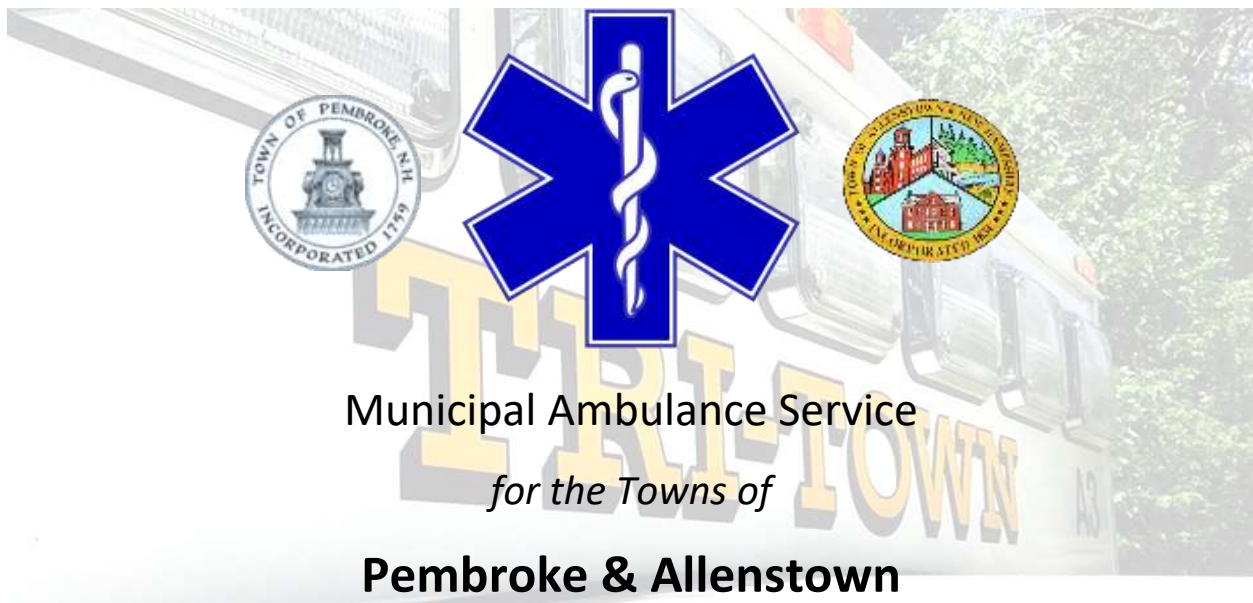


TRI-TOWN Emergency Medical Service

Monthly Director's Report

for the Month of

September 2016



Prepared By: *Christopher Gamache, Director*

October 11, 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 October 11, 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 October 12, 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.nhtems.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
September 2015.....85
- Total Number of Patient's Transported55
September 2015.....51
 - Transports to Concord Hospital 49(89%)
 - Transports to Catholic Medical Center (CMC) 0(0%)
 - Transports to Elliot Hospital 6(11%)
 - Transports to Other Hospital 0(0%)
- Total Number of EMS Runs Where Mutual Aid was Received6
September 2015.....4
 - Concord Fire Department5
 - Epsom Fire Department1
 - Hooksett Fire Department0
 - Other EMS Agency0
- Total Number of Patient's Refusing Transport to the Emergency Department30
- Total Number of EMS Responses that Resulted in Another Disposition12

SECTION 2: EMS RUN DATA

Average Run Times:

- Reaction Time: 0m 55s
- Response Time: 4m 28s
- On-Scene Time: 17m 36s
- Transport Time: 16m 52s
- Back In Service Time: 17m 43s
- Time on Task: 57m 42s

EMS Call Location, by Town:

- Allenstown, NH39(45%)
September 2015.....27
- Pembroke, NH45(50%)
September 2015.....53
- Hooksett, NH1(1%)
- Deerfield, NH1(1%)
- Epsom, NH2(3%)

Time of Calls (Time of Day & Day of the Week)

