

**ATCEMS
ADVISORY BOARD**

May 1, 2013



**AUSTIN-TRAVIS COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY BOARD MEETING**



RBJ HEALTH CENTER, 2ND FLOOR
ATCEMS, SITUATION ROOM
15 WALLER STREET, AUSTIN, TEXAS

May 1, 2013
9:30 a.m. - 11:30 a.m.

AGENDA

ITEM

- 1) Call to Order
- 2) Quorum Determination
- 3) Introduction of new Board Member/s
- 4) Review and approve minutes of previous meeting
- 5) Receive Citizen Communications/Comments
- 6) Receive staff briefing on Board members' education and dedicated e-mail usage requirements necessary to comply with the City of Austin Boards and Commissions Meetings Ordinance
- 7) Review Last Quarter System Statistics; receive comments from ATCEMS Staff relative to same and answer any Board member questions
- 8) Receive Comments from System Providers
- 9) Receive update from Travis County and ATCEMS on status of Interlocal Agreement negotiation
- 10) Brief Board on the Chair and Vice Chair discussions with Commissioners Daugherty and Eckhardt and plans to meet with Mayor/Council Members.
- 11) Discuss and take action on appointing a working group of the Board to work with ATCEMS and OMD staff to review/assemble best practices of leading EMS Transport systems with the aim of recommending adding as appropriate benchmarking measurements for the ATCEMS system.
- 12) Receive brief by ATCEMS staff on accreditation status related to Council on Accreditation of Ambulance Services
- 13) Receive update from ATCEMS on Fiscal 2014 Budget initiatives
- 14) Discuss having an educational briefing/training session for the ATCEMS AB members by ATCEMS and OMD staff on the elements of a modern EMS Transport System.
- 15) Other business
- 16) Adjourn

The City of Austin is committed to compliance with the American with Disabilities Act. Reasonable modifications and equal access to communications will be provided upon request. Meeting locations are planned with wheelchair access. If requiring Sign Language Interpreters or alternative formats, please give notice at least 2 days before the meeting date. Please call Vivian Holmes at the EMS Department, at 972-7148 for additional information; TTY users route through Relay Texas at 711.

MINUTES

**AUSTIN – TRAVIS COUNTY EMS ADVISORY BOARD
MEETING MINUTES**

WEDNESDAY, February 6, 2013



**The Austin – Travis County EMS Advisory Board convened on February 6, 2013,
15 Waller Street, in Austin, Texas at 9:30 a.m.**

Board Members in Attendance: Bob Taylor, Mark Clayton, Paula Barr, Susan Pascoe, Chris Ziebell, Vard Curtis

Board Members Absent: Hector Gonzales, Paul Carrozza

Other Attendees: Ernesto Rodriguez, James Shamard, Vivian Holmes, Keith Simpson, Paul Hinchey, Jose Cabanas, Danny Hobby, Terry Browder, Troy Mayer, Bradley Leach, Casey Ping, Gigi Mao, Harry Evans, Teresa Gardner, Casey Ping, Ron Moellenberg, Jeff Hayes, Rick Branning, Tony Marquardt

1. CALL TO ORDER –February 6, 2013

The meeting was called to order at 9:30 a.m.

2. QUORUM DETERMINATION

A quorum was met and the meeting proceeded.

3. RECEIVE CITIZEN COMMUNICATIONS/COMMENTS

Board Member Pascoe gave feedback on a family incident requiring EMS response. She was pleased by the good service EMS medics provided.

**4. RECEIVE STAFF BRIEFING ON BOARD MEMBERS' EDUCATION AND
DEDICATED E-MAIL USAGE REQUIREMENTS NECESSARY TO COMPLY WITH
THE CITY OF AUSTIN BOARDS AND COMMISSIONS MEETINGS ORDINANCE**

Chair Taylor asked board members if they had any questions about the training and reminded them that they had 90-days to complete it and the deadline was March 29th.

5. REVIEW AND APPROVAL OF MINUTES

Motion: The minutes for the regular meeting of November 14, 2012 were approved on Board Member Curtis' motion, Board Member Pascoe's second on a 6-0 vote.

**6. DISCUSS PLANS AND ACTIONS REQUIRED TO COMPLY WITH REQUIREMENTS TO
REVIEW THE BOARD'S PRIOR YEAR PERFORMANCE AND PLANS FOR 2013.**

A draft report was reviewed by board members for additional input. The annual report is due to the City Clerk's Office by March 31, 2013 and will be submitted by that deadline. Board members also discussed goals for 2013.

7. RECEIVE COMMENTS FROM ATCEMS SYSTEM PARTICIPANT/RESPONDING ORGANIZATIONS, IF ANY

- a. **Emergency Services Districts** - Chief Moellenberg, CAFCA President. He has been meeting with a group of System stakeholders and provided an overview of what has been discussed during the meetings.
- b. **STAR Flight** - Casey Ping, SF Program Manager. He provided updates. CAMTS review and site visit in February and occurs every three years.
- c. **Austin Fire Department** - Chief Evans said AFD is working together with EMS on data to ensure accuracy. F1 collaboration made a difference. Six ESD's have automatic aid agreement with AFD and each other; this creates a road map for all other ESDs who wish to have automatic aid. It will go to Council in the near future for approval and Chief Evans said this is a big step for the System.
- d. **Austin EMS Department** - Chief Rodriguez discussed the System stakeholders meetings and the benefit of the work sessions for the future. County discussions are ongoing for the upcoming interlocal. EMS has submitted the CAAS application. ATCEMS is making progress on staffing configuration. The Community Health Paramedic program is moving forward and looking at integration with healthcare partners. ATCEMS is looking at MAP patients and how we can navigate them to appropriate care.
- e. **Office of Medical Director** - no general updates at this time.

8. RECEIVE STAFF REPORTS ON OF FISCAL YEAR 2013 Q1 OPERATIONAL STATISTICS

- a. **ATCEMS** - Chief Shamard reviewed reports. Board members agreed that they will no longer look at Urban and Suburban data.
- b. **OMD** – Dr. Hinchey said their website ATCOMD.org will have all data posted in a couple of weeks.
- c. **STAR Flight** – Casey Ping provided review of report.
- d. **Consider and approve changes to reports and future reporting as appropriate**— Chair Taylor and Chief Rodriguez discussed a report for system transport unit response analysis. Executive Manager Hobby and Chief Rodriguez to look at analysis as part of the new City/County interlocal. Dr. Hinchey provided input on response compliance.

9. RECEIVE STAFF REPORT ON BILLINGS, COLLECTIONS AND OTHER FINANCIAL MANAGEMENT ISSUES

- a. **Receive report from staff on COA-TC Interlocal financial issues and plans to resolve**
Chief Rodriguez talked about the recent audit report. ATCEMS has brought everything up to standard. Mr. Branning provided an update and gave collection data.
- b. **Consider and make recommendations to Court and Council as appropriate**
Chair Taylor and Chief Rodriguez gave a briefing to new members on how EMS funds are disbursed by the City. He proposed some of the dollars get returned to the department instead of going into the City's general fund. Mr. Hobby will ask the same of the County.

10. RECEIVE STAFF REPORT ON THE ATCEMS STAFFING ISSUE ITS SHORT AND LONG TERM CORRECTION PLANS

Current vacancies-52. EMS Academy starting on Monday with 19 new employees. It takes ten weeks to have the cadets trained and ready to work in the field. Civil service creates an elaborate process. Another Academy in June should bring the vacancy number down.

11. RECEIVE STAFF REPORT ON ALS RESPONDERS AND MEDIC CERTIFICATION PROCESS AND PLANS

a. Consider and make recommendations to Court and Council as appropriate

Dr. Hinchey gave a presentation on the Credentialing process and reviewed: Houston FD, Seattle Medic One, Fort Worth MedStar, Charlotte Medic, Williamson County EMS, Wake County EMS; and OMD Credentialing Process, New OMD Process, Development. Seattle has a lower number of credentialed paramedics and use Seattle Fire's EMT's to answer low priority calls. Dr. Hinchey provided information and answered questions about Seattle. The target is about a year to roll this out. Board Member Pascoe suggested that this information is shared with the PSC. Dr. Curtis asked about Seattle and how we can learn from them. Mr. Hayes said they have a tiered system. Their dispatch system is different, but we have that same capability. He noted that their system has been in place for over 30 years.

12. RECEIVE STAFF REPORT ON TRANSPORT UNIT EXPANSION PLANS

a. Consider and make recommendations to Court and Council as appropriate

Chief Shamard distributed to board members the EMS Medic I packet and reported on the transition thus far on the Medic 1 program. There have been no increase in scene times in critical patients and crew feedback is positive and there is the ability to send a second unit if needed. This item will be on the Public Safety Commission's March meeting agenda (the Commissioners on the PSC have already been provided with the materials).

13. OTHER BUSINESS

None

14. ADJOURN

Chair Taylor adjourned the meeting at 11:49 a.m., without objection.

FY2013 – Q2

PERFORMANCE REPORTS

Response Performance Report

Period: FY2013 Q2

Quarter Summary

Calls Received: 31,192

Incidents: 27,570

Responses: 32,041

Patient Contacts: 22,642

Patient Transports: 18,230

Priority 1

Patients in need of time critical interventions

Incidents 1,863
Responses 2,668
Patient Contacts 1,690
Patient Transports 1,282

Patient Transport Rate 84.84%



Priority 2

Patients with conditions that could require time critical interventions

Incidents 7,723
Responses 8,951
Patient Contacts 6,671
Patient Transports 5,613

Patient Transport Rate 84.48%



Priority 3

Patients with conditions that are emergent but do not require time critical interventions.

Incidents 4,007
Responses 4,459
Patient Contacts 3,797
Patient Transports 3,162

Patient Transport Rate 83.30%



Priority 4

Patients with conditions that are urgent but do not require time critical interventions.

Incidents 10,589
Responses 11,931
Patient Contacts 7,561
Patient Transports 5,736

Patient Transport Rate 75.96%



Priority 5

Patients with conditions that are not time sensitive.

Incidents 3,388
Responses 4,032
Patient Contacts 2,923
Patient Transports 2,437

Patient Transport Rate 84.71%



Response Time Performance

City of Austin (09:59)
All Responders 85.50%
ATCEMS 73.23%

City of Austin (11:59)
All Responders 94.96%
ATCEMS 84.89%

City of Austin (13:59)
All Responders 97.42%
ATCEMS 88.87%

City of Austin (15:59)
All Responders 98.00%
ATCEMS 96.50%

City of Austin (17:59)
All Responders 98.18%
ATCEMS 91.43%

Travis County (11:59)
All Responders 98.40%
ATCEMS 91.64%

Travis County (13:59)
All Responders 99.35%
ATCEMS 96.20%

Travis County (15:59)
All Responders 99.87%
ATCEMS 98.21%

Travis County (17:59)
All Responders 98.99%
ATCEMS 98.70%

Travis County (19:59)
All Responders 95.38%
ATCEMS 95.10%

System Response
Time Indicator

$$= \left(\frac{\text{Total On-Time Count}}{\text{Total Incidents}} \right) = 98.32\%$$

Overall Patient
Transport Rate 81.46%

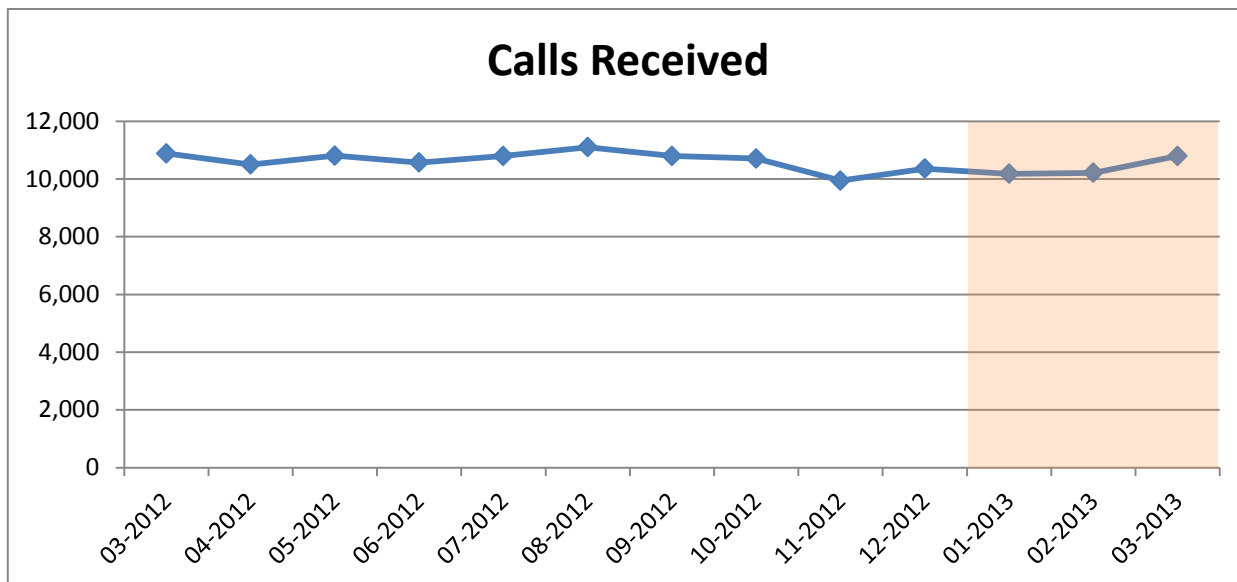
- Notes: 1) Analysis limited to Priority 1-5 incidents that take place within the City of Austin or Travis County.
2) Incidents that occur outside the county (i.e. mutual aid incidents) are excluded.
3) Stand-bys (Priority 6) and other priority levels are excluded.

For official reports please contact the A/TCEMS Business Analysis and Research Team at EMSDataAnalysis@austintexas.gov.

Communications Report

FY2013 Q2

	Jan-13	Feb-13	Mar-13
Calls Received	10,181	10,215	10,796



Overall Compliance with Medical Priority Dispatch Evaluation Criteria

Jan-13	Feb-13	Mar-13
99.66%	99.76%	98.57%

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Performance Measure Summary

STEMI

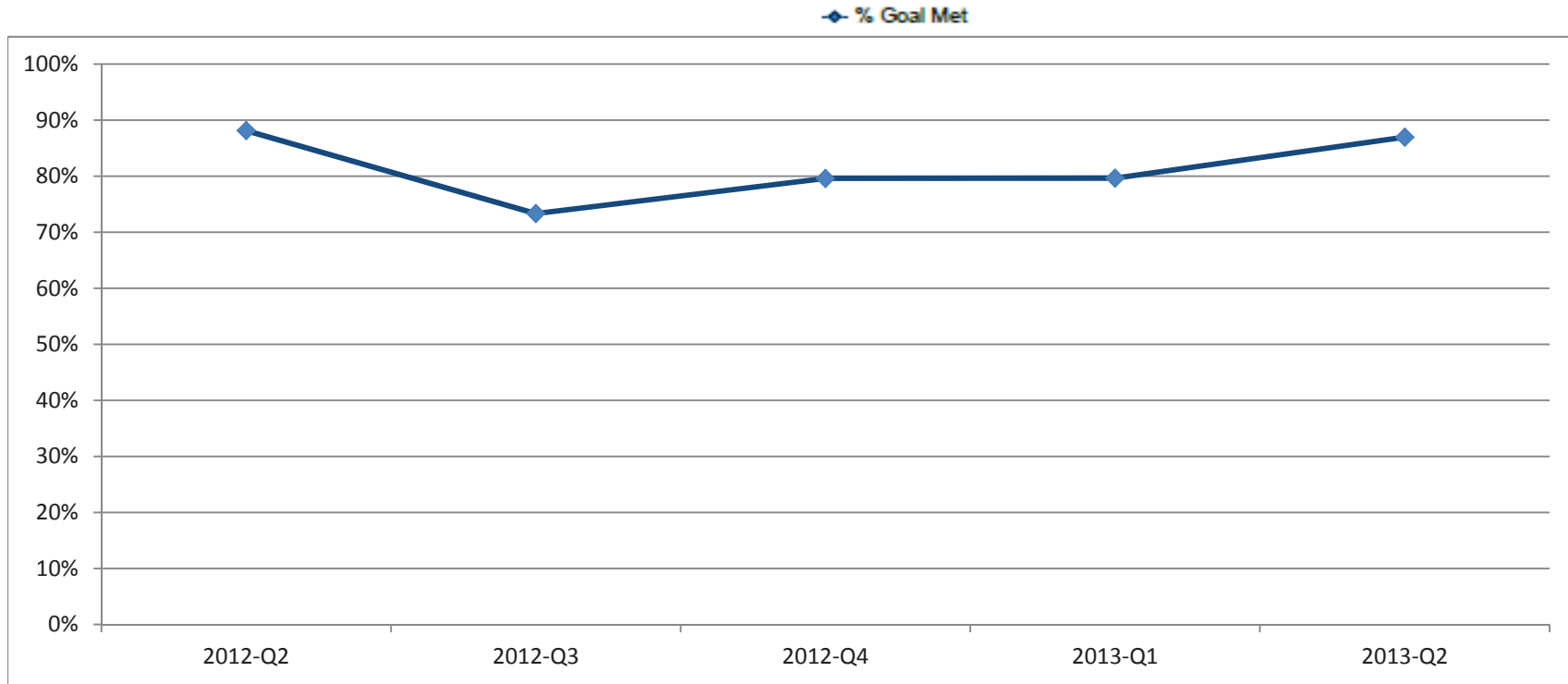
ST Segment Myocardial Infarction (STEMI) is myocardial Infarction (MI) with an electrocardiographic finding of ST segment elevation. MI is caused by an interruption of blood flow to one or more areas of the heart. The most common cause is a rupture of an atherosclerotic plaque which causes obstruction of coronary vessels. Each year, about 1.5 million people suffer a myocardial infarction. It is the leading causes of death in the United States and kills approximately 500,000 people. In 2010, the CDC estimates that heart disease will cost the United States \$316 billion dollars.

ATCEMS Performance Measures

- Scene Time Compliance – Goal is 15 minutes
- Aspirin administration

Scene Time Interval for STEMI Patients

Clinical Performance Indicator 3.3

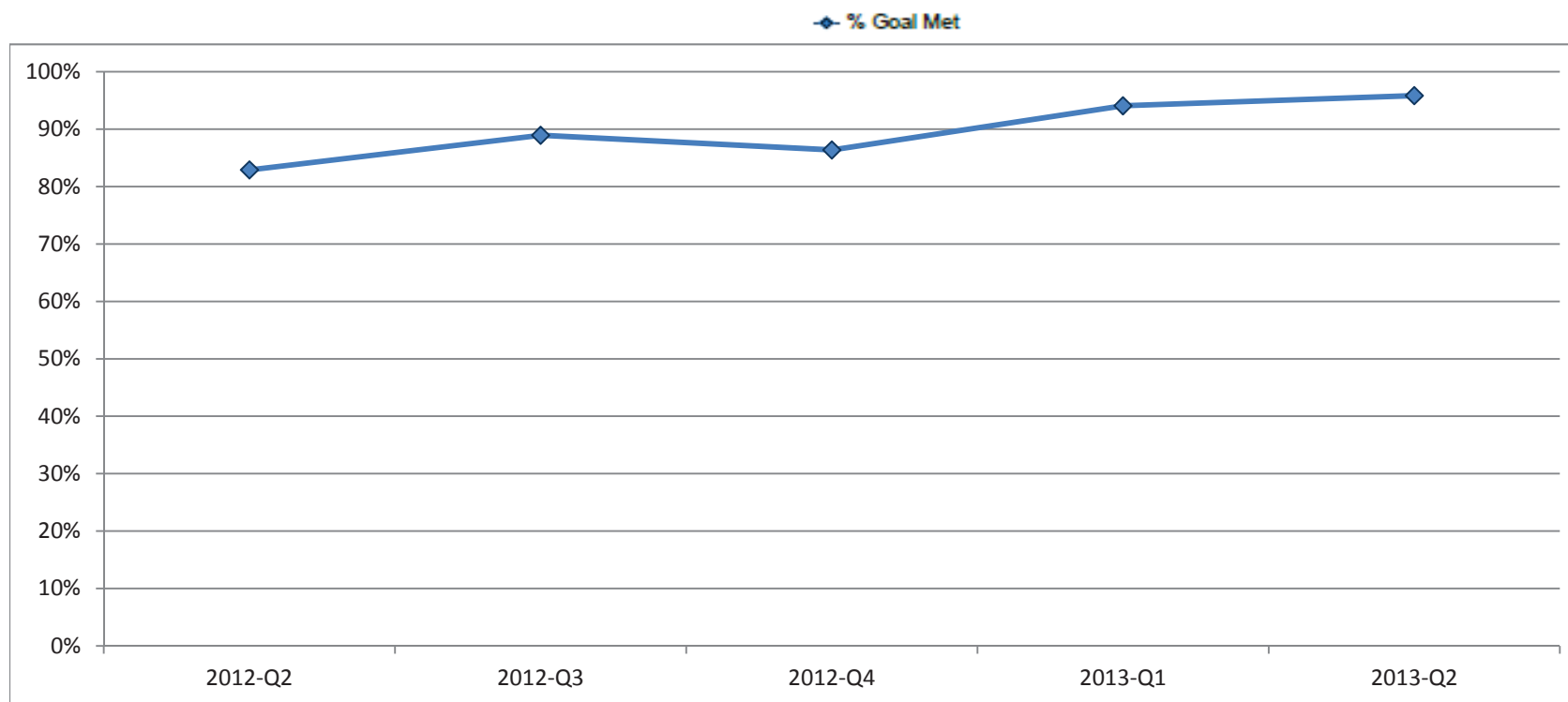


Fiscal Year	Quarter	Count - Trips	Count - Goal Met	Percentage - Goal Met
2012	2012-Q2	59	52	88.14%
2012	2012-Q3	60	44	73.33%
2012	2012-Q4	49	39	79.59%
2013	2013-Q1	54	43	79.63%
2013	2013-Q2	69	60	86.96%

Austin-Travis County EMS

Aspirin Administration in ACS Patients

Clinical Performance Indicator 4.3



Fiscal Year	Quarter	Count - Trips	Count - Goal Met	Percentage - Goal Met
2012	2012-Q2	316	262	82.91%
2012	2012-Q3	325	289	88.92%
2012	2012-Q4	264	228	86.36%
2013	2013-Q1	439	413	94.08%
2013	2013-Q2	601	576	95.84%

Austin-Travis County EMS



Performance Measure Summary

Stroke

A stroke is the loss of neurologic function due to alterations or disturbances in the blood supply to the brain. When blood flow is stopped for more than a few seconds, brain cells begin to die, causing permanent damage. Each year, about 795,000 people suffer a stroke. It is the third leading cause of death in the United States and kills 143,579 people each year and is the leading cause of serious, long-term disability. The total cost of stroke to the United States is estimated at \$43 billion dollars.

There are two types of stroke:

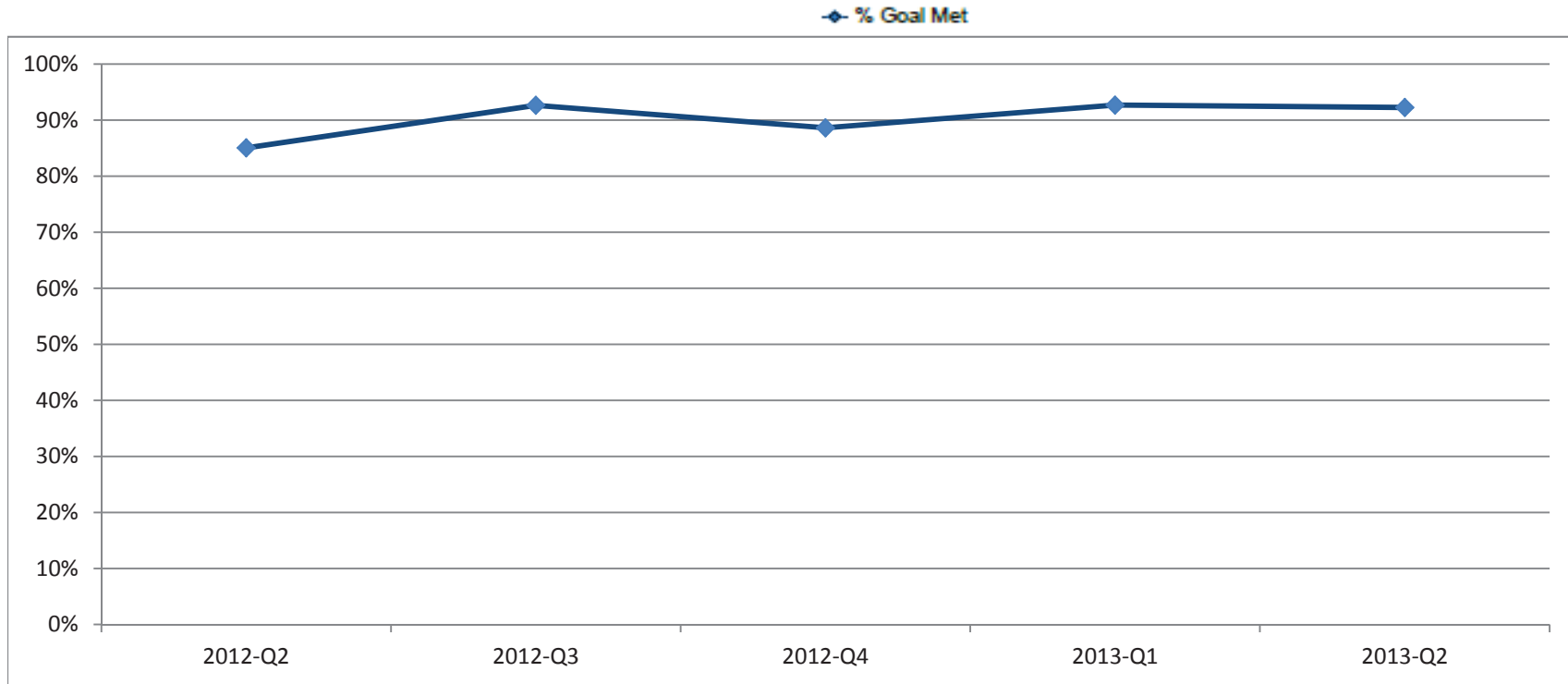
- Ischemic – Ischemic stroke occurs when a blood vessel becomes obstructed and interrupts blood supply. 87% of strokes are classified as ischemic.
- Hemorrhagic – Hemorrhagic strokes are caused by a ruptured blood vessel or abnormal vasculature. This type of stroke accounts for nearly 30% of all stroke deaths.

ATCEMS Performance Measures

- Scene time compliance – Goal is 15 minutes
- Blood glucose assessment

Scene Time Interval for Stroke Patients

Clinical Performance Indicator 2.3

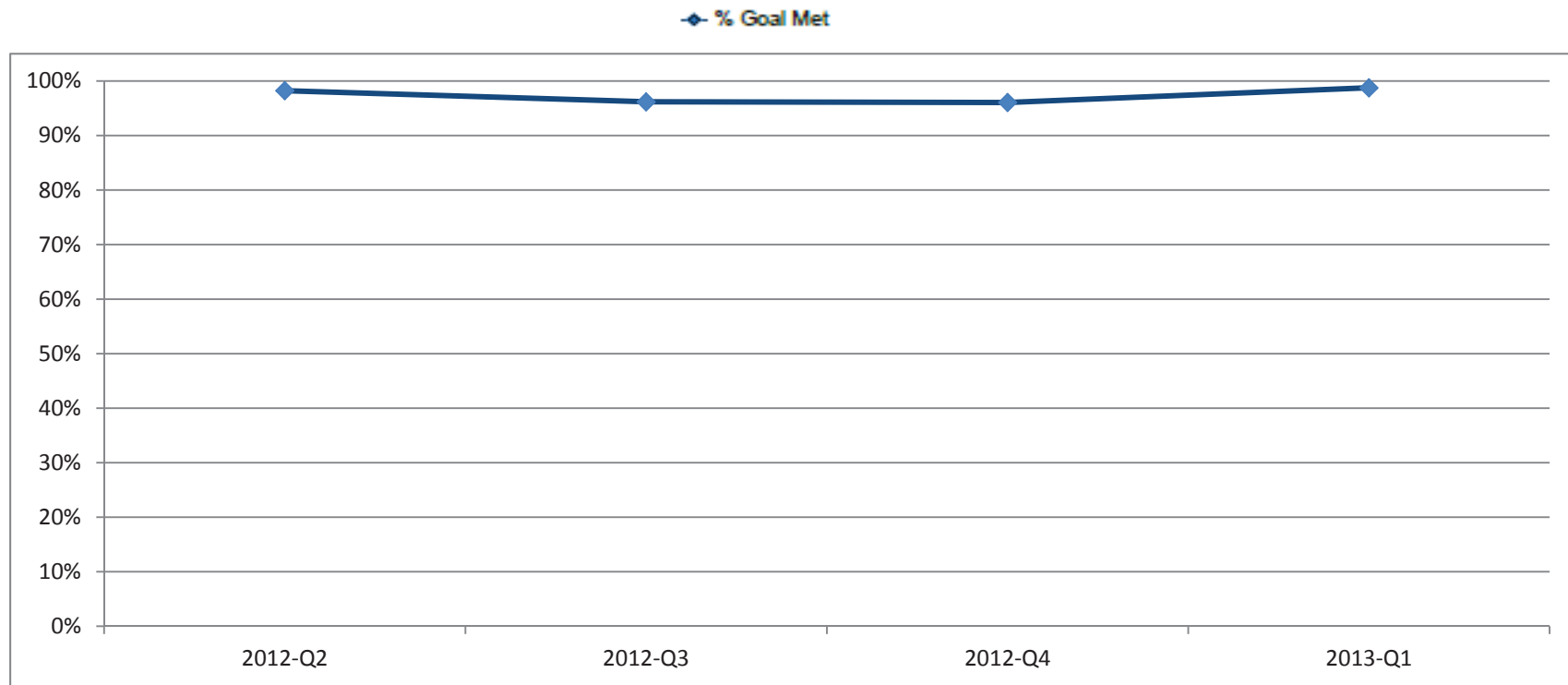


Fiscal Year	Quarter	Count - Trips	Count - Goal Met	Percentage - Goal Met
2012	2012-Q2	127	108	85.04%
2012	2012-Q3	136	126	92.65%
2012	2012-Q4	123	109	88.62%
2013	2013-Q1	123	114	92.68%
2013	2013-Q2	129	119	92.25%

Austin-Travis County EMS

Blood Glucose Level in Stroke Patients

Clinical Performance Indicator 7.2



Fiscal Year	Quarter	Count - Trips	Count - Goal Met	Percentage - Goal Met
2012	2012-Q2	169	166	98.22%
2012	2012-Q3	183	176	96.17%
2012	2012-Q4	152	146	96.05%
2012	2013-Q1	159	157	98.74%
2012	2013-Q2	157	156	99.36%

Austin-Travis County EMS



Performance Measure Summary

Customer Satisfaction

Exemplary patient care and customer service are two important aspects of the A/TCEMS operational model. One measure of customer satisfaction is the Call to Door interval. The Call to Door interval is the amount of time it takes A/TCEMS to receive a 911 request, dispatch, respond, treat, and transport a patient.

ATCEMS Performance Measures

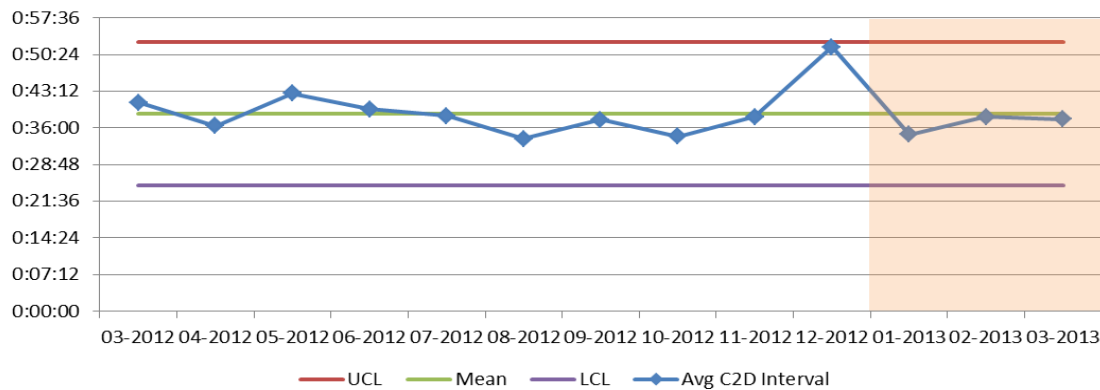
- STEMI – Call to door interval
- Stroke – Call to door interval
- Trauma - Call to door interval

Customer Satisfaction Report

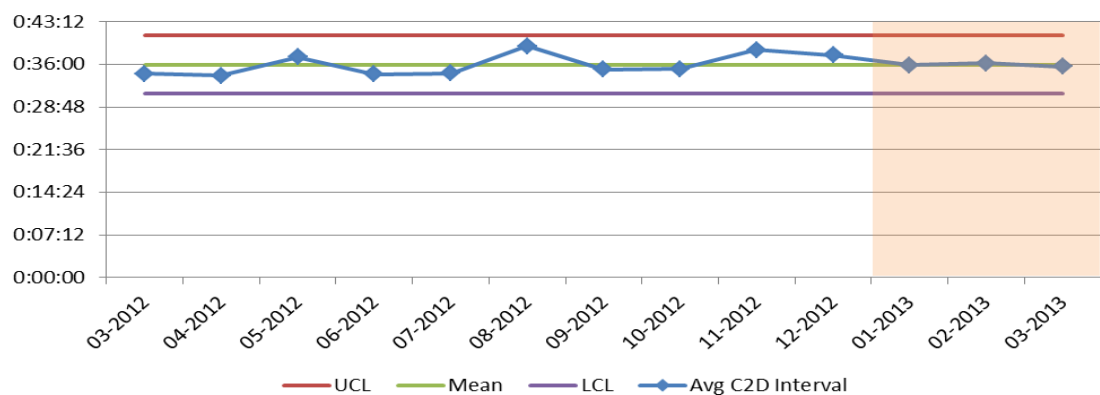
FY2013 Q2

	Jan-13	Feb-13	Mar-13
Avg Call to Door Interval - STEMI	0:38:06	0:51:50	0:34:41
Avg Call to Door Interval - Stroke	0:37:33	0:35:51	0:36:11
Avg Call to Door Interval - Trauma	0:36:32	0:35:19	0:31:13

