Emergency Medical Advisory Group (EMAG)

Meeting Agenda
April 14, 2022
2:30 PM – 4:00 PM

Meeting Location:
Join Zoom Meeting
https://us06web.zoom.us/j/82434475443?pwd=UXV2blpPM3o1eFlqRm4vcmpRWjRydz09

Phone Dial In: 1.669.900.6833
Meeting ID: 824 3447 5443
Passcode: 220252

Topic	Time
Welcome, Introductions, and Agenda Review – *Sandy Damiano, PhD, Deputy Director* • Materials Review • Additional Agenda Items for Discussion • Other Member Announcements	2:30 – 2:40
Approval of February Meeting Minutes – *Stephanie Mello* – ACTION ITEM	2:40 – 2:45
EMS Committees Update – *Hernando Garzon, MD*	2:45 – 2:55
COVID Update – *Hernando Garzon, MD*	2:55 – 3:10
Wall Times – *EMAG Participants* • Work Group Updates – *David Magnino and Brian Jensen* • Hospital Surge Build Out • Computer Aided Dispatch (CAD) Interface • Alternate Destinations	3:10 – 3:45
Public Comment: One comment per person/organization, limited to two minutes.	3:45 – 3:50
Closing Remarks & Adjourn – *Sandy Damiano*	3:50 – 4:00
Next Meetings • Thursday, June 9, 2022 / 2:30 – 4:00 PM • Thursday, August 11, 2022 / 2:30 – 4:00PM	

For more information, please visit the Emergency Medical Advisory Group website at:
https://dhs.saccounty.net/PRI/EMS/Pages/Emergency-Medical-Advisory-Group.aspx

Sacramento County Emergency Medical Advisory Group

Meeting Minutes
February 10, 2022, 2:30 PM – 4:00 PM

Meeting Held Electronically
Zoom Video Conference
https://us06web.zoom.us/j/82434475443?pwd=UXV2blpPM3o1eFlqRm4vcmpRWjRydz09
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ADVISORY GROUP MEMBERS			
X	ALS Ground Transport Providers, Public – Barbie Law, Sac Metro Fire	X	Hospital System – J. Douglas Kirk, MD, UC Davis Health
X	ALS Ground Transport Providers, Private – Karl Pedroni, American Medical Response (AMR)		Law Enforcement – Lt. Shaun Hampton, Sheriff's Office
	ALS Air Transport Providers – Mike Kaslin, REACH Air Medical	X	Training Provider – Jason Hemler, CSUS
	BLS Providers, Public – James Hendricks, Herald Fire District	**EX-OFFICIO MEMBERS**	
X	BLS Providers, Private – James Pierson, Medic Ambulance	X	County Primary Health Division – Sandy Damiano, PhD
X	Hospital System – Michael Korpiel, Dignity Health	X	County EMS Administrator – David Magnino
X	Hospital System – Michael Scates, Kaiser Permanente	X	County EMS Medical Director – Hernando Garzon, MD
X	Hospital System – Kevin Smothers, MD, Sutter Health	**GUEST PRESENTER**	
		X	Brian Jensen, Hospital Council

Advisory Group Members in Attendance: 8 – *Quorum present*
Public/Guests in Attendance: 12

Staff: Stephanie Mello

Sacramento County Emergency Medical Advisory Group

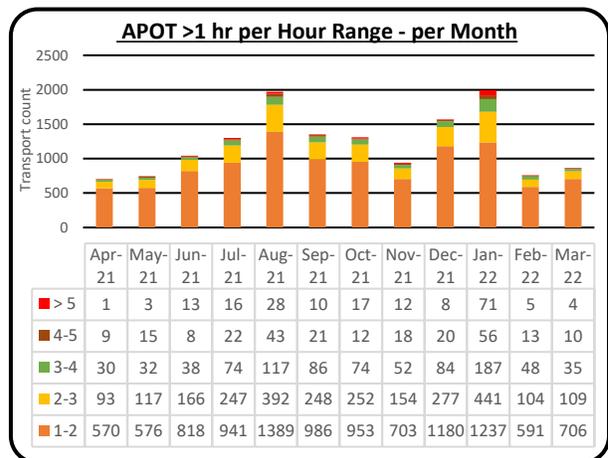| Topic	Minutes
Welcome, Introductions and Opening Remarks- *Sandy Damiano, PhD*	Sandy Damiano welcomed advisory group members, guests, and members of the public, and reviewed the agenda and meeting materials. • Agenda Review: Approval of December Meeting Minutes, EMS Committee Update, COVID Update, Wall Times. • Materials: Approval of December Meeting Minutes, APOT Data. *Materials are posted on the website.* Link: https://dhs.saccounty.net/PRI/EMS/Pages/Emergency-Medical-Advisory-Group.aspx • Additional Agenda Items for Discussion: None • Other Member Announcements: None
Roll Call – *Stephanie Mello*	Stephanie Mello conducted roll call. *Quorum present.*
Meeting Minutes – *Stephanie Mello*	• APPROVED – Advisory Group members had no changes to the December 9, 2021, draft meeting minutes. Meeting minutes were approved on a motion by Michael Korpiel and seconded by Kevin Smothers. Approved by vote of members in Zoom chat.
EMS Committee Update – *Hernando Garzon, MD*	Dr. Garzon: • No EMS Committee meetings since the December meeting. • No updates to report.
COVID Update – *Hernando Garzon, MD*	Dr. Garzon provided an update on COVID-19: • COVID Numbers: Decrease in Omicron COVID cases and COVID hospital admissions, hospitals are slowly decompressing, ICU's are still full and are typically the last to decompress, non-COVID census remains high and hospitals are still impacted. Decreasing numbers for hospital ER visits.
Wall Times – Current and Post Executive Order *All*	• State Surge Build Out: State supported hospital build out added over 200 beds. 5 of 9 Sacramento area hospitals have APOT paramedics. State covered support ends March 31, 2022. APOT paramedics will remain available, if the hospitals can/will pay for them. • APOT Times: Dr. Garzon presented APOT data. APOT times improved at hospitals with State supported surge beds and APOT paramedics. David Magnino presented additional APOT data showing a Monday surge. Michael Korpiel – Dignity Health explained Monday's higher APOT times. Dr. Kirk – UC Davis concurred. Dr. Kirk – UC Davis agrees that APOT paramedics are helpful in getting ambulances back into service.

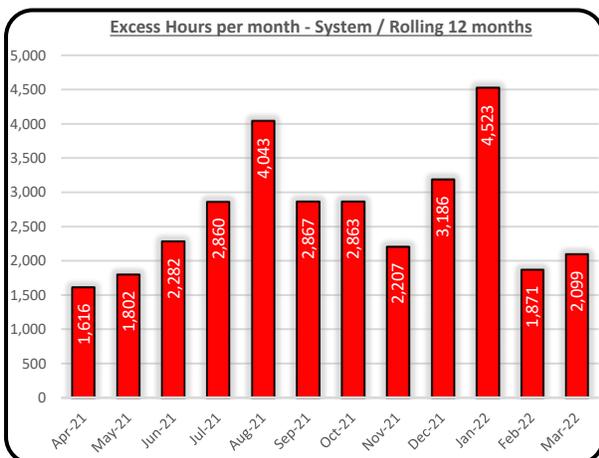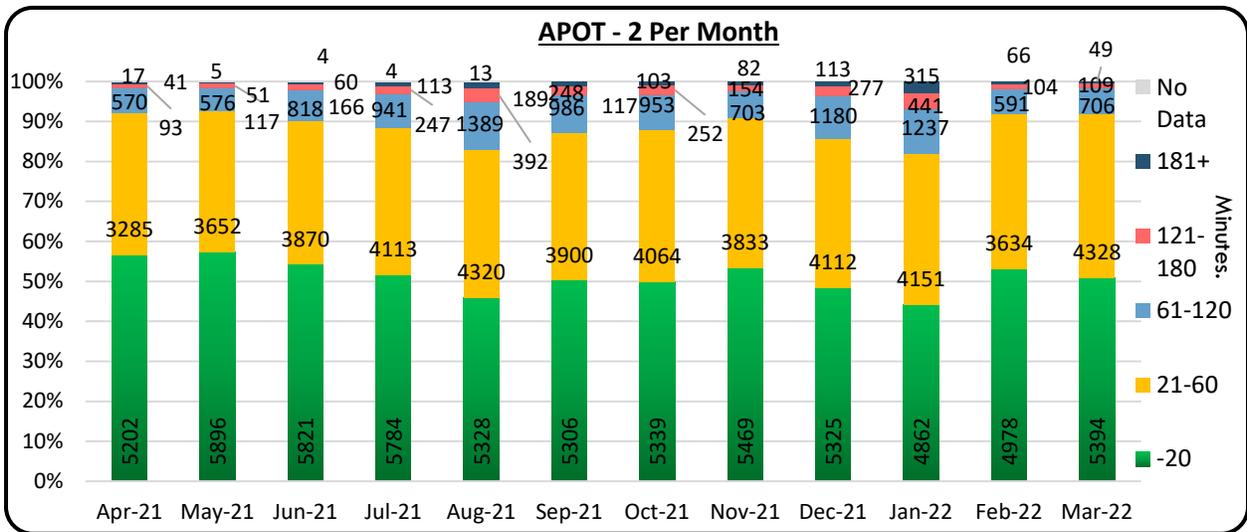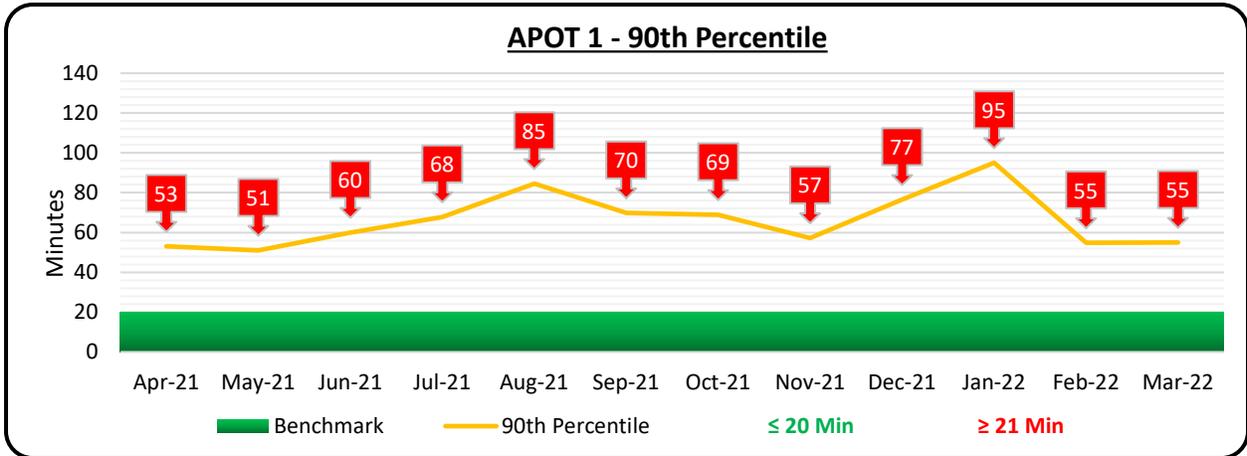# Sacramento County Emergency Medical Advisory Group

	• APOT Paramedics: APOT paramedics scope versus transporting paramedics. Can the scope be extended for APOT paramedics? Dr. Garzon approves, but the issue is the availability of medications and supplies for the APOT paramedics. Hospitals can lend some equipment. Providing medications is a challenge. • APOT Workgroup Update: Hospitals exchanged best practices and instituted some of them. The group continues to discuss resolving APOT issues post March 31, 2022. Action item for the hospitals is to share their plans post March 31, 2022 to consolidate patients on the wall into fewer paramedics and keep the lower APOT times. Michael Korpiel – Dignity Health – EMS feels hiring more staff is the solution, but hiring more staff doesn't resolve the hospital overcrowding and backlog of the system. Dr. Garzon - solutions must be collaborative. EMS transports account for about 15% of emergency room traffic. Dr. Kirk – UC Davis – Everyone has a part and solutions must also have an EMS base. David Magnino – EMS has implemented Assess and Refer, but due to regulations, is unable to implement alternate destinations. Sandy Damiano – Clarified that Dr. Kirk is asking if EMS has asked the State if it can use alternate destinations during this emergency. • Post State Support: Michael Korpiel – Dignity Health - Expressed concern that post March 31, 2022, the hospitals will be expected to hire and replace the APOT paramedics. Due to staffing shortage, hospitals are unable to find staff to hire. Jimmy Pierson – Medic Ambulance – Commented that the state associations need to come together to discuss better solutions or coalition type meetings. Sandy Damiano – Firefighter and Hospital Associations recently wrote a letter to the State urging then to move forward with solutions to mitigate APOT. • Computer Aided Dispatch (CAD) Interface: David Magnino shared a screen shot of the EMResource CAD interface including real time ambulance transports in route to a hospital, the number of ambulances at a hospital and the APOT times. Dr. Kirk – UC Davis – Can real time data be actionable and used to redirect ambulance traffic? Sandy Damiano – This discussion could benefit from more internal discussion. David Magnino – Would like to see hospitals update EMResource hourly or every couple of hours and will present it as a possibility to the Medical Advisory Committee (MAC).
Public Comment	David Buettner - UC Davis: Following up on using data actionable items. We can discuss at MAC drawing up criteria on when the control facility should be used to make the system more balanced and get ambulance back out in the field to respond to calls. Jimmy Pierson – Medic Ambulance: Review the paramedic accreditation process and possible online training. Allow providers to provide interim paramedic orientation to get paramedics in the field quicker, and then attend the monthly orientation. Waiting for orientation class is counterproductive to getting paramedics in the field. David Magnino will discuss with the EMS team.

