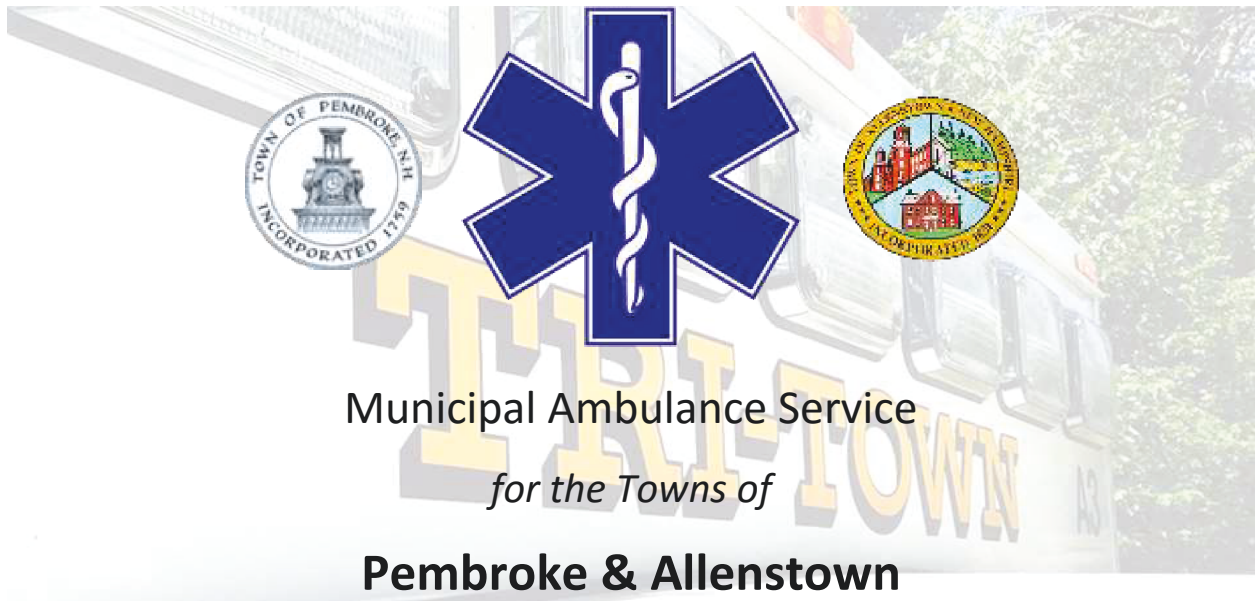


TRI-TOWN Emergency Medical Service

Monthly Director's Report

for the Month of

April 2016



Prepared By: *Christopher Gamache, Director*

May 6, 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 May 6, 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 May 11, 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 Services75
 April 2015.....76
- Total Number of Patient’s Transported53
 April 2015.....55
 - Transports to Concord Hospital40 (76%)
 - Transports to Catholic Medical Center (CMC)5 (10%)
 - Transports to Elliot Hospital8 (15%)
 - Transports to Other Hospital0 (0%)
- Total Number of EMS Runs Where Mutual Aid was Received7
 April 2015.....6
 - Concord Fire Department4
 - Epsom Fire Department1
 - Hooksett Fire Department2
 - Other EMS Agency0
- Total Number of Patient’s Refusing Transport to the Emergency Department10
- Total Number of EMS Responses that Resulted in Another Disposition5

SECTION 2: EMS RUN DATA

Average Run Times:

- Reaction Time: 1m 1s (78.08% <1min)
- Response Time:4m 28s (67.12% <5min)
- On-Scene Time:18m 32s (4.11%< 10min; 52.06%< 20 min)
- Transport Time:.....18m 14s
- Back In Service Time:16m 35s
- Time on Task:0h 58m 52s

EMS Call Location, by Town:

- Allenstown, NH35 (47%)
 April 2015.....30
- Pembroke, NH36 (48%)
 April 2015.....44
- Hooksett, NH3 (4%)
- Concord, NH0 (0%)
- Epsom, NH1 (1%)



