

**County of Santa Clara
Emergency Medical Services System**

Emergency Medical Services Agency
976 Lenzen Avenue, Suite 1200
San Jose, CA 95126
408.885.4250 voice 408.885.3538 fax
www.sccemsagency.org



EMERGENCY MEDICAL SERVICES COMMITTEE

Chair: Health Advisory Commissioner Harry Hall

Thursday, November 12

1:00 pm – 3:00 pm

(Voting Members Requested to RSVP by October 29th, 2015)

**Santa Clara County Sheriff's Department Auditorium
55 West Younger Avenue
San Jose, CA 95110**








All reports and supporting material are available for review on the Santa Clara County EMS Agency website at www.sccemsagency.org and in the EMS Agency's offices at least one week prior to the meeting. This information is also available the day of the meeting. (📄 Indicates supporting documentation attached. 🔄 Indicates committee action required).

- 1. Call to Order / Roll Call** (Commissioner Hall)
- 2. Introductions and Announcements** (Commissioner Hall)
- 3. Public Comment** (Staff)

This portion of the meeting is reserved for persons desiring to address the EMS Committee on a Committee-related matter not on the agenda. Speakers are limited to two (2) minutes. The law does not permit Committee action or extended discussion on any items not on the agenda except under special circumstances. Statements that require a response may be placed on the agenda for the next regular meeting of the Committee.

Regular Items (Commissioner Hall) 📄 🔄

- 4. Presentation (20 minutes): County Ambulance Customer Service Program** (Bob Zuckswert, County Ambulance)
- 5. Presentation (20 minutes): EMS Super Bowl 50 Preparations** (Davies)

6. **Approval of June 4th, 2015 Meeting Minutes**  
7. **EMS System Update (Lowther)**
 - A. Exclusive Operating Area RFP / Renewal Status
 - B. EMS System Strategic Plan Update
 - C. EMS Agency transition from Public Health
 - D. EMD Task Force
 - E. EMS Semi-Annual Report – December 2015
8. **Medical Director Report** 
 - A. Update on Key Clinical Performance Indicators (Diaz)
9. **EMS Trust Fund**  
 - A. Status of the Trust Fund (Natividad)
 - B. FY2017 Trust Fund Category C (Partner Project Proposals) Open Solicitation (Davies)
 - a. Action required to convene EMS Trust Fund Advisory Group in January to review Category C Proposals in advance of EMSCo. Meeting.
 - C. Summary of Items Presented to Board of Supervisors or Health & Hospital Committee (Natividad)
10. **Exclusive Operating Area Contract Status**  (Blain)
 - A. County Service Area Performance
 - B. Palo Alto Service Area
11. **Hospital Destination, Diversion, and Advisory Status Report (Diaz)** 
12. **Member Roundtable and Reports**
13. **Next Meeting and Adjourn (Commissioner Hall)**

March 3, 2016 from 1-3 pm at the Sheriff's Department Auditorium, 55 West Younger Avenue, San Jose, CA 95110

Venue and Parking Instructions

- Visitor parking is available at the County building parking lot designated "Visitor" areas.
- No food or uncapped beverages are permitted in the training room.
- This meeting will be recorded.

Emergency Medical Services Committee
 Sheriff's Department Auditorium, 55 W Younger Avenue
 June 4, 2015
 1300 to 1500 Hours

Meeting Minutes

Item	Discussion	Action
1. Call to Order/Roll Call	Chairman Harry Hall called the meeting to order at 1:11 p.m. A quorum was present.	<ul style="list-style-type: none"> Meeting called to order.
2. Introductions and Announcements		<ul style="list-style-type: none"> None
3. Public Comment	<ul style="list-style-type: none"> No members of public provided comment. 	<ul style="list-style-type: none"> None
Calendar Items		
4. Approval of March 5, 2015 Meeting Minutes	<ul style="list-style-type: none"> Without discussion, the committee approved the consent calendar. M/S/C 	<ul style="list-style-type: none"> March 5, 2015 Meeting Minutes approved. M/S/C S.Drewniani/T.Haglund
5. Summary of Approved or Pending Board of Supervisors and Health & Hospital Committee Items	<p>Patricia Natividad reported:</p> <p><u>Summary of Board of Supervisors Approved Items:</u></p> <p>Proclamation Declaring May 17-23, 2015 as "Emergency Medical Services Week" – May 19, 2015.</p> <p><u>Health and Hospital Approved Committee Approved/Pending Board Items:</u></p> <p>Emergency Medical Services Trust Fund Recommendations for FY16 – April 15, 2015</p> <p>Semi-annual Report on EMS System and EMS Agency – May 22, 2015</p> <p>James Silva inquired about the Board of Supervisors use of the EMS TF.</p>	<ul style="list-style-type: none"> Summary of Approved BOS and HHC items accepted as presented. M/S/C H.Hall/S.Drewniani

	<ul style="list-style-type: none"> • Josh Davies commented that the TF has four categories. Category D is tapped by the Board for one-time projects. • Chief Nickel commented that stakeholders are not comfortable with the process of TF use by the Board. 	
6. EMS System Update	<p>Mike Williams reported:</p> <p>Currently serving in the role of Interim EMS Director. Has been working with stakeholders, other county agencies and Board for collaboration. Will be working on EOA Ambulance RFP until August 2015.</p>	<ul style="list-style-type: none"> • Informational Only
7. Medical Director Report – Clinical Care	<p>Dr. Eric Rudnick reported:</p> <p>The SCAMPS (Santa Clara Assessment for Missed Posterior Strokes) Trial Study began on 5/1/15. In addition, the Airway Task Force has been folded into the committee responsible for Continuous Quality Improvement (CQI). Change was done in order to improve airway management skills for providers.</p>	<ul style="list-style-type: none"> • Informational Only
8. Presentation: Overview of Comprehensive EMS Data System	<p>Michael Clark presented:</p> <ul style="list-style-type: none"> • In 2009 the EMS Agency received a written assessment from Web Reach that detailed a suggested approach to integrating various EMS related databases into one hub. • Since this time, the EMS Agency has developed and implemented various data systems that all combine into the EMS Data Hub. • Systems include a credentialing portal, service and vehicle management, electronic PCR data capture, specialty system registries, and a hospital hub. • The EMS agency is developing the ability to capture data from the moment that 911 was activated up to the moment that a patient was dropped off at the hospital's emergency department. 	<ul style="list-style-type: none"> • Information Only

	<ul style="list-style-type: none"> The Agency has also purchased reporting and analytical components that can look at the data being collected and output an aggregated report based on the configurations the user has chosen. 	
<p>9. Presentation: County Ambulance Customer Service</p>	<p>Presentation was not provided. To be presented at a later meeting by Bob Zuckswert.</p>	
<p>10. EMS Trust Fund</p>	<p>Patricia Natividad reported: A. Written Report on the Financial Status of the EMS Trust Fund.</p> <p>John Owen reported: B. Santa Clara County Fire Chiefs Association: EMS Section – Category C Trust Fund Proposal. A request for the amount of \$300,000 for the cost of additional data hardware for the County Fire Departments was presented. Previous funding was provided in FY14 and FY15 but additional funds are being requested to complete project. Funding will be allocated among Fire Departments based on call volume.</p>	<ul style="list-style-type: none"> 7A - Informational Only 7B - Category C Funding Request Approved. M/S/C S.Drewniani/E.Nickel
<p>11. Exclusive Operating Area Contract Status (Blain)</p> <p>A. County EOA Update – i. Accept Rural/Metro Response Time Performance Report ii. Accept Status of Deliverables</p> <p>B. Accept Fire Department Response Time Performance Report.</p> <p>C. Palo Alto EOA Update – Accept Verbal Report</p>	<p>John Blain reported on the modifications of Rural/Metro Agreement.</p> <ul style="list-style-type: none"> 11A - Rural/Metro response time performance was provided and reviewed. 11B - Fire department response time performance was provided and reviewed. 11C - Eric Nickel provided verbal report on Palo Alto EOA Update. 	<ul style="list-style-type: none"> 11A - Rural/Metro Response Time Performance Report accepted as presented. M/S/C 11B - Fire Department Response Times Performance Report accepted as presented. M/S/C 11C – Palo Alto EOA Report accepted as presented. M/S/C
<p>12. Hospital Destination, Diversion, and Advisory Status Report</p>	<p>Josh Davies provided review of report in lieu of Linda Diaz.</p>	<ul style="list-style-type: none"> Information Only
<p>13. Member Roundtable and Reports</p>	<p>No comments.</p>	<ul style="list-style-type: none"> Information Only

14. Next Meeting	The next meeting will be held on October 1, 2015 from 1:00 to 3:00pm at the Sheriff's Department Auditorium.	• As noted.
15. Adjournment	There being no further business, the meeting was adjourned at 2:39 p.m.	• Meeting adjourned.

