# Florida EMS Plan Strategic Initiatives

**Mission:** To protect, promote and improve the health of all people in Florida through integrated state, county and community efforts.

## Clinical and Operational Performance - STEMI Patients

<table>
<thead>
<tr>
<th>Objective</th>
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<th>Report</th>
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<th>Goal</th>
</tr>
</thead>
</table>
| % of STEMI Alerts with on-scene time less than or equal to 20 min | Transport unit left scene date time – transport unit arrived on scene date time | 1. Average (mean) on-scene time  
2. % of time transport unit is off scene within 20 min | • Include treated and transported  
• Exclude calls where scene time is greater than 90 minutes | 90% by 12/2020 - original goal was 15 min, 90% of time |

### V1.4 Calculation / Definition

- **Numerator:**  
  E23_09 Florida Alert Type = 9030 STEMI Alert  
  OR  
  E19_03 Procedure Performed = 101.104 Specialty Center Activation- STEMI  
  AND  
  E05_09 Unit Left Scene Time - E05_07 arrived at patient <= 20 minutes  
  Transport unit arrived on scene <= 20 minutes  

- **Denominator:**  
  E23_09 Florida Alert Type = 9030 STEMI Alert  
  OR  
  E19_03 Procedure Performed = 101.104 Specialty Center Activation- STEMI  
  (where treated and transported--- E20_10=4850)  

### V 3.3.4 and V 3.4

- **Numerator:**  
  eDisposition.24 Destination Team Pre-Arrival Alert or Activation=STEMI  
  AND  
  eTimes.09 - Unit Left Scene Date/Time - eTimes.07 - Arrived at Patient Date/Time  
  <= 20 minutes  
  Transport unit arrived on scene <= 20 minutes  

- **Denominator:**  
  eDisposition.24 Destination Team Pre-Arrival Alert or Activation=STEMI  
  (where treated and transported -- eDisposition.12=4212033 Patient Treated, Transported by this EMS Unit)  
  Related ICD-10 – Any of I21 and I22 (ST Elevation MI, Acute Myocardial infarction, and NSTEMI MI)
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</thead>
<tbody>
<tr>
<td>Increase % of STEMI Alert Pts transported initially to Level 1 or 2 Cardio Hospital</td>
<td>Total # of STEMI Alert pts transported to Level 1 or 2 / divided by Total # of STEMI Alert pts transported</td>
<td>% of STEMI Alert patients transported to a Level 1 or 2 cardio hospital</td>
<td>Exclude null or bad facility codes</td>
<td>90% of the time by 12/20</td>
</tr>
</tbody>
</table>

**V1.4 Calculation / Definition**

**Numerator:**
E20_02 Destination/Transferred To Code is designated in the AHCA list as a Level I or Level II Cardiovascular Hospital AND E23_09 Florida Alert Type = 9030 STEMI Alert OR E19_03 Procedure Performed = 101.104 Specialty Center Activation - STEMI

**Denominator:**
E23_09 Florida Alert Type = 9030 STEMI Alert OR E19_03 Procedure Performed = 101.104 Specialty Center Activation - STEMI (where treated and transported-- E20_10=4850 and null/bad facility id removed)

**Recommended Actions**

Identify if there is a standard for patient symptoms that prompt a 12-lead upon contact (goal to improve time of arrival to first 12-lead)

Goal of 20 min, 90% of the time was met. Therefore amend goal to be 18 minutes 90% of the time

Create a comprehensive outline on how to capture data. Create a training outline on the data points and how to capture them from the end user perspective.
<table>
<thead>
<tr>
<th>Clinical and Operational Performance- STROKE Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective</strong></td>
</tr>
</tbody>
</table>
| % of Stroke Alerts with on-scene time less than or equal to 20 min | Time transport unit left scene date time – transport unit arrived on scene date time | 1. Average (mean) on-scene time  
2. % of time transport unit is off scene within 20 min. | • Include treated and transported  
• Exclude calls where scene time is greater than 90 minutes |
| | | | Off scene within 20 min  
90% of the time by 12/2020 |

