



# San Joaquin County

## Emergency Medical Services Agency



### Continuous Quality Improvement Report

**Performance Improvement Activity:** Develop and monitor performance indicators for hospital diversion and ambulance delay times in accordance with EMS Policy No. 4980, Receiving Hospital Diversion.

**Reporting Period (month, quarter, year):** August 2006

1. Opportunity/Issue/Problem **(PLAN)**

- Opportunity: Evaluate and improve hospital diversion and ambulance delay times.
- Problem: Patient assessment and treatment in the hospital setting is delayed by hospital diversion and prolonged ambulance patient care transfer times.
- Goal: Obtain baseline data and minimize diversion times.

2. Solution Implemented **(DO)**

- Collect hospital status data from EMSsystem.
- Collect data from prehospital care provider Delay of Transfer of Care at the Emergency Department forms.

3. Data Elements Collected for Evaluation

- Hospital Status:
  - Diversion
  - Advisory
  - Internal Disaster
- Delays in transfer of care

4. Results and Data Analysis **(STUDY)**

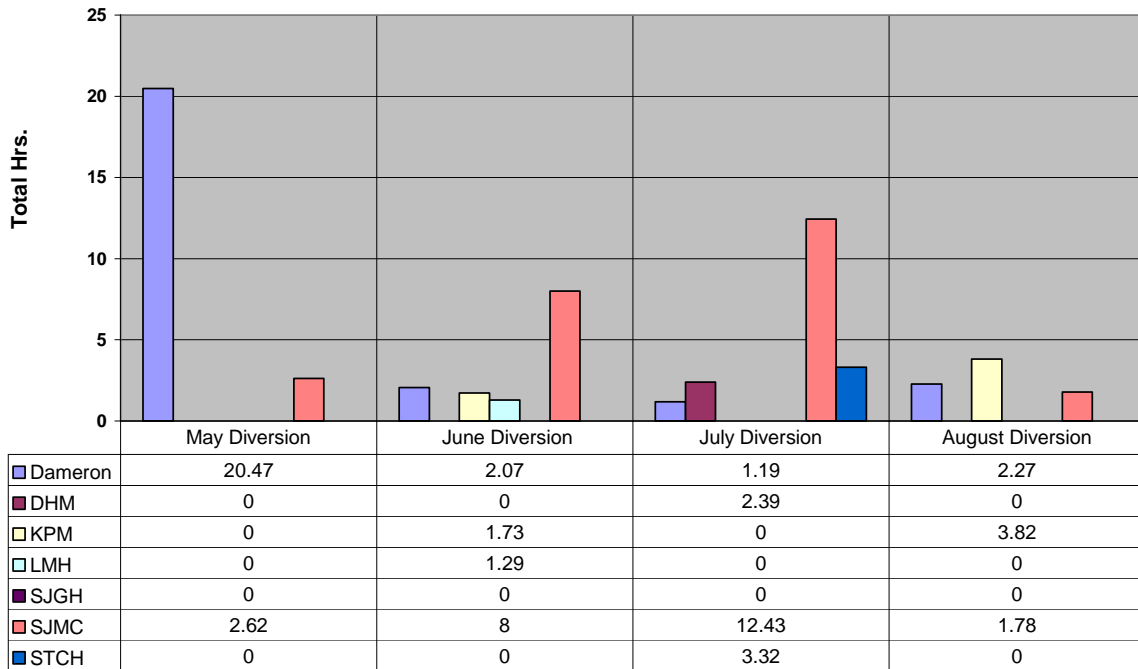
Analysis of data for August 2006 includes the following results:

- All hospitals have submitted a written diversion avoidance policy and are now eligible to utilize the EMS Policy No. 4980, Receiving Hospital Diversion.
- 3/7 hospitals utilized diversion time to manage emergency department (ED) inundation.
- Total hospital diversion time was 7.87 hours.
- 0/7 hospitals closed to ambulance traffic due to Internal Disaster.
- There was no delay of transfer of care in the Emergency Department reports filed with the EMS Agency during the month of August.

5. Conclusions and Recommendations **(ACT)**

- Facility specific diversion times are as followed:
  - Dameron – 2.27 hours
  - Doctors Hospital of Manteca – N/A
  - Kaiser Permanente Manteca – 3.82 hours
  - Lodi Memorial Hospital – N/A
  - San Joaquin General Hospital – N/A
  - St. Joseph's Medical Center – 1.78 hours
  - Sutter Tracy Community Hospital – N/A
- Recommendations:
  1. Maintain policy for receiving hospital diversion.
  2. Increase receiving hospital use of EMSsystem for reporting advisory status.
  3. Continue to collect and trend hospital status and delay of transfer data.

## Monthly Diversion/Delay Hours May - August 2006



## Hospital Status Report August 2006

