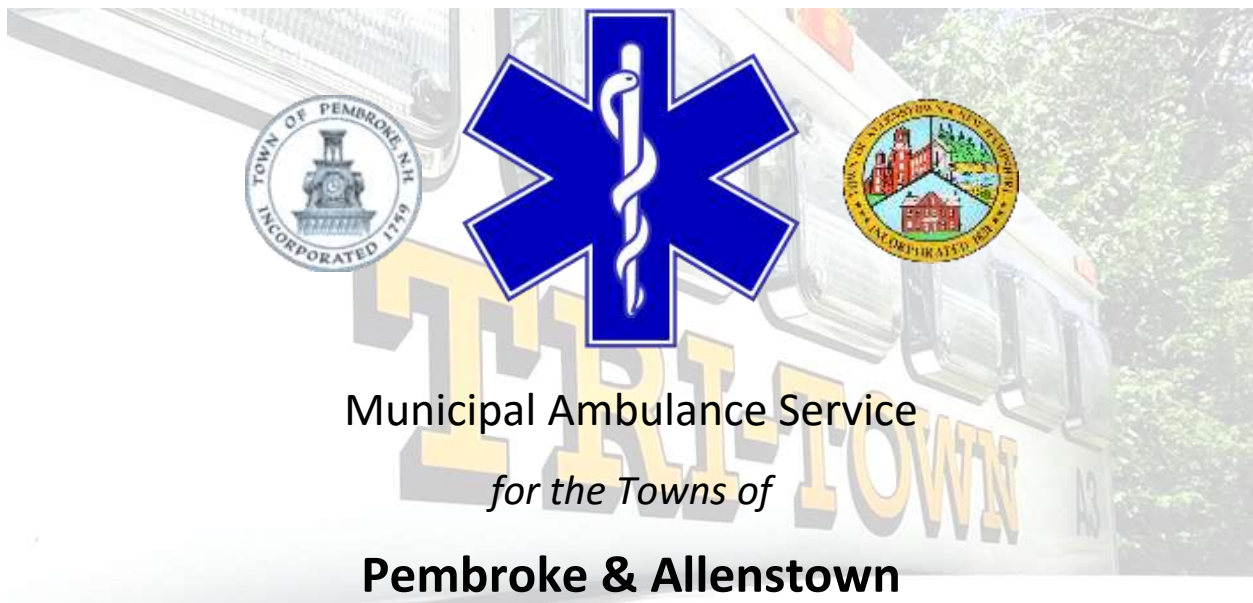


TRI-TOWN Emergency Medical Service

Monthly Director's Report

for the Month of

March 2016



Prepared By: *Christopher Gamache, Director*

April 5, 2016



PREFACE

Tri-Town Emergency Medical Service was started on January 1, 2013 by an Inter-Municipal Agreement between the towns of Allenstown and Pembroke, New Hampshire. The service is managed by the Service Director and Paramedic, Christopher Gamache with oversight by the Tri-Town EMS Board of Directors that is comprised of the Town Administrator and Fire Chief from both towns as well as a member from each community and a Tri-Town EMS employee representative. Tri-Town EMS' primary service area are the two towns, but also provides mutual aid to the Towns of Hooksett, Deerfield, Epsom, Chichester, Bow, the City of Concord, and where ever and whenever requested to do so. Tri-Town EMS is proud to be one of a few ambulance services within the Capital Area with an around the clock, fully staffed ambulance, at the Paramedic level. The service is making great strides to provide those we serve with the highest quality medical care coupled with up-to-date EMS equipment. Our staff is ready and available to answer call for help.

REPORT INTRODUCTION

This report was generated on April 5, 2016 by the Service's Director, Christopher Gamache, and represents the EMS activity of the Tri-Town EMS, current projects, operational concerns and performance projections. The content of this report shall be available for discussion at the Monthly Meeting of the Tri-Town EMS Board of Directors on Wednesday April 13, 2016. This document contains data that was derived from the New Hampshire Department of Safety, Bureau of Emergency Medical Service patient care reporting web site, www.nhtemsis.org, where Tri-Town EMS documents all EMS related incidents that are dispatched by Concord Fire Alarm. Additionally, this document contains data from the agency's billing contractor, ComStar.

