



March 2018



PREFACE

Tri-Town Emergency Medical Service was created in June of 2012 and began operation in January of 2013. Prior to that date the Tri-Town Volunteer Emergency Ambulance Service was a non-profit entity that once provided ambulance service to the Towns of Allenstown, Hooksett and Pembroke. The Town of Hooksett now provides ambulance services through its fire department.

Under New Hampshire RSA 53-A, the Towns of Allenstown and Pembroke entered into an inter-municipal agreement to create a public entity to provide ambulance service for both communities. A Board of Directors is the governing body for the Service in accordance with this agreement. The ambulance is housed at the Pembroke Safety Center. The Service is staffed 24 hours per day, 7 days per week at the *Paramedic* Level. The cost of the Service is partially subsidized by funding provided from each town on a percentage basis in accordance with the provisions of the agreement. The Service also bills patients through a third party billing firm making up the remainder of the revenues that pay for the cost of operations.

Tri-Town EMS utilizes Concord Hospital as its Medical Resource Hospital and provides Emergency Medical Care under the coordination and guidance of Dr. Nicolas Larochelle. As part of the Medical Resource Hospital Agreement (MRH), Tri-Town EMS receives many of the medications and supplies the Service needs from Concord Hospital.

This report was created on April 10, 2018, by the Service Director, Christopher Gamache BS, NRP. This document contains data that was obtained from the New Hampshire Department of Safety, Bureau of Emergency Medical Service patient care reporting website, www.NHTEMSIS.org/elite, where all patient records for the Service are maintained. Tri-Town EMS is dispatched by Concord Fire Alarm who maintains all the times associated with the Service's EMS Incidents. Financial data has been provided by the Town of Pembroke and by ComStar Ambulance Billing.





SUMMARY

Service continued to see an increased call volume for the month and this March was the busiest March since the Service started operations. By the end of the month, Tri-Town EMS was 72 runs over last year for the same time period.

During the month, Ambulance 8 had some service and repair items that were addressed, the two regular Full Time Employees were given on-going tasks to perform with the added requirement of providing a monthly report on those tasks. The Assistant Director stated the Advanced EMT course. I continued working on consolidating the Policy Manual for the service and looked into some recent changes to the billing.



AMBULANCE 8

As reported last month, it was discovered that the Air Conditioning (A/C) Unit in Ambulance 8 was not functioning appropriately. The ambulance was sent to Grappone for to have this addressed. It was initially thought the evaporator was bad. During their diagnostics, Grappone discovered the ambulance's radiator was leaking. These two items were ordered and the ambulance was scheduled to have the repairs made. Since the ambulance was going to be out of service for a period, I authorized them to perform a routine lube and filter service on the truck. I also requested they look at the brakes, as the brakes have been squeaking a lot lately.

The work on the ambulance was done on April 4th and 5th. Grappone discovered the A/C issue was not on the Ford side of the vehicle, but rather on the PL Custom side. PL Custom was contacted and they sent a field technician to the station. They are going to work with Grappone to make the repair, charge and test the system. Also, PL Custom replaced the back-up alarm on ambulance 8 as it was not working. The radiator was replaced and this was a warrantee item. The brakes were checked and found to be fine and no further work was required on the brakes. The lube and filter service was completed.



INVENTORY:

One of the full time employees has been tasked with tracking the Service's supplies. This includes keep track of the supplies we have and ordering supplies when the levels hit a certain level. I have instructed this employee to provide me with a monthly account of the inventory ordered and used, create a spread sheet so we can monitor how the value of the supplies in the stock area and do a complete count of all inventory every quarter.



VEHICLE AND DME CHECKS:

The other full time employee checks all Durable Medical Equipment (DME) and vehicles every month. They provide me with a check sheet of the items checked and any discrepancies that were found.



ADVANCED EMERGENCY MEDICAL TECHNICIAN COURSE (AEMT):

The Advanced Emergency Medical Technician Course started on March 19th. The enrollment was below what was anticipated. This was attributed to the extremely short advertisement period. I had the Assistant Director go over the finances with me and we removed all possible overtime and adjusted the schedule so that the cost of the course would not exceed the revenues the course will generate. When I was satisfied with the financial outcome, I gave the go-ahead for the course. Tri-Town EMS has one (1) employee taking the course.



