## Annual Performance Evaluation Emergency Medical Services (EMS)

A Comprehensive Report of Emergency Ambulance Services
Delivered by the Alliance in Collaboration with the Contra Costa
County EMS Agency (CCCEMS)

Year 2018

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Contra Costa County EMS Agency
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Contra Costa County Fire Protection District





#### Performance Evaluation

#### Performance Based Contract:

Key Driver of Countywide EMS System enhancement

#### Performance Report

- Response times
- \* Clinical Performance
- \* Innovation
- Workforce Stability
- Pricing & Revenue Recovery
- Reporting Compliance
- Fiscal Stability & Sustainability



## The Alliance Year Three of Exemplary Service

#### \* On January 1, 2016,

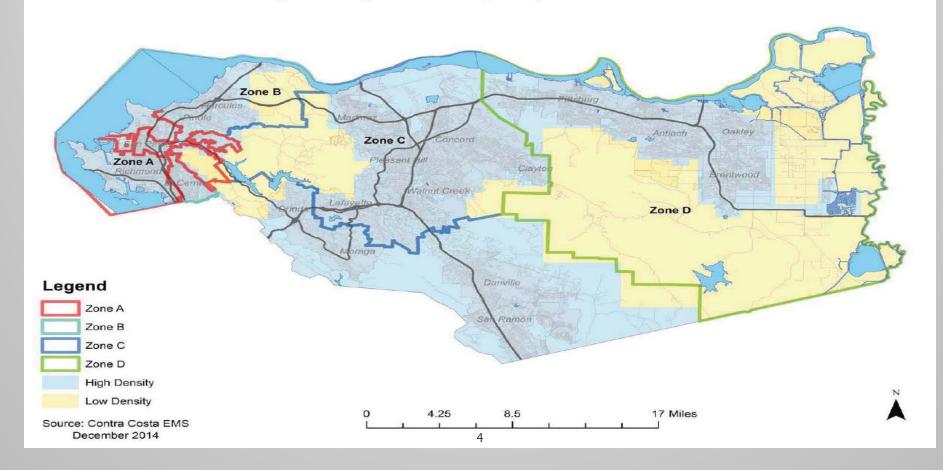
Contra Costa County Fire Protection District (CCCFPD) assumed Emergency Ambulance Services for Exclusive Operating Areas (EOAs) I, II and V covering West, Central and East County = 92% of the County.

- Initial Agreement January 1, 2016 thru December 31, 2020
- \* "Earned Contract Extension" for additional 5 years
  - From January 1, 2020 through December 31, 2025
- LEMSA recommendation and findings report to BOS in April
- \* Alliance Model: CCCFPD (contractor) operationally responsible for the subcontractor performance provided by American Medical Response (AMR). CCCEMS (contract performance oversight and compliance evaluator).