Tri-Town EMS has a Medical Resource Hospital Agreement (MRHA) with Concord Hospital. This agreement entitles the agency to function under the medical oversight of the hospital's Medical Director, Dr. David Hirsch. As part of the MRHA, Tri-Town EMS has a Control Substance Agreement with Concord Hospital, these two agreements afford TTEMS the ability to have Paramedic level medications and Controlled Substances.

SECTION 1: EMERGENCY MEDICAL SERVICE (EMS) ACTIVITY:

- Total Number of EMS Responses / Request for EMS Services88
March 2015.....82
- Total Number of Patient's Transported58
March 2015.....60
 - Transports to Concord Hospital42 (72%)
 - Transports to Catholic Medical Center (CMC)5 (9%)
 - Transports to Elliot Hospital11 (21%)
 - Transports to Other Hospital0 (0%)
- Total Number of EMS Runs Where Mutual Aid was Received6
March 2015.....7
 - Concord Fire Department5
 - Epsom Fire Department1
 - Hooksett Fire Department0
 - Other EMS Agency0
- Total Number of Patient's Refusing Transport to the Emergency Department14
- Total Number of EMS Responses that Resulted in Another Disposition16

SECTION 2: EMS RUN DATA

Average Run Times:

- Reaction Time: 1m 11s (76.74% <1min)
- Response Time:4m 55s (59.3% <5min)
- On-Scene Time:16m 34s (6.98% < 10min; 55.82% < 20 min)
- Transport Time:18m 49s
- Back In Service Time:18m 56s
- Time on Task:1h 0m 14s

EMS Call Location, by Town:

- Allenstown, NH44 (50.00%)
March 2015.....38
- Pembroke, NH36 (41.00%)
March 2015.....40
- Hooksett, NH6 (7.0%)
- Concord, NH1 (1.0%)
- Epsom, NH1 (1.0%)

Times of Call

Time Period	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total	Percentage
0000 - 0300	1	1	1	2	2	0	0	7	8.14%
0300 - 0600	0	2	0	1	1	1	0	5	5.81%
0600 - 0900	3	2	3	0	2	0	1	11	12.79%
0900 - 1200	0	3	2	1	1	2	1	10	11.63%
1200 - 1500	2	2	5	1	2	1	4	17	19.77%
1500 - 1800	2	3	0	2	3	1	6	17	19.77%
1800 - 2100	1	0	2	2	2	3	2	12	13.95%
2100 - 2400	2	1	0	2	1	0	1	7	8.14%
Unknown	0	0	0	0	0	0	0	0	0.00%
Total	11	14	13	11	14	8	15	86	100%

Runs by Dispatch Reason

Dispatch Reason	# of Times	% of Times
Abdominal Pain	3	3.49%
Animal Bite	1	1.16%
Assault	1	1.16%
Back Pain (Non-Traumatic / Non-Recent Trauma)	2	2.33%
Breathing Problem	8	9.30%
Chest Pain	5	5.81%
Choking	1	1.16%
Diabetic Problem	1	1.16%
Fall Victim	15	17.44%
Heart Problems	1	1.16%
Hemorrhage / Laceration	1	1.16%
Lift Assist / Invalid Assist	1	1.16%
Medical Alarm	6	6.98%
Motorized Vehicle Crash (Auto / Truck / ATV / Etc).	5	5.81%
Other	6	6.98%
Overdose	6	6.98%
Pain	1	1.16%
Psychiatric / Behavioral Problems	5	5.81%
Seizure / Convulsions	2	2.33%
Sick Person	10	11.63%
Stroke / CVA	3	3.49%
Traumatic Injury	1	1.16%
Unconscious / Fainting	1	1.16%
Unknown	0	0.00%
Total	86	100%

