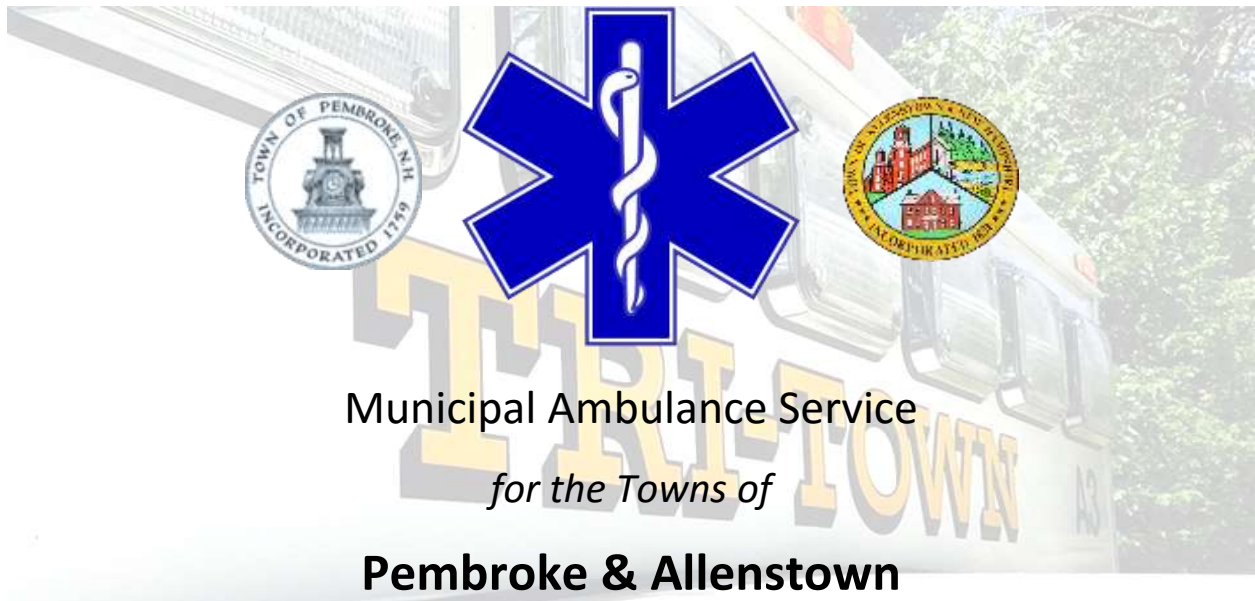


**TRI-TOWN Emergency Medical Service**

**Monthly Director's Report**

*for the Month of*

*February 2016*



**Municipal Ambulance Service**

*for the Towns of*

**Pembroke & Allenstown**



Prepared By: *Christopher Gamache, Director*

March 4, 2016



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## 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.

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## REPORT INTRODUCTION

This report was generated on March 4, 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 March 9, 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](http://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 Services .....75  
     February 2015.....63
- Total Number of Patient’s Transported .....57  
     February 2015.....38
  - Transports to Concord Hospital .....46 (75%)
  - Transports to Catholic Medical Center (CMC) .....6 (10%)
  - Transports to Elliot Hospital .....9 (15%)
  - Transports to Other Hospital .....0 (0%)
- Total Number of EMS Runs Where Mutual Aid was Received .....4  
     February 2015.....n/a
  - Concord Fire Department .....3
  - Epsom Fire Department .....1
  - Hooksett Fire Department .....0
  - Other EMS Agency .....0
- Total Number of Patient’s Refusing Transport to the Emergency Department .....5
- Total Number of EMS Responses that Resulted in Another Disposition .....13

**SECTION 2: EMS RUN DATA**

**Average Run Times:**

- Reaction Time: ..... 1m 4s (79.45% <1min)
- Response Time: .....4m 26s (68.49% <5min)
- On-Scene Time: .....19m 7s (5.48%< 10min; 47.95%< 20 min)
- Transport Time:.....18m 18s
- Back In Service Time: .....14m 51s
- Time on Task: .....1h 1m 15s

**EMS Call Location, by Town:**

- Allenstown, NH .....37 (49.33%)  
     February 2015.....21
- Pembroke, NH .....31 (41.33%)  
     February 2015.....39
- Hooksett, NH .....6 (8.0%)
- Concord, NH .....1 (1.33%)



## Times of Call

Time Period	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total	Percentage
0000 - 0300	2	2	0	1	1	2	0	8	10.96%
0300 - 0600	1	2	0	0	0	1	0	4	5.48%
0600 - 0900	1	1	2	1	2	0	0	7	9.59%
0900 - 1200	1	1	4	3	1	1	1	12	16.44%
1200 - 1500	2	6	1	3	0	2	1	15	20.55%
1500 - 1800	1	1	1	0	0	3	1	7	9.59%
1800 - 2100	2	0	0	4	1	3	3	13	17.81%
2100 - 2400	0	3	0	2	1	1	0	7	9.59%
Unknown	0	0	0	0	0	0	0	0	0.00%
<b>Total</b>	<b>10</b>	<b>16</b>	<b>8</b>	<b>14</b>	<b>6</b>	<b>13</b>	<b>6</b>	<b>73</b>	<b>100%</b>