(TIME)	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
0000-0259	1	0	0	3	2	1	0
0300-0559	0	0	1	1	3	0	0
0600-0859	0	2	0	2	3	2	1
0900-1159	1	0	2	1	1	4	0
1200-1459	1	3	4	2	4	3	6
1500-1759	3	1	1	1	3	2	2
1800-2059	2	2	2	1	3	4	7
2100-2359	0	2	0	2	1	2	2
TOTALS:	8	10	10	13	20	18	18

Incidents by Dispatch Reasons

Incident Complaints Reported by Dispatch	Number of Incidents	Percentage of Total Incidents
MVC/Transportation Incident (29)	18	18.56%
Breathing Problems (6)	10	10.31%
Falls (17)	9	9.28%
Overdose / Misuse of Meds / Poisoning (23)	7	7.22%
Sick Person (26)	7	7.22%
Unconscious / Syncope (31)	5	5.15%
Chest Pain (Non-Traumatic) (10)	4	4.12%
Psychiatric / Behavioral / Suicide Attempt (25)	4	4.12%
Auto vs Pedestrian (29)	3	3.09%
Diabetic Problem (13)	3	3.09%
Hemorrhage / Laceration / Bleeding (21)	3	3.09%
Medical Alarm (32)	3	3.09%
Unknown Problem / Person Down (32)	3	3.09%
Assault (4)	2	2.06%
Lift / Invalid Assist	2	2.06%
Pain (26)	2	2.06%
Seizure (12)	2	2.06%
Stroke / CVA / TIA (28)	2	2.06%
Traumatic Injury (30)	2	2.06%
Abdominal Pain / Problems (1)	1	1.03%
Altered Mental Status (26)	1	1.03%
Cardiac Arrest / Death (9)	1	1.03%
No Other Appropriate Choice	1	1.03%
Pregnancy / Childbirth / Miscarriage (24)	1	1.03%
Standby	1	1.03%

Procedures Performed By EMS Personnel

<u>Procedure Name</u>	<u># of Times Procedure Performed</u>	<u>Percent of Incidents Procedures Performed (%)</u>
Intravenous Catheterization (IV)	55	29.57%
Cardiac Monitoring (4 Lead ECG)	21	11.29%
Patient Assessment	19	10.22%
Cardiac Monitoring (12-Lead ECG)	18	9.68%
C-Collar	4	2.15%
Spinal Motion Restriction	3	1.61%
Bagged Valve Mask Respirations (BVM)	3	1.61%
Stroke Exam	2	1.08%
Manual Defibrillation	2	1.08%
Nasopharyngeal Airway (NPA) Insertion	2	1.08%
CPR - Manual	1	0.54%
CPR – Mechanical	1	0.54%
Spinal Assessment	1	0.54%
Splinting	1	0.54%
Supraglottic Airway Insertion – King LT	1	0.54%
CPAP	1	0.54%
Oropharyngeal Airway Insertion	1	0.54%
General Wound Care	1	0.54%
Pressure Dressing Application	1	0.54%
Intraosseous Cannulation (IO)	1	0.54%

Medications Administered by EMS Personnel

<u>Medication Name</u>	<u># of Times Medication Administered</u>	<u>Percentage of Incidents Medications Administered (%)</u>
Albuterol	2	1.40%
Albuterol/Atrovent (DuoNeb)	2	1.40%
Aspirin (ASA)	3	2.10%
Dextrose 10% in NS (D10)	4	2.80%
Epinephrine 1:10,000	3	2.10%
Fentanyl	2	1.40%
Glucagon	2	1.40%
Ipratropium Bromide	1	0.70%
Methylprednisolone / Solumedrol	2	1.40%
Narcan	10	6.99%

Nitroglycerine	6	4.20%
Normal Saline (0.9% NaCl)	23	16.08%
Ondansetron (Zofran)	7	4.90%
Oral Glucose	1	0.7%
Oxygen	12	8.39%
Sodium Bicarbonate	1	0.70%

SECTION 3: TRI-TOWN EMS PERSONNEL:

