

TRI-TOWN Emergency Medical Service

Monthly Director's Report

for the Month of

April 2015



Municipal Ambulance Service

for the Towns of

Pembroke & Allenstown



Prepared By: *Christopher Gamache, Director*

May 4, 2015



PREFACE

Tri-Town Emergency Medical Service was started on January 1, 2013 by an Inter-Municipal Agreement between the towns of Allentown 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 is the two towns, but will 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 that provides its service area with 24/7 paramedic coverage. 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 around the clock to answer call for help.

REPORT INTRODUCTION

This report was generated on May 4, 2015 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 presented at the Monthly Meeting of the Joint Board on Wednesday May 13, 2015. 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 calls 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 Hirsh. 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 Services76
- Total Number of Patient’s Transported55
 - Transports to Concord Hospital45 (82%)
 - Transports to Catholic Medical Center (CMC)5 (9%)
 - Transports to Elliot Hospital5 (9%)
 - Transports to Other Hospital0
- Total Number of EMS Runs Where Mutual Aid was Received6
 - Concord Fire Department5
 - Epsom Fire Department0
 - Hooksett Fire Department1
 - Other EMS Agency0
- Total Number of Patient’s Refusing Transport to the Emergency Department15
- Total Number of EMS Responses that Resulted in Another Disposition6

SECTION 2: EMS RUN DATA

Average Run Times:

- Reaction Time: 1m 26s (57.9% <1min)
- Response Time:4m 7s (77.63% <5min)
- On-Scene Time:19m 51s (5.26%< 10min; 50%< 20 min)
- Transport Time:19m 46s
- Back In Service Time:19m 1s

EMS Call Location, by Town:

- Allenstown, NH30 (39.47%)
- Pembroke, NH44 (57.89%)
- Deerfield, NH0 (0%)
- Manchester, NH.....0 (0%)
- Hooksett, NH2 (2.63%)
- Epsom, NH0 (1.22%)
- Concord, NH0 (0%)



Times of Call

Time Period	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total	Percentage
0000 - 0300	2	1	1	1	0	0	0	5	6.58%
0300 - 0600	1	1	2	0	2	0	1	7	9.21%
0600 - 0900	4	1	2	2	0	2	1	12	15.79%
0900 - 1200	3	3	1	2	3	0	2	14	18.42%
1200 - 1500	1	4	2	1	1	0	1	10	13.16%
1500 - 1800	2	0	1	7	0	0	1	11	14.47%
1800 - 2100	0	0	4	1	1	3	2	11	14.47%
2100 - 2400	1	2	0	3	0	0	0	6	7.89%
Unknown	0	0	0	0	0	0	0	0	0.00%
Total	14	12	13	17	7	5	8	76	100%

Runs by Dispatch Reason

Dispatch Reason	# of Times	% of Times
Abdominal Pain	2	2.63%
Assault	2	2.63%
Back Pain (Non-Traumatic / Non-Recent Trauma)	1	1.32%
Breathing Problem	12	15.79%
Chest Pain	7	9.21%
CO Poisoning / Hazmat	1	1.32%
Diabetic Problem	1	1.32%
Fall Victim	8	10.53%
Lift Assist / Invalid Assist	1	1.32%
Medical Alarm	2	2.63%
Motorized Vehicle Crash (Auto /Truck / ATV / Etc).	5	6.58%
Other	6	7.89%
Overdose	3	3.95%
Pregnancy / Childbirth	1	1.32%
Psychiatric / Behavioral Problems	2	2.63%
Respiratory Arrest	1	1.32%
Seizure / Convulsions	5	6.58%
Sick Person	9	11.84%
Stroke / CVA	3	3.95%
Unconscious / Fainting	4	5.26%
Unknown	0	0.00%
Total	76	100%

Procedure Administered

Procedure Name	#	%
Assessment: Patient Assessment	75	48.68%
Cardiac: 12 Lead ECG Obtained	63	32.89%
Cardiac: 12/15/18 Lead ECG-Transmitted	6	3.95%
Cardiac: CPR (Mechanical Device)	2	1.32%
Cardiac: ECG Monitoring	75	47.37%
General: Patient Warming (Hot Pack or Global)	2	1.32%
Movement: Cervical Collar Applied for Stabilization	4	2.63%
Movement: via Extrication Device (Full-Length)	2	1.32%
Musculoskeletal: Spinal Assessment	4	2.63%
Musculoskeletal: Spinal Motion Restriction (With C-Collar)	8	5.26%
Musculoskeletal: Spinal Precautions Withheld Per Assessment Criteria	2	1.32%
Musculoskeletal: Splinting (General)	6	3.95%
Respiratory: Bagged Ventilations (via Tube)	2	1.32%
Respiratory: CPAP	3	1.32%
Respiratory: ETCO2 Digital Capnography	9	5.26%
Respiratory: Intubation (Orotracheal)	2	1.32%
Vascular: IV Catheterization (Extremity Vein)	124	68.42%
None	15	19.74%