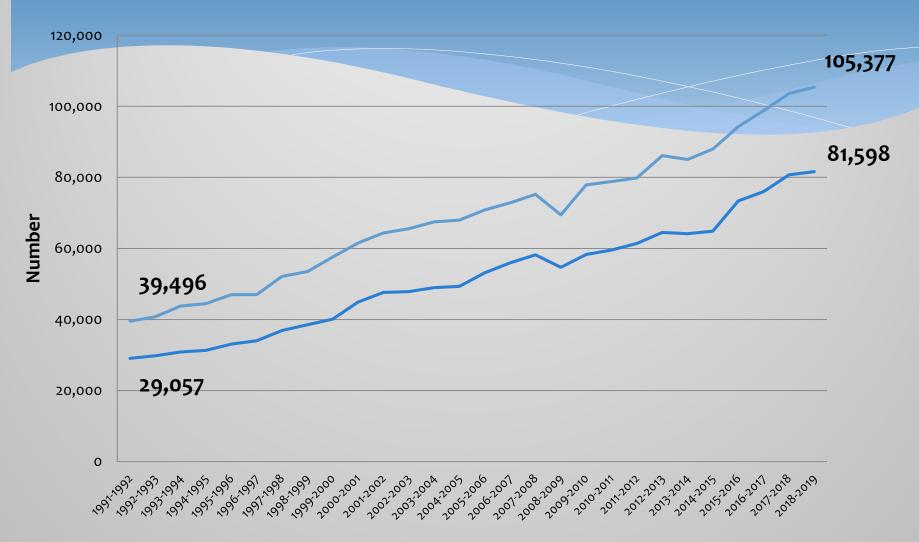
#### Alliance Ambulance Response Zones

#### Contra Costa County

High Density/Low Density Response Zones - Plan A



# Contra Costa Emergency Medical Services Total EMS System Response and Transport Volume



# Countywide EMS Ambulance Volume 2018 A Powerhouse of 9-1-1 EMS System Delivery

	All Providers		Contra Costa County Fire		
	#	%	#	%	
Total Dispatches	105434	100.0%	94836	100.0%	
Transported	81598	77.4%	74704	78.8%	
Canceled	23836	22.6%	20132	21.2%	
Total Patient Transports	81598	100.0%	74704	100.0%	
Transported Code 3	4607	5.6%	4097	5.5%	
Transported Code 2	76064	93.2%	69680	93.3%	
Transport Code Not Reported	927	1.1%	927	1.2%	
Total Canceled	23836	100.0%	20132	100.0%	
Enroute	6467	27.1%	5515	27.4%	
On Scene	17369	72.9%	14617	72.6%	

# Alliance EMS System Footprint Countywide (2018)

89% of All EMS Ambulance Responses

91% of All EMS Ambulance <u>Transports</u>

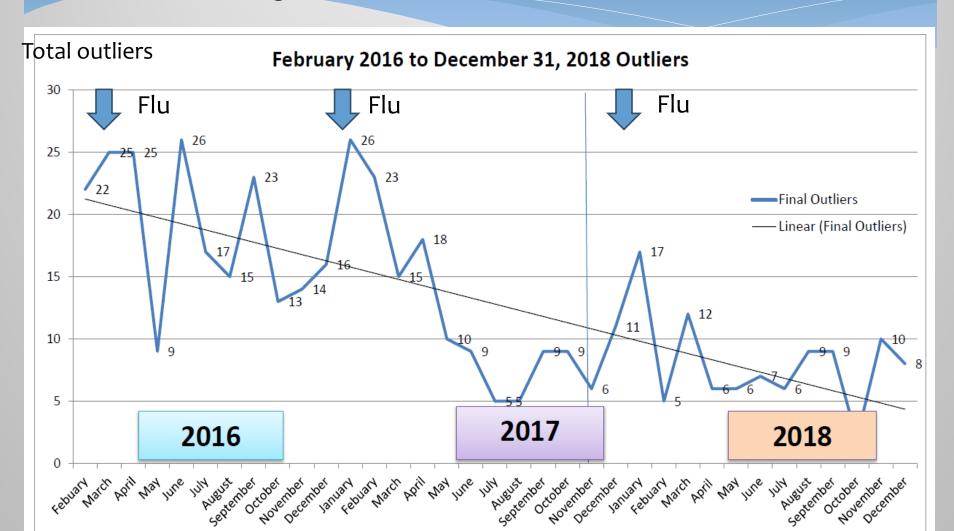
## Response Time Performance Highly Reliable Service

Response Area	Response Time Performance Requirement High Density (Code 3)	Alliance Performance 2016	Alliance Performance 2017	Alliance Performance 2018	Average Response Time (in minutes) 2018
Zone A (Richmond)	10:00 minutes 90% of the time	94%	96 %	96%	5:35
Zone B (West)	11:45 minutes 90% of the time	95 %	96 %	96%	6:29
Zone C (Central)	11:45 minutes 90% of the time	94%	95 %	95%	6:35
Zone D** (East)	11:45 minutes 90% of the time	94%	95 %	95%	6:42