### V1.4 Calculation / Definition

**Numerator:**
E23_09 Florida Alert Type = 9015 Stroke Alert  
OR  
E19_03 Procedure Performed = 101.105 Specialty Center Activation - Stroke  
AND  
E05_09 Unit Left Scene Time - E05_07 arrived at patient <= 20 minutes  
Transport unit arrived on scene <= 20 minutes  

**Denominator:**
E23_09 Florida Alert Type = 9015 Stroke Alert  
OR  
E19_03 Procedure Performed = 101.105 Specialty Center Activation - Stroke  
(where treated and transported---E20_10=4850)
### Objective

**Increase % of Stroke Alert Pts transported initially to Primary or Comprehensive Stroke Center**

### Formula

- Total # of Stroke Alert pts transported to Primary or Comp center / divided by Total # of Stroke Alert pts transported

### Report

- % of Stroke Alert patients transported to a Primary or Comprehensive Stroke Center

### Inclusions/Exclusions

- Include treated and transported
- Exclude null or bad facility codes
- Note: Stroke center is tracked by facility ID (some VA facilities don’t have AHCA numbers)

### V1.4 Calculation / Definition

**Numerator:**

- E20_02 Destination/Transferred To Code is designated in the AHCA list as a Primary or Comprehensive Stroke Center
- AND
- E23_09 Florida Alert Type = 9015 Stoke Alert
- OR
- E19_03 Procedure Performed = 101.105 Specialty Center Activation - Stroke

**Denominator:**

- E23_09 Florida Alert Type = 9015 Stoke Alert
- OR
- E19_03 Procedure Performed = 101.105 Specialty Center Activation - Stroke

**Recommended Actions**

- Potentially add in-process measure of elapsed time from on-scene (or FMC if possible) to time of stroke alert
- Determine if secondary stroke assessment tool and impact it has on destination and time on scene
- Identify best practice for what stroke test to use- better and less time to perform
- Review impact of pending legislation for a new definition of “Acute Stroke Ready” facility (HB 785- SB 1406)
<table>
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</tr>
</thead>
</table>
| % of Trauma Alerts with on-scene time less than or equal to 20 min | Time transport unit left scene date time – transport unit arrived on scene date time | 1. Average (mean) on-scene time  
2. % of time transport unit is off scene within 20 min. | • Include Treated and Transported  
• Exclude air transports  
• Exclude calls with on-scene time greater than 90 minutes  
• Exclude cardiac arrests | Off scene within 20 min, 90% of the time by 12/2020  
Original goal was 10 min on-scene time |
| Segment out trauma alerts transported by ground only | V1.4 Calculation / Definition V 3.3.4 and V 3.4 |                                                                 | • Include transport to landing zone or disposition is transfer to other transport agency (?) |                                                                                           |
Numerator:
E23_09 Florida Alert Type = 9010
Trauma Alert
OR
E19_03 Procedure Performed = 101.101 Specialty Center Activation - Adult Trauma
OR
E19_03 Procedure Performed = 101.102 Specialty Center Activation - Pediatric Trauma
AND
E05_09 Unit Left Scene Time - E05_07 arrived at patient <= 20 minutes
Transport unit arrived on scene <= 20 minutes

Denominator:
E23_09 Florida Alert Type = 9010
Trauma Alert
OR
E19_03 Procedure Performed = 101.101 Specialty Center Activation - Adult Trauma
OR
E19_03 Procedure Performed = 101.102 Specialty Center Activation - Pediatric Trauma
(where treated and transported ---
E20_10=4850 and E09_15 Providers Primary Impression not in (1640--cardiac arrest, 1685--obvious death) and E09_16 Providers Secondary Impression not in (1775--cardiac arrest, 1820--obvious death))

Numerator:
eDisposition.24 Destination Team Pre-Arrival Alert OR Activation=trauma (adult and pediatric & general)
AND
eTimes.09 - Unit Left Scene Date/Time - eTimes.07 - Arrived at Patient Date/Time <= 20 minutes
Transport unit arrived on scene <= 20 minutes

Denominator:
eDisposition.24 Destination Team Pre-Arrival Alert or Activation=trauma (adult and pediatric & general)
(where treated and transported--
eDisposition.12=4212033 Patient Treated, Transported by this EMS Unit and
eSituation.11 Provider Primary Impression=ICD-10??? and
eSituation.12 Provider Secondary Impression=ICD-10???)