Sacramento County Emergency Medical Advisory Group

	<u>Rose Colangelo – Sutter Roseville ED Director</u>: Always happy to collaborate with APOT and provide any help they can.
Action Item	<u>Subgroup:</u> Develop a document, as a united front, that lays out the system issues, identifies the pitfalls, identifies what has already been done, and pulls together solution areas.
	<u>Alternate Destinations:</u> David Magnino and Dr. Garzon to discuss the issue of alternate destinations and what's the State's thinking or when it might let up, given the situation in Sacramento County.
Closing Remarks and Adjourn – *Sandy Damiano*	Sandy thanked everyone for participating in today's meeting and acknowledged the hard work of everyone in the group.
	With no additional business to discuss, the meeting adjourned at approximately 3:43 PM.
Next Meeting	**Thursday, April 14, 2022 / 2:30 PM – 4:00 PM** https://us06web.zoom.us/j/82434475443?pwd=UXV2blpPM3o1eFlqRm4vcmpRWjRydz09 Meeting ID: 824 3447 5443 Passcode: 220252

APOT 1, 2 & 3 - ROLLING 12 MONTHS / SYSTEM

APOT-1 represents the time (in minutes) under which 90% of patients have their care transferred from EMS to hospital staff. **APOT-2** is the percentage of patients whose care is transferred from EMS to hospital staff by designated time frames (see graph key for time ranges). A**POT-3** Represents the excess time (in hours) over 20 min aggregate of patient transferred from EMS to hospital per month. Illustrated is the System Total Excess hours per month. *Example: if APOT in min is 184min then 184-20(APOT benchmark) = 164min. Then 164/60 = 2.73hrs*

APOT 1 - 90th Percentile

Values (90th Percentile): Apr-21: 53, May-21: 51, Jun-21: 60, Jul-21: 68, Aug-21: 85, Sep-21: 70, Oct-21: 69, Nov-21: 57, Dec-21: 77, Jan-22: 95, Feb-22: 55, Mar-22: 55

Legend: Benchmark | 90th Percentile | ≤ 20 Min | ≥ 21 Min

APOT - 2 Per Month

Legend (Minutes): No Data | 181+ | 121-180 | 61-120 | 21-60 | -20

Excess Hours per month - System / Rolling 12 months

Month	Excess Hours
Apr-21	1,616
May-21	1,802
Jun-21	2,282
Jul-21	2,860
Aug-21	4,043
Sep-21	2,867
Oct-21	2,863
Nov-21	2,207
Dec-21	3,186
Jan-22	4,523
Feb-22	1,871
Mar-22	2,099

APOT >1 hr per Hour Range - per Month

	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
> 5	1	3	13	16	28	10	17	12	8	71	5	4
4-5	9	15	8	22	43	21	12	18	20	56	13	10
3-4	30	32	38	74	117	86	74	52	84	187	48	35
2-3	93	117	166	247	392	248	252	154	277	441	104	109
1-2	570	576	818	941	1389	986	953	703	1180	1237	591	706

Completed by: Sacramento County Emergency Medical Services Agency (SCEMSA) Updated: 4.7.2022

APOT 1 PER HOSPITAL & APOT 3 PER HOSPITAL & PROVIDER AGENCY FOR MARCH – 2022

APOT-1 represents the time (in minutes) under which 90% of patients have their care transferred from EMS to hospital staff. **APOT-2** is the percentage of patients whose care is transferred from EMS to hospital staff by designated time frames (see graph key for time ranges). A**POT-3** Represents the excess time (in hours) over 20 minutes aggregate of patient transferred from EMS to hospital per month. Illustrated is the System Total Excess hours per month. *Example: if APOT in min is 184min then 184-20(APOT benchmark) = 164min. Then 164/60 = 2.73hrs*

APOT 1 - 90th Percentile

APOT 3- Excess Hours per Provider
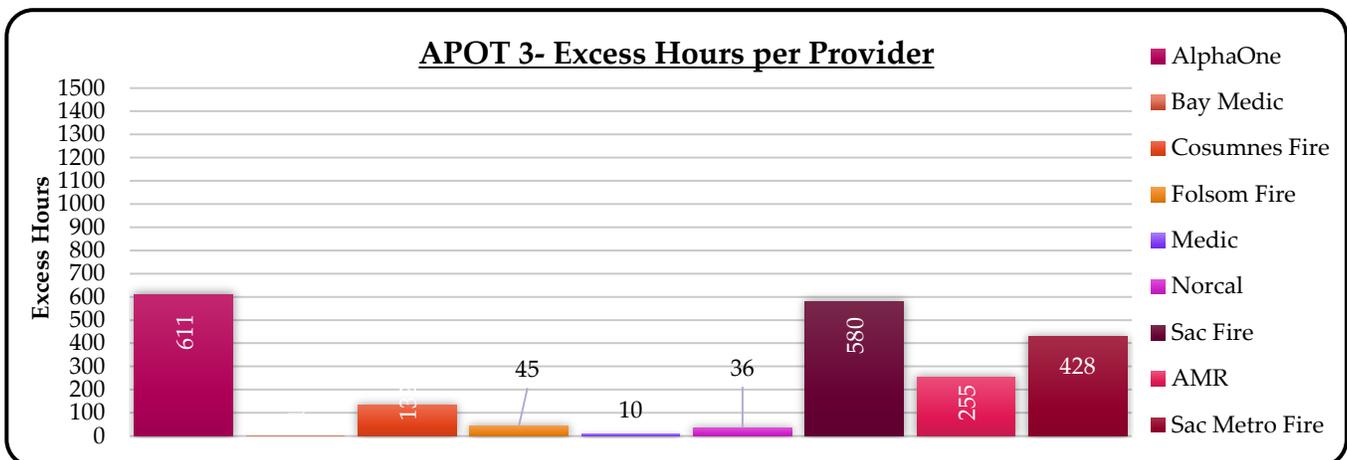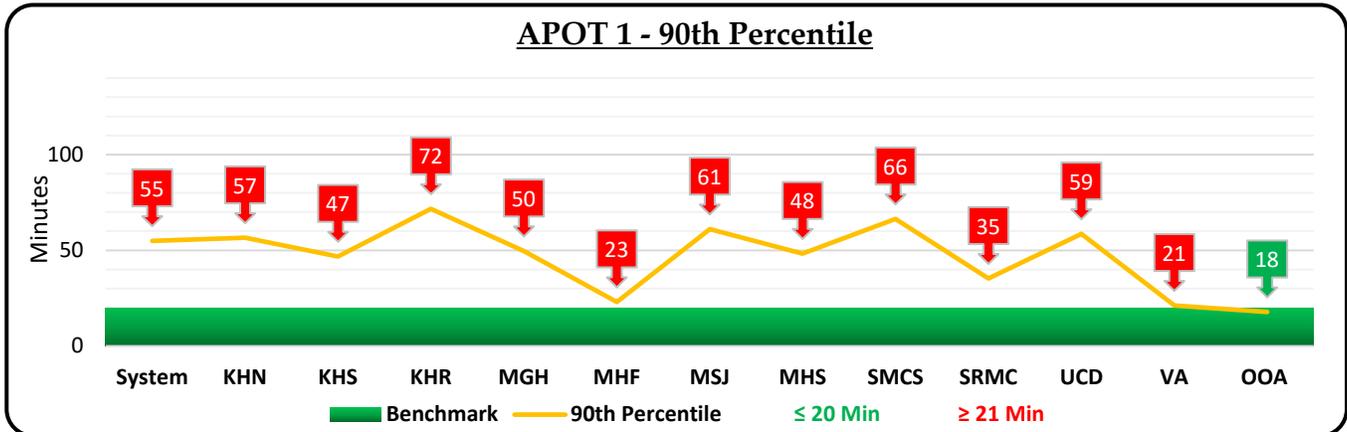
APOT >1hr per Hour Range					
Hospital Names	1-2	2-3	3-4	4-5	> 5
KHR	66	13			
KHN	117	8	4		
KHS	69	27	6	1	1
MGH	47	1	1		
MHF	3				
MSJ	133	22	6		
MHS	35	1			
SMCS	143	19	1	1	
SRMC	5				
UCD	88	18	17	8	3
VA					
System	706	109	35	10	4
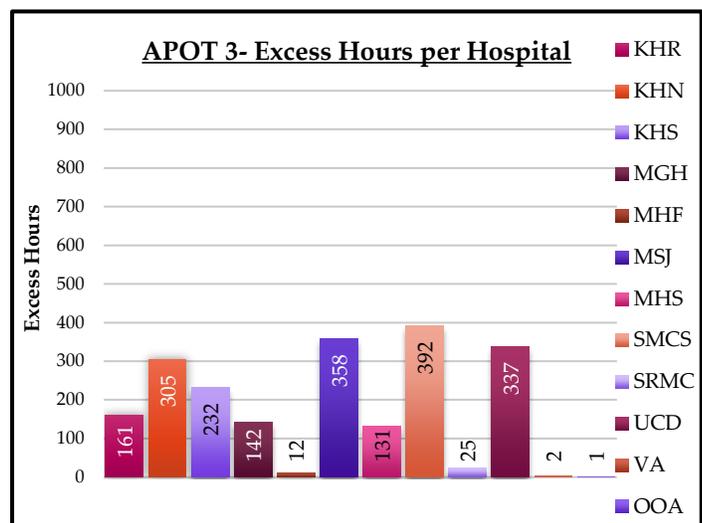
APOT 3- Excess Hours per Hospital

APOT Table - March 2022

Hospital Names	Excess Hours	APOT in Minutes	Percentage within 20 min	EMS Field to ED Patient count	Average Cost of Excess Hours to EMS Strike Team Rate $210.74hr	Average Cost per 10 patients
Kaiser Roseville	161	1:11:41	45.93%	614	$33,958.54	$553.07
Kaiser Morse	305	0:56:32	45.52%	1507	$64,298.53	$426.67
Kaiser South	232	0:46:51	68.41%	1415	$48,854.10	$345.26
Mercy General	142	0:49:39	40.02%	822	$29,834.74	$362.95
Mercy Folsom	12	0:23:04	87.52%	569	$2,489.19	$43.75
Mercy San Juan	358	1:01:05	47.45%	1587	$75,506.53	$475.78
Mercy Methodist	131	0:48:21	38.85%	780	$27,692.75	$355.04
Sutter Sacramento	392	1:06:22	28.92%	1293	$82,677.24	$639.42
Sutter Roseville	25	0:35:14	64.95%	368	$5,258.14	$142.88
UC Davis	337	0:58:34	52.80%	1375	$71,084.22	$516.98
VA Sacramento	2	0:21:11	89.51%	162	$396.54	$24.48
Out of Area	1	0:17:48	96.81%	94	$196.69	$20.92
System	1871	0:54:47	53.11%	9,373	$394,219.20	$420.59

APOT 1, 2 & 3 - ROLLING 12 MONTHS / KAISER NORTH

APOT-1 represents the time (in minutes) under which 90% of patients have their care transferred from EMS to hospital staff. **APOT-2** is the percentage of patients whose care is transferred from EMS to hospital staff by designated time frames (see graph key for time ranges). A**POT-3** Represents the excess time (in hours) over 20 min aggregate of patient transferred from EMS to hospital per month. Illustrated is the System Total Excess hours per month. *Example: if APOT in min is 184min then 184-20(APOT benchmark) = 164min. Then 164/60 = 2.73hrs*

APOT 1 - 90th Percentile

	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
90th Percentile	46	48	50	58	69	49	48	49	48	58	45	57

