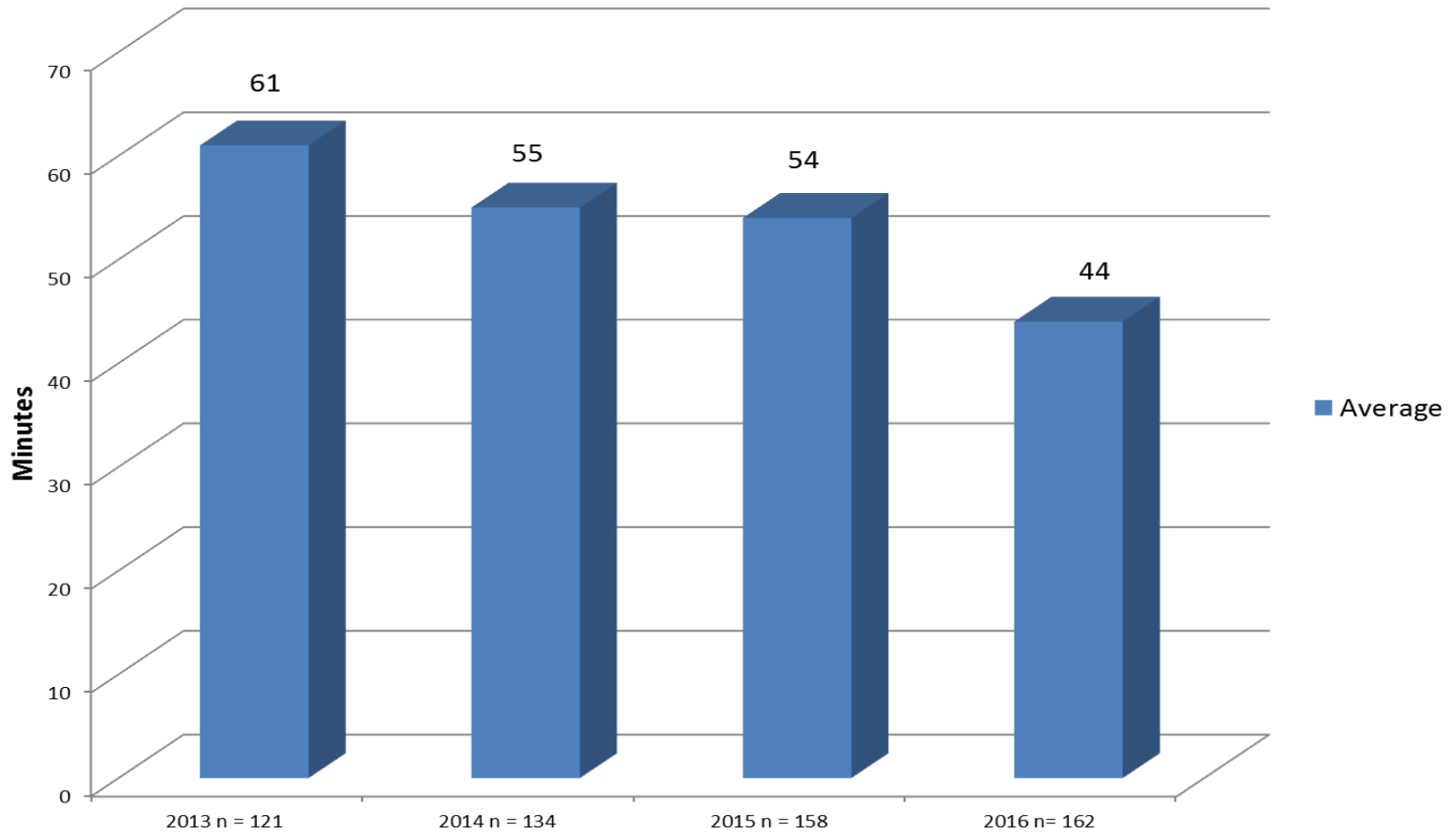
Source: AMR Meds/Zoll



Stroke System 2016

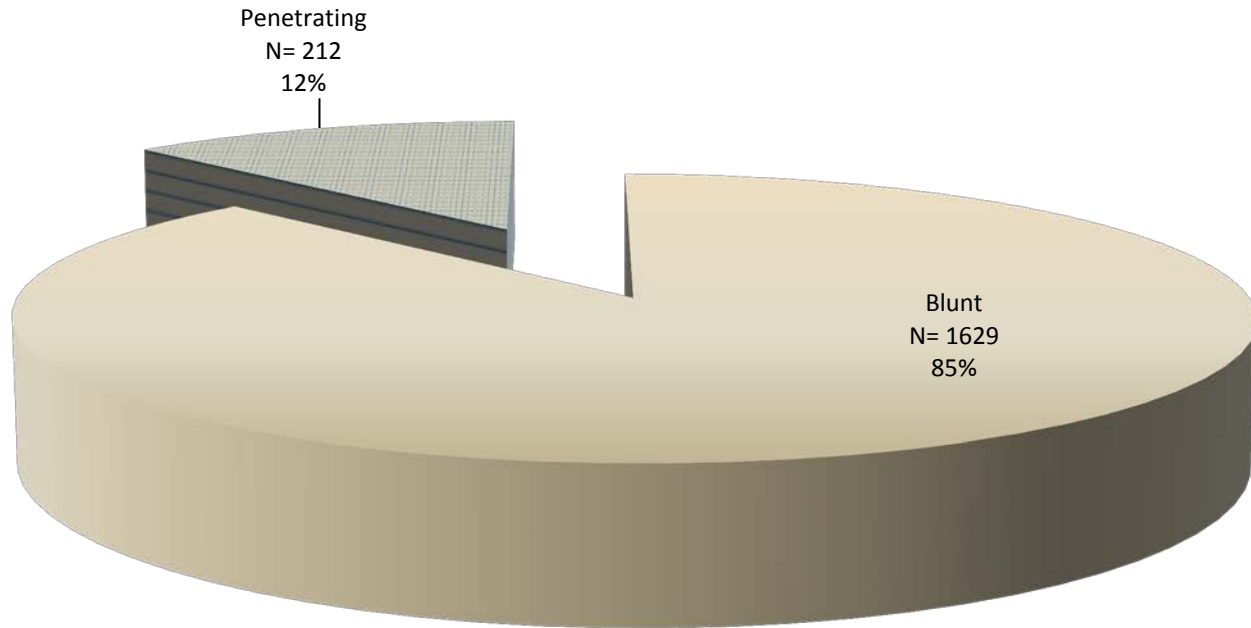
Average Door to Drug Time by Year for all Hospitals