MEMBERS PRESENT

Harry Hall, Chair, Health Advisory Commission
 Kenneth Horowitz, Health Advisory Commission
 Rick Kline, Santa Clara County Trauma Surgeons
 Randy Hooks, Permitted Non-911 Ambulance Provider
 Elaine Nelson, South Bay Emergency Medical Directors
 James Silva, Santa Clara County Medical Association
 Steven Drewniany, Santa Clara County Police Chief's
 Tom Haglund, County City/County Managers
 Ginger Miramontes, Emergency Department Managers

STAFF PRESENT

Mike Williams, Interim EMS Director
 Josh Davies, EMS Section Chief
 Erik Rudnick, Medical Director, EMS
 Patricia Natividad, Administrative Manager
 John Blain, EMS Specialist
 Sandra Alvarado, Executive Assistant

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Date: October, 2015
To: Santa Clara County EMS Committee Members
From: Eric M. Rudnick, MD, FACEP, FAAEM
Santa Clara County EMS Agency Medical Director
Subject: Clinical Care/Medical Directors Report

The EMS Update is scheduled for 10/6/15. At this training we will deliver the newly revised Spinal Motion Restriction (SMR) policy. Historically all patients who may have experienced any level of trauma whether from a ground level fall to a motor vehicle accident were treated the same. If the patient complained of neck pain or back pain they were placed in a hard cervical collar and positioned on a rigid backboard. Then subsequently strapped down until they could not move. Current literature and statements from the American College of Surgeons and National Association of EMS Physicians have called this practice into question. We have modified the procedure to ensure patient safety and eliminate the side effects from being placed in the traditional spinal immobilization.

A project that will be on-going is the revision of the 700 series clinical policies. This process is being conducted with a small group subcommittee with incredible stakeholder involvement. We have included both program managers and field staff. We will be looking at the policies that govern the care and treatment of the higher risk patient population first. This will be rolled out in a staggered fashion to allow adequate public comment and implementation.

On a somber note, I have resigned my position as EMS medical director for Santa Clara County. This will be effective late October 2015. I have thoroughly enjoyed my 5 years in Santa Clara County. The accomplishments achieved in improving the care delivered to the public has been due to the overwhelming support from the various stakeholders and the incredible staff at the EMS agency. It has been a honor serving in the medical director capacity.

Thank you for your attention and respectfully submitted.

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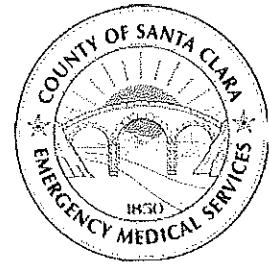
Date: September 30, 2015
To: Santa Clara County EMS Committee Members
From: Patricia Natividad
Senior Management Analyst
Subject: EMS Trust Fund – Liquidated Damages for Fiscal Year 2015

**Monthly Liquidated Damages for Response Time
July 1, 2014 – July 30, 2015**

Month / Year	Amount
July-14	\$206,750.00
August-14	\$323,500.00
September-14	\$349,000.00
October-14	\$325,500.00
November-14	\$350,500.00
December-14	\$375,500.00
January-15	\$404,750.00
February-15	\$247,250.00
March-15	\$282,000.00
April-15	\$251,000.00
May-15	\$7,000.00
June-15	\$7,000.00
July-14	\$53,250.00
Total for FY15	\$3,183,000.00
Average Monthly Total In Period	\$244,846.00

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Date: September 30, 2015

To: Santa Clara County EMS Committee Members

From: Patricia Natividad
Senior Management Analyst

Subject: Summary of Approved or Pending Board of Supervisors and Health and Hospital Committee Items

Summary of Board of Supervisors Approved Items:

Second Amendment to Agreement with Eric M. Rudnick, M.D., EMS Medical Director – June 23, 2015.

Consider recommendations relating to Agreement with Eric M. Rudnick, M.D., related to providing medical oversight of the Emergency Medical Services system. Approve Second Amendment to Agreement with Eric M. Rudnick, M.D., relating to providing medical oversight of the Emergency Medical Services system, increasing the maximum contract amount by \$192,200 from \$274,000 to \$466,200, and extending the agreement for a 12-month period through June 30, 2016, that has been reviewed and approved by County Counsel as to form and legality.

On June 25, 2013, the Board of Supervisors approved an agreement with Dr. Eric Rudnick in the amount of \$125,000 for the period July 1, 2013 through June 30, 2014. On April 29, 2014, the Board of Supervisor approved the first amendment to the agreement, increasing the maximum contract amount to \$274,000 and extending the term to December 31, 2014, with an option to extend to June 30, 2015. The proposed amendment would be the second amendment to the contract. The Public Health Department had a previous agreement with Dr. Rudnick, with a maximum contract amount of \$375,000, for the period July 1, 2010 through June 30, 2013.

Pursuant to Board Policy 5.4.5.4, exceptions to the maximum five-year term of contracts must be approved by the executing authority. California Health and Safety Code Division 2.5 1797.202 states that every local Emergency Medical Services (EMS) agency shall have a full or part-time licensed physician and surgeon as medical director. In July 2009, the Public Health Department conducted an informal competitive bid process to select an EMS Medical Director. The process included posting the announcement on the EMS Agency website, distributing the announcement to County EMS agencies throughout the State, and advertising in the California Chapter of American College of Emergency Medical Services newsletter and website, as well as on the Journal of Emergency Medical Services

website. At the conclusion of this process an interview panel selected Dr. Rudnick as the EMS Medical Director because of his combined expertise in the area of emergency medicine and his experience providing clinical oversight and direction to other EMS systems in California. The Public Health Department entered into an agreement with Dr. Rudnick to provide EMS medical oversight through June 30, 2013 and, through a new agreement, to provide the same services through June 30, 2015. This request is not currently authorized by the exceptions listed in the policy related to length of term of contracts, but is necessary to meet State law and provide the Public Health Department time to create a new job classification/code that would allow the Department to hire a permanent employee to fill this role rather than contracting with an individual for these job duties.

Agreement with The Abaris Group for EMS Agency Services – June 9, 2015

Held from May 19, 2015 (Item No. 22): Consider recommendations relating to Agreement with The Abaris Group to provide short-term Emergency Medical Services Agency services. Ratify Second Amendment to Agreement with The Abaris Group, increasing the maximum contract amount by \$381,350, from \$98,000 to \$479,350, and extending the Agreement for a four-month period ending September 19, 2015, with an option to extend up to an additional eight-month period through May 30, 2016 for the purpose of work related to the 911 Ambulance for Proposals at no additional cost, that has been reviewed and approved by County Counsel as to form and legality.

Pursuant to Board of Supervisors Policy 5.6.5.1(D)(2), exceptions to competitive procurement must be approved by the executing authority. This contractor is selected as a Single Source under 5.6.5.1(D)(2) – (a) Single Source. The resignation of the County EMS Director in February 2015 left County Administration with a sudden and unexpected vacancy in management. Following the resignation, County Administration determined that an experienced contractor with EMS knowledge and expertise was needed on an emergency basis to preform critical work items for EMS, including providing short term Director and mentoring services, as well as preparing an RFP and conducting the RFP process for 911 Ambulance providers.

The Abaris Group was immediately available and uniquely qualified to assist the County in filling its need. The Abaris Group is already intimately familiar with the County's EMS Agency since it assisted with the development of the current EMS Strategic Plan for the County, from July 1, 2012 through June 30, 2013. Through that process, The Abaris Group integrated the input and participation of key EMS system stakeholders, including fire agencies, hospitals, non-contracted hospital providers, pre-hospital training programs, dispatch centers and the County contracted ambulance provider Rural/Metro. Consequently, The Abaris Group was able to provide much needed assistance immediately in a way that others in the marketplace could not. Accordingly, the County Executive, in the exercise of his delegated authority, executed an Agreement allowing The Abaris Group to immediately begin providing services to the County EMS Agency. The contract has a March 16, 2015 commencement date and expires on September 19, 2015 unless terminated earlier in accordance with the Agreement.

Health and Hospital Approved Committee Approved/Pending Board Items:

Receive Report on the recommended structure of an AED matching grant program - August 12, 2015

Receive report from Emergency Medical Services Agency relating to structure of an Automated External Defibrillator matching grant program.

On June 15, 2015, Board of Supervisors approved Fiscal/Budget Item No. 15 to allocate funding to create an AED Matching Funds Reserve. This report provides the Health and Hospital Committee requested information regarding the recommended structure of an Automated External Defibrillator (AED) matching grant program.

To generate the matching funds and identify high-risk locations where AEDs would be most beneficial, the EMS Agency proposes to create a committee of stakeholders committed to the cause of providing access to life saving devices for sudden cardiac arrest. The committee would review data collected from the Public Health Department and EMS Agency to identify key locations where an AED would be most beneficial. The committee would examine information such as locations where sudden cardiac arrests occur with more frequency and the locations where AEDs are currently placed. Through this process, a list of locations where AEDs would provide utility would be developed. The committee could then address additional community stakeholders in these areas to determine interest in placing AEDs, as well as generate interest in funding the match. Such organizations could include Chambers of Commerce, the Silicon Valley Leadership Group, Silicon Valley Council of Nonprofits, Hospital Council, American Heart Association, Racing Hearts (to name just a few). Where interest and funds are connected, AEDs could be placed through the EMS Agency's matching fund. Thus far in FY16, Racing Hearts has raised \$45,000 toward AEDs to be placed within the East Side Union School District (in San Jose), where the placement of AEDs has been determined beneficial. This is enough funding to be matched to purchase 39 AEDs. There would be \$455,000 remaining in the reserve, which could be matched to purchase additional AEDs.

The EMS Agency will return to the Health & Hospital Committee with a more comprehensive plan to successfully administer the AED Designated Matching Fund Program later this year. The plan would include a proposed process for purchasing and placing the AEDs

Approve Third Amendment to Agreement with Eric M. Rudnick, M.D., relating to providing medical oversight of the Emergency Medical Services (EMS) System – June 10, 2015

Approve Third Amendment to Agreement with Eric M. Rudnick, M.D., relating to providing medical oversight of the Emergency Medical Services (EMS) system increasing the maximum contract amount by \$185,000 from \$274,000 to \$459,000, and extending for a 12- month period, through June 30, 2016.

The Health and Safety Code Division 2.5 1797.202 states that "every local EMS agency shall have a full or part-time licensed physician and surgeon as medical director, who has substantial expertise in the practice of emergency medicine, as designated by the county or by the joint powers agreements, to

provide medical control and to assure medical accountability throughout the planning, implementation and evaluation of the EMS system."

Following a competitive bid process in July 2009, the Santa Clara County EMS Agency selected Dr. Rudnick as the EMS Medical Director because of his combined expertise in the area of emergency medicine and his experience providing clinical oversight and direction to other EMS systems in California. In July, 2010, the Public Health Department entered into an agreement with Dr. Rudnick for a 12-month period, through June 30, 2011 that was amended to extend the agreement to June 30, 2013. On June 25, 2013, the Board of Supervisors approved a 12-month agreement, for the period of July 1, 2013 through June 30, 2014, and on April 29, 2014 the Board approved the first amendment to the agreement, extending the term to December 31, 2014, with an option to extend an additional 6-months. On March 23, 2015 the six-month extension was executed by mutual agreement. The proposed third amendment to the agreement would extend the term of the agreement through June 30, 2016 and increase the maximum contract amount by \$185,000 to \$459,000. This would allow for an additional 1,500 hours of contracted services in FY16.

Approve Appropriation for Contract Expense in the EMS Trust Fund Related to Estimate Liability to the San Jose Fire Department for Response Time Performance Payments for FY16. – August 12, 2015

Approve appropriation for contract expense in the EMS Trust Fund related to estimated liability to the San Jose Fire Department for response time performance payments for FY16. These funds would be set aside in a liability account.

The Public Health Department is requesting approval of the appropriation of funds from the EMS Trust Fund in the event that the City of San Jose meets response times for six consecutive months. These funds would be set aside in a liability account. If the City of San Jose meets its response time requirements for six consecutive months, they would be eligible to receive these funds. The amount that the Public Health Department requests to be set aside is approximately \$1.8 million.

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Date: December 3, 2015
To: Santa Clara County EMS Committee Members
From: John Blain
Contract Manager
Subject: County EOA Service Area Response Time Performance Report for County Ambulance

History and Issue

The County has entered into agreements with private and public entities to provide emergency medical response and advanced life support ambulance transportation services. Periodic response time compliance reports have been provided to the EMS Committee for the purpose of providing public review of those entities' performance and compliance with contractual response time requirements. The County has performance based contracts with the following entities:

1. Rural/Metro of California (County Ambulance provider)

Context

Compliance is measured by several key performance indicators that include; response time requirements based on population density; designated response areas; type of response priority (red lights & siren or non-red lights & siren); total number of responses; total number of late responses; and total number of responses exempted (removed) from compliance calculations. Compliance is achieved when ninety (90%) percent or more of the responses meet the specified response time requirement in each response priority within each designated response area.

This report contains response time compliance data for April 2015-September 2015.

Cost

There is no direct cost to the EMS Committee to accept and/or not accept the report.

Legal Issues

There are no legal issues related to accepting and/or not accepting the report.

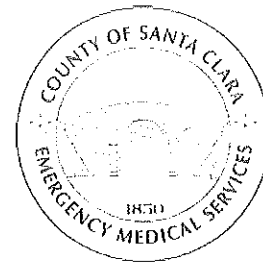
Options

- 1) Recommend that the EMS Committee accepts the "County EOA Service Area Response Time Performance Report for April 2015-September 2015".
- 2) Recommend that the EMS Committee does not accepts the "County EOA Service Area Response Time Performance Report for April 2015-September 2015".

Recommendation

- 1) Recommend that the EMS Committee accepts the "County EOA Service Area Response Time Performance Report for April 2015-September 2015".

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Date: December 3, 2015
To: Santa Clara County EMS Committee Members
From: John Blain
Contract Manager
Subject: County EOA Service Area Response Time Performance Report for Fire Departments

History and Issue

The County has entered into agreements with private and public entities to provide emergency medical response and advanced life support ambulance transportation services. Periodic response time compliance reports have been provided to the EMS Committee for the purpose of providing public review of those entities' performance and compliance with contractual response time requirements. The County has performance based contracts with the following entities:

1. Gilroy, *City of*
2. Milpitas, *City of*
3. Morgan Hill, *City of*
4. Mountain View, *City of*
5. San Jose, *City of*
6. Santa Clara, *City of*
7. Santa Clara County Central Fire Protection District
8. South Santa Clara County Fire District
9. Sunnyvale, *City of*

Context

Compliance is measured by several key performance indicators that include; response time requirements based on population density; designated response areas; type of response priority (red lights & siren or non-red lights & siren); total number of responses; total number of late responses; and total number of responses exempted (removed) from compliance calculations. Compliance is achieved when ninety (90%) percent or more of the responses meet the specified response time requirement in each response priority within each designated response area.