Times of Call

Time Period	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total	Percentage
0000 - 0300	1	0	0	0	1	2	3	7	9.59%
0300 - 0600	1	0	1	0	3	0	0	5	6.85%
0600 - 0900	2	0	1	0	1	1	1	6	8.22%
0900 - 1200	1	3	0	0	2	2	4	12	16.44%
1200 - 1500	1	1	2	0	2	1	3	10	13.70%
1500 - 1800	1	0	2	2	2	2	3	12	16.44%
1800 - 2100	2	1	1	2	3	2	2	13	17.81%
2100 - 2400	0	1	1	0	2	1	3	8	10.96%
Unknown	0	0	0	0	0	0	0	0	0.00%
Total	9	6	8	4	16	11	19	73	100%

Runs by Dispatch Reason

Dispatch Reason	# of Times	% of Times
Abdominal Pain	1	1.37%
Assault	5	6.85%
Back Pain (Non-Traumatic / Non-Recent Trauma)	3	4.11%
Breathing Problem	11	15.07%
Burns	2	2.74%
Cardiac Arrest	2	2.74%
Chest Pain	8	10.96%
Diabetic Problem	2	2.74%
Fall Victim	11	15.07%
Hemorrhage / Laceration	2	2.74%
Lift Assist / Invalid Assist	2	2.74%
Medical Alarm	2	2.74%
Motorized Vehicle Crash (Auto / Truck / ATV / Etc).	3	4.11%
Other	3	4.11%
Overdose	1	1.37%
Psychiatric / Behavioral Problems	1	1.37%
Seizure / Convulsions	2	2.74%
Sick Person	6	8.22%
Stroke / CVA	2	2.74%
Unconscious / Fainting	4	5.48%
Unknown	0	0.00%
Total	73	100%

Procedure Administered

Procedure Name	#	%
Assessment: Patient Assessment	25	34.25%
Cardiac: 12 Lead ECG Obtained	24	32.88%
Cardiac: 12/15/18 Lead ECG-Transmitted	5	6.85%
Cardiac: 15 Lead ECG Obtained	1	1.37%
Cardiac: CPR (Mechanical Device)	1	1.37%
Cardiac: ECG Monitoring	27	36.99%
Movement: Cervical Collar Applied for Stabilization	1	1.37%
Movement: Extrication of Patient	1	1.37%
Movement: via Extrication Device (Full-Length)	1	1.37%
Musculoskeletal: Spinal Assessment	3	4.11%
Musculoskeletal: Spinal Motion Restriction (w/o C-Collar)	1	1.37%
Musculoskeletal: Spinal Motion Restriction (With C-Collar)	2	2.74%
Musculoskeletal: Spinal Precautions Withheld Per Assessment Criteria	1	1.37%
Musculoskeletal: Splinting (General)	2	2.74%
Respiratory: Bagged Ventilations (via Mask)	1	1.37%
Respiratory: Bagged Ventilations (via Tube)	1	1.37%
Respiratory: ETCO2 Digital Capnography	4	5.48%
Respiratory: Intubation (Orotracheal Using Bougie Device)	1	1.37%
Respiratory: OPA Insertion	1	1.37%
Respiratory: SGA Insertion (King / Single Lumen)	1	1.37%
Soft Tissue: Burn Care	1	1.37%
Vascular: IntraOsseous Insertion	1	1.37%
Vascular: IV Catheterization (Extremity Vein)	50	68.49%
None	24	32.88%

Medication Administered

Medication Name	#	%
Albuterol Sulfate	2	2.74%
Aspirin (ASA)	7	9.59%
Dextrose 10% (D10)	1	1.37%
DuoNeb (0.5 Atrovent/3.0 Albuterol)	5	6.85%
Epinephrine 1:10,000	1	1.37%
Fentanyl	2	2.74%
Ipratropium Bromide (Atrovent)	1	1.37%
Methylprednisolone (Solu-Medrol)	2	2.74%
Naloxone (Narcan)	1	1.37%
Nitroglycerin	5	6.85%
Nitroglycerin Drip	1	1.37%
Normal Saline	15	20.55%
Ondansetron (Zofran)	11	15.07%
Oxygen	3	4.11%
Oxygen by Nasal Cannula	5	6.85%
None	37	50.68%

SECTION 3: TRI-TOWN EMS PERSONNEL:



During the month of April 2016, one Per Diem EMT completed their orientation process and one Per Diem Advanced EMT resigned (No Board meeting to accept resignation, moved to May). 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, 5-AEMT, 5-EMT).....16
- TOTAL WORK FORCE24

SECTION 4: EQUIPMENT

- Braun Infusion Pumps (4) Medication Library was updated to cover all possible infusions Tri-Town EMS may administer and Dopamine was removed.