Benchmark — 90th Percentile — ≤ 20 Min — ≥ 21 Min

APOT - 2 Per Month

APOT-3 /Exces Hours per Month

APOT >1 hr per Hour Range - per Month

	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
> 5												
4-5												
3-4		2	3	6	4			3		1		4
2-3	2	13	9	25	38	7		12	7	15	3	8
1-2	54	66	93	115	164	87	80	73	87	130	53	117

Completed by: Sacramento County Emergency Medical Services Agency (SCEMSA) Updated: 4.7.2022
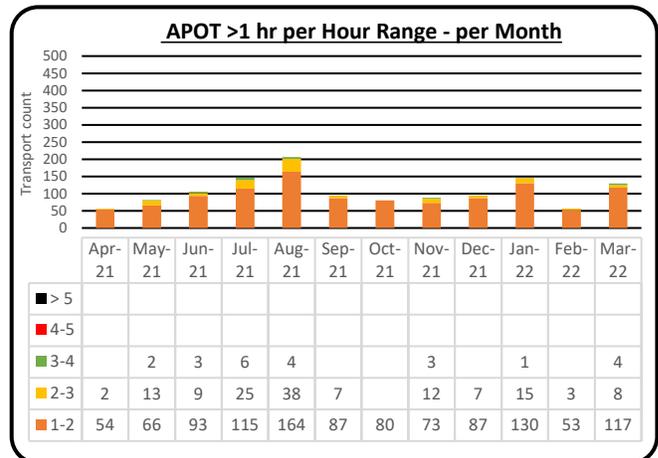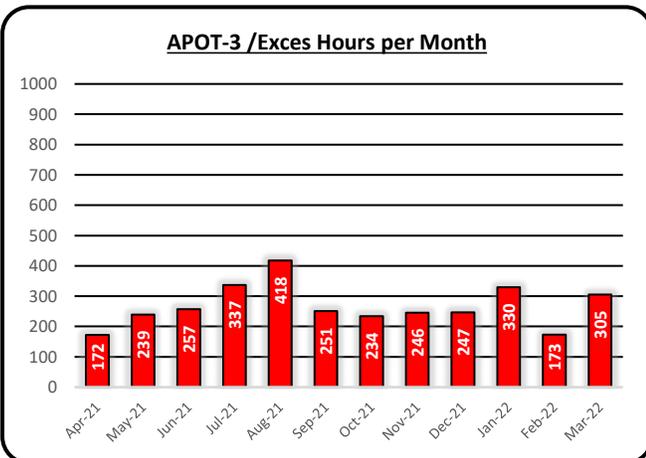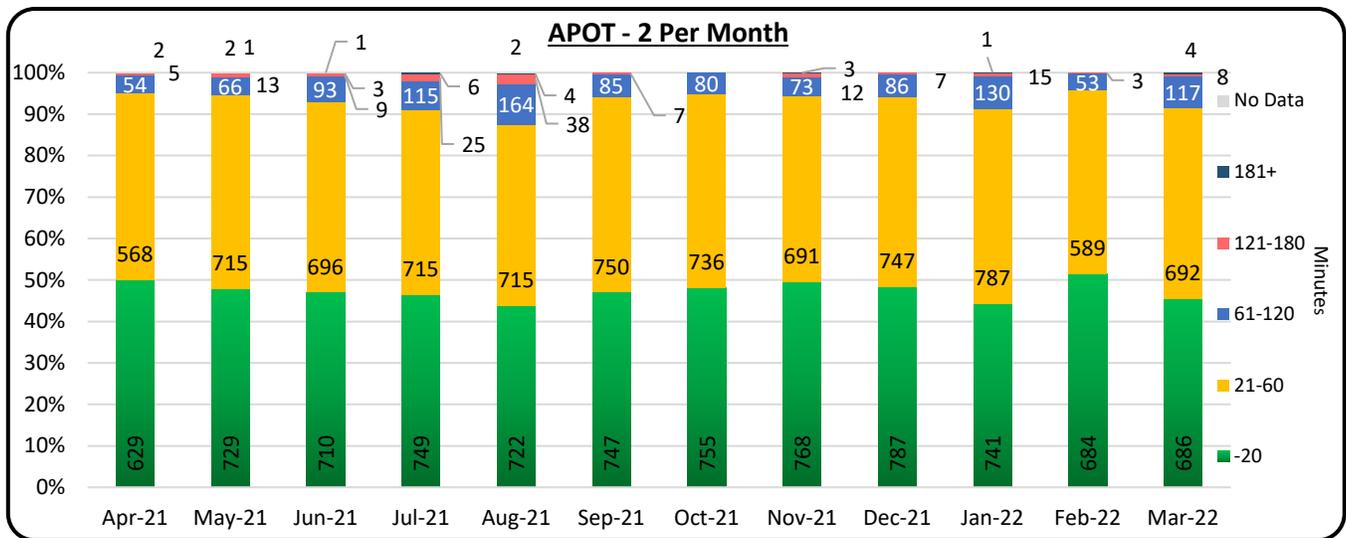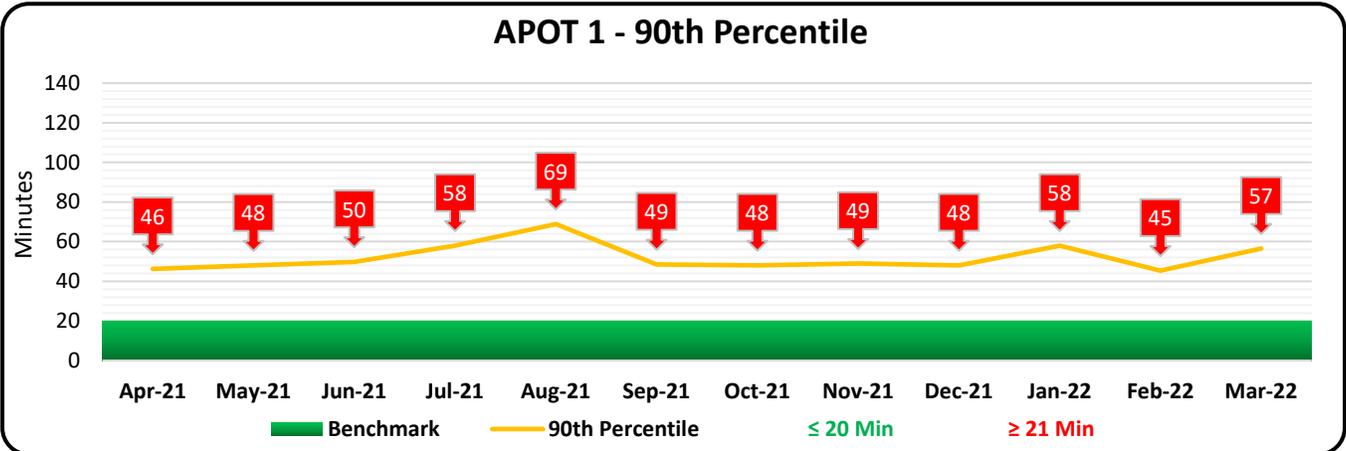
APOT 1, 2 & 3 - ROLLING 12 MONTHS / KAISER ROSEVILLE

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APOT 1 - 90th Percentile

APOT - 2 Per Month

APOT-3 /Exces Hours per Month

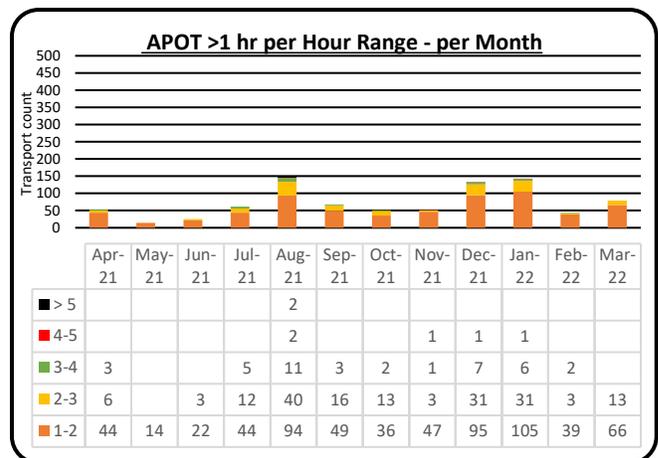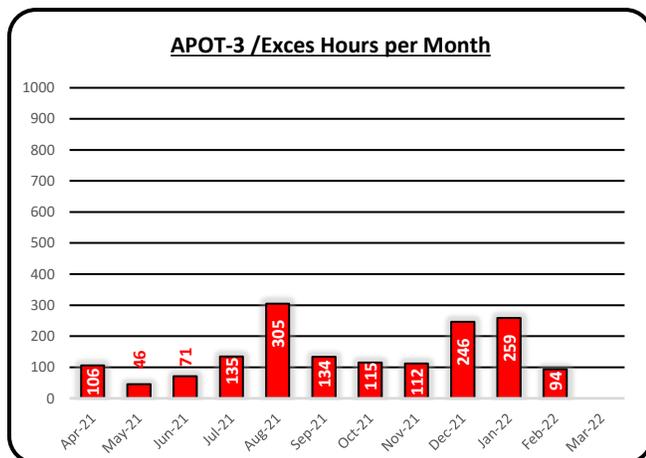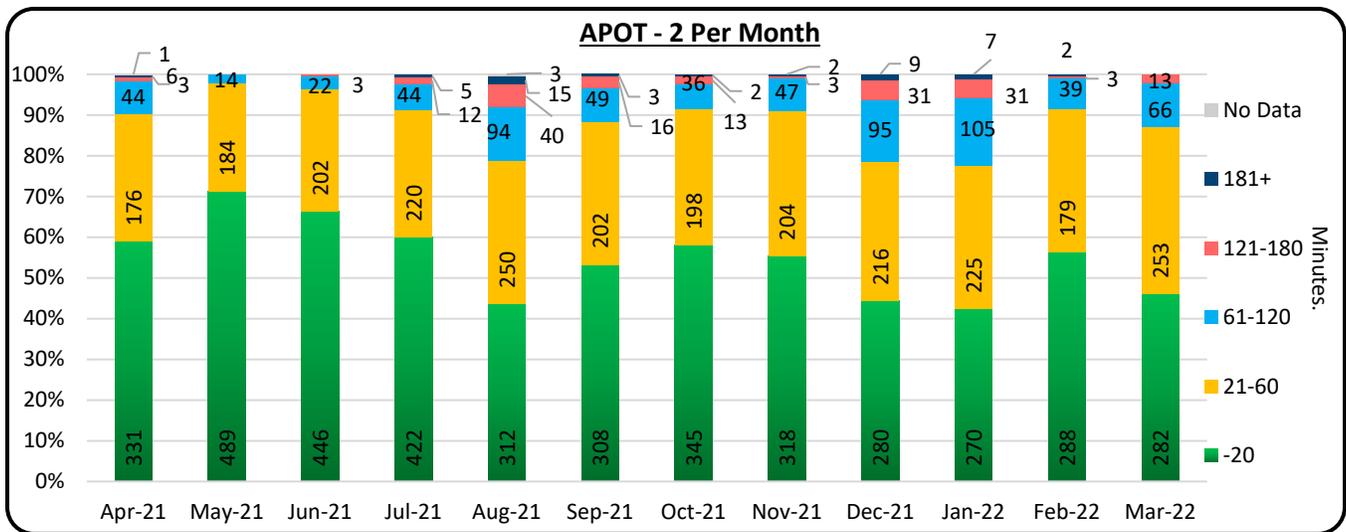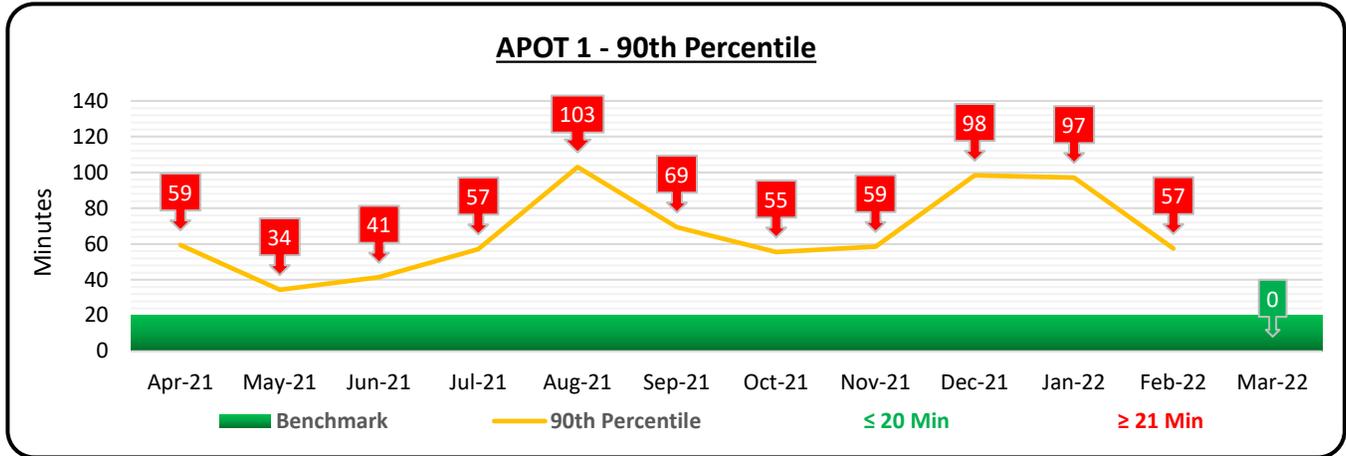APOT >1 hr per Hour Range - per Month