Trauma Alert Criteria met (1 red or 2 blues for example)
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</thead>
</table>
| Increase % of Trauma Alert Pts transported initially to Trauma Center | Total # of Trauma Alert pts transported to Trauma center divided by Total # of Trauma Alert pts transported | % of Trauma Alert patients transported to a Trauma Center | • Exclude air transport  
• Exclude null or bad facility codes  
• Exclude cardiac arrests | 90% of TA to trauma center by 12/2020 |
| V1.4 Calculation / Definition                  |                                                                        | V 3.3.4 and V 3.4                           | Include transport to landing zone or disposition is transfer to other transport agency |                                                |
**Numerator:**
E20_02 Destination/Transferred To Code is designated in the AHCA list as a Trauma Center AND
E23_09 Florida Alert Type = 9010 Trauma Alert OR
E19_03 Procedure Performed = 101.101 Specialty Center Activation - Adult Trauma OR
E19_03 Procedure Performed = 101.102 Specialty Center Activation - Pediatric Trauma

**Denominator:**
E23_09 Florida Alert Type = 9010 Trauma Alert OR
E19_03 Procedure Performed = 101.101 Specialty Center Activation - Adult Trauma OR
E19_03 Procedure Performed = 101.102 Specialty Center Activation - Pediatric Trauma

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**Numerator:**
eDisposition.01 - <Destination/Transferred To, Name> is designated in the AHCA list as a Trauma Center AND
eDisposition.24 Destination Team Pre-Arrival Alert or Activation=trauma (adult and pediatric & general)

**Denominator:**
eDisposition.24 Destination Team Pre-Arrival Alert or Activation=trauma (adult and pediatric) & general

(where treated and transported--
eDisposition.12=4212033 Patient Treated, Transported by this EMS Unit and null/bad facility id removed and 
(eSituation.11 Provider Primary Impression=ICD-10??? and eSituation.12 Provider Secondary Impression=ICD-10???)

Primary Impression not cardiac arrest or obvious death

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**Recommended Actions**

Review potential causes of extended scene times such as immobilization, IV/IO start, intubation, etc.
## Clinical and Operational Performance - Non Traumatic Cardiac Arrest Patients

<table>
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<tr>
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<tbody>
<tr>
<td>% of Non-traumatic cardiac arrest patients with bystander CPR</td>
<td>Bystander is defined as anyone who was not “dispatched” to the scene so a SNF staff member would quality as a bystander</td>
<td>% of non-traumatic cardiac arrest patients had bystander CPR</td>
<td>* Would include non-transport</td>
<td>20% by 12/2020</td>
</tr>
<tr>
<td>% of non-traumatic cardiac arrest patients were witnessed by someone other than EMS</td>
<td></td>
<td></td>
<td>Include cardiac arrest etiology “presumed cardiac”</td>
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<td></td>
<td>Primary Impression = Cardiac Arrest</td>
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<td>Exclude calls where field “new trauma” is YES</td>
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<td></td>
<td>Exclude Primary or secondary Impression with Trauma</td>
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<td>Arrest witnessed by = witnessed by family, witnessed by lay person, or witnessed by healthcare provider</td>
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<td>Resuscitation Attempted by EMS = attempted defib, initiated chest compressions, or attempted ventilation</td>
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<td></td>
<td>Include Cardiac Arrest = Yes, prior to EMS arrival</td>
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<td></td>
<td>“Who provided CPR” = family member, Healthcare (non-EMS), Other EMS not part of dispatch response, or Lay person</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>V1.4 Calculation / Definition</td>
<td>V 3.3.4 and V 3.4</td>
</tr>
</tbody>
</table>
**Numerator:**
E11_02 Cardiac Arrest Etiology = 2250 Presumed Cardiac
OR
E11_01 Cardiac Arrest = 2240 Yes Prior to EMS Arrival
OR
E11_01 Cardiac Arrest = 2245 Yes After EMS Arrival
OR
E09_15 Provider Primary Impression = 1640 Cardiac Arrest
OR
E09_16 Secondary Impression = 1775 Cardiac Arrest
AND
E09_15 Primary Impression NOT = 1740 Traumatic Injury
AND
E09_01 Prior Aid = 99.600 CPR or 99.601 CPR By AED
AND
E09_02 = 1205 Lay Person 1210 Other Healthcare Provider & 1215 Patient