Medication Administered

Medication Name	#	%
Albuterol Sulfate	5	6.58%
Aspirin (ASA)	7	9.21%
Dextrose 50% (D50)	2	2.63%
DuoNeb (0.5 Atrovent/3.0 Albuterol)	3	3.95%
Epinephrine 1:10,000	1	1.32%
Fentanyl	5	6.58%
Glucose (Oral)	1	1.32%
Ibuprofen (Advil, Motrin)	1	1.32%
Ipratropium Bromide (Atrovent)	3	3.95%
Methylprednisolone (Solu-Medrol)	3	3.95%
Midazolam (Versed)	1	1.32%
Morphine Sulfate	4	5.26%
Naloxone (Narcan)	1	1.32%
Nitroglycerin	4	5.26%
Normal Saline	25	32.89%
Ondansetron (Zofran)	14	18.42%
Oxygen	3	3.95%
Oxygen by Nasal Cannula	7	9.21%
Sodium Bicarbonate	1	1.32%
None	36	47.37%

SECTION 3: TRI-TOWN EMS PERSONNEL:

During the month of April 2015, there was one (1) Per Diem employee removed from the roster for lack of involvement with the service and (1) Per Diem employee who resigned. One (1) Full Time was placed on Paid Administrative Leave. The current staffing of Tri-Town EMS:

- Full Time Employees3
- Part Time Employees6
- Per Diem Employees16
- TOTAL WORK FORCE25

SECTION 4: EQUIPMENT

- The service took delivery of two (2) Panasonic Toughpads for documenting EMS Calls.
- The service replaced the four (4) fire extinguishers for the ambulances.

SECTION 5: COORESPONDANCE WITH OTHER HEALTHCARE AGENGIES

Concord Hospital: April 9th, attended an MCI Triage Committee meeting put on by Concord Hospital. The meeting’s purpose was to suggest a triage method for the Capital Area. Continuing with the METTAG system was the consensus. Data came from an MCI training and exercise held at the Pembroke Fire Station.

Concord Hospital: The service’s Medical Director Dr. Hirsh and EMS Coordinator Sue Prentiss were made aware of internal inquiry pertaining to clinical issues and the action being taken by the service.

New Hampshire Bureau of EMS: (March), Representatives from Tri-Town EMS attended the March Medical Control Board Meeting. Major topics included the state’s efforts with Trauma Centers; current legislation; drug diversion updates; the states struggle with Heroin and licensing law enforcement to administer Narcan; the administration of Aspirin for cardiac related chest discomfort; pushing providers to perform a stroke scale on patients with signs and symptoms of such; changes to pediatric cardiac arrest; updated the use of CPAP for pediatrics; administration of IV fluids for patients with signs and symptoms of dehydration; Bariatric Protocol; Medical Integrated Health Care updates; Cricothyrotomy preparations, Zofran for AEMTs – no changes were made, BiPAP and RSI.

SECTION 6: REVENUE AND EXPENDITURES

Revenues: Ambulance Billing: \$49,965.69 Legal Document Request: \$25.00
Total: \$49,990.69

Expenses:

- The service paid \$1,182.52 for supplies and oxygen for the month of April.
- OVERTIME: 77 hours, \$2,070.87



SECTION 7: DIRECTOR RECOMMENDATIONS/COMMENTS

- The service entered into an internal inquiry resulting in an employee being placed on paid administrative leave. This is the reason the overtime for April was significantly increased.
- The service is in the process of creating specifications for a new ambulance and is working with ambulance manufacturers to obtain pricing.
- ComStar is waiting on Tri-Town to determine the fate of 25 accounts, representing just over \$17,000. The accounts are delinquent. The board was given a recommendation for a process for the handling of delinquent accounts.

SECTION 8: VEHICLE MAINTENANCE

- Ambulance 2: MILEAGE: 75,006
- Ambulance 3: MILEAGE: 51,389

SECTION 9: 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: Veronica "Paige" Lorenz
- Pembroke Member-At-Large: Robert "Bob" Bourque
- Tri-Town EMS Employee Member: VACANT
- Tri-Town EMS Director: Christopher Gamache BS, NREMT-P



Christopher Gamache - Director

05/12/2015

Date