During the month of September 2016, there was no changes to the Service roster. The current staffing of Tri-Town EMS:

- Full Time Employees (4- Paramedics).....4
- Part Time Employees (1-Paramedics, 2-AEMT, 2-EMT).....5
- Per Diem Employees (5-Paramedics, 5-AEMT, 4-EMT).....15
- TOTAL WORK FORCE24

SECTION 4: EQUIPMENT

- ALS Mannequin: The mannequin was again returned to the Service. This time Simulaids stated possible fixes to the problems the service was having.
- Ambulance 2 Life Pack 15: The device remained with Physio Control as the unit needed to be sent back to the Corporate Office to have a component replaced.

SECTION 5: COORESPONDENCE WITH OTHER HEALTHCARE AGENCIES

Allenstown: 1) School active shoot drill preparation meeting. Drill is planned for some time next fall. Tri-Town EMS has been tasked to work with Allenstown Fire Department to develop an active shoot plan, specifically for a school. As part of this drill/plan, Tri-Town EMS employees are to complete the on-line training program provide by FS&T and NH EMS on EMS in the Warm Zone. 2) Allenstown Fire Department Open House on October 1.

Concord Hospital: 1) Director and Assistant Director met with Dr. Hirsch. Topics are confidential. 2) Christina Swansberry present a lecture on Stroke Assessment and Care for the September monthly Training held at the Allenstown Fire Department.

New Hampshire Bureau of Emergency Medical Service: Assistant Director Stephanie Locke received the NH Association of EMT's award EMT of the Year at the 2016 Fire and EMS Awards Ceremony.

Capital Area Health Network: Met at Concord Fire Department with area Public Health Officials. Topics included the concept of a Regional Health Officer, Regional Training and Preparedness Exercises, NH information dissemination system, Citizen Corps, Naloxone distribution and Flu Clinics.

Capital Area Mutual Aid Compact Meeting: Held at the Allenstown Fire Station. 2017 Budget was discussed and voted on. Also the on-line program "I am Responding" was discussed and it was determined that each department within the compact would be responsible for purchasing the licenses

to use the program. Current prices are based on all agencies using the program. If few services subscribe to the program then the price will go up.

Pembroke: 1) Pembroke Fire Department to host an open house on October 8th from 10am to 2pm. 2) Planning for the 2016 regatta race on October 16th.

SECTION 6: REVENUE AND EXPENDITURES

Revenues:

Ambulance Billing: \$30,603.59 Legal Document Request: \$25.00

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

Total: \$30,628.59

Expenses:

- The service paid \$1,310.59 for supplies and oxygen for the month of September.
- Payroll 9/1/16: \$15,088.65
- Payroll 9/15/16: \$15,968.65
- Payroll 9/29/16: \$14,371.59
- OVERTIME: 87.75 hours, \$2,712.00

SECTION 7: QUALITY ASSURANCE / QUALITY IMPROVEMENT SUMMARY

- QA concern, Complaint #09020160800IC. – Discussed with Dr. Hirsch and Ambulance Crew.
- QA concern, Complaint #09212061509IC. – Discussed with Dr. Hirsch and Ambulance Crew.
- EMS crews are continued to be reminded to enter cardiac and 12-leads as a procedure and to attach a tracing with their patient care reports.
- September's Training(s):
 - JEMS Article: Delivering Death Notifications: Performing and Emotionally Surviving Notifications of Death to a Patient's Family – 15/24 employees completed the training.
 - EMS World Article: Spine Injury for the Prehospital Provider – 15/24 employees completed the training.
 - NCCP Training: Stroke - Course by Christina Swansberry – 9/24 employees attended the training.
- October's NCCP training will be at Allenstown Fire Department on October 25th with the topic being Pediatric Cardiac Arrest, by Stephanie Locke.

SECTION 8: DIRECTOR'S COMMENTS & RECOMMENDATIONS

- The Service is working on being up to date with unpaid ambulance bills. ComStar advises that when the account is listed as "Deceased, No Estate" there is a process they do to verify that. I recommend that when this shows up on an account, these accounts are written off. There was an issue with a deceased patient with VA benefits, where the family was told by the VA to not pay the ambulance bill. In the month of September 60 pre-collections notices were sent out by the Service.