**Denominator:**
E11_02 Cardiac Arrest Etiology = 2250 Presumed Cardiac
OR
E11_01 Cardiac Arrest = 2240 Yes Prior to EMS Arrival
OR
E11_01 Cardiac Arrest = 2245 Yes After EMS Arrival
OR
E09_15 Provider Primary Impression = 1640 Cardiac Arrest
OR
E09_16 Secondary Impression = 1775 Cardiac Arrest
AND
E09_15 Primary Impression NOT = 1740 Traumatic Injury

**Numerator:**
eArrest.02 Cardiac Arrest Etiology = 3002001 Cardiac (Presumed)
OR
eArrest.01 Cardiac Arrest = 3001003 Yes Prior to EMS Arrival
OR
eArrest.01 Cardiac Arrest = 3001005 Yes After EMS Arrival
OR
eSituation.11 Provider Primary Impression = ICD-10??
OR
eSituation.12 Secondary Impression = ICD-10??
AND
eSituation.11 Primary Impression NOT = ICD-10??
AND
the 'prior aid' has changed, though there are several CPR related field under Arrest (no prior aid in V3, possibly some other fields in arrest section that might indicate prior aid info)

**Denominator:**
eArrest.02 Cardiac Arrest Etiology = 3002001 Cardiac (Presumed) - (ICD I46: cardiac arrest due to underlying cardiac condition)
OR
eArrest.01 Cardiac Arrest = 3001003 Yes Prior to EMS Arrival
OR
eArrest.01 Cardiac Arrest = 3001005 Yes After EMS Arrival
OR
eSituation.11 Provider Primary Impression = ICD-10 Cardiac arrest due to underlying cardiac condition.......OR
eSituation.12 Secondary Impression = ICD-10??.......AND
eSituation.11 Primary Impression NOT = ICD 10 I46 - Cardiac Arrest due to other underlying cause) or Cardiac Arrest cause unspecified.
<table>
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<th>Version</th>
</tr>
</thead>
</table>
| % of Non-traumatic cardiac arrest patients with sustained ROSC | ROSC is Pulse sustained prior to and maintained at time EMS turned over care in the ED. # of Utstein Cardiac Arrest patients with ROSC / divided by total # of Utstein Cardiac Arrest patients | % Sustained ROSC | • *Would include non-transports
• Include cardiac arrest etiology “presumed cardiac”
• Exclude calls where field “new trauma” is YES
• Exclude Primary or secondary Impression with Trauma
• Include arrest witnessed by value equal to “witnessed by Healthcare provider, Lay Person, or EMS, or ‘Seen/Heard by Lay Person/Healthcare provider
• Include 1st monitored rhythm of the pt. value equal to V-fib, V-tach, or Unkn AED Shockable rhythm
• Resuscitation Attempted by EMS = attempted defib, initiated chest compressions, or attempted ventilation
• Include cardiac arrest = Yes, after EMS arrival, or Yes, prior to EMS Arrival
• “Any return of spontaneous circulation” - with any Value that has “Yes” | 20.34% by 12/2020 |