SECTION 5: COORESPONDENCE WITH OTHER HEALTHCARE AGENGIES

Allenstown Fire Department & Pembroke Fire Department: Joint training with the two fire departments and Tri-Town EMS, put on by Dr. David Hirsch of Concord Hospital on Illicit Drugs and Excited/Agitated Delirium.

Capital Area Mutual Compact: Attended the meeting at the Warner Fire Department – Talked about Accountability Tags, Discussion on current Active Shooter / EMS in the Warm Zone Trainings, those who attended found it beneficial, Discussed dispatch equipment on towers.

New Hampshire Bureau of Emergency Medical Service: 1) Submitted the service’s application to be able to perform Bougie Assisted Surgical Cricothyrotomy 2) Submitted official correspondence to the Bureau pertaining to an employee matter.

SECTION 6: REVENUE AND EXPENDITURES

Revenues: Ambulance Billing: \$19,382.58 Legal Document Request: \$0.00
 Detail Coverage: \$0.00 Paramedic Intercept: \$0.00
Total: \$19,382.58

Expenses:

- The service paid \$1,681.38 for supplies and oxygen for the month of March.
- OVERTIME: 20 hours, \$616.50

SECTION 7: QUALITY ASSURANCE / QUALITY IMPROVEMENT SUMMARY

- 2 EMS Incidents were reviewed with the providers for Quality Assurance purposes.
- EKG need to be attached to PCR’s when the procedure is performed.
- Several Employees failed to enter transport mileage on their PCR’s.
- April’s Training(s):
 - JEMS Article: Ticking Time Bomb: How Aortic Aneurysms Become Catastrophes
 - EMS World Article: Permissive Hypotension in Trauma
 - NCCP Training: Psychiatric Emergencies & Agitated Delirium by Dr. David Hirsch



- Primex Provided Training (On-Line) was made mandatory for all personnel (Back Injury Prevention, Bloodborne Pathogens, Defensive Driving, Diversity Benefits, EEO Laws and Discrimination Prevention, Ergonomics in the Office, Ethics for Public Employees, Fire Safety, Personal Protective Equipment and Slips, Trips and Fall Prevention.
- On site Primex Training on Sexual Harassment, Hostile Work Environment and Defensive Driving was attended by 7 providers.
- 1 on 1 training was given to some employees covering past trainings topics.
- Monthly Skills Training on ALS mannequin commenced.
- Recommendations:
 - Storage needed for training aids
 - Update Orientation Manual
 - Update and implement competencies in 2016
 - Refresher training on infusion pumps.

SECTION 8: DIRECTOR'S COMMENTS & RECOMMENDATIONS


- Worked on the HIPAA/Survey forms. This project is almost complete.
- Developed a Merit Step plan for future employee raises.
- Sent out Tri-Town EMS ambulance specifications to 5 ambulance manufacturers.
- Developed six (6) policies: Advocating for Safety, Durable Medical Equipment, Employee Pay Increases, Falsification of Documents, Mandatory Reporting, and Fiscal Responsibility.

SECTION 9: VEHICLE MAINTENANCE

- Ambulance 2: MILEAGE: 77,899
- Ambulance 3: MILEAGE: 68,700

SECTION 10: TRI TOWN EMERGENCY MEDICAL SERVICE LEADERSHIP

- | | |
|--|---------------------------------|
| ● Chairman of the Board of Directors & Allentown Town Administrator: | Shaun Mulholland |
| ● Pembroke Town Administrator: | David Jodoin |
| ● Allentown Fire Chief: | Dana Pendergast |
| ● Pembroke Fire Chief: | Harold Paulsen |
| ● Allentown 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 |



05/06/2016

Christopher Gamache - Director

Date

APPENDIX 1: 4-Year Call Volume History



TRI-TOWN EMS CALL VOLUME