BILLING:

I talked with ComStar about the notification from Rick Martin earlier this year as well as changes I have noticed in the weekly report we received. As I had thought, the Federal Government authorized or renewed increases to Medicare. At first, EMS was going to see a 2% reduction in Medicare reimbursement for 2018 however, with the reauthorization by the government, EMS is seeing a 2% increase in reimbursement.



POLICIES:

I am currently combining and updating all the Service's policies so they are in one location. When this process is completed, I will combine them with the Town of Pembroke's Policy Manual, so that our staff has one manual with all Service's and Town's Policies together.



MEDICAL CONTROL BOARD (MCB):

The Medical Control Board met on March 15th, 2018 at the New Hampshire Fire Academy. During the meeting, the New Hampshire Bureau of EMS reported the On-Line, EMS in the Warm Zone, Operations level training will be available soon. This training is required of the Service as part of the grant we received last year. Within a week or so after this meeting, the training was released and currently, our staff is being required to complete this training while on shift.

The MCB discussed the following protocols: Traumatic Cardiac Arrest, Crush Injuries, Abdominal Pain, Anaphylaxis, Pediatric Respiratory Distress, Adult Respiratory Distress, and Brief Resolved

Unexplained Event (B.R.U.E) otherwise referred to those life threatening events that occur to pediatrics. The board also started discussion on the role of EMS for sheltering event, citing a warming shelter in Rochester that quickly changed to a regular shelter and local EMS was needed to assist some of the inhabitants. A brief update on the collaborative effort of NH 911 and poison control to provide guidance to EMS and to the receiving emergency department when a person called 911 for poisoning or an overdose.



PUBLIC HEALTH NETWORK

The Capital Area Public Health Network (CAPHN) met on March 14th, 2018 at their facility on Airport Road in Concord. The newly developed Local/Regional Sheltering Plan was reviewed. A drill was run on March 30th at the same facility that tested the ease of use of the plan. I was present for both these events. The feedback provided from the drill is being worked into the plan. The Local/Regional Plan is being release to all the communities in the Capital Area this June. Each community can cater the plan to their specific needs and abilities. The overall goal of the plan was to create a plan that could be used in any community, easy to use and has virtually all the documents a person or a small group of people would need to establish an Emergency Shelter.



CONTINUUM of CARE / SUBSTANCE ABUSE DISORDER (CoC/SuD):

The Group met at Concord Hospital on March 27th, 2018. The meeting started off with a brief review of funding changes to various organizations within New Hampshire that are involved in the substance abuse problem in the state. Regional Access Point or RAPs received the state wide contract to help coordinate service for people in need.

The group shifted topics to discussing more practical goals and functions. One of the items discussed was the development of an assessment tool or screening tool to be used by Fire, Police, EMS and VNA. From the screening or assessment tool, the patient will be referred or brought to the appropriate location for the appropriate treatment. Some assessment tools exist, such as SBERT. VNA uses a series of questions referred to as Lethality Questions. There is a possibility of merging the two into a simple and/or rapid assessment tool. EMS is specifically looking to define levels based upon the tool so that if a patient doesn't need to go to the ED, they won't be brought there. This would also mean the ability of EMS, Police and others to bring people to locations and those locations would have to exist and be financially stable. The meeting ended with a discussion on 46CFR waiver and the need to have the patient give permission to EMS, Fire or Police to seek assistance on their behalf.



VEHICLE MAINTENANCE

AMBULANCE 3 (79A3):

- Mileage – 84,840
- No Maintenance, Repairs.
- Monthly Service check completed, check engine light comes on.
- Scheduled for Lube and Filter Service and the check the engine for leaks and check engine light.

AMBULANCE 8 (79A8):

- Mileage – 26,599
- Lube and Filter Service, AC Unit Checked and found to be leaking refrigerant, Radiator has a leak.
- Back-up alarm does not work
- Monthly Service check completed.



QUALITY ASSURANCE

Tri-Town EMS through its clinical coordinator reviews all EMS incidents for adherence to the current New Hampshire Patient Care Protocols.

- Signatures and documenting SSN and insurance information continued to be an issue.
- Trend specific to an employee was discovered and looked into. The issue is being addressed through training.
- Some crews are still not entering Mutual Aid runs into TEMSIS. These are runs where mutual aid was received by the Service and a run number was generated.