<sup>\*</sup> Average compliance prior to Alliance model was 93%

# Ambulance Response Time Performance The Outlier Improvement Initiative

Average 7,889 ambulance responses/month Average 6225 ambulance transports/month



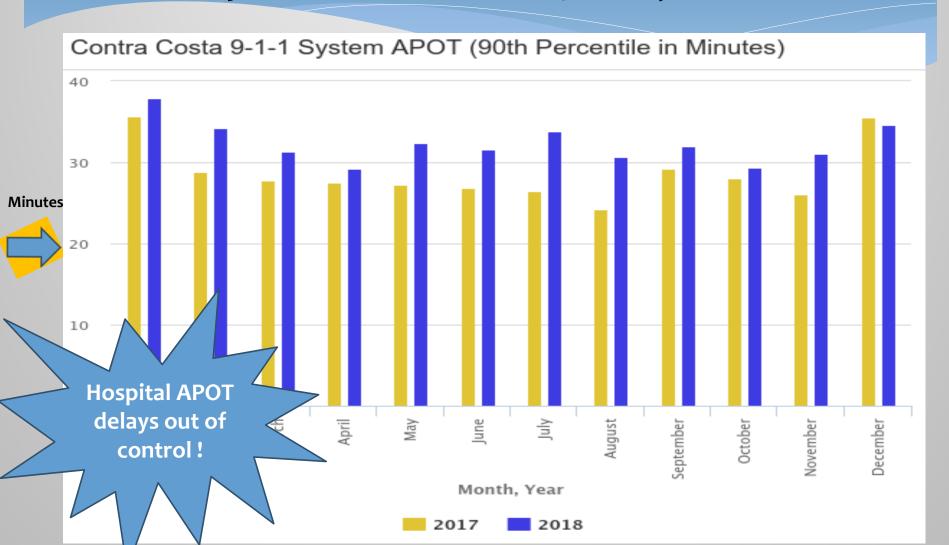
#### Outlier Fee Re-Investment

Alliance Accountability Supporting EMS System Optimization

Year	Responses Per Year	Total Number** (fee)	Code 2 Outlier Optimization Re-investment
2016	89,768	174 (\$240,000)	DECCAN System Status Management Dispatch (Total Cost \$235,000)
2017	93,389	139 (\$184,500)	4 Motorola Dispatcher Radio Consoles (Total Cost \$204, 592)
2018	94,836	108 (\$117,000)	Partial Cost Recovery for Hospital APOT Delays > 60 minutes

<sup>\*\*</sup>Outliers within reasonable control of the provider

# Ambulance Patient Offload Time (APOT) EMS System Hospital APOT Standard County Standard 20 min 90% of the Time



#### Hospital Delays In Ambulance Patient Transfer of Care (APOT) > 60 minutes

# Delays ambulance availability for next 911 call Increases Cost to Providers

EMS System Hospital Performance	2016	2017	2018
Delays > 60 minutes	618	858	1131*
Hospitals County wide 90% APOT Time (Contra Costa)	30 min	33 min	37 min

A 54% Increase between 2016 -2018

<sup>\*</sup>Includes 271 > 60 min delays for out of county destinations in 2018

## Partners in System Optimization

2019 Focus: Ambulance Patient Offload Times (APOT)



\* Alliance is disproportionally affected by prolonged patient handoff at the emergency departments.

- Ambulance Patient Transfer of Care Delays
  - \* Draw down ambulance availability
  - \* Increase response times
  - Delay definitive patient care
- Cost Recovery for Hospital APOT Delays
  - \* Hospitals Choice: Reduce APOT delays or provide cost recovery for APOT delays
  - Recommendation allow EMS providers to invoice hospitals for services rendered



#### The Alliance Model

- \* Evolved from a Robust EMS System Redesign
  - \* Responsive to Public & Stakeholder Input
- \* First of its Kind Service Delivery Model
  - \* Focus on EMS System **Optimization**
  - Positioned to be fiscally resilient and patient-centric



#### The Alliance Model Benefits

- \* Complete financial transparency
- \* Continuity of care
  - \* Dispatch, first response, ambulance transport
- \* Better resource allocation options
  - \* Choose right resource to match incident
  - \* Known location of all resources
- Faster dispatch times
- \* Revenue reinvestment



#### Contra Costa EMS System/Alliance Partnership Dedicated to Improving Patient Care

















## Highest AHA Recognition "System of Care" Achievement

BECAUSE TIME MATTERS.





2018 Mission: Lifeline® EMS Recognition

The American Heart Association proudly recognizes

#### Contra Costa County EMS Martinez, CA

Team Organizations: East Contra Costa Fire Protection District, Richmond Fire, El Cerrito Fire, Rodeo-Hercules Fire, Pinole Fire, Moraga-Orinda Fire District, San Ramon Valley Fire Protection District, American Medical Response, Contra Costa County Fire Protection District

> Mission: Lifeline®-EMS - GOLD PLUS Achievement Award - EMS Agency

The American Heart Association/American Stroke Associations recognizes this EMS provider organization, and the EMS provider organizations it supports, as an integrated EMS team. The EMS team has demonstrated continued success in using the Mission Lifeline\*-EMS program. Thank you for applying the most up-to-date evidence-based treatment guidelines to improve patient care and outcomes in the community you serve.\*