APOT 1, 2 & 3 - ROLLING 12 MONTHS / KAISER SOUTH

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APOT 1 - 90th Percentile

APOT - 2 Per Month

APOT -3 / Excess Hours per Month

APOT >1 hr per Hour Range - per Month

	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
> 5			1				0		0	14	1	1
4-5			0	4	2	0	0		2	11	2	1
3-4			1	7	9	2	4		7	43	9	6
2-3	7	2	15	35	32	10	27	8	41	85	26	27
1-2	48	48	79	149	176	97	118	73	183	193	79	69

APOT 1, 2 & 3 - ROLLING 12 MONTHS / MERCY GENERAL

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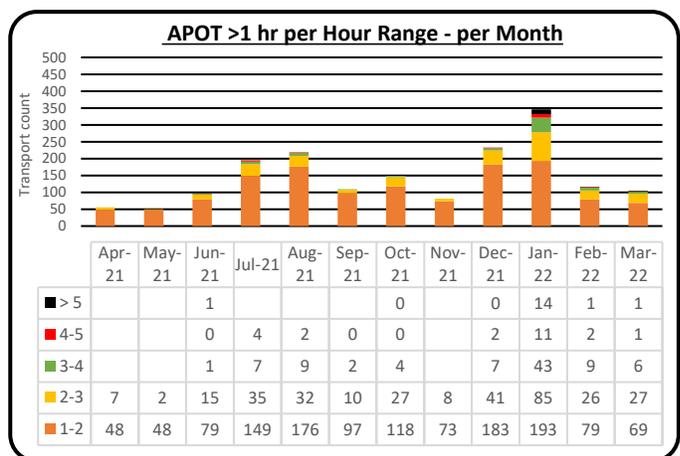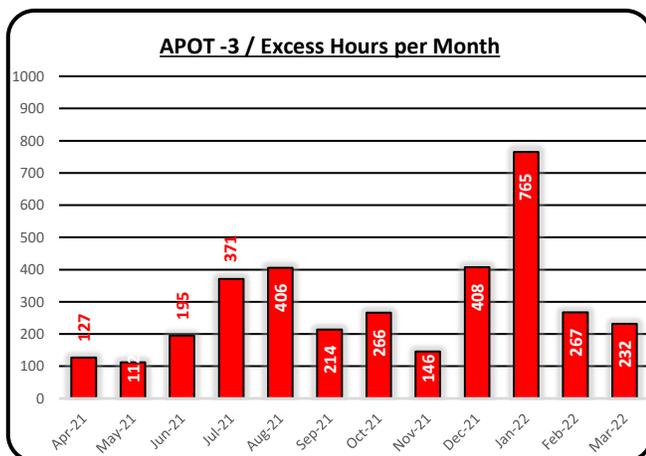
APOT 1 - 90th Percentile

	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
90th Percentile	57	59	63	70	85	63	72	66	81	80	52	50

Legend: Benchmark — 90th Percentile — ≤ 20 Min — ≥ 21 Min

APOT - 2 Per Month

APOT -3 / Excess Hours

	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
Excess Hours	132	206	192	219	387	208	289	234	294	324	124	142

APOT >1 hr per Hour Range - per Month

	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
> 5									1			
4-5		2			1			1	1	1		
3-4		6	1	2	10	2	3	10	2	5		1
2-3	5	13	9	19	34	11	11	14	25	30	2	1
1-2	57	54	81	77	151	85	133	74	127	112	46	47

Completed by: Sacramento County Emergency Medical Services Agency (SCEMSA) Updated: 4.7.2022
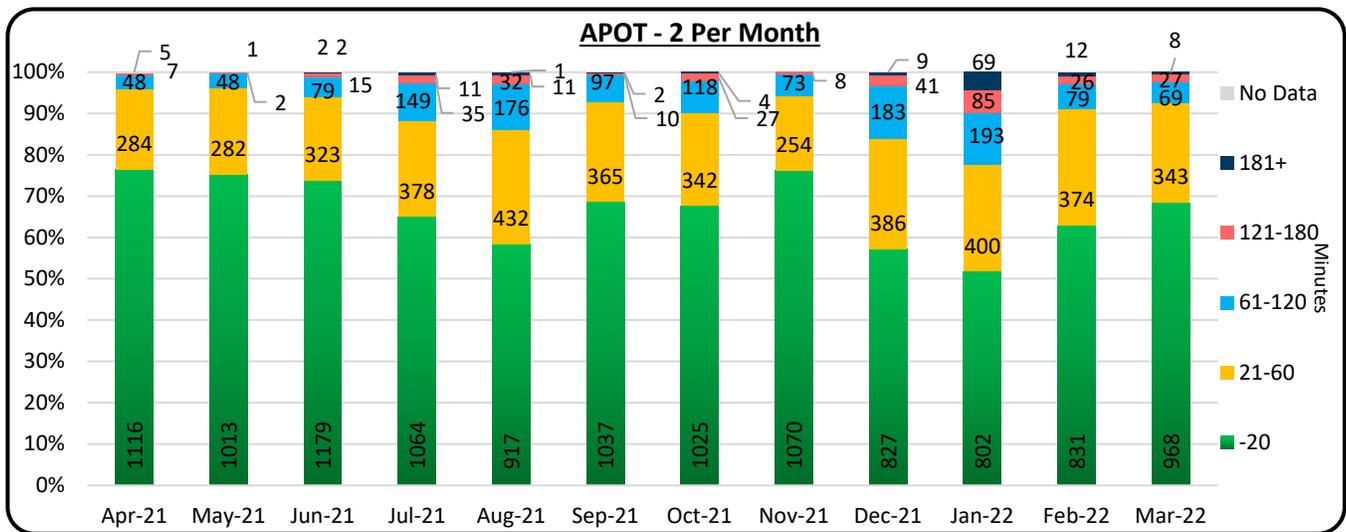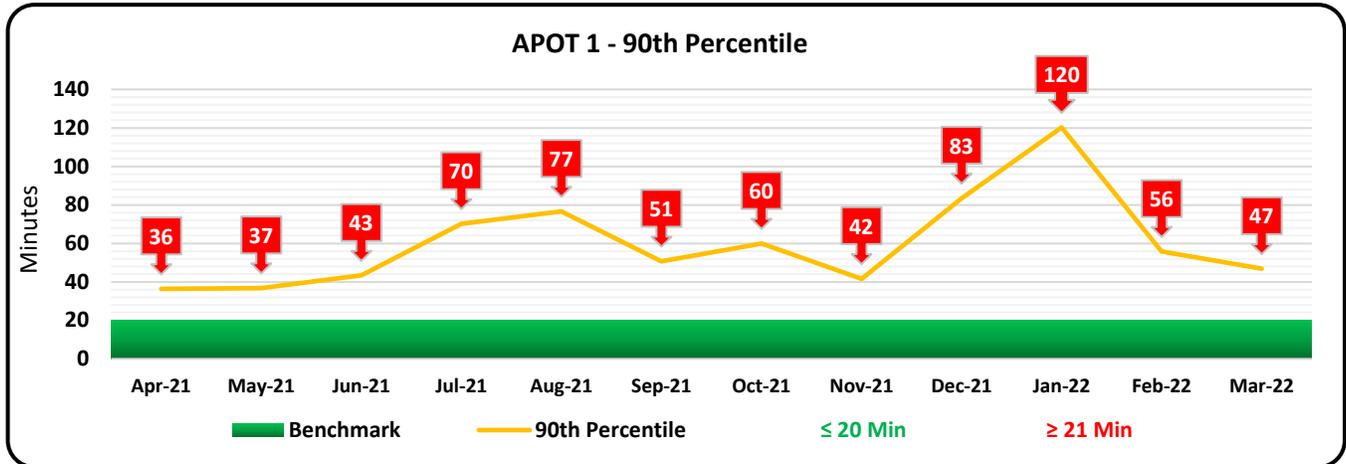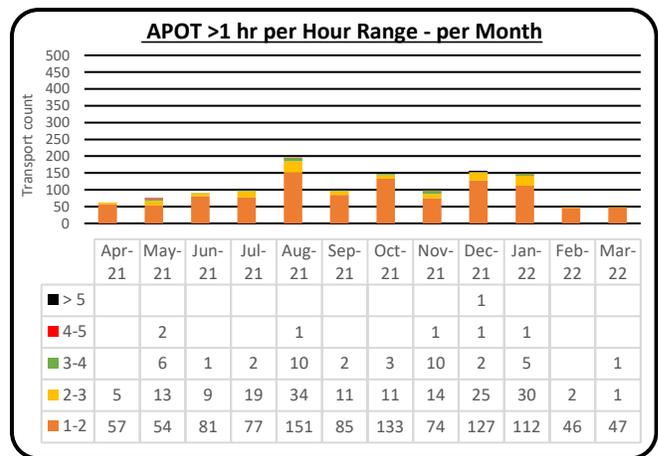
APOT 1, 2 & 3 - ROLLING 12 MONTHS / MERCY OF FOLSOM

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APOT 1 - 90th Percentile

APOT - 2 Per Month

APOT -3 / Excess Hours per Month

APOT >1 hr per Hour Range - per Month

	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
> 5												
4-5												
3-4										3		
2-3						2		1		9		
1-2	2	3	6	7	14	18	10	2	7	19	1	3