MONTH	IV	IO	ETT	KING SGA	CPAP
January	76.2%	100%	33%	100%	100%
February	74.3%	100%	0%	100%	n/a
March	67.8%	n/a	n/a	n/a	100%
YTD Aver	72.8%	100%	25%	100%	100%



EMS EDUCATION

- March's NCCP training was to be the EMS Grand Rounds at the New Hampshire Fire Academy on March 13th. This was postponed until April 11 due to a snow storm.
- Journal of Emergency Medical Service (JEMS) article – "Is TXA a Lifesaving Drug that's Too Cheap to Bother Using" (0.25 hours). 19/25 completed the article.

- EMS World article – “Five things to know about eating laundry detergents” (0.25). 19/25 completed the article.
- Monthly Skills Training – 16/25 completed the training.
- Monthly Shift Training – Annual Safety Training (0.5 hours). 18/25 completed the training.
- Assistant Stephanie Locke is signed up to take the Active Attack Integrated Response (AAIR) course the week of April 23rd. This is a multi-discipline course designed to train Law Enforcement, EMS/Fire and Dispatchers on how to handle an Active Shooter Event.
- All new employees have now completed their orientation and ride time.



STAFFING

During the month of March 2018, there were no changes to the Service’s Roster. The current staffing for the service is as follows:

FULL TIME	4	Paramedics					4
PART TIME	1	Paramedics	1	AEMTs	1	EMTs	3
PER DIEM	3	Paramedics	8	AEMTs	7	EMTs	18
TOTAL	8	Paramedics	9	AEMTs	8	EMTs	25