## Runs by Dispatch Reason

Dispatch Reason	# of Times	% of Times
Abdominal Pain	4	5.48%
Altered Mental Status	1	1.37%
Back Pain (Non-Traumatic / Non-Recent Trauma)	1	1.37%
Breathing Problem	7	9.59%
Cardiac Arrest	2	2.74%
Chest Pain	9	12.33%
CO Poisoning / Hazmat	1	1.37%
Diabetic Problem	2	2.74%
Fall Victim	7	9.59%
Heart Problems	2	2.74%
Medical Alarm	2	2.74%
Motorized Vehicle Crash (Auto / Truck / ATV / Etc).	5	6.85%
Other	1	1.37%
Overdose	4	5.48%
Pain	1	1.37%
Psychiatric / Behavioral Problems	1	1.37%
Seizure / Convulsions	3	4.11%
Sick Person	10	13.70%
Stroke / CVA	1	1.37%
Traumatic Injury	2	2.74%
Unconscious / Fainting	4	5.48%
Unknown Problem / Man Down	3	4.11%
Unknown	0	0.00%
<b>Total</b>	<b>73</b>	<b>100%</b>



## Procedure Administered

Procedure Name	#	%
Assessment: Patient Assessment	31	42.47%
Cardiac: 12 Lead ECG Obtained	28	38.36%
Cardiac: 12/15/18 Lead ECG-Transmitted	12	16.44%
Cardiac: CPR (Manual)	1	1.37%
Cardiac: CPR (Mechanical Device)	1	1.37%
Cardiac: Defibrillation (AED)	1	1.37%
Cardiac: ECG Monitoring	33	45.21%
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 Motion Restriction (With C-Collar)	2	2.74%
Musculoskeletal: Splinting (General)	2	2.74%
Respiratory: Bagged Ventilations (via Mask)	2	2.74%
Respiratory: ETCO2 Digital Capnography	3	4.11%
Respiratory: Heimlich Maneuver	1	1.37%
Respiratory: Intubation (Orotracheal)	3	4.11%
Respiratory: NPA Insertion	1	1.37%
Respiratory: Suction Airway	1	1.37%
Soft Tissue: General Wound Care	2	2.74%
Vascular: IntraOsseous Insertion	2	2.74%
Vascular: IV Catheterization (Extremity Vein)	71	97.26%
None	17	23.29%

## Medication Administered

Medication Name	#	%
Albuterol Sulfate	2	2.74%
Aspirin (ASA)	12	16.44%
Dextrose 10% (D10)	1	1.37%
Diltiazem (Cardizem)	1	1.37%
Diphenhydramine (Benadryl)	1	1.37%
DuoNeb (0.5 Atrovent/3.0 Albuterol)	1	1.37%
Epinephrine 1:10,000	1	1.37%
Fentanyl	5	6.85%
Hydromorphone (Dilaudid)	1	1.37%
Ipratropium Bromide (Atrovent)	1	1.37%
Ketorolac (Toradol)	1	1.37%
Magnesium Sulfate	1	1.37%
Methylprednisolone (Solu-Medrol)	1	1.37%
Midazolam (Versed)	1	1.37%
Naloxone (Narcan)	1	1.37%
Nitroglycerin	10	13.70%
Normal Saline	27	36.99%
Ondansetron (Zofran)	15	20.55%
Oxygen	9	12.33%
Oxygen by Nasal Cannula	5	6.85%
Oxygen by Nebulizer	1	1.37%
None	32	43.84%

SECTION 3: TRI-TOWN EMS PERSONNEL:

During the month of February 2016, one Per Diem EMT left the Service and the Service hire a Per Diem EMT and a Per Diem AEMT. The current staffing of Tri-Town EMS:

- Full Time Employees (3- Paramedics).....3
- Part Time Employees (2-Paramedics, 2-AEMT, 2-EMT).....6
- Per Diem Employees (6-Paramedics, 8-AEMT, 4-EMT).....18
- TOTAL WORK FORCE .....27

SECTION 4: EQUIPMENT

- The ALS mannequin was received by the service. The power supply needed to be replaced and it was. The iPad’s latest update was incompatible with the APP for the mannequin. The Service is waiting for the APP to be updated.
- Protective Pelican Case was purchased and set up for the McGraph Video Laryngoscope.