Completed by: Sacramento County Emergency Medical Services Agency (SCEMSA) Updated: 4.7.2022
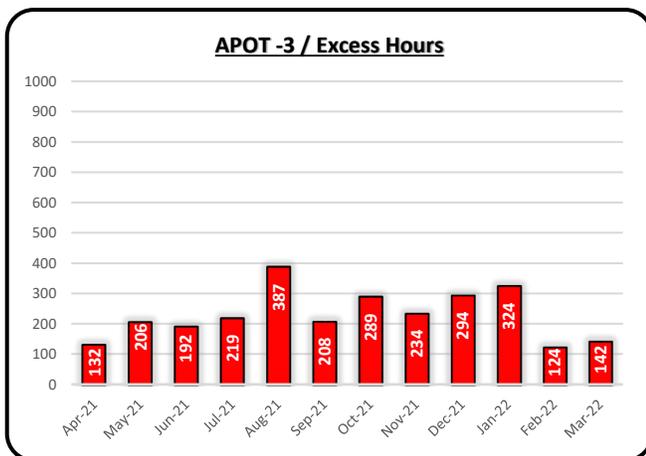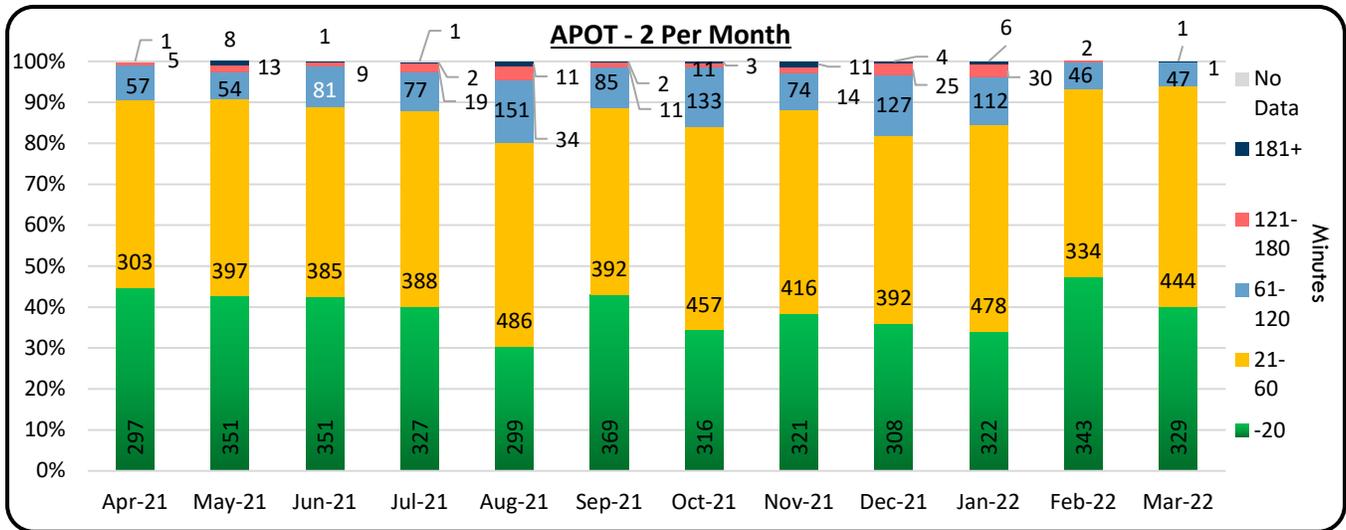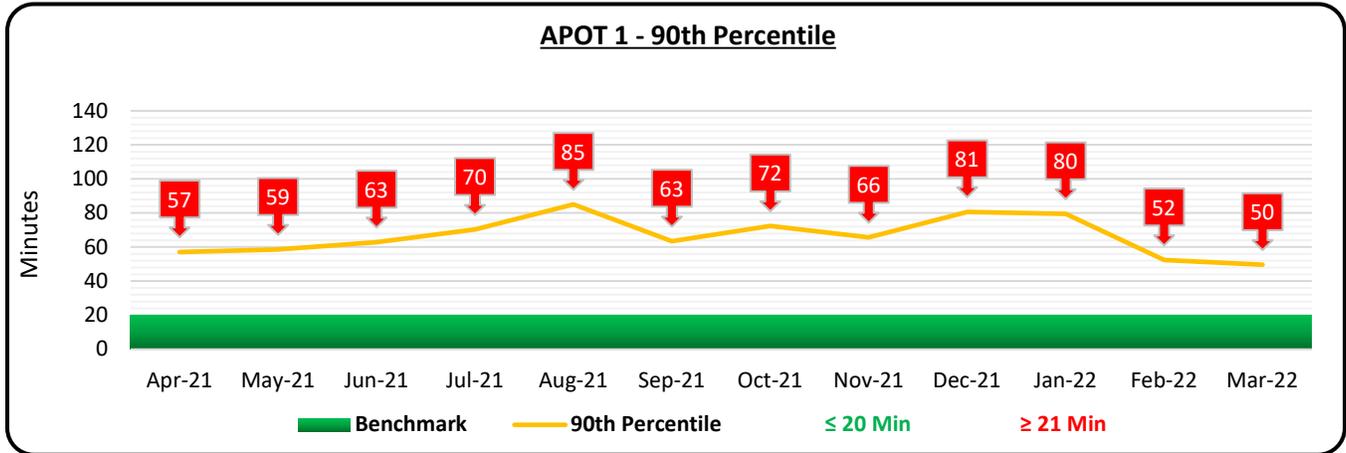
APOT 1, 2 & 3 - ROLLING 12 MONTHS / MERCY SAN JUAN

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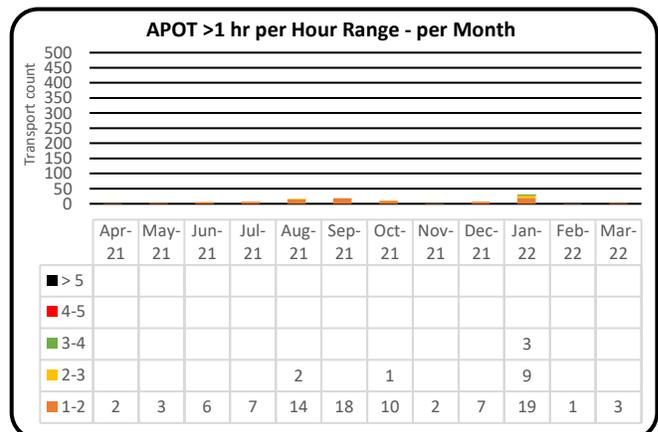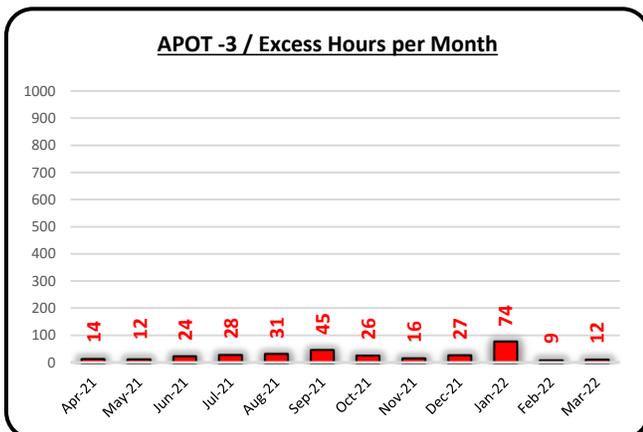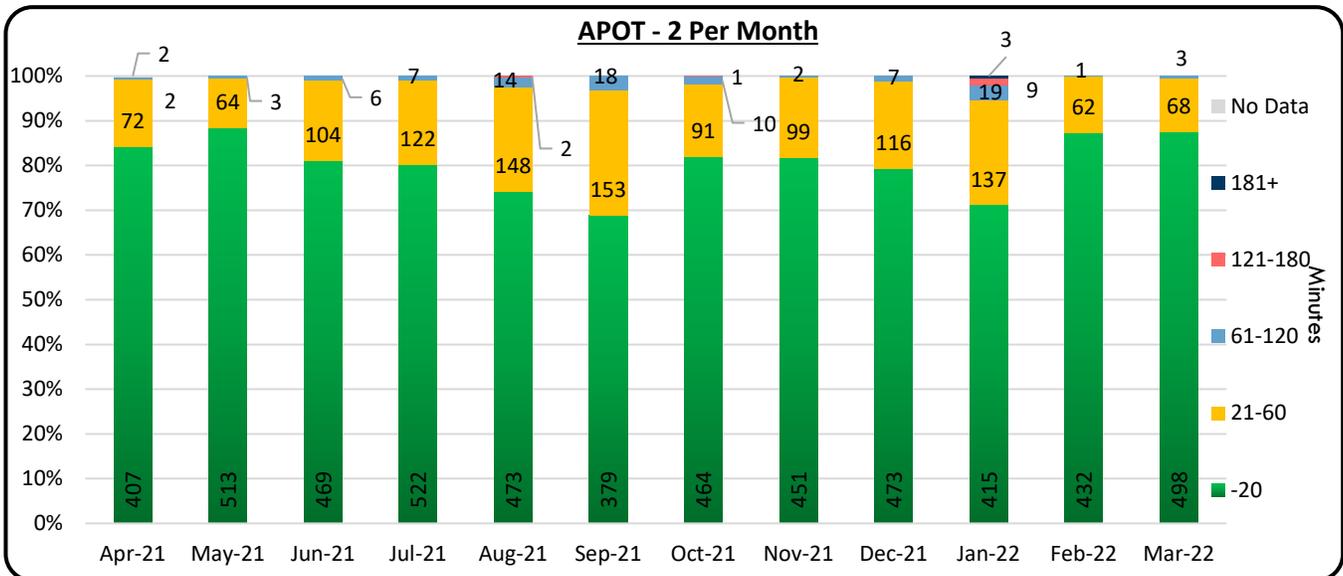
APOT 1 - 90th Percentile

Month	90th Percentile (min)
Apr-21	78
May-21	65
Jun-21	73
Jul-21	86
Aug-21	103
Sep-21	88
Oct-21	101
Nov-21	94
Dec-21	91
Jan-22	125
Feb-22	54
Mar-22	61

Legend: Benchmark — 90th Percentile — ≤ 20 Min — ≥ 21 Min

APOT - 2 Per Month

Minutes	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
181+	2	6	8	1	3	20	28	67	29	60	7	6
121-180	29	1		56	37	186	83	169	53	104	16	22
61-120	138	135	165	147	192		198		186	186	88	133
21-60	383	493	484	531	485	502	539	534	527	483	463	673
-20	612	891	863	835	796	783	744	743	796	697	763	753

Additional labels: 8 (Apr), 34 (May), 41 (Jun), 30 (Jul), 92 (Aug), 39 (Nov), 88 (Feb)

APOT -3 /Excess Hours per Month

Month	Excess Hours
Apr-21	326
May-21	340
Jun-21	393
Jul-21	506
Aug-21	650
Sep-21	516
Oct-21	617
Nov-21	583
Dec-21	543
Jan-22	765
Feb-22	247
Mar-22	358