- Call volume continues to be slightly up. The Service has been seeing a higher incidence of high acuity calls, violent calls and illicit drug use. I am pleased to say, our EMS crews are handling these calls professionally and clinically appropriately.
- The Service has started the ground work for the Call Force, presenting policy changes to employee classifications and employee compensation.
- The Field Training Officer (FTO) program is looking to be completed by next month. The last component is how the FTO's are to be compensated for their roll. That is to be partially addressed in one of the recommended policy changes.
- The Service is currently moving forward with two (2) applicants. One EMT and an EMT who is finishing their Paramedic program.
- The plan for the radios for the new ambulance was to use spare Allenstown Fire Department Radios. Because of the repeater that is installed in the new ambulance, the "Cab" radio may need to be a new radio. It appears the radio in the patient compartment that will be used to contact hospitals, can be one of the spare Allenstown Fire Department radios. We are currently looking at the best configuration of channels for both radios.

SECTION 9: VEHICLE MAINTENANCE

- Ambulance 2: MILEAGE: 78,923
 - 2016 State Safety Inspection performed.
- Ambulance 3 (Primary): MILEAGE: 76,970
 - 2016 State Safety Inspection performed.

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: | Robert "Bob" Bourque |
| • Pembroke Member-At-Large: | Michael Kelley, BSN, NREMT |
| • Tri-Town EMS Employee Member: | Christopher Gamache BS, NREMT |
| • Tri-Town EMS Director: | Stephanie Locke, NREMT |
| • Tri-Town EMS Assistant Director: | |

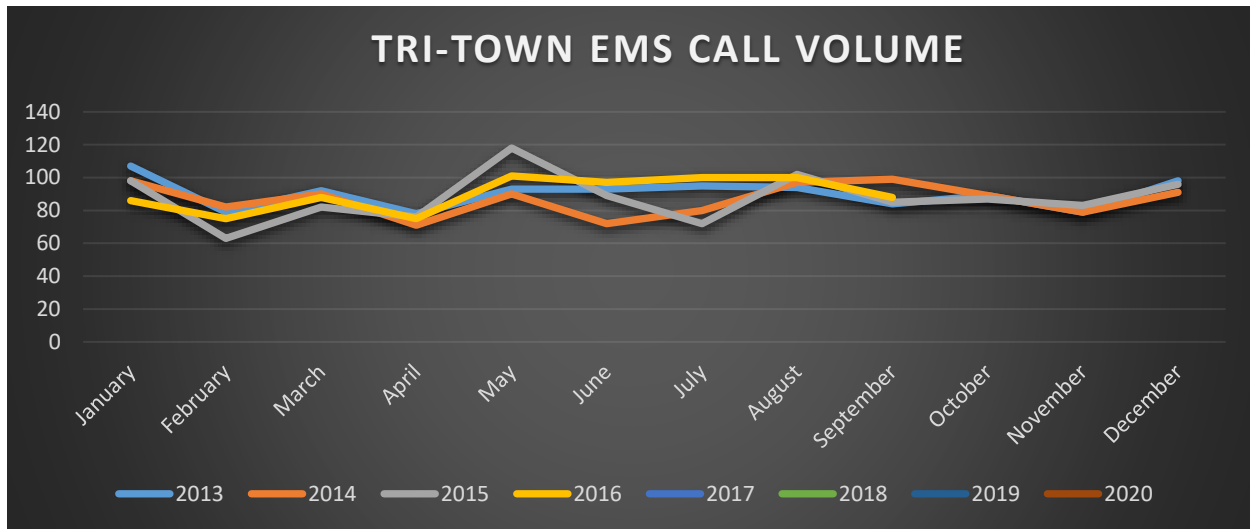


10/12/2016

Christopher Gamache - Director

Date

APPENDIX 1: 4-Year Call Volume History



APPENDIX 2: Revenue Chart