This report contains response time compliance data for March 2015-August 2015.

Cost

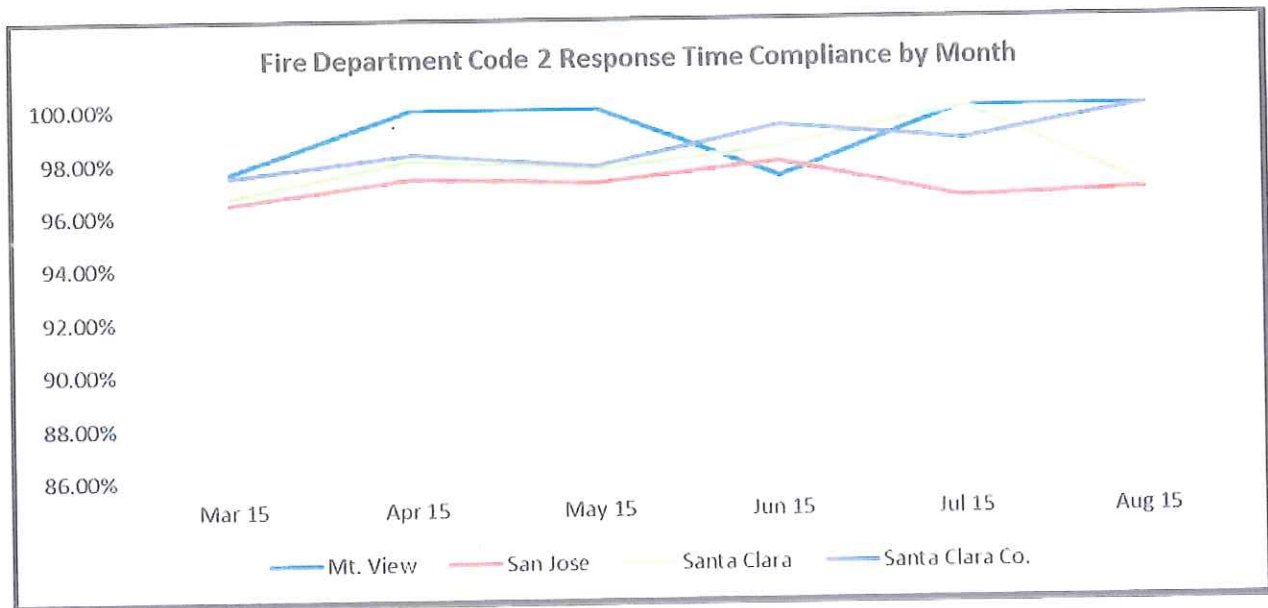
There is no direct cost to the EMS Committee to accept and/or not accept the report.

Legal Issues

There are no legal issues related to accepting and/or not accepting the report.

Fire Departments

Code 2 Response	Mar 15	Apr 15	May 15	Jun 15	Jul 15	Aug 15
<i>Mt. View</i>	97.62%	100.00%	100.00%	97.37%	100.00%	100.00%
<i>San Jose</i>	96.44%	97.35%	97.17%	97.93%	96.54%	96.77%
<i>Santa Clara</i>	96.69%	98.05%	97.64%	98.48%	100.00%	96.95%
<i>Santa Clara Co.</i>	97.48%	98.27%	97.81%	99.30%	98.73%	100.00%



City of Palo Alto

Palo Alto, CA
Client 9701



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Lansing, Mi 48096
1 (877) 583-3100
service@EMSSurveyTeam.com
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EMS System Report

April 1, 2015 to June 30, 2015

Your Score

94.05

Number of Your Patients in this Report

82

Number of Patients in this Report

17,971

Number of Transport Services in All EMS DB

82





Executive Summary

This report contains data from **82 City of Palo Alto** patients who returned a questionnaire between **04/01/2015** and **06/30/2015**.

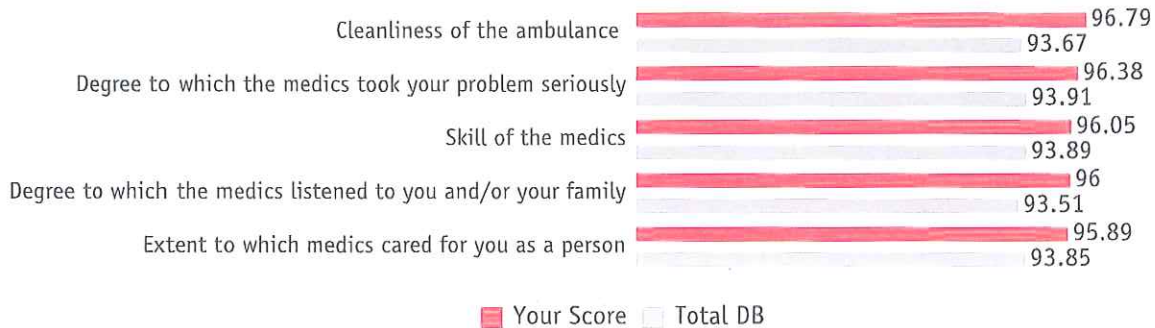
The overall mean score for the standard questions was **94.05**; this is a difference of **1.88** points from the overall EMS database score of **92.17**.

The current score of **94.05** is a change of **-1.16** points from last period's score of **95.21**. This was the **9th** highest overall score for all companies in the database.

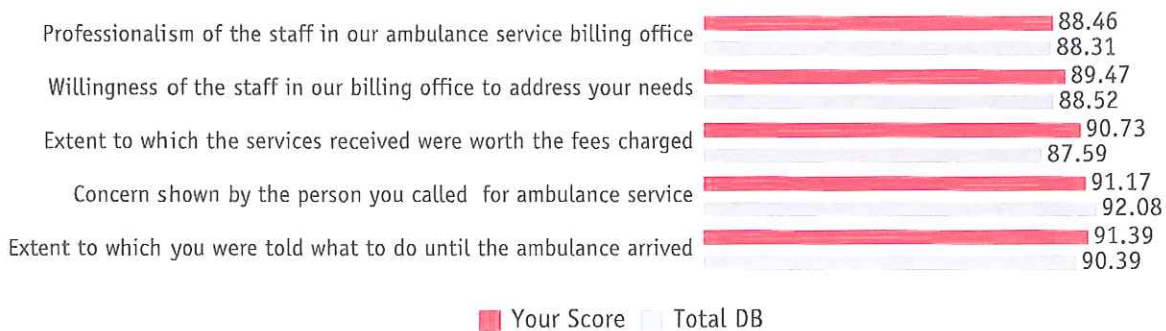
You are ranked **3rd** for comparably sized companies in the system.

78.01% of responses to standard questions had a rating of Very Good, the highest rating. **99.63%** of all responses were positive.

5 Highest Scores



5 Lowest Scores

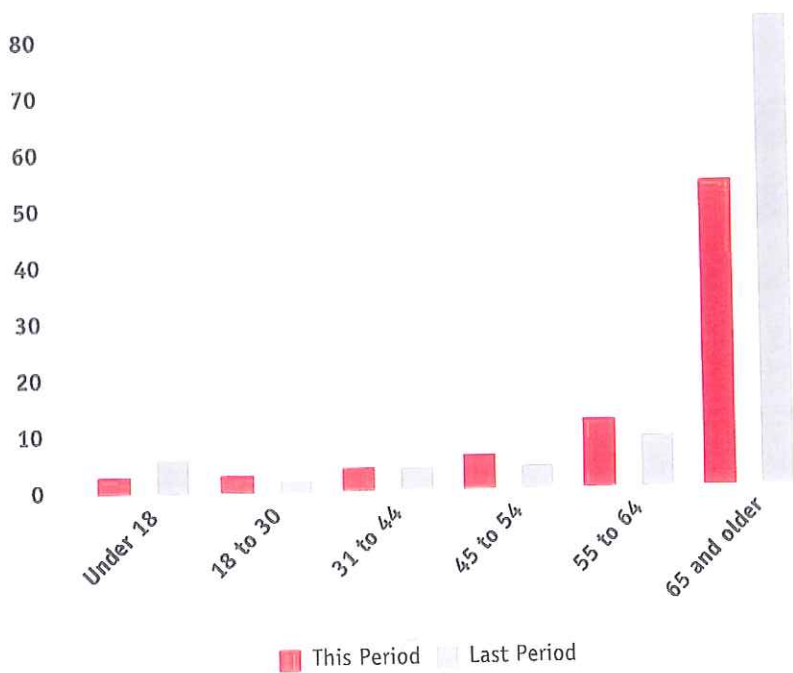




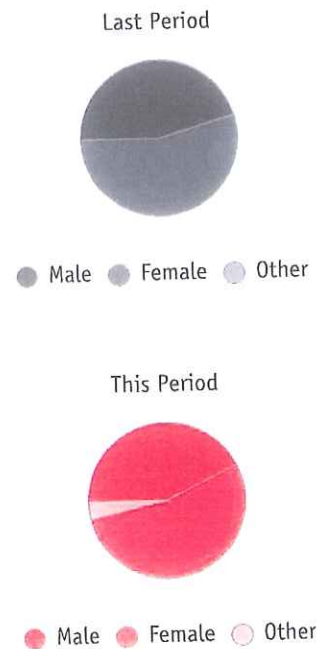
Demographics — This section provides demographic information about the patients who responded to the survey for the current and the previous periods. The information comes from the data you submitted. Compare this demographic data to your eligible population. Generally, the demographic profile will approximate your service population.

	Last Period				This Period			
	Total	Male	Female	Other	Total	Male	Female	Other
Under 18	6	5	1	0	3	2	1	0
18 to 30	2	0	2	0	3	1	2	0
31 to 44	4	0	4	0	4	2	2	0
45 to 54	4	2	2	0	6	5	1	0
55 to 64	9	7	2	0	12	6	6	0
65 and older	83	35	48	0	54	19	32	3
Total	108	49	59	0	82	35	44	3

Age Ranges



Gender





Dispatch Analysis

This analysis details the section results that concern dispatcher operations. The analysis contains the mean scores for each survey question. The first column shows the company score and the total database score, the second column is your variance from the database score.

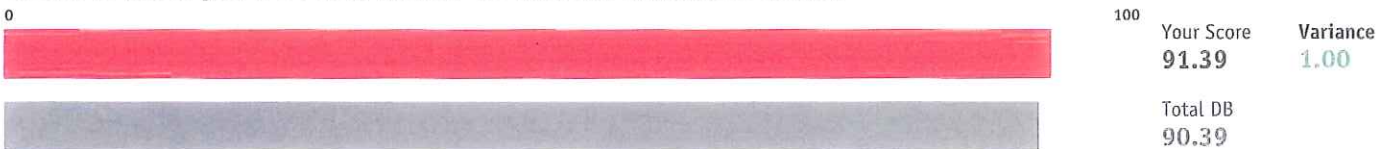
Helpfulness of the person you called for ambulance service



Concern shown by the person you called for ambulance service



Extent to which you were told what to do until the ambulance arrived



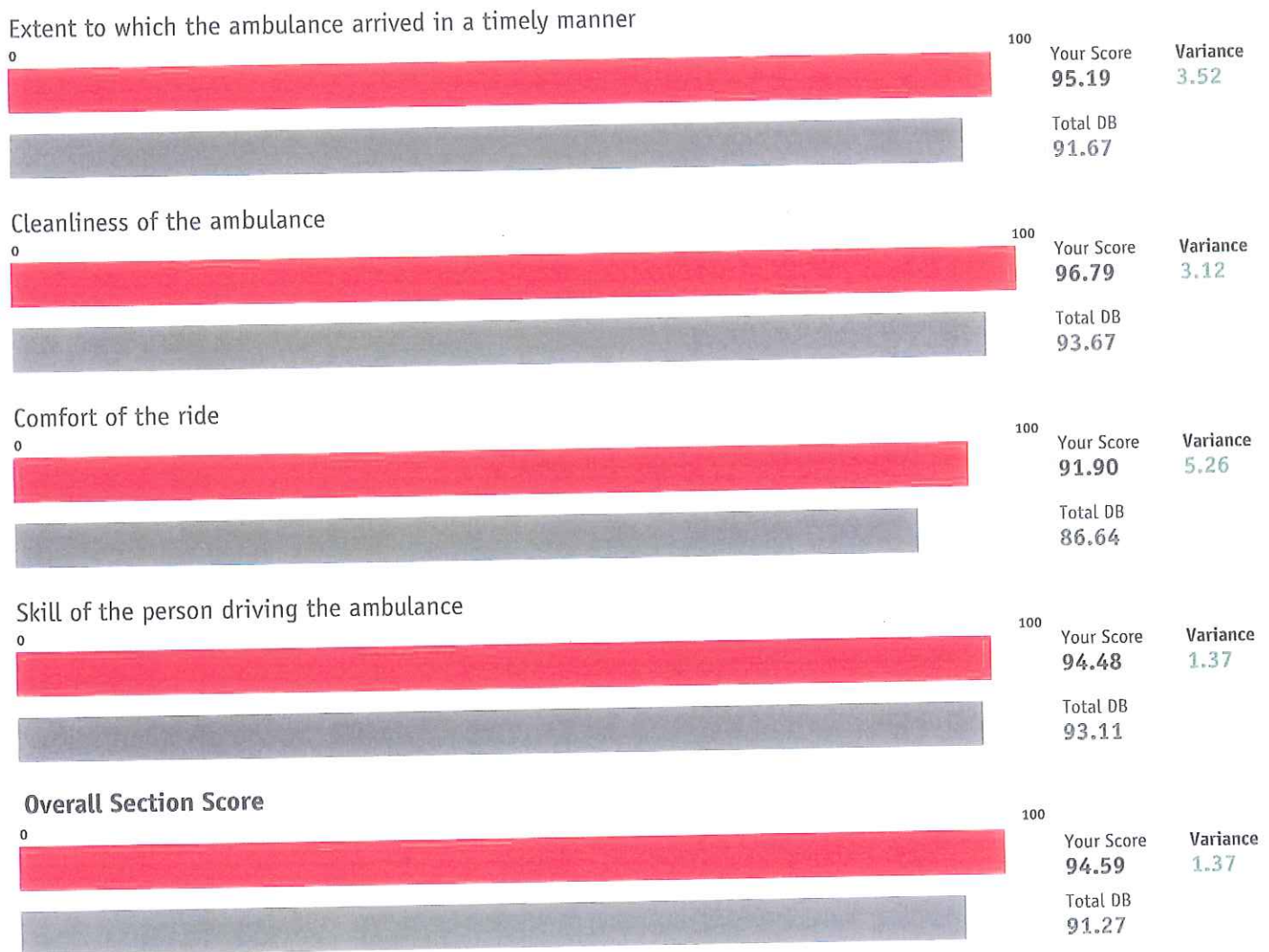
Overall Section Score





Ambulance Analysis

This analysis details the section results that concern ambulance operations. The analysis contains the mean scores for each survey question. The first column shows the company score and the total database score, the second column is your variance from the database score.

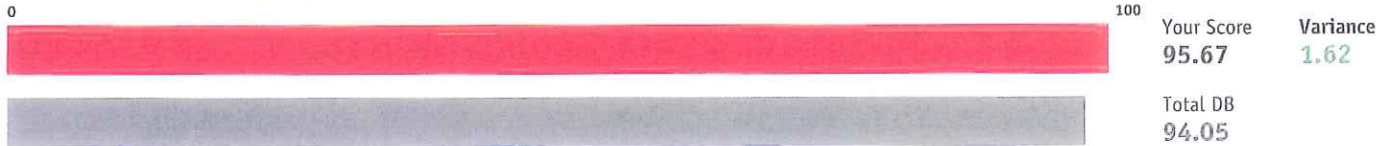




Medic Analysis

This analysis details the section results that concern medic operations. The analysis contains the mean scores for each survey question. The first column shows the company score and the total database score, the second column is your variance from the database score.

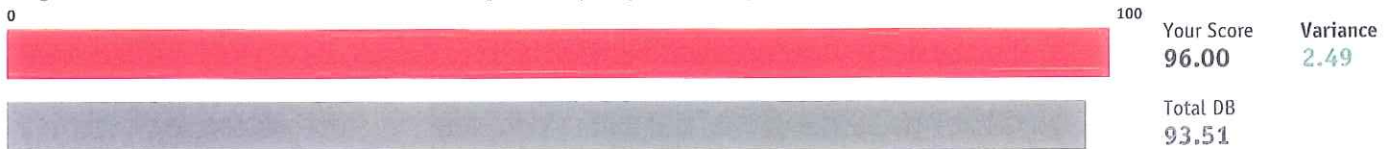
Care shown by the medics who arrived with the ambulance



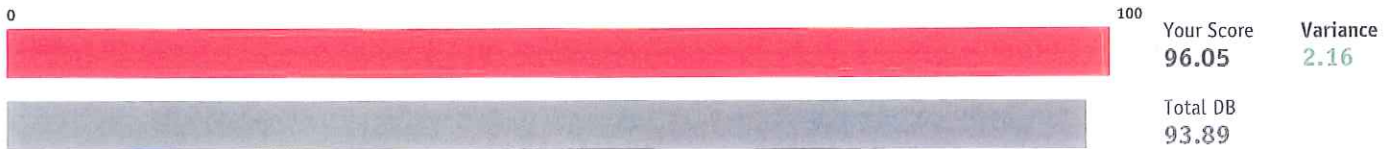
Degree to which the medics took your problem seriously



Degree to which the medics listened to you and/or your family



Skill of the medics



Extent to which the medics kept you informed about your treatment



Extent to which medics included you in the treatment decisions (if applicable)



Degree to which the medics relieved your pain or discomfort

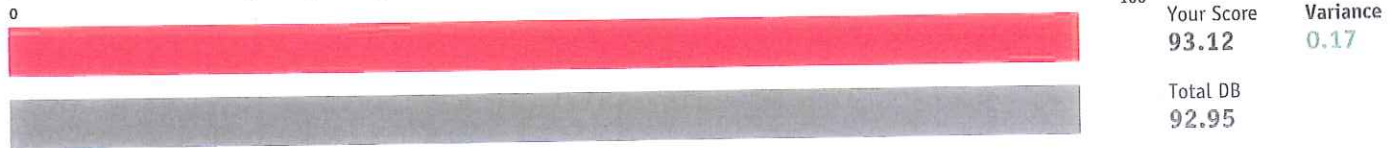




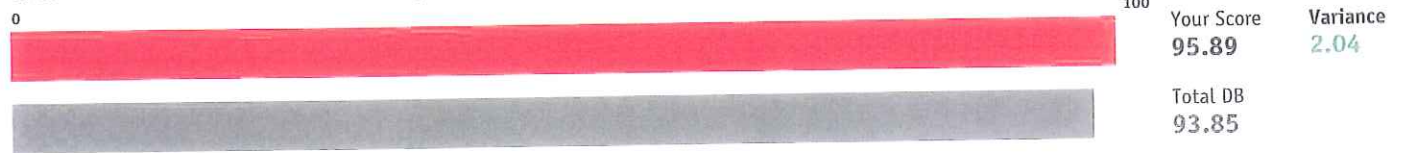
Medic Analysis

This analysis details the section results that concern medic operations. The analysis contains the mean scores for each survey question. The first column shows the company score and the total database score, the second column is your variance from the database score.

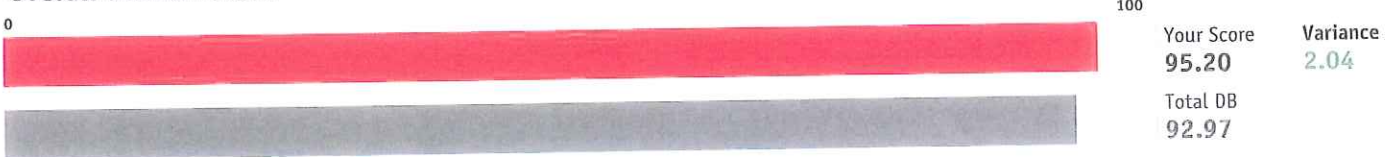
Medics' concern for your privacy



Extent to which medics cared for you as a person



Overall Section Score

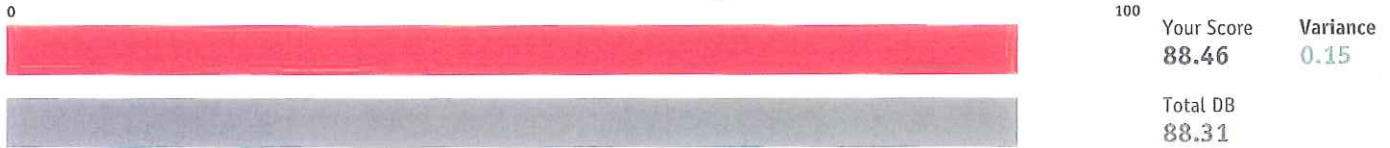




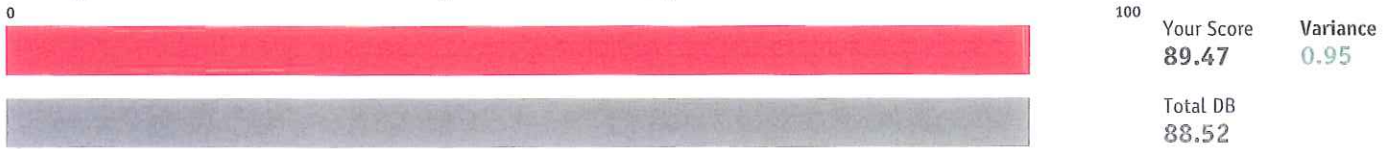
Billing Staff Assessment Analysis

This analysis details the section results that concern office operations. The analysis contains the mean scores for each survey question. The first column shows the company score and the total database score, the second column is your variance from the database score.

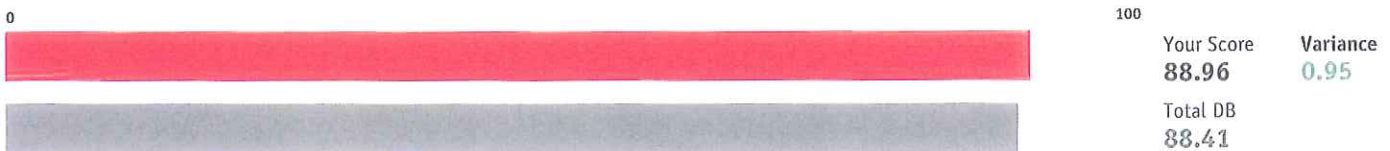
Professionalism of the staff in our ambulance service billing office



Willingness of the staff in our billing office to address your needs



Overall Section Score





Overall Assessment Analysis

This analysis details the section results that concern assessment of operations. The analysis contains the mean scores for each survey question. The first column shows the company score and the total database score, the second column is your variance from the database score.