Source: PSC



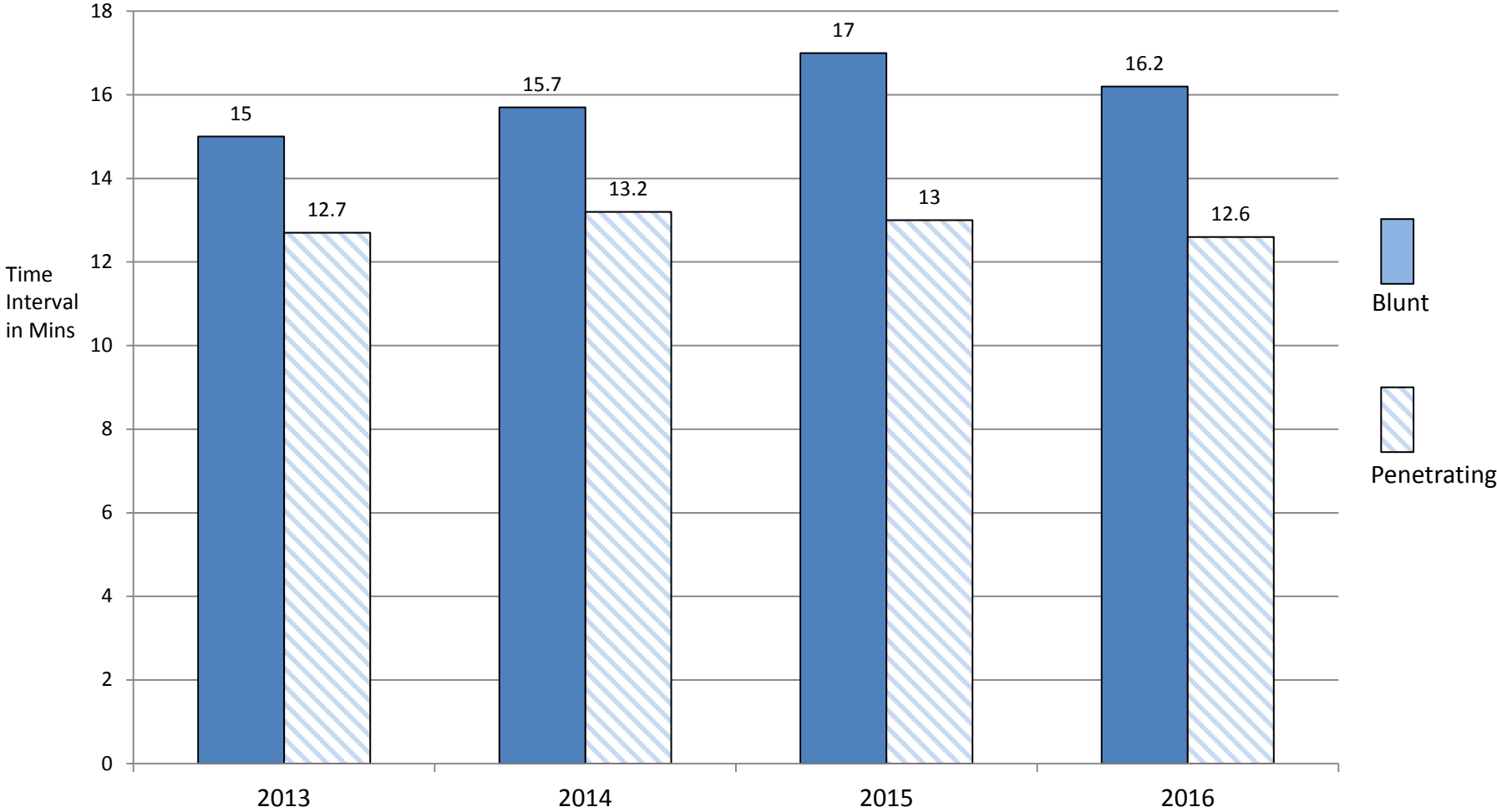
Trauma System
Annual 2016

2016
Total Trauma Patients by Type of Injury
N=1841



Median Prehospital On Scene Time Interval Blunt vs. Penetrating Trauma By Year 2013-2016