V1.4 Calculation / Definition | V 3.3.4 and V 3.4 |
<table>
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<th>Denominator:</th>
</tr>
</thead>
<tbody>
<tr>
<td>E11_02 Cardiac Arrest Etiology = 2250 Presumed Cardiac OR E11_01 Cardiac Arrest = 2240 Yes Prior to EMS Arrival OR E11_01 Cardiac Arrest = 2245 Yes After EMS Arrival OR E09_15 Provider Primary Impression = 1640 Cardiac Arrest OR E09_16 Secondary Impression = 1775 Cardiac Arrest AND E09_15 Primary Impression NOT = 1740 Traumatic Injury AND E11_06 (any ROSC) = 2375 Yes prior to the ED arrival and at the ED</td>
<td>E11_02 Cardiac Arrest Etiology = 2250 Presumed Cardiac OR E11_01 Cardiac Arrest = 2240 Yes Prior to EMS Arrival OR E11_01 Cardiac Arrest = 2245 Yes After EMS Arrival OR E09_15 Provider Primary Impression = 1640 Cardiac Arrest OR E09_16 Secondary Impression = 1775 Cardiac Arrest AND E09_15 Primary Impression NOT = 1740 Traumatic Injury</td>
</tr>
<tr>
<td>eArrest.02 Cardiac Arrest Etiology = 3002001 Cardiac (Presumed) OR eArrest.01 Cardiac Arrest = 3001003 Yes Prior to EMS Arrival OR eArrest.01 Cardiac Arrest = 3001005 Yes After EMS Arrival OR eSituation.11 Provider Primary Impression = ICD-10?? OR eSituation.12 Secondary Impression = ICD-10?? AND eSituation.11 Primary Impression NOT = ICD-10?? AND eArrest.12 (any ROSC) = 3012003 Yes, At Arrival at the ED OR 3012005 Yes, Prior to Arrival at the ED?? (answers has changed)??</td>
<td>eArrest.02 Cardiac Arrest Etiology = 3002001 Cardiac (Presumed) (ICD 146: cardiac arrest due to underlying cardiac condition) OR eArrest.01 Cardiac Arrest = 3001003 Yes Prior to EMS Arrival OR eArrest.01 Cardiac Arrest = 3001005 Yes After EMS Arrival OR eSituation.11 Provider Primary Impression = ICD-10 Cardiac arrest due to underlying cardiac condition.... OR eSituation.12 Secondary Impression = ICD-10??....AND eSituation.11 Primary Impression NOT = ICD 10 146 -Cardiac Arrest due to other underlying cause) or Cardiac Arrest cause unspecified.</td>
</tr>
<tr>
<td><strong>Recommended Actions</strong></td>
<td></td>
</tr>
<tr>
<td>----------------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Verify measures with the V3 Data Dictionary; Align ePCR with data dictionary</td>
<td>Perform routine random chart audits</td>
</tr>
<tr>
<td>Educate agencies on Utstein definition and data entry for ePCR (“witnessed” for example); Adopt the Utstein template that has been provided by the Medical Directors Group</td>
<td>Emphasize high Quality CPR; continuous, no hyperventilating</td>
</tr>
<tr>
<td>Educate Medical Directors to embrace the Dispatchers use of No, No, Go template and questions to initiate 'hands-only&quot; CPR in field prior to arrival of EMS. Don't refer to it as CPR but rather tell caller to perform 'chest compressions’</td>
<td>State DOH- Health Information and Policy Analysis Section to identify best practices and provide road map</td>
</tr>
<tr>
<td>Identify number of agencies participating in CARES registry</td>
<td>Identify best practices for increasing community CPR training (hands only campaigns for example)</td>
</tr>
<tr>
<td><strong>Consider Leading measure of “# of non-traumatic cardiac arrest patients with bystanders CPR / divided by # of non-traumatic cardiac arrest patients with bystanders present.</strong></td>
<td>Educate agencies on definition of Bystander (Lay Person)</td>
</tr>
</tbody>
</table>

**Overall Action Items**

1. Data dictionary for strategic plan measures including exclusion and inclusion criteria
2. Report for each strategic plan measure on the FL Reporting website
3. Display and recognize the top 10-20% performers in these areas to be recognized and benchmarked. Also identify the bottom 10-20% in order to provide coaching and resources to help improve.