APOT >1 hr per Hour Range - per Month

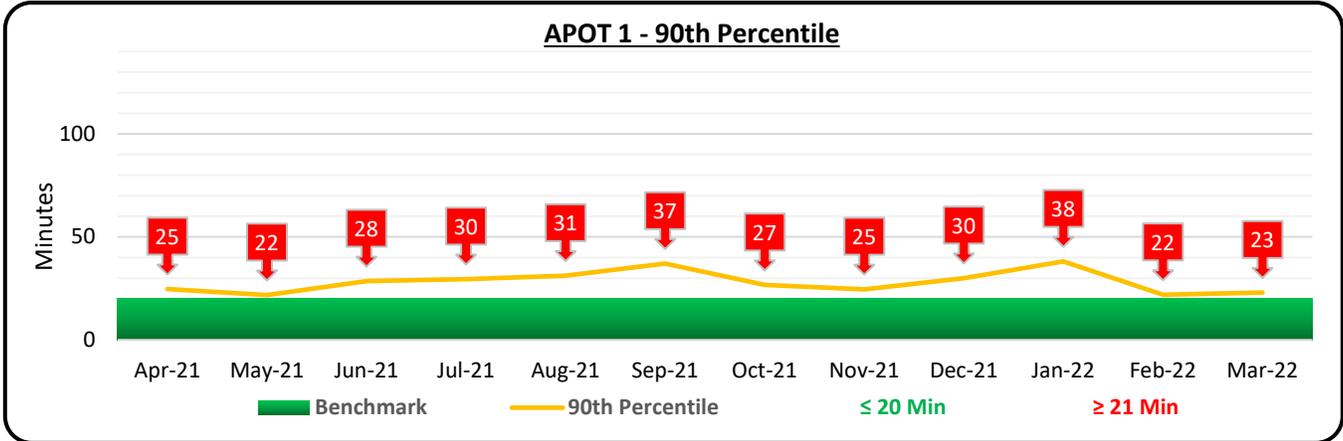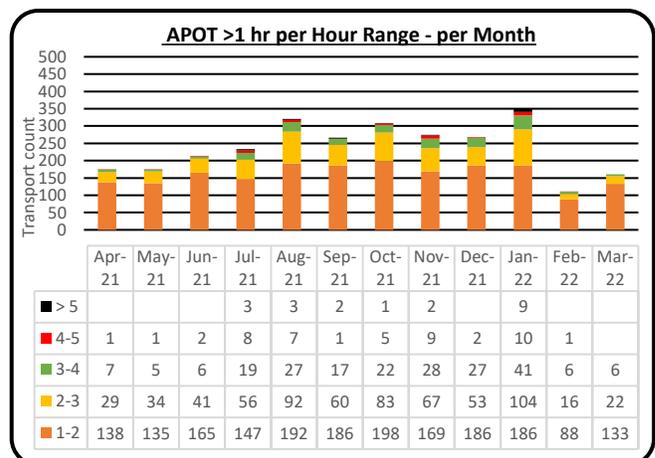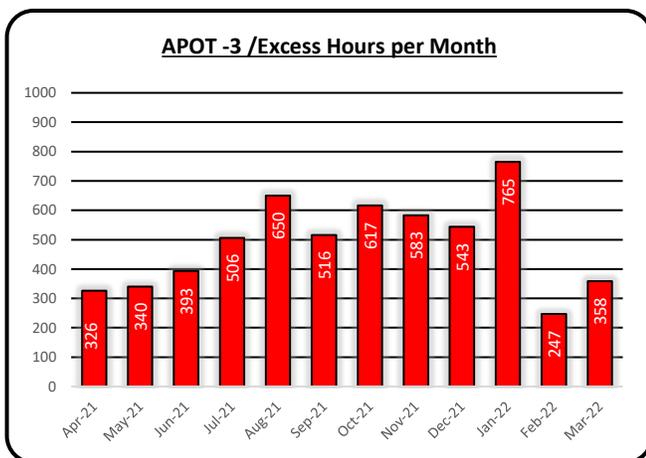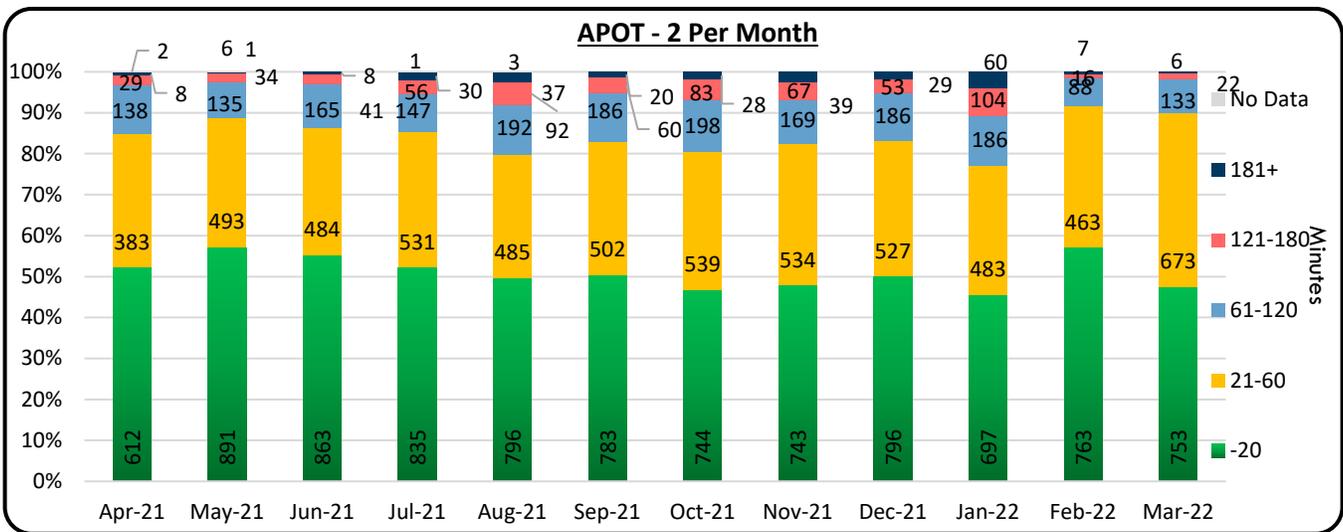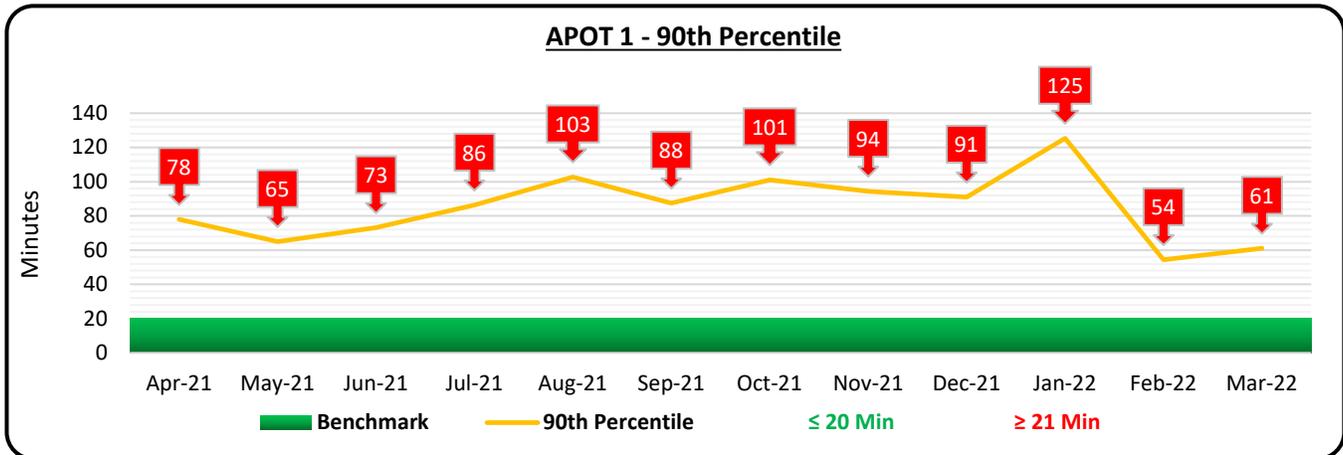| Range	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
> 5				3	3	2	1	2		9		
4-5	1	1	2	8	7	1	5	9	2	10	1	
3-4	7	5	6	19	27	17	22	28	27	41	6	6
2-3	29	34	41	56	92	60	83	67	53	104	16	22
1-2	138	135	165	147	192	186	198	169	186	186	88	133

APOT 3 - ROLLING 12 MONTHS / MERCY METHODIST

APOT-1 represents the time (in minutes) under which 90% of patients have their care transferred from EMS to hospital staff. **APOT-2** is the percentage of patients whose care is transferred from EMS to hospital staff by designated time frames (see graph key for time ranges). A**POT-3** Represents the excess time (in hours) over 20 min aggregate of patient transferred from EMS to hospital per month. Illustrated is the System Total Excess hours per month. *Example: if APOT in min is 184min then 184-20(APOT benchmark) = 164min. Then 164/60 = 2.73hrs*
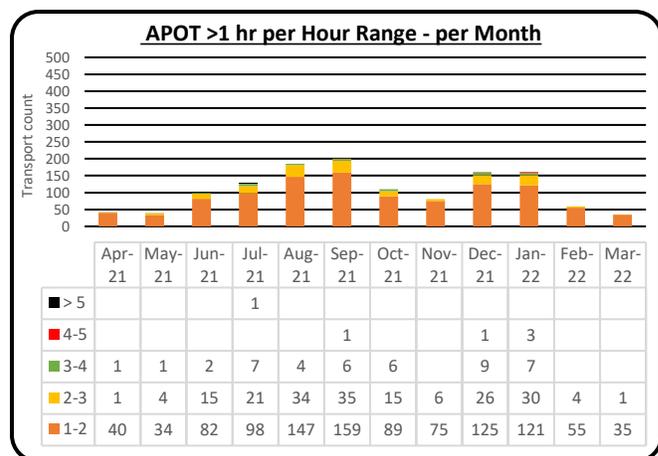
APOT 1 - 90th Percentile

Data labels (90th Percentile): May-21: 50, Jun-21: 65, Jul-21: 74, Aug-21: 85, Sep-21: 95, Oct-21: 69, Nov-21: 62, Dec-21: 86, Jan-22: 84, Feb-22: 56, Mar-22: 48

Legend: ■ Benchmark — 90th Percentile ≤ 20 Min ≥ 21 Min

APOT - 2 Per Month

Minutes	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
181+	1	1	1	1	2		15	6	10	10	4	1
121-180	1	1	2	8	4	35				30		
61-120	40	34	82	98	147	159	89	75	125	121	55	35
21-60	411	381	448	458	455	414	443	443	443	434	439	441
-20	288	244	266	269	249	174	247	231	259	240	243	303

Legend: □ No Data ■ 181+ ■ 121-180 ■ 61-120 ■ 21-60 ■ -20

APOT -3 / Excess Hours per Month

Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
133	125	226	283	357	376	256	185	328	333	162	131

APOT >1 hr per Hour Range - per Month

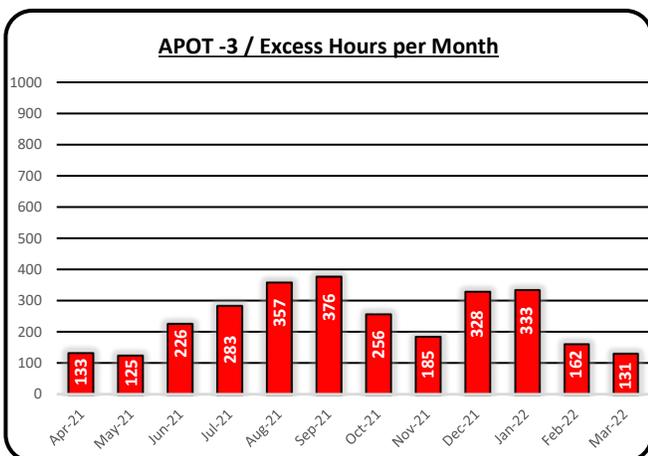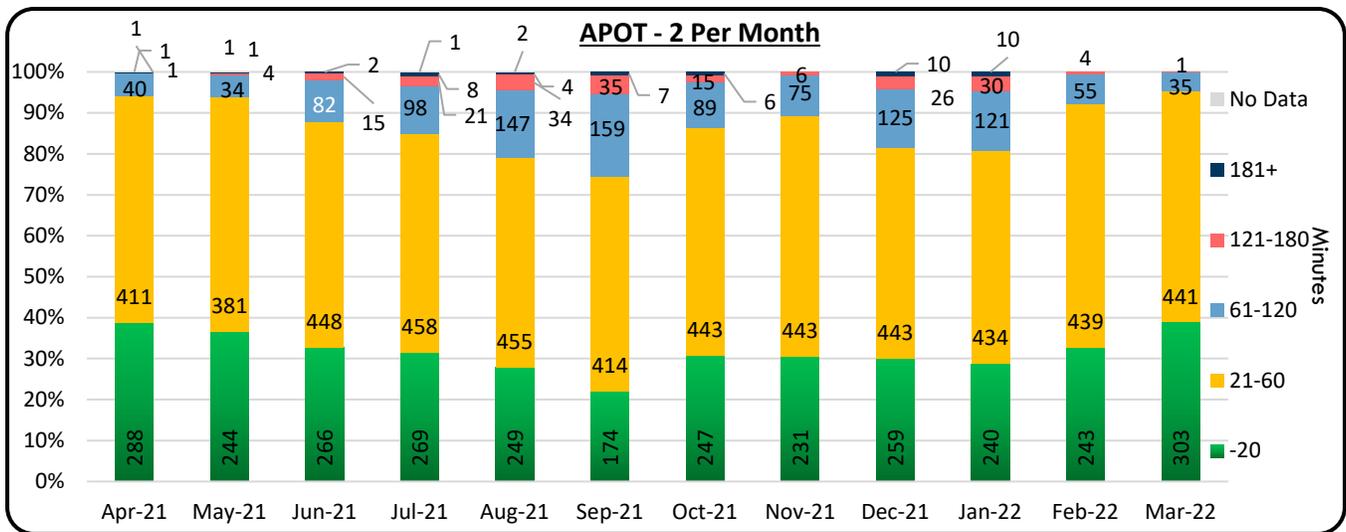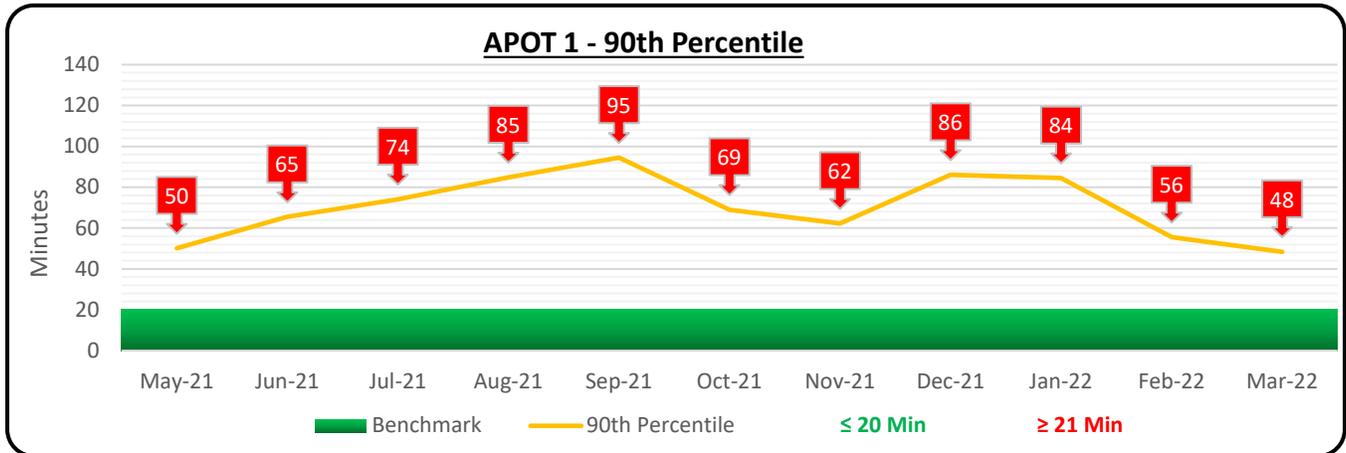|	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
■ > 5				1								
■ 4-5						1			1	3		
■ 3-4	1	1	2	7	4	6	6		9	7		
■ 2-3	1	4	15	21	34	35	15	6	26	30	4	1
■ 1-2	40	34	82	98	147	159	89	75	125	121	55	35

APOT 1, 2 & 3 - ROLLING 12 MONTHS / SUTTER ROSEVILLE

APOT-1 represents the time (in minutes) under which 90% of patients have their care transferred from EMS to hospital staff. **APOT-2** is the percentage of patients whose care is transferred from EMS to hospital staff by designated time frames (see graph key for time ranges). A**POT-3** Represents the excess time (in hours) over 20 min aggregate of patient transferred from EMS to hospital per month. Illustrated is the System Total Excess hours per month. *Example: if APOT in min is 184min then 184-20(APOT benchmark) = 164min. Then 164/60 = 2.73hrs*

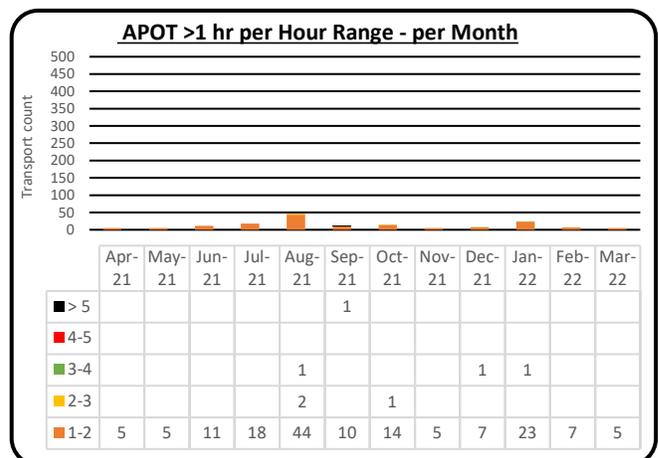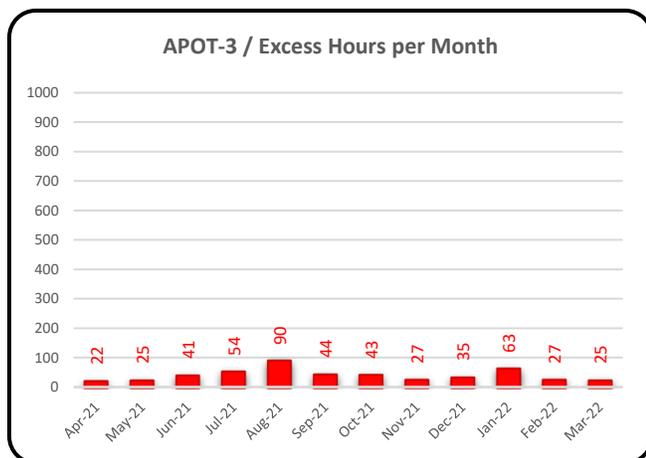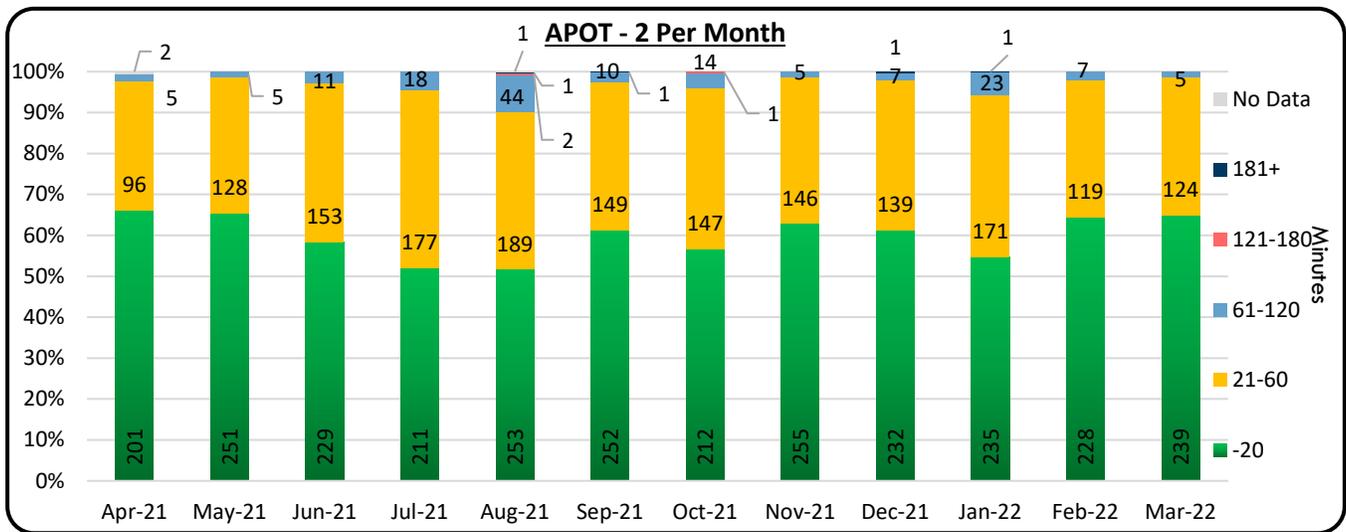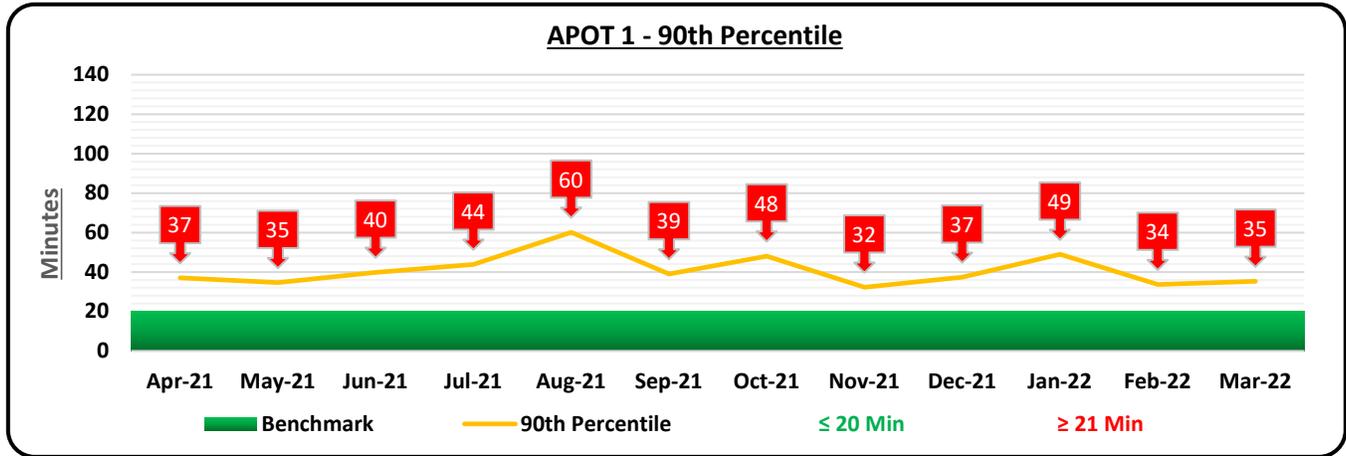## APOT 1 - 90th Percentile

Legend: Benchmark | 90th Percentile | ≤ 20 Min | ≥ 21 Min

Values (90th Percentile): Apr-21: 37, May-21: 35, Jun-21: 40, Jul-21: 44, Aug-21: 60, Sep-21: 39, Oct-21: 48, Nov-21: 32, Dec-21: 37, Jan-22: 49, Feb-22: 34, Mar-22: 35

APOT - 2 Per Month

	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
181+					1							
121-180							1					
61-120	2			18	44		14			23		5
21-60	96	128	153	177	189	149	147	146	139	171	119	124
-20	201	251	229	211	253	252	212	255	232	235	228	239

Additional annotations: May-21: 5, Jun-21: 11, Aug-21: 1, 1, 2, Sep-21: 10, 1, Oct-21: 1, Nov-21: 5, Dec-21: 7, 1, Jan-22: 1, Feb-22: 7

APOT-3 / Excess Hours per Month

Values: Apr-21: 22, May-21: 25, Jun-21: 41, Jul-21: 54, Aug-21: 90, Sep-21: 44, Oct-21: 43, Nov-21: 27, Dec-21: 35, Jan-22: 63, Feb-22: 27, Mar-22: 25

APOT >1 hr per Hour Range - per Month

	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
> 5						1						
4-5												
3-4					1					1	1	
2-3					2		1					
1-2	5	5	11	18	44	10	14	5	7	23	7	5

APOT 1, 2 & 3 - ROLLING 12 MONTHS / SUTTER SACRAMENTO

APOT-1 represents the time (in minutes) under which 90% of patients have their care transferred from EMS to hospital staff. **APOT-2** is the percentage of patients whose care is transferred from EMS to hospital staff by designated time frames (see graph key for time ranges). A**POT-3** Represents the excess time (in hours) over 20 min aggregate of patient transferred from EMS to hospital per month. Illustrated is the System Total Excess hours per month. *Example: if APOT in min is 184min then 184-20(APOT benchmark) = 164min. Then 164/60 = 2.73hrs*
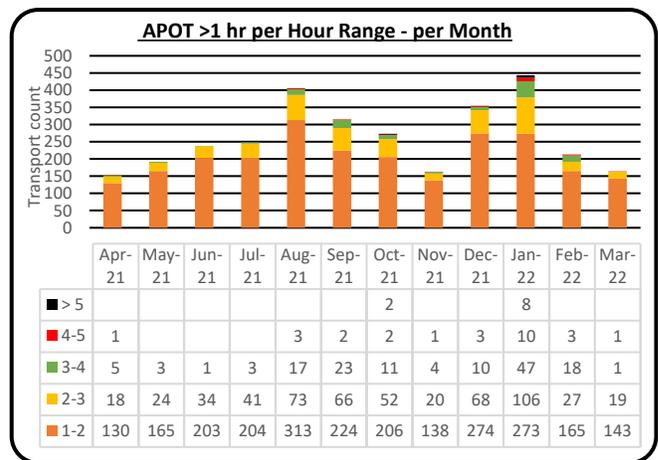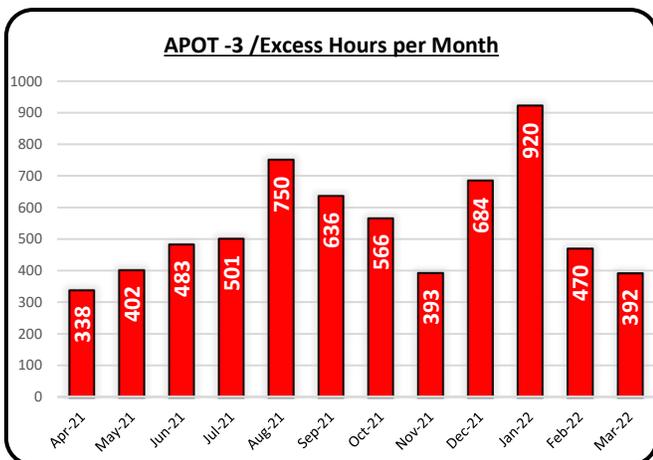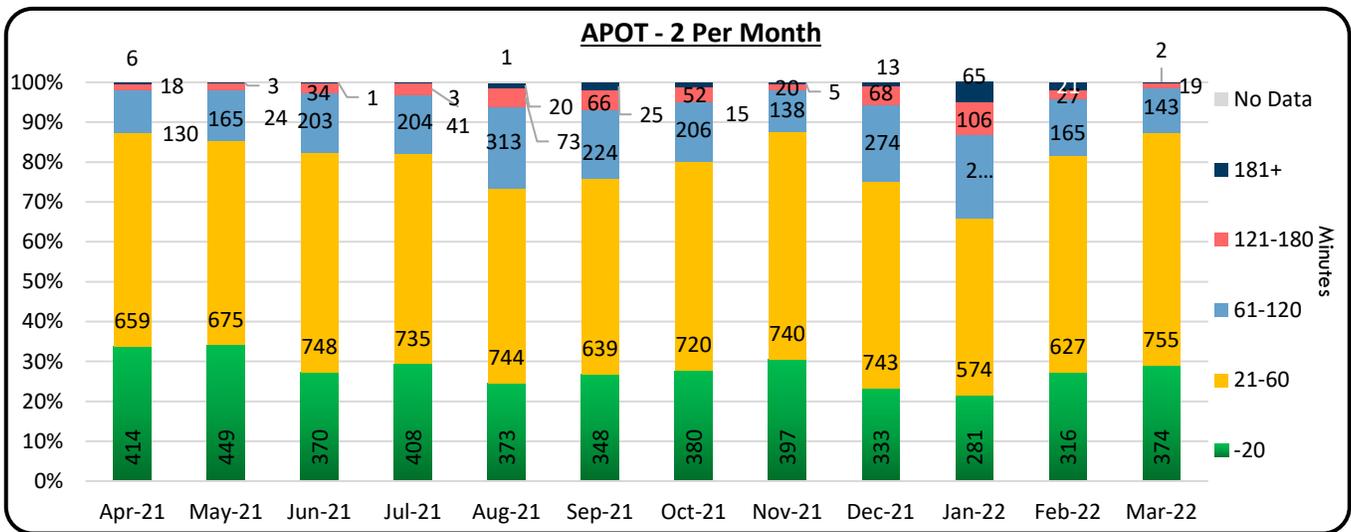
APOT 1 - 90th Percentile