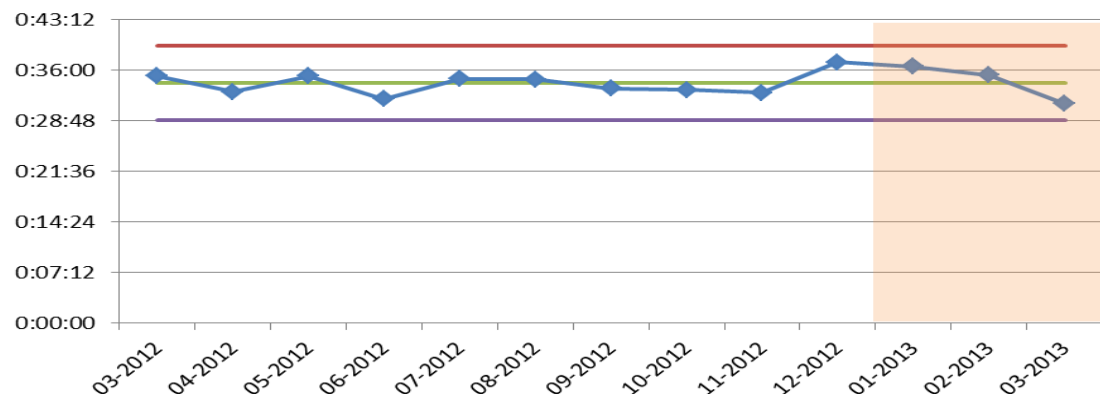
Average Call-to-Door Interval - STEMI



Average Call-to-Door Interval - Stroke



Average Call-to-Door Interval - Trauma



This report is prepared by the A/TCEMS Business Analysis and Research Team .
Please submit questions or comments at EMSDataAnalysis@austintexas.gov.

ATCEMS SYSTEM RESPONSE COMPLIANCE

	ATCEMS (ALS TRANSPORT) COMPLIANCE WITH RESPONSE TIME GOAL												
	CITY OF AUSTIN							TRAVIS COUNTY					
INCIDENT RESPONSE PRIORITY	1	2	3	4	5	OVERALL		1	2	3	4	5	OVERALL
RESPONSE TIME GOAL	09:59	11:59	13:59	15:59	17:59	COMPLIANCE		11:59	13:59	15:59	17:59	19:59	COMPLIANCE
FY2011-Q1	93.50%	96.61%	99.01%	98.51%	94.74%	97.11%		78.42%	80.63%	88.44%	96.16%	91.15%	87.79%
FY2011-Q2	93.81%	96.37%	97.82%	98.29%	93.40%	96.56%		69.96%	84.38%	88.85%	94.49%	88.57%	87.56%
FY2011-Q3	93.32%	97.02%	98.20%	98.57%	96.13%	97.29%		72.31%	81.72%	89.76%	93.99%	88.14%	86.86%
FY2011-Q4	94.11%	96.30%	98.19%	98.51%	95.39%	96.95%		72.50%	82.05%	86.79%	95.43%	92.11%	87.57%
FY2012-Q1	93.35%	96.84%	97.55%	98.64%	96.50%	97.21%		73.06%	82.70%	91.44%	95.93%	91.13%	88.47%
FY2012-Q2	93.26%	96.53%	97.73%	98.92%	96.10%	97.15%		76.33%	84.91%	88.78%	94.85%	90.85%	88.56%
FY2012-Q3	91.68%	96.19%	98.28%	98.51%	95.26%	96.76%		71.92%	83.02%	89.57%	96.24%	91.72%	88.41%
FY2012-Q4	92.55%	96.13%	97.95%	98.68%	96.86%	97.07%		67.90%	83.43%	88.37%	96.07%	91.03%	87.84%
FY2013-Q1	91.24%	96.36%	98.32%	98.63%	95.69%	96.90%		75.09%	83.40%	89.24%	96.04%	93.55%	88.82%
FY2013-Q2	91.64%	96.20%	98.21%	98.70%	95.10%	96.85%		73.23%	84.89%	88.87%	96.50%	91.43%	88.80%

	ATCEMS SYSTEM (ALL RESPONDERS) COMPLIANCE WITH RESPONSE TIME GOAL												
	CITY OF AUSTIN							TRAVIS COUNTY					
INCIDENT RESPONSE PRIORITY	1	2	3	4	5	OVERALL COMPLIANCE		1	2	3	4	5	OVERALL COMPLIANCE
RESPONSE TIME GOAL	09:59	11:59	13:59	15:59	17:59			11:59	13:59	15:59	17:59	19:59	
FY2011-Q1	98.97%	99.35%	99.92%	98.87%	95.22%	98.66%		97.97%	97.16%	98.40%	99.12%	97.80%	98.12%
FY2011-Q2	98.38%	99.25%	99.68%	98.65%	93.77%	98.24%		87.44%	96.17%	97.45%	98.02%	98.20%	96.60%
FY2011-Q3	98.82%	99.38%	99.76%	98.75%	96.58%	98.80%		86.83%	92.97%	96.32%	97.68%	97.89%	95.20%
FY2011-Q4	99.11%	99.16%	99.59%	98.73%	95.98%	98.62%		88.48%	94.23%	95.47%	98.48%	97.97%	95.88%
FY2012-Q1	98.58%	99.31%	99.50%	98.86%	96.76%	98.77%		87.85%	94.37%	96.83%	98.11%	99.32%	96.08%
FY2012-Q2	98.96%	99.41%	99.49%	99.11%	96.41%	98.85%		91.53%	96.02%	98.30%	97.42%	97.20%	96.63%
FY2012-Q3	98.20%	99.11%	99.65%	98.81%	95.52%	98.52%		86.26%	95.32%	97.70%	98.75%	97.97%	96.46%
FY2012-Q4	98.64%	99.21%	99.68%	98.94%	97.01%	98.83%		87.18%	94.78%	96.30%	98.70%	98.10%	96.10%
FY2013-Q1	97.33%	99.21%	99.67%	98.93%	95.95%	98.59%		88.93%	94.08%	96.77%	98.10%	98.86%	96.03%
FY2013-Q2	98.40%	99.35%	99.87%	98.99%	95.38%	98.70%		85.50%	94.96%	97.42%	98.00%	98.18%	95.92%

This report contains working data for internal use only. For official reports please contact the A/TCEMS Business Analysis and Research Team at EMSDataAnalysis@austintexas.gov.

**FY13 Q2 - First Responder Fractile Report
(From EMS Phone pickup to Fire First Unit Arrival)
EMS Priority 1 & 2 incidents**

Location	Case base	% arriving within 08:15 minutes	90th percentile for quarter		
			Current	1 Yr ago	2 Yrs ago
ESD01 North Lake Travis	108	49%	13:30	12:54	12:49
ESD02 Pflugerville	452	86%	08:46	08:59	09:04
ESD03 Oak Hill	58	83%	09:58	08:36	10:57
ESD04	63	51%	13:58	13:25	11:18
ESD05 Manchaca	62	76%	09:37	14:01	10:52
ESD06 Lake Travis FR	188	73%	11:45	09:59	09:50
ESD08 Pedernales	23	30%	15:07	13:11	15:30
ESD09 Westlake	41	78%	10:11	08:49	08:28
ESD10 Ce-Bar	13	77%	09:34	08:47	07:48
ESD11 Travis County FR	120	63%	10:42	10:50	12:12
ESD12 Manor	120	56%	13:55	11:43	13:00
ESD13 Elgin	10	0%	17:18	18:02	16:42
ESD14 Volente	13	38%	12:18	11:34	06:50
County - City comparison					
All ESDs	1,271	71%	11:45	10:56	10:56
AFD	7,051	87%	08:37	08:37	08:38
County-wide	8,322	85%	09:04	09:03	09:01
Travis County ESDs By Region					
East	634	76%	11:04	10:35	10:37
South	182	67%	10:37	11:10	12:05
West	334	71%	11:48	09:53	10:06
Northwest	121	48%	12:54	12:50	12:49
Case base excludes: <ul style="list-style-type: none"> - Incidents where calltaking was performed by agency other than EMS - Incidents where EMS was already onscene before First responder assigned to call - Test and duplicate calls, per EMS cancel reason - Incidents where no units were assigned and/or no arrival times recorded. 					
NOTES: Locations are based on EMS jurisdiction codes. Unit stage time was substituted for arrival time if the first-in unit had a stage timestamp greater or equal to enroute time but less than the arrival time (if any). Percentiles use a calculation method (waverage) that is more accurate for small case bases than the standard method.					