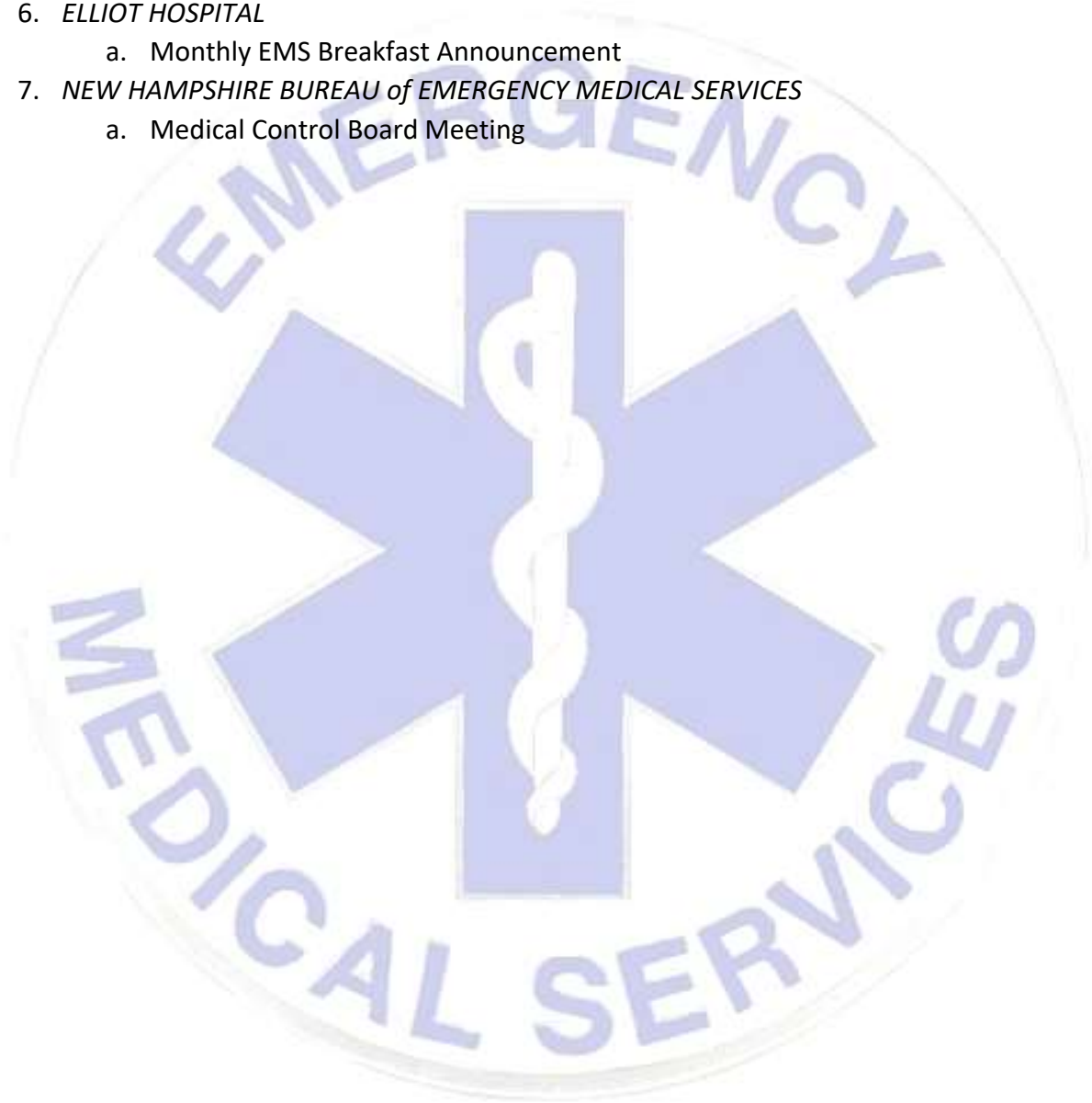


CORRESPONDANCE WITH OTHER HEALTHCARE & PUBLIC SAFETY AGENCIES

During March 2018, Tri-Town EMS was in contact with the following Healthcare and Public Safety Agencies to better serve individuals and our community.

1. *ALLENSTOWN POLICE DEPARTMENT*
 - a. Requested a CPR Course (rescheduled)
2. *CAPITAL AREA MUTUAL AID COMPACT*
 - a. Meeting on March 15th.
 - b. Communications pertaining to the change in radio communications.
3. *CAPITAL AREA PUBLIC HEALTH NETWORK & CoC/SuD*
 - a. Meeting and Drill on Shelter Plan (CAPHN)
 - b. Meeting on March 27th (CoC/SuD)
4. *CATHOLIC MEDICAL CENTER*
 - a. Pyxis list update
 - b. Multiple educational events being put on by CMC.
5. *CONCORD HOSPITAL*
 - a. Stoke Updates
 - b. Training announcements
 - c. Change in traffic patterns around the hospital in the next few months due to work on city roads.

- d. Changes in the amount of Sodium Bicarbonate EMS services carry – increased to meet current protocol for certain types of overdoses.
 - e. Dilaudid (HYDRO-morphine) shortage. EMS boxes will keep their current amount, however, future replacement will be decreased.
 - f. MCI Drill at the New Hampshire Motor Speedway in Loudon on June 25th. Service replied that we will be taking part in this event.
6. *ELLIOT HOSPITAL*
- a. Monthly EMS Breakfast Announcement
7. *NEW HAMPSHIRE BUREAU of EMERGENCY MEDICAL SERVICES*
- a. Medical Control Board Meeting





FINANCES

LINE NAME	BUDGETED	MONTH	YTD
Ambulance Revenue	\$352,800.00	\$46,553.77	\$126,373.14
Allenstown Payment	\$180,333.00	--	--
Pembroke Payment	\$224,635.00	\$56,158.75	\$56,158.75
Miscellaneous Revenue	\$20,390.00	880.00	\$1,978.00
Interest	\$1.00	--	--
TOTAL REVENUE	778,159.00	\$103,592.52	\$184,509.89
Full Time Salaries	\$214,777.00	\$24,592.57	\$49,989.78
Per Diem Salaries	\$245,286.00	\$25,451.33	\$50,784.28
Overtime	\$28,153.00	\$2,900.97	\$6,517.26
Health Insurance	\$43,037.00	\$2,563.07	\$10,733.32
Dental Insurance	\$6,000.00	\$477.59	\$1,910.36
Life Insurance	\$150.00	\$12.00	\$48.00
Disability Insurance	\$2,660.00	\$256.26	\$1,025.04
Social Security	\$30,270.00	\$3,282.58	\$6,652.08
Medicare	\$7,519.00	\$815.35	\$1,652.29
NH Retirement	\$27,476.00	\$3,105.76	\$6,357.52
Uniforms	\$6,500.00	--	\$2,259.78
Training & Certification	\$33,500.00	\$265.00	\$1,621.66
Legal Services	\$15,000.00	--	--
Telephone	\$5,280.00	\$277.98	\$994.02
Contracted Billing Services	\$18,000.00	\$1,690.44	\$3,990.98
Accounting Services	\$5,800.00	--	--
Building Maintenance	\$250.00	--	--
Ambulance & Life Pack Lease	--	--	--
Liability Insurance	\$7,500.00	--	\$6,605.00
Unemployment Compensation	\$600.00	--	\$616.00
Worker's Compensation	\$13,000.00	--	\$13,307.00
Department Supplies	\$14,500.00	\$282.99	\$3,313.75
Postage	\$1,900.00	--	--
Fuel	\$6,000.00	\$634.99	\$1,463.41
Office Supplies	\$3,358.00	\$643.96	\$1,251.52
Transcription Service	\$800.00	--	--
Medical Equipment (Maint.Repl)	\$15,303.00	--	\$1,428.00
Radio/Communications Equipment	\$1,000.00	--	--
Medical Evaluation	\$4,500.00	--	\$1,041.00
Vehicle Maintenance & Repair	\$5,500.00	--	\$1,055.85
Computer/Software	\$2,000.00	--	\$142.50
Equipment & Vehicle Replacement	\$120,000.00	--	--
TOTAL EXPENDITURES	886,159.00	\$67,252.84	\$174,630.92
REVENUE (-) EXPENDITURES	(\$108,000.00)	\$36,339.68	\$9,878.97
TRANSFER from FUND BALANCE	\$108,000.00	--	--