How well did our staff work together to care for you



Extent to which our staff eased your entry into the medical facility



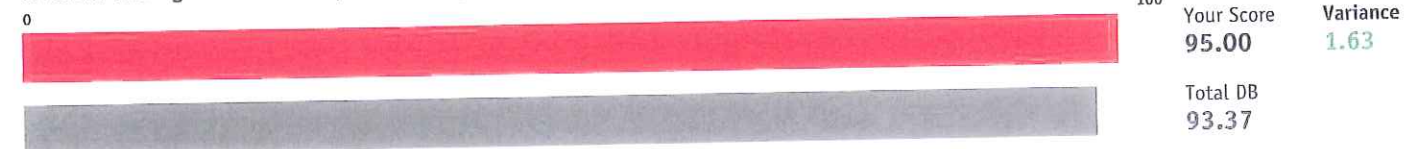
Appropriateness of Emergency Medical Transportation treatment



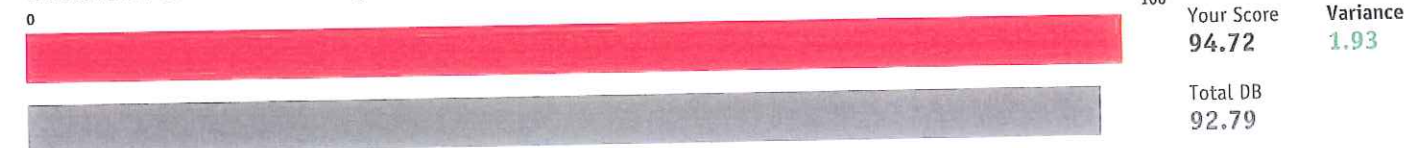
Extent to which the services received were worth the fees charged



Overall rating of the care provided by our Emergency Medical Transportation service



Likelihood of recommending this ambulance service to others



Overall Section Score





Question Analysis

This section lists a synopsis of the information about your individual questions and overall scores for this monthly reporting period. The first column shows the company score from the previous period, the second column shows the change, the third column shows your score for this period and the fourth column shows the total Database score.

Dispatch Analysis

	Last Period	Change	This Period	Total DB
Helpfulness of the person you called for ambulance service	96.95	-4.75	92.20	92.30
Concern shown by the person you called for ambulance service	95.99	-4.82	91.17	92.08
Extent to which you were told what to do until the ambulance arrived	93.59	-2.20	91.39	90.39

Ambulance Analysis

	Last Period	Change	This Period	Total DB
Extent to which the ambulance arrived in a timely manner	95.54	-0.35	95.19	91.67
Cleanliness of the ambulance	95.65	1.14	96.79	93.67
Comfort of the ride	90.59	1.31	91.90	86.64
Skill of the person driving the ambulance	95.05	-0.57	94.48	93.11

Medic Analysis

	Last Period	Change	This Period	Total DB
Care shown by the medics who arrived with the ambulance	97.58	-1.91	95.67	94.05
Degree to which the medics took your problem seriously	97.04	-0.66	96.38	93.91
Degree to which the medics listened to you and/or your family	96.47	-0.47	96.00	93.51
Skill of the medics	96.63	-0.58	96.05	93.89
Extent to which the medics kept you informed about your treatment	96.91	-1.84	95.07	92.27
Extent to which medics included you in the treatment decisions (if applicable)	96.64	-1.64	95.00	91.99
Degree to which the medics relieved your pain or discomfort	92.25	1.41	93.66	90.31
Medics' concern for your privacy	95.51	-2.39	93.12	92.95
Extent to which medics cared for you as a person	96.67	-0.78	95.89	93.85

Billing Staff Assessment Analysis

	Last Period	Change	This Period	Total DB
Professionalism of the staff in our ambulance service billing office	87.50	0.96	88.46	88.31
Willingness of the staff in our billing office to address your needs	88.89	0.58	89.47	88.52



Question Analysis (Continued)

Overall Assessment Analysis	Last Period	Change	This Period	Total DB
How well did our staff work together to care for you	95.83	-1.26	94.57	92.99
Extent to which our staff eased your entry into the medical facility	95.93	-3.07	92.86	93.01
Appropriateness of Emergency Medical Transportation treatment	96.08	-1.29	94.79	93.20
Extent to which the services received were worth the fees charged	89.03	1.70	90.73	87.59
Overall rating of the care provided by our Emergency Medical Transportation	96.55	-1.55	95.00	93.37
Likelihood of recommending this ambulance service to others	96.52	-1.80	94.72	92.79



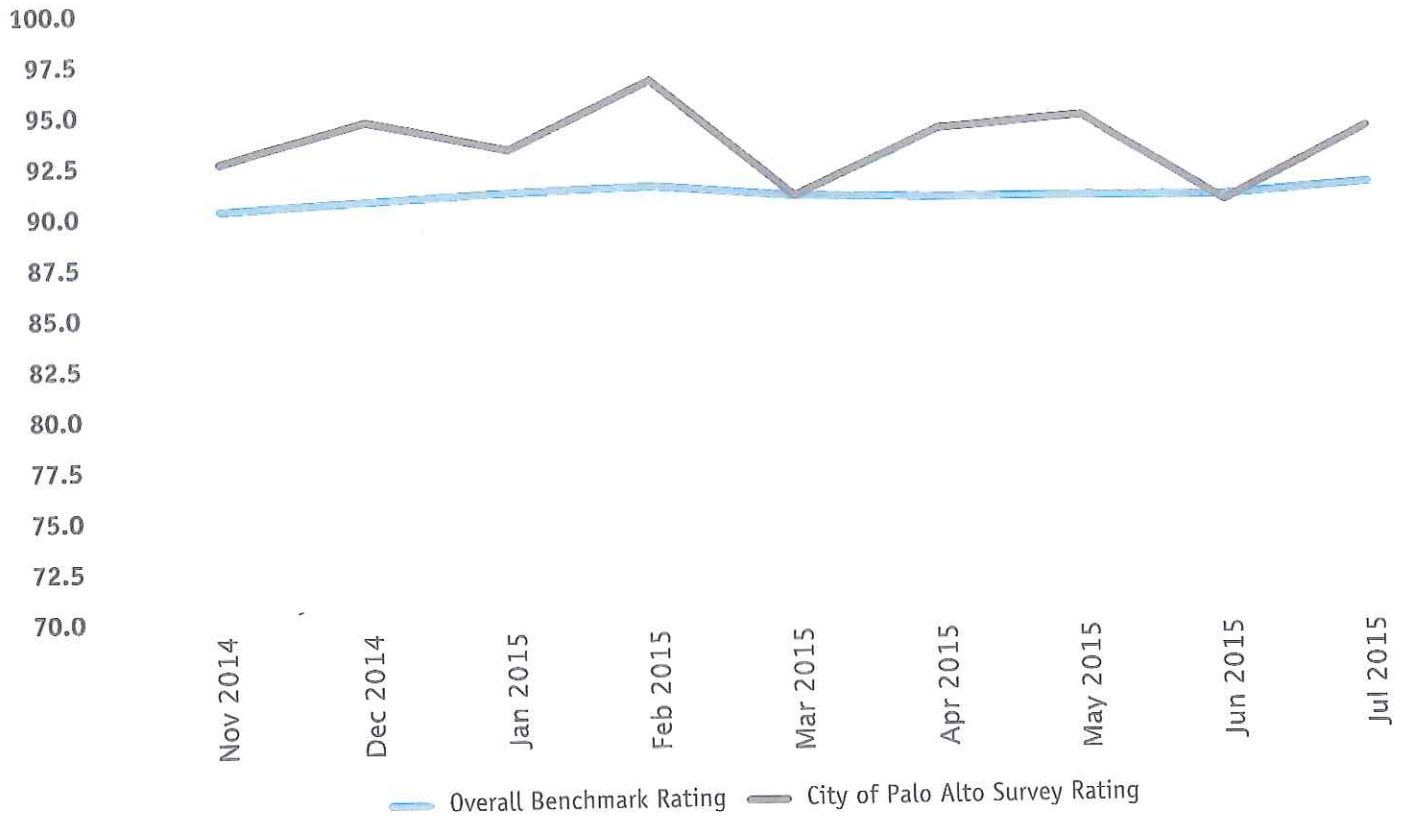
Monthly Breakdown

Below are the monthly responses that have been received for your service. It details the individual score for each question as well as the overall company score for that month.