Procedure Administered

Procedure Name	#	%
Assessment: Patient Assessment	25	29.07%
Cardiac: 12 Lead ECG Obtained	25	29.07%
Cardiac: 12/15/18 Lead ECG-Transmitted	11	12.79%
Cardiac: ECG Monitoring	24	27.91%
General: Patient Cooling (Cold Pack or Global)	1	1.16%
Musculoskeletal: Spinal Motion Restriction (With C-Collar)	3	3.49%
Musculoskeletal: Splinting (General)	2	2.33%
Respiratory: Bagged Ventilations (via Mask)	1	1.16%
Respiratory: CPAP	1	1.16%
Soft Tissue: Pressure Dressing Application	1	1.16%
Vascular: IV Catheterization (Extremity Vein)	50	58.14%
Vascular: IV Puncture for Blood Draw	1	1.16%
None	30	34.88%

Medication Administered

Medication Name	#	%
Albuterol Sulfate	1	1.16%
Aspirin (ASA)	6	6.98%
DuoNeb (0.5 Atrovent/3.0 Albuterol)	2	2.33%
Fentanyl	2	2.33%
Ipratropium Bromide (Atrovent)	1	1.16%
Midazolam (Versed)	2	2.33%
Nitroglycerin	4	4.65%
Normal Saline	16	18.60%
Ondansetron (Zofran)	5	5.81%
Oxygen	6	6.98%
Oxygen by Nasal Cannula	5	5.81%
Oxygen by Nebulizer	1	1.16%
Oxygen by Positive Pressure Device	1	1.16%
None	60	69.77%

SECTION 3: TRI-TOWN EMS PERSONNEL:

During the month of March 2016, one Part Time Paramedic left the service and one Per Diem EMT-Intermediate resigned. One of the new employees completed his orientation and was cleared to work shifts and the other new employee is finishing up his orientation. The current staffing of Tri-Town EMS:

• Full Time Employees	(3- Paramedics).....	3
• Part Time Employees	(1-Paramedics, 2-AEMT, 2-EMT).....	5
• Per Diem Employees	(6-Paramedics, 7-AEMT, 4-EMT).....	17
• TOTAL WORK FORCE	25

SECTION 4: EQUIPMENT

- The primary Life Pak 15 had a failure of the Non-Invasive BP (NiBP) module. Initially Checked and no errors were found.
- Both Life Pak 15's received their annual preventative maintenance in March. Physio Control recommends to not use the "Rainbow" probe (Pulse Oximetry Probe used to measure spCO) on all patients.
- The primary Life Pak 15 had a second failure of the NiBP module. Physio Control came back to the station and replaced the module.
- McGraph Video Laryngoscope – In-service on device was completed and device was placed into service.

SECTION 5: COORESPONDENCE WITH OTHER HEALTHCARE AGENCIES

Allenstown Fire Department: Staff of Tri-Town EMS attended a Community Health Program for the public distribution of Naloxone (Narcan™). April will be the first month Allenstown Fire Department is included into the monthly article training which Tri-Town EMS does. The articles for April were emailed to Allenstown Fire Department. Staff of Tri-Town EMS partook in the St. Patrick Day's Corn Beef meal that was served at the Allenstown Fire Department.

Capital Area Mutual Compact: 1) Discussion on "I Am Responding ™", 2) Chief Gilbert's command vehicle is available to area agencies for purchase.

New Hampshire Bureau of Emergency Medical Service: 1) attended the Medical Control Board Meeting and discussed: 1. EMT-I to AEMT transition, 2. TEMSIS Elite Rollout and current problems, 3. Upcoming protocol changes (Adding Ketamine, Pediatric Sedation, IO Access, Shock Protocol and Spinal Trauma Protocol), Paramedic Re-Entry Program, Emergency Medicine Act Update, Operational Medical Director), 4. Drug Diversion Form – proposed. 5. Cardiac Arrest Summit in Seattle – rollout trainings to be coming soon to NH, 6. Education Update – once relicensed, all CEH can be used for the next relicensing period.

