

**EMS SPONSOR HOSPITAL POLICY  
QUALITY ASSURANCE / QUALITY IMPROVEMENT  
PERFORMANCE METRICS**

**Purpose:**

Continuously measure system performance to objectively demonstrate quality care delivery and to identify areas on which to focus improvement activities

**Scope:**

All Hartford Hospital Sponsored EMS Agencies.

**Discussion:**

To be most effective, quality assurance activities must rely on objective data to trend system and provider performance over time as well as to compare performance against EMS systems of similar size and design. The EMS Coordinator is available to work with sponsored EMS agencies on facilitating the measurement and use of these performance indicators.

**Policy:**

**All sponsored EMS services will monitor the following performance measures and report out to the Sponsor Hospital at monthly intervals. First responder agencies may partner with their local ambulance provider to identify cardiac arrest cases. Additional CPR, defibrillation and/or outcome performance data may be captured and reported if desired.**

**All sponsored EMS services (First Responder, Ambulance & Paramedic):**

- Number of 911 EMS responses – For first responders, this will usually be the same as requests received. For transport and paramedic agencies, this will be the difference of requests received and passed calls.
- Number of cases receiving QA review: Number of clinical cases reviewed for adherence to patient care guidelines and standard of care

The following only apply if the service is authorized to use AEDs / perform defibrillation and/or administer naloxone:

- Number of cardiac arrest patients: Number of patients with cardiac arrest occurring prior to EMS arrival where CPR is performed by agency personnel.
- Number of cardiac arrest patients with AED/monitor applied: Number of patients with cardiac arrest occurring prior to EMS arrival where CPR is performed and agency personnel applied an agency AED or cardiac monitor.
- Average time from dispatch till 1st rhythm: In cardiac arrest occurring prior to EMS arrival where CPR is performed, what is the average time from dispatch till AED “analyze” (or Cardiac Monitor powered on and ECG rhythm displayed)
- Number of cardiac arrest patients receiving defibrillation: Number of patients with cardiac arrest occurring prior to EMS arrival where defibrillation is attempted.

- Average time from dispatch till defibrillation: In cardiac arrest occurring prior to EMS arrival where defibrillation is attempted, what is the average time from dispatch to the initial defibrillation?
- Number of patients administered naloxone by agency personnel: Only count patients who received naloxone from the agency's EMS providers.
- Percentage of patients administered naloxone by agency personnel with BVM ventilation documented: Percentage of the total number of patients who received naloxone by agency personnel for whom agency personnel also documented performing BVM ventilation.
- Percentage of patients administered naloxone by agency personnel with BVM ventilation documented as performed PRIOR to naloxone: Percentage of the total number of patients who received naloxone by agency personnel for whom agency personnel also clearly documented performing BVM ventilation PRIOR to naloxone administration.

### Transport and Paramedic Services

- Number of refusals: Number of 911 EMS responses resulting in patient-initiated refusal
- Number of 911 EMS transports: Number of 911 EMS responses resulting in transport
- Percentage of patients with bystander CPR performed prior to EMS arrival: Percentage of cardiac arrest patients who received CPR for whom CPR was performed prior to first responder/ambulance/paramedic arrival by bystander.
- Number of Stroke Patients : Number of patients with EMS documented clinical impression of Stroke or CVA or focal neurological deficit
- Stroke scene time <15 minutes: Percentage of suspected Stroke patients with on scene time <15 minutes (California EMS core measure STR-3)
- Percentage of stroke patients with last known well time documented: Percentage of patients with primary or secondary clinical impression of stroke, CVA or TIA for whom a last known well or last seen normal time is documented.
- Percentage of acute stroke patients with stroke alert documented: Percentage of patients with primary or secondary clinical impression of stroke, CVA or TIA for whom a stroke alert pre-notification is documented. May exclude cases in which a last known well time is documented as >24 hours from hospital arrival time.

### Paramedic Services

- Percentage of stroke patients receiving blood glucose check: Percent of patient contacts with impression of CVA/Stroke or focal neurologic deficit with a documented blood glucose check (California EMS Core Measure STR-2)
- Percentage adult severe pain treated and improved: Percentage of patients older than 13 reporting a pain score of 7 or greater on a 0-10 scale received subsequent interventions associated with pain relief (NHTSA EMS performance measure 6.4)
- Number of patients for whom endotracheal intubation was attempted: Number of patients for whom intubation was attempted. An attempt is defined as a laryngoscope blade or ET tube passing the lips or ET tube entering the nostril.
- Percentage first pass intubation success: Percent of patient contacts for whom intubation was attempted who were successfully intubated on the 1<sup>st</sup> attempt. An attempt is defined as a laryngoscope blade or ET tube passing the lips or ET tube entering the nostril.
- Percentage EtCO2 utilization with BVM: Percentage of patient receiving BVM ventilation for whom continuous waveform capnography was utilized (modification of California EMS Core measure SKL-2)

**Monthly EMS PERFORMANCE METRIC REPORT**

Complete and submit to the Hartford Hospital EMS Coordinator within two weeks after the end of each month. If unable to obtain results for any metric(s), note as “unable to obtain” or “UTO” and provide detail on the issue(s) and any planned resolution in the comments.

Sponsored EMS Service		Month/Year:	/
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<b>ALL Sponsored EMS Agencies</b>	Number of 911 EMS responses	
	Number of cases receiving QA review	
	<b>Cardiac Arrest</b>	
	Number of cardiac arrest patients	
	Number of cardiac arrest patients with AED/monitor applied	
	Average time from dispatch till 1 <sup>st</sup> rhythm	minutes
	Number of cardiac arrest patients receiving defibrillation	
	Average time from dispatch till defibrillation	minutes
	<b>Naloxone</b>	
	Number of patients administered naloxone by agency personnel	
	Percentage of patients administered naloxone by agency personnel with BVM ventilation documented	%
	Percentage of patients administered naloxone by agency personnel with <u>BVM</u> ventilation documented as performed <u>PRIOR</u> to naloxone	%
	<b>Ambulance &amp; Paramedic</b>	Number of 911 EMS patient-initiated refusals
Number of 911 EMS transports		
Percentage of patients with bystander CPR performed		%
Number of Stroke Patients		
Stroke scene time <15 minutes		%
Percentage of stroke patients with last known well time documented		%
Percentage of acute stroke patients with stroke alert documented		%
<b>Paramedic</b>	Percentage of stroke patients receiving blood glucose check	%
	Percentage adult severe pain treated and improved	%
	Number of patients for whom endotracheal intubation was attempted	
	Percentage first pass intubation success	%
	Percentage EtCO2 utilization with BVM	%

Comments: