

# Department of Emergency Management 1011 Turk Street, San Francisco, CA 94102



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Anne Kronenberg Executive Director

# MEMORANDUM

October 26, 2015

TO: EMS Providers

FROM: Dr. John Brown, MD

**EMS Medical Director** 

RE: New Policy Effective NOVEMBER 1, 2015

Enclosed is the final version for Policy 4000.1 Ambulance Turnaround Standard. The effective date is <u>Sunday</u>, <u>November 1</u>. Please direct any questions or comments to Mary Magocsy (415) 487-5019 or <u>mary.magocsy@sfgov.org</u>

Thank you for your interest in improving EMS for San Francisco.

Policy Revision			
Policy		Action	
Number	Title	Taken	Details
4000.1	Ambulance Turnaround Standard	New Policy	Issue: Delays in ambulance patient off-loads at hospitals may affect EMS ambulance availability and response times.  Recommendation: Improving ambulance patient offload times is one part of an overall comprehensive effort to improve SF EMS response times.  Background: This policy defines standards for the ambulance turnaround and patient offload times. The time intervals were adapted from the California Hospital Association August 2014 guide entitled, "Toolkit to Reduce Ambulance Patient Off-Load Delays."

#### SAN FRANCISCO EMERGENCY MEDICAL SERVICES AGENCY

Policy Reference No.: 4000.1 Effective Date: November 1, 2015 Review Date: June 1, 2016

# AMBULANCE TURNAROUND TIME STANDARD

#### I. PURPOSE

To define the goals for ambulance turnaround and patient offload times.

#### II. AUTHORITY

California Health and Safety Code, Division 2.5, Sections 1797.204, 1797.206, 1797.220, 1797.224, 1797.252, and 1798.

#### III. BACKGROUND

Patient transfer from ambulance to hospital is a critical part of emergency care, both for the individual patient at the hospital and to preserve the availability of ambulances to answer 911 calls for medical assistance throughout the San Francisco EMS System.

#### IV. DEFINITIONS

**Ambulance arrival at the emergency department** – The time the ambulance stops (actual wheel stop) at the location outside the hospital emergency department where the patient is unloaded from the ambulance.

**Ambulance patient offload time** – The time when a patient is physically removed from the ambulance gurney to hospital equipment and transfer of care has been completed, as recorded by a signature from an emergency department nurse or doctor in a patient's EMS electronic health record.

**Ambulance return to service time –** The time the ambulance is response ready after transporting a patient to a hospital emergency department.

**Offload time interval** - The period of time between ambulance arrival at emergency department and ambulance patient offload time.

**Ambulance turnaround interval** - The period of time between ambulance arrival at emergency department and ambulance return to service time.

# V. POLICY

The goal for the offload time interval is 20 minutes or less, 90 percent of the time.

Policy Reference No.: 4001 Effective Date: November 1, 2015 Review Date: June 1, 2016

The goal for the ambulance turnaround interval is 30 minutes or less, 90 percent of the time.

# VI. DATA COLLECTION

- A. All interval measurements shall be reported monthly (on the first business day of the month) to the EMS Agency in an approved electronic format.
- B. Turnaround time data submitted by providers shall include date, time, location, call disposition (Code 2 or Code 3), arrival time at hospital, ambulance patient offload time and ambulance return to service time.

# VII. QUALITY IMPROVEMENT

- A. The EMS Agency will report monthly the following:
  - 1. Offload time interval for each provider at each emergency department.
  - 2. Ambulance turnaround interval for each provider at each emergency department.
  - 3. System aggregate intervals for patient offload and ambulance turnaround intervals.
- B. The EMS Agency will focus on identifying the root causes for delays, surges in demand and to what extent diversion impacts offload and turnaround intervals.