****NOTE**** All Numbers Are Estimations and are Subject to Changes Based Upon Audit Adjustments and Results.



AMBULANCE BILLING

<u>YEAR</u>	<u>XPORTS</u>	<u>CHARGES</u>	<u>REDUCTION</u>	<u>ALLOWABLE</u>	<u>PAYMENTS</u>	<u>BALANCE</u>
2014	613	\$546,306.50	\$166,318.19	\$379,988.31	\$277,097.30	\$102,891.01
2015	700	\$660,833.70	\$234,122.20	\$426,711.50	\$316,415.05	\$110,296.45
2016	725	\$844,130.00	\$338,189.89	\$505,940.11	\$365,507.53	\$140,423.58
2017	819	\$952,508.00	\$392,477.60	\$560,030.40	\$405,216.63	\$154,813.77
TOTAL	2,857	\$3,003,778.20	\$1,131,107.88	\$1,872,670.32	\$1,364,236.51	\$508,433.81

Revenue per Transport (\$/Trip) 2014: \$452.03 2015: \$452.03 2016: \$504.15 2017: \$494.77



EQUIPMENT

- Stryker had a recall on components inside the Load System. The field service technician came to the station and replaced the components.



ADMINISTRATION

- Allenstown Town Administrator Michael Stark (Acting)
- Pembroke Town Administrator David Jodoin
- Allenstown Fire Chief Chief Shawn Murray
- Pembroke Fire Chief Chief Harold Paulsen
- Allenstown Public Representative Michael O'Mara
- Pembroke Public Representative Robert "Bob" Bourque
- Tri-Town EMS Employee Representative Hearshell VanLuven, NRP, FTO
- Tri-Town EMS Director Christopher Gamache, BS, NRP
- Tri-Town EMS Assistant Director Stephanie Locke, NRP, I/C



EMS INCIDENT DATA

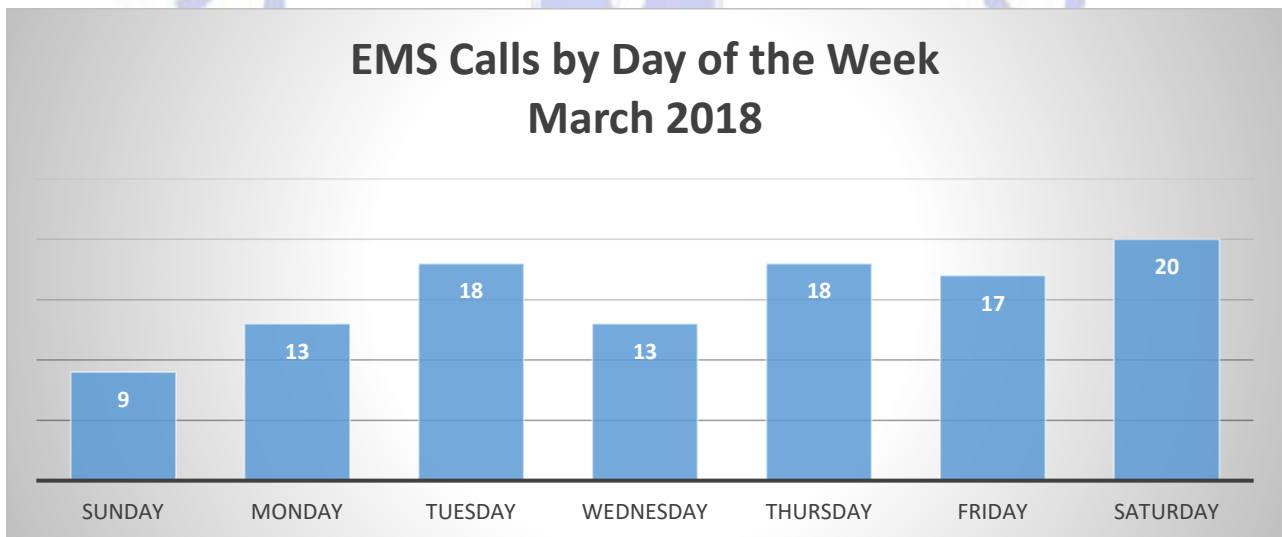
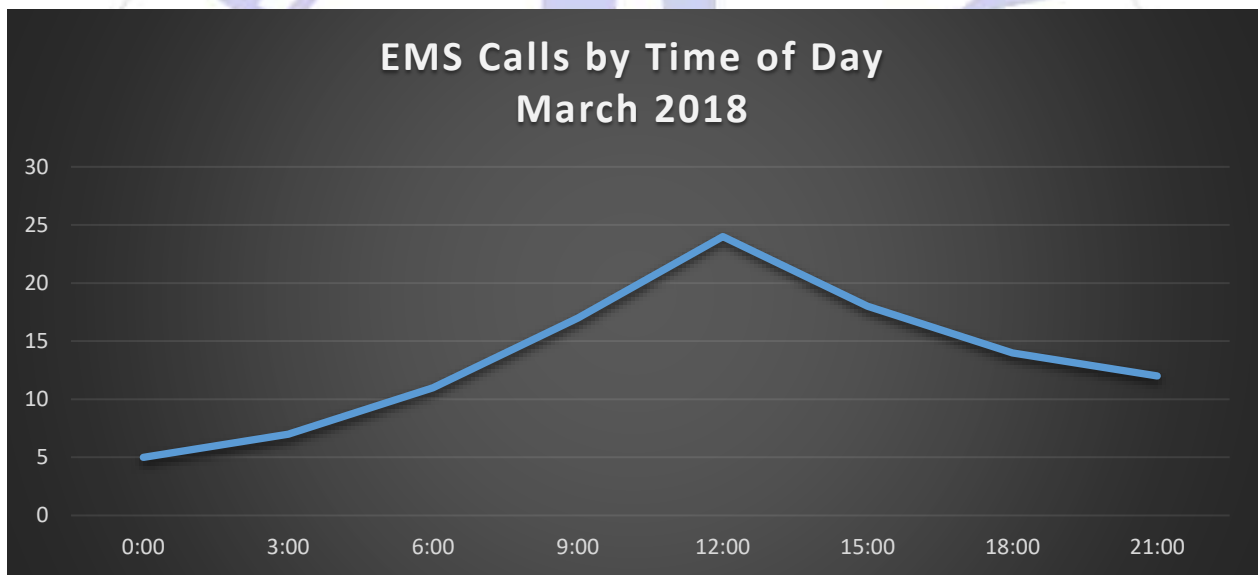
TOTAL Number of INCIDENTS	113 (March 2017 – 91)
Allenstown.....	50 (50.5%) (March 2017 - 35)
Pembroke	49 (49.5%) (March 2017 – 52)
Barnstead	0
Bow	0
Chichester	0
Concord	6
Deerfield	0
Epsom	3
Hooksett	5
Pittsfield	0
INCIDENTS Handled by Tri-Town EMS	104 (March 2017 - 83) (92.04%)
Mutual Aid RECEIVED from other Departments	9 (March 2017 – 8) (7.96%)
Bow Fire Department	0
Concord Fire Department	4
Epsom Fire Department	1
Hooksett Fire Department	4
Mutual Aid GIVEN to other COMMUNITIES	14 (March 2017 - 4) (12.40%)
TOTAL Number of PATIENTS TRANSPORTED to the HOSPITAL ...	77 (March 2017-58) (68.14%)
Catholic Medical Center (CMC)	10 (12.99%)
Concord Hospital	58 (75.32%)
Elliot Hospital	9 (11.69%)
Average REACTION Time (Dispatch to Responding).....	47 Seconds
Average RESPONSE Time (Dispatch to On-Scene)	5 Minutes 48 Seconds
Average ON-SCENE Time	18 Minutes 14 Seconds
Average TRANSPORT Time	19 Minutes 28 Seconds
Average AT HOSPITAL Time	20 Minutes 37 Seconds
Average CALL LENGTH Time (Dispatch to In-Service)	1 Hour 4 Minutes 54 Seconds



TIME OF CALLS (*Time of Day & Day of the Week*)

TIME	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	TOTALS
0:00-2:59	1	1	2	0	0	0	1	5
3:00-5:59	0	2	1	1	0	1	2	7
6:00-8:59	3	2	1	1	2	0	2	11
9:00-11:59	0	1	2	2	4	5	3	17
12:00-14:59	1	2	3	5	6	3	4	24
15:00-17:59	1	0	5	0	1	5	6	18
18:00-20:59	2	3	2	4	2	1	0	14
21:00-23:59	1	2	2	0	3	2	2	12
TOTALS	9	13	18	13	18	17	20	108

*Excludes some Mutual Aid Received Runs





EMS INCIDENTS by DISPATCHED REASONS

<u>INCIDENT COMPLAINT REPORTED by DISPATCH (EMD CODE)</u>	<u>OCCURANCE</u>
Chest Pain (Non-Traumatic) (1)	14
Sick Person (26)	14
Breathing Problem (6)	10
Falls (17)	9
Medical Alarm (32)	6
Hemorrhage / Laceration / Bleeding (21)	5
Psychiatric / Behavioral / Suicide Attempt (25)	5
Standby	4
Unconscious / Syncope (31)	4
Assault (4)	3
Back Pain (Non-Traumatic) (5)	3
Seizure (12)	3
Stroke / CVA / TIA (28)	3
Traumatic Injury (30)	3
Unknown Problem / Person Down (32)	3
Diabetic Problem (13)	2
Headache (18)	2
Heart Problems / AICD (19)	2
MVC / Transportation Incident (29)	2
No Other Appropriate Choice	2
Overdose / Misused of Meds / Poisoning (23)	2
Abdominal Pain / Problems (1)	1
Alcohol Intoxication	1
Cardiac Arrest / Death (9)	1
Interfacility Transfer / Medical Transport (33)	1
Lift / Invalid Assist	1
Medication Reaction (Not Allergic)	1
Pain (26)	1



PROCEDURES ADMINISTERED

<u>PROCEDURE PERFORMED</u>	<u>OCCURANCE</u>
Vascular: IV / Extremity Vein Catheterization	85
Cardiac: 12-Lead ECG Obtained	62
Cardiac: ECG Monitoring (4 Lead or Defib Pads)	63
Assessment: Patient Assessment	33
Assessment: Stoke Exam	15
Assessment: Orthostatic Vital Signs	2
Ortho: Spinal Assessment	1
Ortho: Spinal Motion Restrictin	1
Ortho: Spinal Motion Restriction Applied w/C-Collar	1
Ortho: Spinal Motion Restriction Withheld	1
Ortho: Splinting (General)	1
Ortho: Splinting (Traction)	1
Respiratory: BVM / Bagged Ventilations via Mask	1
Respiratory: CPAP	1

Soft Tissue: Pressure Dressing Application	1
--	---



MEDICATIONS ADMINISTERED

MEDICATION ADMINISTERED	OCCURANCE
Nitroglycerin (2 NTG Infusions)	21
Ondansetron / Zofran	16
Normal Saline	15
Fentanyl	14
Aspirin	12
Oxygen	9
Naloxone / Narcan	6
Albuterol w/ Ipratropium Bromide (DuoNeb)	3
Dextrose / Oral Glucose	1
Methylprednisolone / Solu-Medrol	1
Metoclopramide / Reglan	1
Metoprolol / Lopressor	1
Midazolam / Versed	1