Legend: Benchmark | 90th Percentile | ≤ 20 Min | ≥ 21 Min

APOT - 2 Per Month

Legend (Minutes): No Data | 181+ | 121-180 | 61-120 | 21-60 | -20

APOT -3 /Excess Hours per Month

APOT >1 hr per Hour Range - per Month

	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
> 5									2		8	
4-5	1				3	2	2	1	3	10	3	1
3-4	5	3	1	3	17	23	11	4	10	47	18	1
2-3	18	24	34	41	73	66	52	20	68	106	27	19
1-2	130	165	203	204	313	224	206	138	274	273	165	143

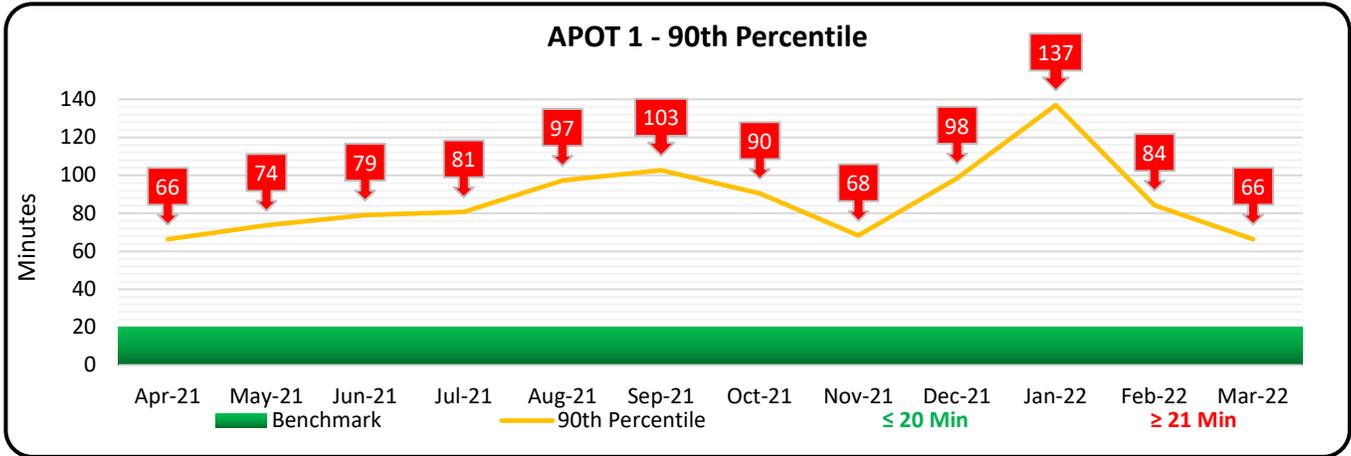Completed by: Sacramento County Emergency Medical Services Agency (SCEMSA) Updated: 4.7.2022

APOT 1, 2 & 3 - ROLLING 12 MONTHS / UC DAVIS

APOT-1 represents the time (in minutes) under which 90% of patients have their care transferred from EMS to hospital staff. **APOT-2** is the percentage of patients whose care is transferred from EMS to hospital staff by designated time frames (see graph key for time ranges). A**POT-3** Represents the excess time (in hours) over 20 min aggregate of patient transferred from EMS to hospital per month. Illustrated is the System Total Excess hours per month. *Example: if APOT in min is 184min then 184-20(APOT benchmark) = 164min. Then 164/60 = 2.73hrs*

APOT 1 - 90th Percentile
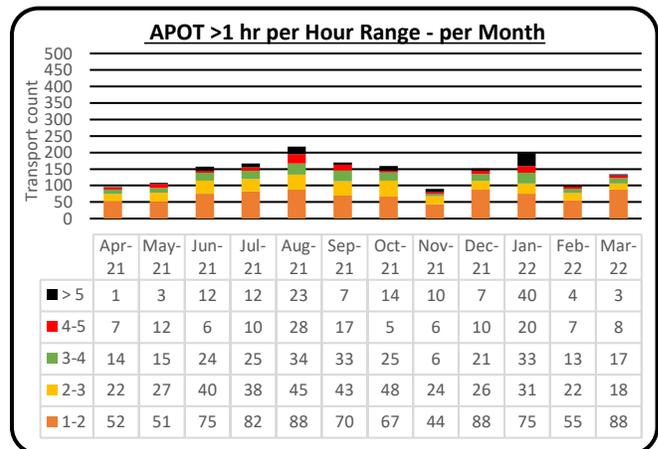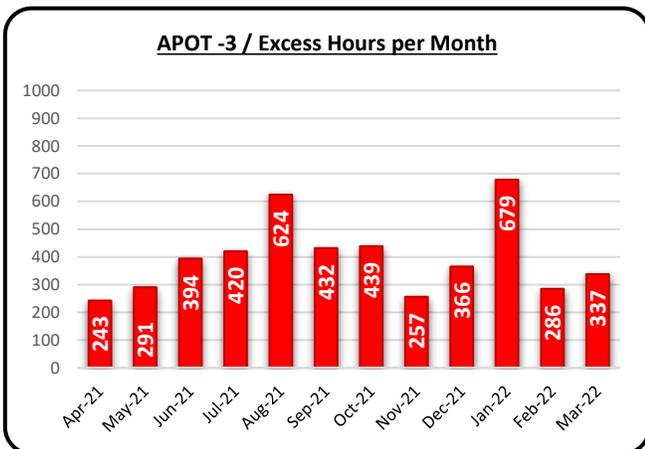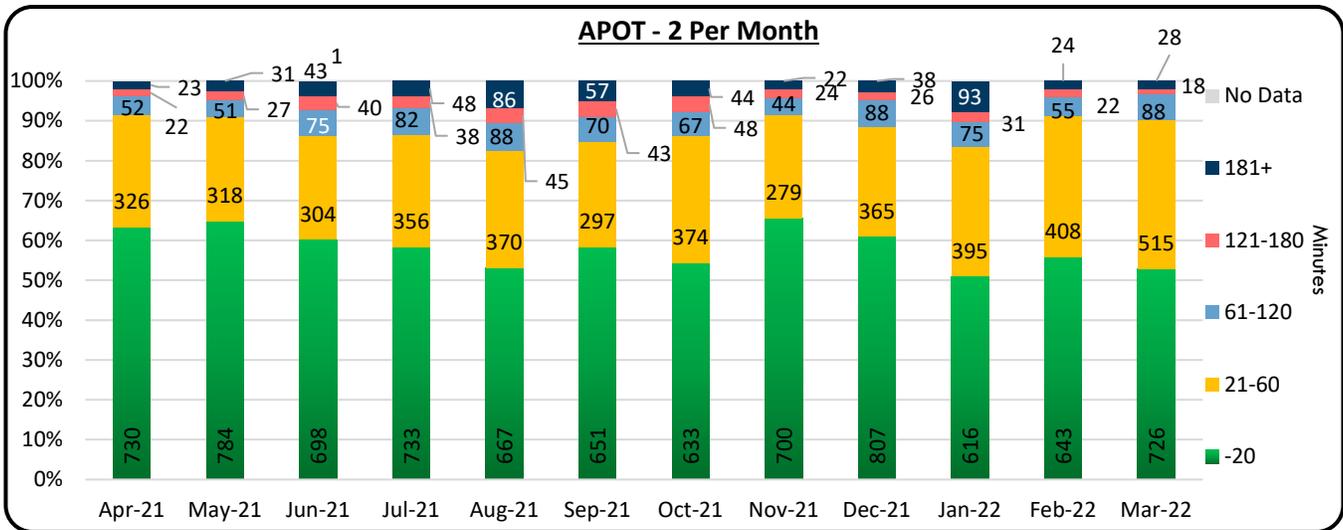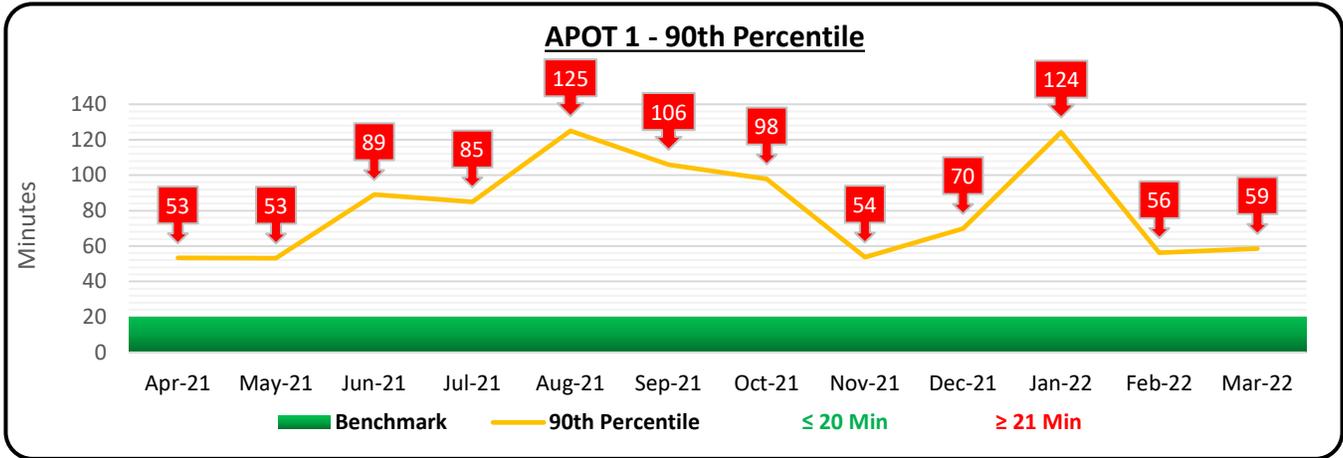
Minutes (y-axis 0–140)

Data points (90th Percentile): Apr-21: 53, May-21: 53, Jun-21: 89, Jul-21: 85, Aug-21: 125, Sep-21: 106, Oct-21: 98, Nov-21: 54, Dec-21: 70, Jan-22: 124, Feb-22: 56, Mar-22: 59

Legend: Benchmark | 90th Percentile | ≤ 20 Min | ≥ 21 Min

APOT - 2 Per Month

Minutes	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
181+	23	31	43	1	86	57	22	24	38	93	24	28
121-180	22	27	40	48	—	70	44	—	26	—	22	18
61-120	52	51	75	82	88	43	67	44	88	75	55	88
21-60	326	318	304	356	370	297	374	279	365	395	408	515
-20	730	784	698	733	667	651	633	700	807	616	643	726

(Additional labels: Aug-21 38, 45; Oct-21 48; Nov-21 24; Jan-22 31; legend: No Data)

APOT -3 / Excess Hours per Month

Month	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
Excess Hours	243	291	394	420	624	432	439	257	366	679	286	337

APOT >1 hr per Hour Range - per Month

Transport count

	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
> 5	1	3	12	12	23	7	14	10	7	40	4	3
4-5	7	12	6	10	28	17	5	6	10	20	7	8
3-4	14	15	24	25	34	33	25	6	21	33	13	17
2-3	22	27	40	38	45	43	48	24	26	31	22	18
1-2	52	51	75	82	88	70	67	44	88	75	55	88

APOT 1, 2 & 3 - ROLLING 12 MONTHS / VA

APOT 1 represents the time (in minutes) under which 90% of patients have their care transferred from EMS to hospital staff. **APOT-2** is the percentage of patients whose care is transferred from EMS to hospital staff by designated time frames (see graph key for time ranges). A**POT-3** Represents the excess time (in hours) over 20 min aggregate of patient transferred from EMS to hospital per month. Illustrated is the System Total Excess hours per month. *Example: if APOT in min is 184min then 184-20(APOT benchmark) = 164min. Then 164/60 = 2.73hrs*

APOT 1 - 90th Percentile

APOT - 2 Per Month

APOT -3 / Excess Hours per Month

APOT >1 hr per Hour Range - per Month

Completed by: Sacramento County Emergency Medical Services Agency (SCEMSA) Updated: 4.7.2022