SECTION 5: COORESPONDENCE WITH OTHER HEALTHCARE AGENGIES

*Allenstown Fire Department:* Finalized training plans to involve Allenstown Fire Department, with the EMS trainings to begin in April. Also designated a contacted person for Allenstown Fire Department pertaining to Training. Allenstown Fire will start to be part of the monthly article training starting in April.

*Capital Area Mutual Compact:* 1) Met with Chief Keith Gilbert about the Mutual Process and how to tie EMS (and related NH RSA’s) into the Compact. 2) Attended the February Compact meeting at the Hillsboro Fire Station on February 18<sup>th</sup>.

*Hooksett Fire Department:* Assisted Hooksett Fire Department with their EMS training plans for the next two (2) years. (Done over the phone)

*New Hampshire Bureau of Emergency Medical Service:* 1) attended the protocol committee meeting.

*Concord Hospital:* 1) met with Dr. Hirsch and Sue Prentiss about adding Reglan, Decadron and Norepinephrine (Levophed) to the Tri-Town’s medication bag, Medical Director approval for Decadron and Norepinephrine trainings, set up RSI Assistant Training Program on conjunction with Concord Hospital and the New Hampshire Fire Academy, Medical Director approval for the FTO Program, Medical Director approval for the monthly skill matrix and minimum accepted standards for their completion, Medical Director Review of Pre-Requisite Protocol Procedure of Surgical Cricothyrotomy packet, Medical Director involvement in the Quality Assurance process and Accreditation Process, discussed Mutual Aid Agreement and Paramedic Intercept Agreements, update on Lactate monitor program, and reviewed Service Competencies. 2) Discussed clinical concerns pertaining to an inquiry with Dr. Hirsch and Sue Prentiss. 3) Notified Concord Hospital of Tri-Town’s completion of the Control Substance Accountability Training.



## SECTION 6: REVENUE AND EXPENDITURES

Revenues: Ambulance Billing: \$21,807.75      Legal Document Request: \$0.00

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

**Total: \$21,832.75**

### Expenses:

- The service paid \$749.17 for supplies and oxygen for the month of December.
- OVERTIME: 28 hours, \$845.25

## SECTION 7: QUALITY ASSURANCE / QUALITY IMPROVEMENT SUMMARY

- Clinical Inquiry Performed. Complaint # 121920151143IC
- Training on DNR's is indicated.
- Ongoing concerns pertaining to appropriate signatures for authorization for billing.
- February's Training(s):
  - JEMS Article: Peeling Back the Layers, and overview of Bacterial Meningitis.
  - EMS World Article: Getting the most from your history & physical; chest pain patients.
  - Paramedic Training on Wasting Control Substances – Mandated by Concord Hospital. Deadline for Service Paramedics to complete is 2/7/16 - **COMPLETED**
  - CPR Course help by Concord Hospital RN, Michelle Gamache – 5 attended.
- Recommendations:
  - Rollout the monthly skill matrix/trainings without the iPad being ready.
  - Obtain state approval for the Surgical Cricothyrotomy Program.
  - Rollout the McGrath Video Laryngoscope Trainings.

## SECTION 8: DIRECTOR'S COMMENTS & RECOMMENDATIONS

- In the process of finishing the employee evaluations
- Work continues on the Mutual Aid Agreements and Paramedic Intercept Agreements.
- Finalizing Ambulance Specifications to be sent out for proposal at the end of March or beginning of April.
- Pertaining to the issues with Ambulance 3, changes some of the processes surrounding starting the ambulance, and vehicle checks will soon be disseminated to the staff.
- Assigned Full Time employee to work on Patient Surveys and collection of surveys and analysis methods.
- Working on HIPAA notices for the service.
- 2016 pay increases will take effect in April. Forms are being readied for that process.
- Review of Accreditation Standards and their impact on the service. The Service will be soon be ordering the packet for accreditation by the Commission on Accreditation of Ambulance Service (CAAS). Work has already been started on this process.
- Director and Assistant Director will be attending the NHFS&T Instructor II/III course held at Dover Fire Department every Wednesday in March.
- Director, Assistant Director and Full Time Employee are signed up for a CPR instructor course in May. The Service will attempt to affiliate with Concord Hospital for CPR training.
- The Service intends on submitting the packet for the Surgical Cricothyrotomy Pre-Requisite Protocol to NH EMS in March.

**SECTION 9: VEHICLE MAINTENANCE**

- Ambulance 2: MILEAGE: 77,783
- Ambulance 3: MILEAGE: 65,884
- Ambulance 3 :
  - Ambulance 3 was checked by Profession Vehicle Corporation (PVC), the vendor who sold Ambulance 3 to TTVEAS, because the low voltage alarm was sounding every time the ambulance was started and the ambulance sometimes was hard to start. The Alternators, Battery Charger and Electrical System was checked and no problems found. It was recommended if the problem persists, that the Service replaces one part at a time until the problem goes away.

**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