EMS Advisory Board

Cardiac Arrest Survival Rates (thru December 2012)

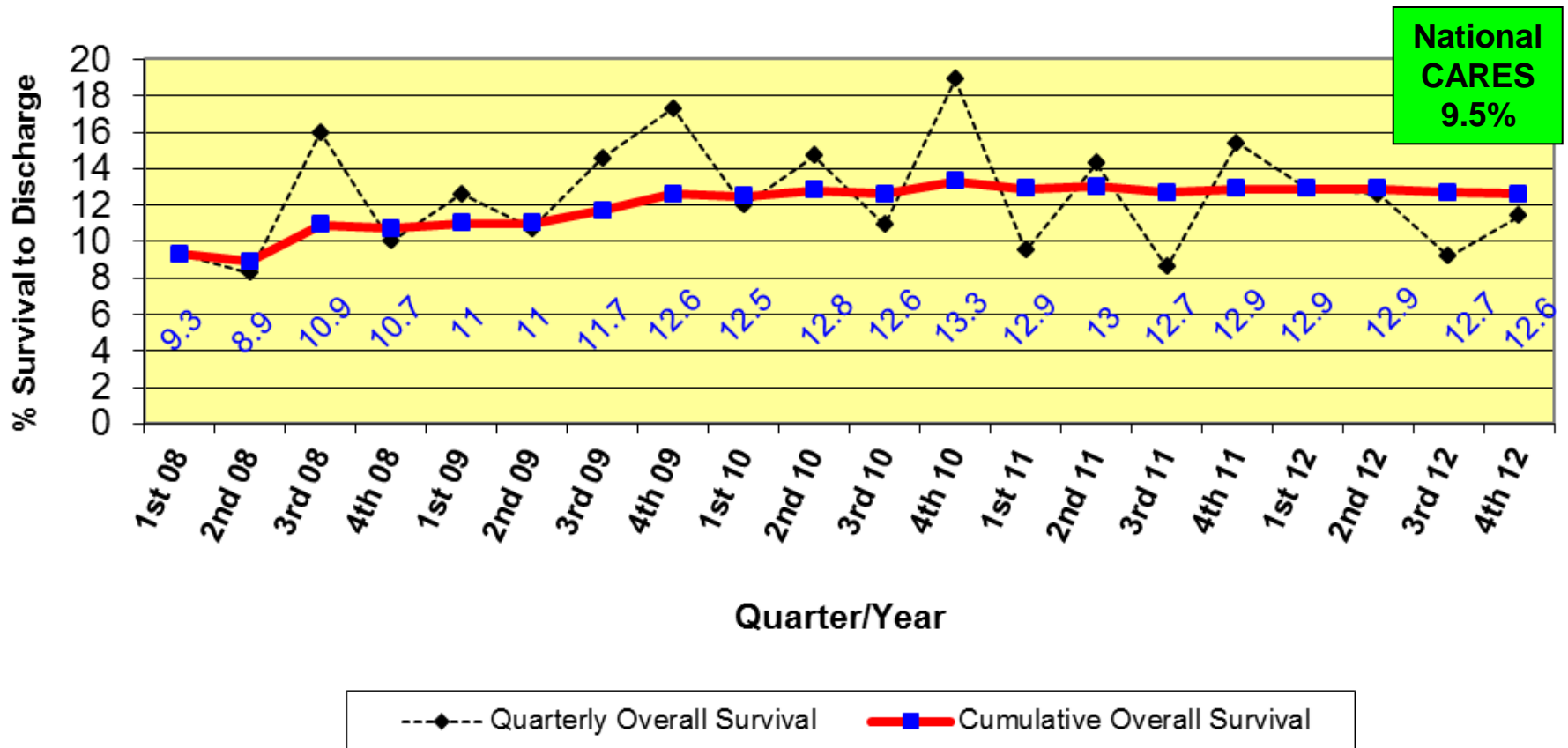
Current CARES Sites

- Anchorage, AK
- Arizona (state)
- Contra Costa, CA
- San Francisco, CA
- Santa Barbara, CA
- San Diego, CA
- Ventura County, CA
- Colorado Springs, CO
- Denver, CO
- El Paso County, CO
- Stamford, CT
- New Castle Co., DE
- Miami, FL
- Atlanta, GA
- Kansas City, KS
- Sedgwick Co, KS
- Boston, MA
- Cambridge, MA
- Springfield, MA
- Oakland County, MI
- Kent County, MI
- Minnesota (state)
- North Carolina (state)
- Las Vegas, NV
- Reno, NV
- Arizona (state)
- MONOC, NJ
- Ohio (state)
- Hershey, PA
- Hilton Head, SC
- Sioux Falls, SD
- Nashville, TN
- Austin, TX
- Baytown, TX
- Fort Worth, TX
- Houston, TX
- Plano, TX
- Richmond, VA