Eric Smith, MD Chairperson, Get With The Guidelines







## Ambulance Strike Team Response Regional Ambulance Mutual Aid





# Alliance partner AMR Training Initiative



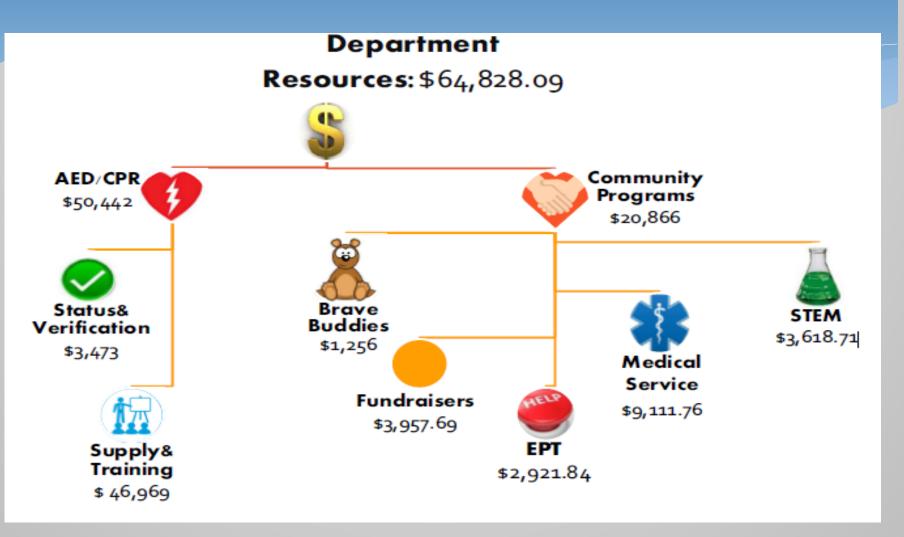
#### 2019 Alliance Health Improvement Project

Pediatric Trauma "Look Out for the Littles"



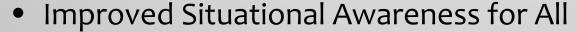
Emergency Medical Services for Children (EMSC): Improving the Care of III and Injured Children

#### Public Education in the Community



# Fire / EMS Communication Center Benefits All

- Common Communications
- One Computer Aided Dispatch (CAD)
   System



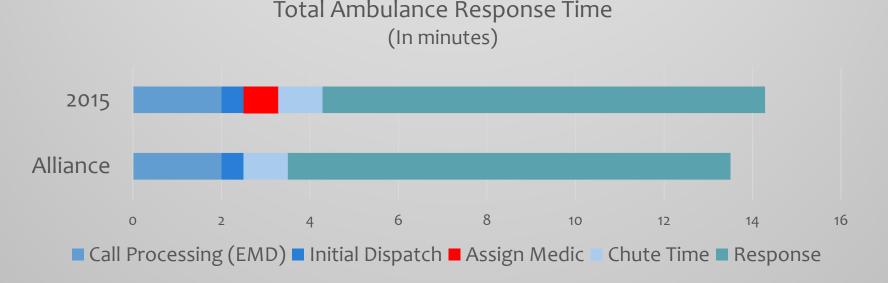
- Vehicle Location
- CAD Comments
- Location Information
- Safety Related Issues





# Fire / EMS Communication Center Decreased Total Response Times

- Previous contract had 60 seconds to assign a medic after an engine was assigned
- Today, paramedic units are assigned at the same time that engines are assigned
- 47 seconds on average has completely been eliminated



#### Right Resources to the Right Patient



- After extensive study, in collaboration, the LEMSA and Alliance adjusted response configurations for a certain component of call types. The goals are:
  - \* Introduce flexibility into the EMS system
  - Introduce added safety into our EMS response
  - \* Introduce efficiency into our EMS response
  - Understand that there is no "one size fits all"



#### Financial Stability and Transparency

At the current payer mix, collections rate, and contract expenses, Alliance model is financially sustainable

- \* The Contra Costa County Fire Protection District established a separate fund and budget (EMS Transport Fund) associated with Alliance ambulance service delivery.
  - \* Allows tracking of revenue from different payer groups and expenditures associated with the provision of ambulance services.
- \* The End of Year fund balance in the EMS Transport Fund for FY 2017-18 was \$16,900,000
- \* The District continues to build appropriate reserves and to prepare for future uncertainties in the health care system and payer plans.
  - \* It is the District's goal to set aside six months of operating expenses as reserves and is on track to accomplish this goal.



## Collaborative Partnerships Stronger Together!