Concord Hospital: On-going discussion with Dr. Hirsch for the implementation of the Surgical Cricothyrotomy. Tri-Town EMS was given the Medical Directors approval letter. Sue Prentiss, EMS Manager disseminated a clinical advisory for the safe administration of HYDROmorphine (Dilaudid ™) and the appropriate use of the Controlled Substance Incident Form. On-going / current clinical topics. Sue Prentiss provided follow-up information for patients who has a myocardial infarction (heart attack).

Farmington Fire Department: Provided NCCP assistance.

Pembroke Police Department: Provided materials for Bloodborne Pathogen Training material.

SECTION 6: REVENUE AND EXPENDITURES

Revenues: Ambulance Billing: \$39,858.78 Legal Document Request: \$0.00

Detail Coverage: \$0.00 Paramedic Intercept: \$0.00

Total: \$39,858.78

Expenses:

- The service paid \$744.02 for supplies and oxygen for the month of March.
- OVERTIME: 60 hours, \$1,842.00

SECTION 7: QUALITY ASSURANCE / QUALITY IMPROVEMENT SUMMARY

- Complaint # 032420160836IC – Controlled Substance Documentation Error
- EKG need to be attached to PCR's when the procedure is performed.
- Improvements notices in obtaining signatures and billing information.
- 2016/2017 NCCP training plan is complete.
- Monthly Skills matrix was disseminated to the staff and will start in April.
- February's Training(s):
 - JEMS Article: Life & Limb: Evaluation & Management of Limb-Threatening Knee Injuries.
 - EMS World Article: The ABC's of Pediatric Sepsis.
 - Glucometer Training / Competency.
 - Annual Safety Training
 - Decadron & Levophed Training
 - McGrath Video Laryngoscope Training
 - Surgical Cricothyrotomy Training
 - Director Gamache & Assistant Director Locke completed the NHFS&T Instructor II/III course.
- Recommendations:
 - Develop standardize Lesson Plan form for classes to be held by Tri-Town EMS
 - Have IV Medication Infusion Pumps updated with Nitroglycerin rates and add Levophed to the medication library.
 - Implement use of competencies in 2016.

SECTION 8: DIRECTOR'S COMMENTS & RECOMMENDATIONS

- Capital Area may be utilizing "I Am Responding" service which provides other methods of receiving dispatch information for emergency calls. Pembroke Fire Department has started using the program. Tri-Town EMS is looking to possible subscribe to this service this year.
- On-going projects: HIPAA/Survey forms, Mutual Aid process and Evaluations.
- Much of the available time this month was taken up with a current employee issue.
- Working on Policy and Procedure to address future pay increases and future hires.

SECTION 9: VEHICLE MAINTENANCE

- Ambulance 2: MILEAGE: 77,897
- Ambulance 3: MILEAGE: 67,675
- Ambulance 2 :
 - Received and Oil Change, General PM, and replaced lightbulbs in the patient module.

SECTION 10: TRI TOWN EMERGENCY MEDICAL SERVICE LEADERSHIP

- | | |
|--|---------------------------------|
| • Chairman of the Board of Directors
& Allenstown Town Administrator: | Shaun Mulholland |
| • Pembroke Town Administrator: | David Jodoin |
| • Allenstown Fire Chief: | Dana Pendergast |
| • Pembroke Fire Chief: | Harold Paulsen |
| • Allenstown Member-At-Large: | Jennifer Abbot, RN |
| • Pembroke Member-At-Large: | Robert "Bob" Bourque |
| • Tri-Town EMS Employee Member: | Michael Kelley, BSN, NREMT-P |
| • Tri-Town EMS Director: | Christopher Gamache BS, NREMT-P |
| • Tri-Town EMS Assistant Director: | Stephanie Locke, NREMT-P |



04/05/2016

Christopher Gamache - Director

Date