


Sierra – Sacramento Valley EMS Agency Program Policy

Ambulance Patient Offload Time (APOT)

	Effective: 12/01/2020	Next Review: 11/2023	307
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PURPOSE:

- A. To establish standards for the timely transfer of patient care responsibilities from EMS prehospital personnel to hospital emergency department (ED) medical personnel.
- B. To establish standardized methodologies for collecting, calculating and reporting Ambulance Patient Offload Time (APOT).

AUTHORITY:

- A. HSC, Division 2.5, Chapter 4, Article 1, § 1787.225, § 1797.227 & § 1797.228.
- B. CCR, Title 22, Division 9, Chapter 3, § 100127 & Chapter 4, § 100169.
- C. S-SV EMS Base/Modified Base Hospital Agreements.

DEFINITIONS:

- A. **Ambulance Patient Offload Time (APOT)** – The time interval between the arrival of a 911 ambulance patient at a hospital ED and the time the patient is transferred from the ambulance cot to the ED gurney, bed, chair or other acceptable location, and ED medical personnel assume complete responsibility for care of the patient.
- B. **APOT 1.1** – An APOT time interval measure. This metric is a continuous variable measured in minutes, aggregated and reported as a median.
- C. **APOT 1.2** – An APOT interval measure. This metric is a continuous variable measured in minutes, aggregated and reported as a 90th percentile.
- D. **APOT 2** – An APOT time interval process measure. This metric demonstrates the incidence of ambulance patient offload times expressed as a percentage of total EMS patient transports within a twenty (20) minute target, and exceeding that time in reference to 60-, 120- and 180-minute intervals.

POLICY:**A. APOT Documentation and Standards:**

1. EMS prehospital personnel shall adequately document APOT on all incidents.
 - All incident times, including 'Patient Arrived at Destination Date/Time' and 'Destination Patient Transfer of Care Date/Time' shall be accurately documented in the electronic patient care report.
 - Any APOT greater than 60 minutes shall be additionally noted/documentated in the electronic patient care report narrative (i.e. "delayed patient offload time of greater than 60 minutes" or similar wording).
 - Any misrepresentation of APOT documentation in the electronic patient care report incident times or narrative sections is a serious infraction, which may result in disciplinary action.
2. The expectation is that all ambulance patients are transferred from the ambulance cot/equipment to the ED gurney, bed, chair or other acceptable location, and ED medical personnel assume complete responsibility for care of the patient as soon as possible after ED arrival. The standard APOT for the S-SV EMS region is 20 minutes, and 911 ambulance patients shall have an APOT time of 20 minutes or less, 90% of the time. The following time measurements exceed/significantly exceed S-SV EMS APOT standards:
 - Exceeds APOT Standard:
 - APOT 1.1: 21 – 30 minutes
 - APOT 1.2: 21 – 30 minutes
 - APOT 2: 21 – 60 minutes
 - Significantly Exceeds APOT Standard:
 - APOT 1.1: Greater than 30 minutes
 - APOT 1.2: Greater than 30 minutes
 - APOT 2: Greater than 60 minutes

B. APOT Calculations/Reporting:

1. APOT calculations will be completed by S-SV EMS staff on a monthly basis, utilizing electronic patient care report data from the S-SV EMS data system.
 - Incidents with obvious data errors, that cannot be subsequently resolved/verified, will be excluded from APOT calculations and reporting.
2. S-SV EMS will produce/publish a system-wide APOT report on a monthly basis. This APOT report will be available to all EMS system participants as well as the general public.

3. S-SV EMS will provide APOT data to the California EMS Authority, as required by current statutes and regulations.
4. S-SV EMS will utilize the following National Emergency Medical Services Information System (NEMSIS) Version 3.4 data codes, descriptions and criteria to calculate, evaluate and report APOT measures:

NEMSIS Data Code	Data Description	Criteria/ Calculation
dAgency.03	EMS Agency Name	All S-SV EMS Authorized 911 Transport Providers
eResponse.05	Type of EMS Service Requested	911 Response (Scene)
eDisposition.12	Pt Disposition	Pt Treated & Transported by EMS
eDisposition.01	Pt Destination/Transferred to	Hospitals receiving 911 pts transported by ambulance
eTimes.11 eTimes.12	Pt Arrived at Destination Time Pt Destination Transfer of Care Time	Calculation = Difference (in minutes) between eTimes.11 & eTimes.12