Definitions

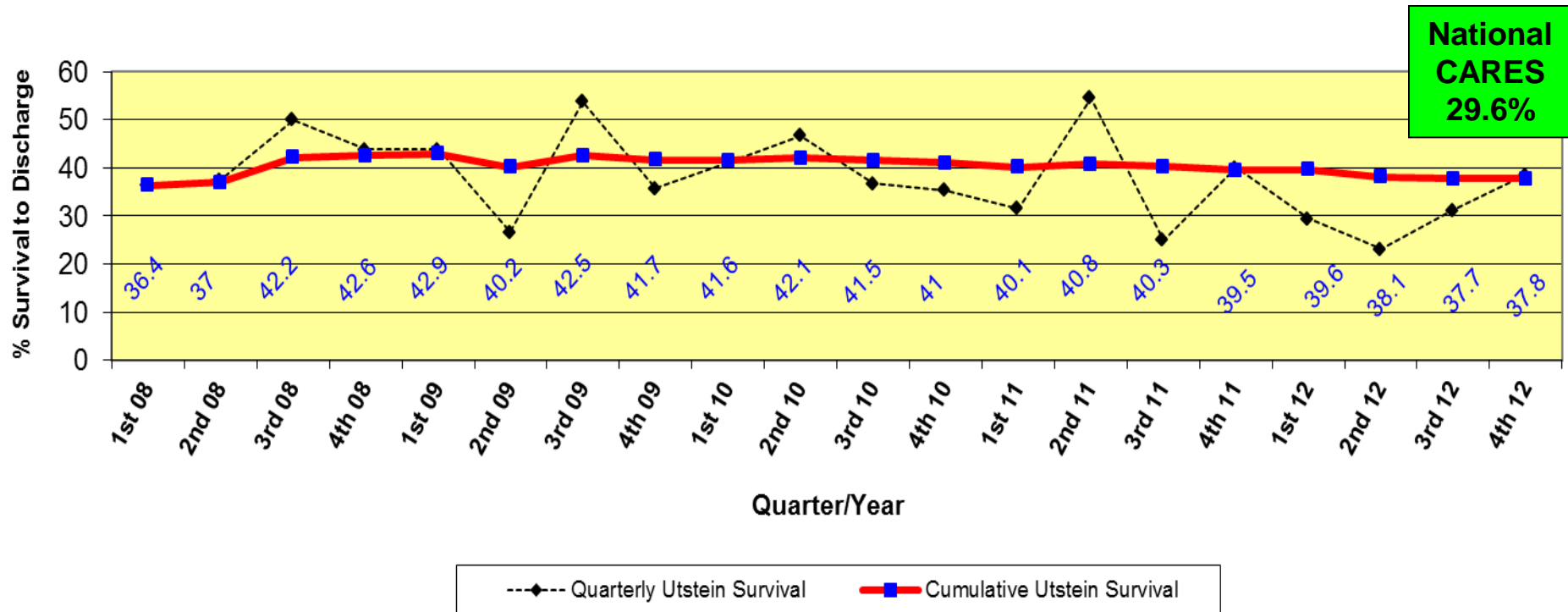
- CARES – a national out of hospital cardiac arrest registry based at Emory University; it only includes patients who have an out of hospital cardiac arrest that is deemed likely due to a cardiac type of problem.
- Overall Survival – the proportion of patients for whom resuscitation efforts were attempted and who survived to hospital discharge
- Utstein Survival – the proportion of patients who had a witnessed cardiac arrest (excludes EMS witnessed) and who had ventricular fibrillation as the 1st identified cardiac rhythm
- Quarterly Survival – includes cardiac arrests for the specific quarter only
- Cumulative Survival – includes all cardiac arrests since Jan 2008
- National Survival – the Overall Survival or Utstein Survival for the aggregate of all CARES site data (cumulative since Jan 2008)

CARES Overall Survival



* *Indicates incomplete quarter

CARES Utstein Survival



* *Indicates incomplete quarter

1st & 2nd QUARTER REPORT: FY 2013

All Emergency Response

Dispatches	935	Aborts		In County	Out of County
Flight Hrs	444.3	Cancelled		87	49
TC Transports	90	Mechanical		1	1
OOO Transports	189	Weather		14	62
Total Transports	279	Total		102	112

Response Type	Dispatches	Aborts	Missions	% - Missions to Dispatch	Flight Hrs	% of Total Flight Hours
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Travis County Responses

EMS	174	96	78	44.8%	48.5	10.9%
Rescue	23	9	14	60.9%	10.1	2.3%
Law Enfor.	10	3	7	70.0%	6.0	1.4%
Fire	3	0	3	100.0%	3.6	0.8%
Sub -Total	210	108	102	48.6%	68.2	15.3%

Out of County Responses

EMS	302	107	195	64.6%	195.0	43.9%
Rescue	10	7	3	30.0%	5.8	1.3%
Law Enfor.	4	2	2	50.0%	3.8	0.9%
Fire	5	1	4	80.0%	4.0	0.9%
Sub -Total	321	117	204	63.6%	208.6	47.0%

All Responses

EMS	476	203	273	57.4%	243.5	54.8%
Rescue	33	16	17	51.5%	15.9	3.6%
Law Enfor.	14	5	9	64.3%	9.8	2.2%
Fire	8	1	7	87.5%	7.6	1.7%
Total	531	225	306	57.6%	276.8	62.3%

Other Missions

Operations	262				45.4	10.2%
Repositon	3				0.4	0.1%
Maintenance	12				4.0	0.9%
Public Relations	25				9.4	2.1%
Training	102				108.3	24.4%
Sub -Total	404				167.5	37.7%

TOTAL MISSIONS	935				444.3	100.0%
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Auto Launches	MPD P1	MPD P2	MPD P3	MPD P4	MPD P5	Transports	% of Total
122						45	37%

PCRs	CC Reviews	% CC Reviews	MD Reviews	% MD Reviews	Exceptions*	Investigations**
528	528	100%	7	1%	1	1

*Exceptions = Unique/seldom occurring circumstances requiring a more indepth review, including crew interviews, to determine if appropriate actions were taken

**Investigations = COG/protocol compliance were not adhered requiring a more indepth review, including crew interviews, to determine reason

2nd QUARTER REPORT: FY 2013

All Emergency Response

Dispatches	477			Aborts	In County	Out of County
Flight Hrs	221.4			Cancelled	47	26
TC Transports	41	EMS Cancelled		Mechanical	0	1
OOC Transports	93	Missed Busy	In Co / Out Co	Weather	5	32
Total Transports	134	1	39 / 23	Total	52	59

Response Type	Dispatches	Aborts	Missions	% - Missions to Dispatch	Flight Hrs	% of Total Flight Hours
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Travis County Responses

EMS	82	50	32	39.0%	24.4	11.0%
Rescue	11	3	8	72.7%	4.4	2.0%
Law Enfor.	4	0	4	100.0%	3.5	1.6%
Fire	2	0	2	100.0%	3.2	1.4%
Sub -Total	99	53	46	46.5%	35.5	16.0%

Out of County Responses

EMS	157	58	99	63.1%	95.1	43.0%
Rescue	4	2	2	50.0%	3.2	1.4%
Law Enfor.	3	2	1	33.3%	2.5	1.1%
Fire	4	1	3	75.0%	3.2	1.4%
Sub -Total	168	63	105	62.5%	104.0	47.0%

All Responses

EMS	239	108	131	54.8%	119.5	54.0%
Rescue	15	5	10	66.7%	7.6	3.4%
Law Enfor.	7	2	5	71.4%	6.0	2.7%
Fire	6	1	5	83.3%	6.4	2.9%
Total	267	116	151	56.6%	139.5	63.0%

Other Missions

Operations	136				20.2	9.1%
Repositon	3				0.4	0.2%
Maintenance	6				2.6	1.2%
Public Relations	10				3.0	1.4%
Training	55				55.7	25.2%
Sub -Total	210				81.9	37.0%

TOTAL MISSIONS	477		221.4	100.0%
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Auto Launches	MPD P1	MPD P2	MPD P3	MPD P4	MPD P5	Transports	% of Total
65						27	42%

PCR's	CC Reviews	% CC Reviews	MD Reviews	% MD Reviews	Exceptions*	Investigations**
266	266	100%	4	2%	1	1

*Exceptions = Unique/seldom occurring circumstances requiring a more indepth review, including crew interviews, to determine if appropriate actions were taken

**Investigations = COG/protocol compliance were not adhered requiring a more indepth review, including crew interviews, to determine reason