N=1841

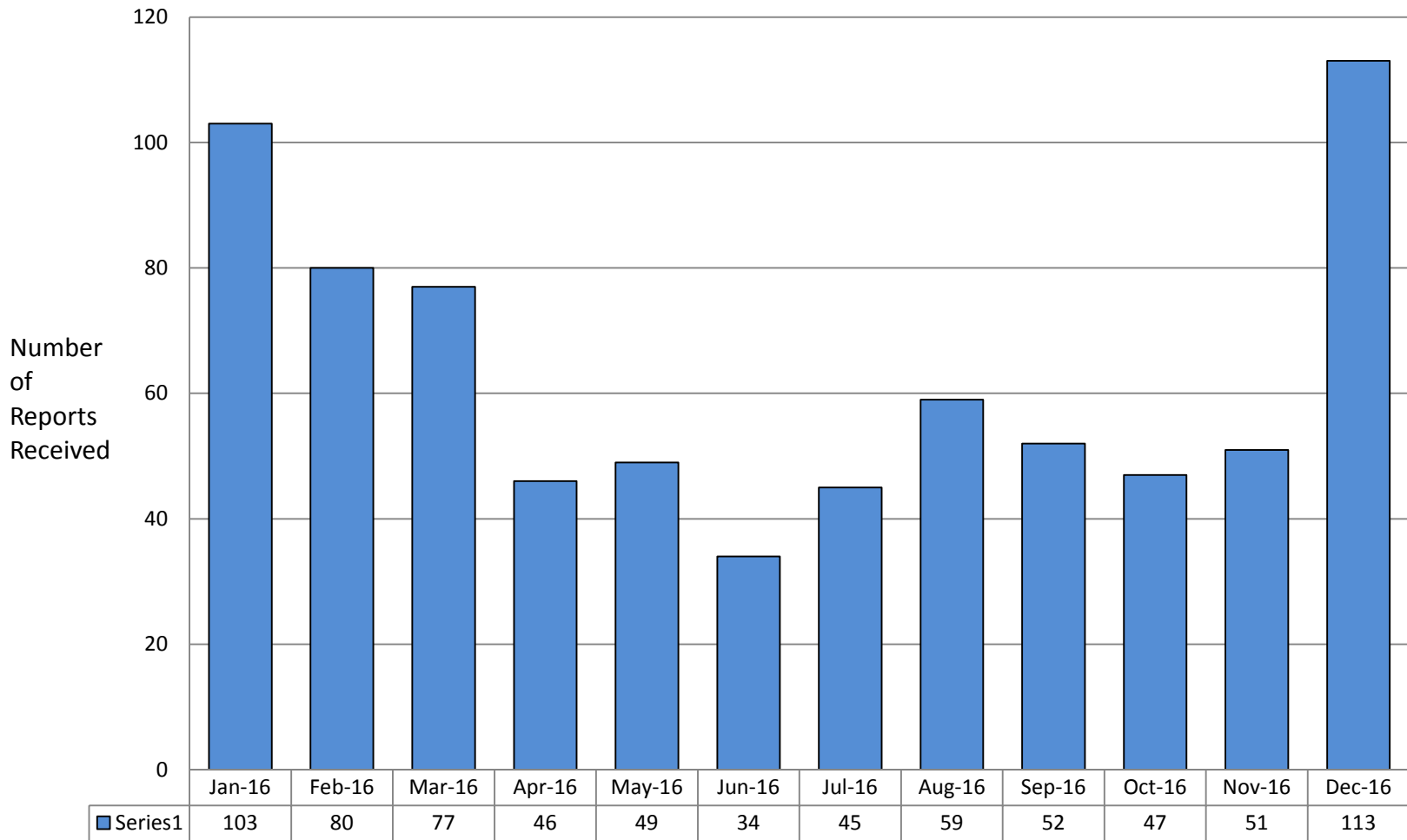


EMS Events 2016

EMS Events

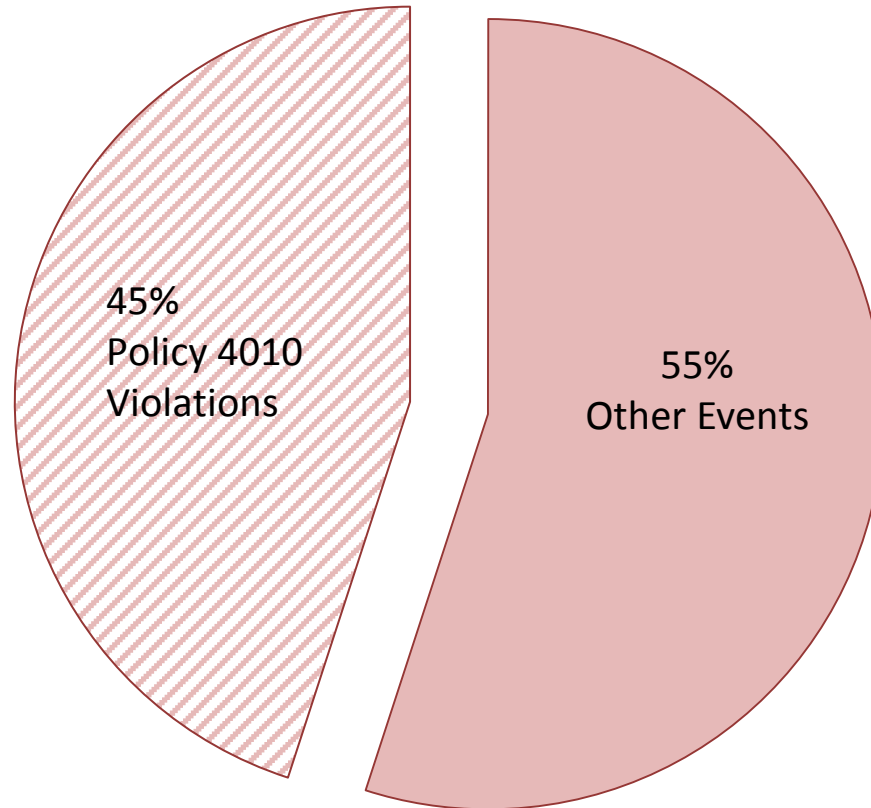
Reports Received by Month

2016
N=616



EMS Events Reported by General Category 2016

N=616



END REPORT
Annual 2016

2016

Quality Improvement Initiatives

Quality Improvement Initiatives

Patient Off-Load Time Reduction

In 2014, an initiative to monitor and reduce the handoff times between ambulances and hospital emergency departments was implemented by the CCCEMS with the support of the CQI team. Current measures reflect that during high-volume periods, patients arriving at emergency departments by ambulance are often waiting longer than 30 minutes for offloading. Measures and other pertinent information continued to be reviewed by internal staff and the QLC. Reports were updated monthly and hospital leadership continued to be informed.

In 2016, outcomes showed some slight decreases in off-load times, however, goals for reduction continue to be a challenge for some hospitals. Most recently, a statewide initiative has been implemented in collaboration with hospital leadership to evaluate and act to improve the hospital off-load times statewide. This initiative will continue to be monitored and acted on for further improvement in the 2017 improvement cycle.

Quality Improvement Initiatives

High Performance Cardiac Arrest Resuscitation Team

In 2014-15, indicators to measure quality of CPR for compression ratios, depth and pauses for shock were developed and implemented. In 2016, our CARES showed a 4% increase in the annual save rate performance.

In 2016-17, staff participated in targeted training programs in both Seattle and Monterey to learn the latest science and best practices to improve and enhance CCC EMS Cardiac Arrest System of Care. A newly organized Cardiac Arrest Performance Improvement Team has since been activated with the objectives of continuing to sustain our gains and to further enhance and improve outcomes.