	Nov 2014	Dec 2014	Jan 2015	Feb 2015	Mar 2015	Apr 2015	May 2015	Jun 2015
Helpfulness of the person you called for ambulance service	98.13	96.15	97.22	98.21	96.09	95.83	92.67	85.71
Concern shown by the person you called for ambulance service	98.75	95.49	96.53	96.43	95.16	95.83	91.37	85.71
Extent to which you were told what to do until the ambulance	97.14	93.22	95.00	91.67	92.74	95.83	91.67	85.71
Extent to which the ambulance arrived in a timely manner	95.54	96.47	93.62	96.88	97.37	96.43	95.56	91.67
Cleanliness of the ambulance	99.52	97.22	95.35	96.15	95.83	100.00	96.83	94.44
Comfort of the ride	97.06	92.96	90.00	93.75	90.28	95.83	92.74	83.44
Skill of the person driving the ambulance	99.02	97.89	94.44	95.45	95.71	95.83	94.35	94.44
Care shown by the medics who arrived with the ambulance	97.32	97.30	95.83	98.33	99.31	100.00	95.90	91.67
Degree to which the medics took your problem seriously	97.77	96.58	94.32	100.00	99.26	100.00	96.77	91.67
Degree to which the medics listened to you and/or your family	97.17	96.18	93.60	100.00	98.53	100.00	95.90	94.44
Skill of the medics	97.64	97.50	94.77	98.08	98.48	100.00	96.37	91.67
Extent to which the medics kept you informed about your	93.23	96.74	95.95	98.21	97.50	95.00	95.56	91.67
Extent to which medics included you in the treatment decisions	93.89	94.25	95.16	98.08	97.83	100.00	95.31	90.63
Degree to which the medics relieved your pain or discomfort	94.68	96.37	88.57	93.18	97.00	100.00	94.83	83.33
Medics' concern for your privacy	96.50	95.77	92.36	96.15	99.14	95.00	93.42	89.29
Extent to which medics cared for you as a person	97.17	97.10	93.45	98.33	100.00	100.00	95.42	96.88
Professionalism of the staff in our ambulance service billing	87.07	92.86	86.11	95.00	86.67	91.67	87.88	91.67
Willingness of the staff in our billing office to address your	89.58	92.74	89.06	95.00	86.67	83.33	90.63	83.33
How well did our staff work together to care for you	97.06	98.24	94.51	97.92	96.77	100.00	94.74	90.63
Extent to which our staff eased your entry into the medical	98.58	97.79	95.35	93.75	97.58	85.00	93.86	90.63
Appropriateness of Emergency Medical Transportation treatment	98.08	96.55	95.00	92.31	99.17	100.00	94.92	90.63
Extent to which the services received were worth the fees	84.35	87.32	86.39	90.63	92.00	93.75	91.50	84.38
Overall rating of the care provided by our Emergency Medical	97.22	97.79	94.77	100.00	97.66	95.00	95.61	90.63
Likelihood of recommending this ambulance service to others	95.74	97.19	95.27	97.50	97.66	100.00	94.92	90.63
Your Master Score	96.15	96.00	93.77	96.59	96.46	96.64	94.38	90.03
Your Total Responses	60	84	49	17	42	7	66	9



Monthly tracking of Overall Survey Score





Greatest Increase and Decrease in Scores by Question

	Last Period	This Period	Change	Total DB Score
Increases				
Extent to which the services received were worth the fees charged	89.03	90.73	1.70	87.59
Degree to which the medics relieved your pain or discomfort	92.25	93.66	1.41	90.31
Comfort of the ride	90.59	91.90	1.30	86.64
Cleanliness of the ambulance	95.65	96.79	1.14	93.67
Professionalism of the staff in our ambulance service billing office	87.50	88.46	0.96	88.31
Willingness of the staff in our billing office to address your needs	88.89	89.47	0.58	88.52
Decreases				
Concern shown by the person you called for ambulance service	95.99	91.17	-4.82	92.08
Helpfulness of the person you called for ambulance service	96.95	92.20	-4.75	92.30
Extent to which our staff eased your entry into the medical facility	95.93	92.86	-3.07	93.01
Medics' concern for your privacy	95.51	93.12	-2.40	92.95
Extent to which you were told what to do until the ambulance arrived	93.59	91.39	-2.20	90.39
Care shown by the medics who arrived with the ambulance	97.58	95.67	-1.91	94.05
Extent to which the medics kept you informed about your treatment	96.91	95.07	-1.85	92.27
Likelihood of recommending this ambulance service to others	96.52	94.72	-1.80	92.79
Extent to which medics included you in the treatment decisions (if applicable)	96.64	95.00	-1.64	91.99
Overall rating of the care provided by our Emergency Medical Transportation service	96.55	95.00	-1.55	93.37



Greatest Scores Above Benchmarks by Question

Highest Above Benchmark	This Period	Variance	Total DB Score
Cleanliness of the ambulance	96.79	3.13	93.67
Degree to which the medics took your problem seriously	96.38	2.47	93.91
Skill of the medics	96.05	2.16	93.89
Degree to which the medics listened to you and/or your family	96	2.49	93.51
Extent to which medics cared for you as a person	95.89	2.05	93.85
Care shown by the medics who arrived with the ambulance	95.67	1.62	94.05
Extent to which the ambulance arrived in a timely manner	95.19	3.53	91.67
Extent to which the medics kept you informed about your treatment	95.07	2.8	92.27
Overall rating of the care provided by our Emergency Medical Transportation service	95	1.63	93.37
Extent to which medics included you in the treatment decisions (if applicable)	95	3.01	91.99





Highest and Lowest Scores

	Last Period	This Period	Change	Total DB Score
Highest Scores				
Cleanliness of the ambulance	95.65	96.79	1.14	93.67
Degree to which the medics took your problem seriously	97.04	96.38	-0.66	93.91
Skill of the medics	96.63	96.05	-0.58	93.89
Degree to which the medics listened to you and/or your family	96.47	96.00	-0.47	93.51
Extent to which medics cared for you as a person	96.67	95.89	-0.78	93.85

	Last Period	This Period	Change	Total DB Score
Lowest Scores				
Professionalism of the staff in our ambulance service billing office	87.50	88.46	0.96	88.31
Willingness of the staff in our billing office to address your needs	88.89	89.47	0.58	88.52
Extent to which the services received were worth the fees charged	89.03	90.73	1.70	87.59
Concern shown by the person you called for ambulance service	95.99	91.17	-4.82	92.08
Extent to which you were told what to do until the ambulance arrived	93.59	91.39	-2.20	90.39



Key Drivers — This section shows the relative importance of each question to the respondents' overall satisfaction. The greater the coefficient number, the more important the issue is to your patients' overall satisfaction. The questions are arranged based on their weighted importance value.

Question	Your Score	Correlation Coefficient
Appropriateness of Emergency Medical Transportation treatment	94.79	.89099528
Overall rating of the care provided by our Emergency Medical Transportation service	95.00	.877450558
Care shown by the medics who arrived with the ambulance	95.67	.872542838
Extent to which medics included you in the treatment decisions (if applicable)	95.00	.859997631
How well did our staff work together to care for you	94.57	.85292411
Extent to which medics cared for you as a person	95.89	.843587288
Medics' concern for your privacy	93.12	.830660732
Extent to which the medics kept you informed about your treatment	95.07	.826663841
Skill of the medics	96.05	.82607978
Likelihood of recommending this ambulance service to others	94.72	.823023047
Extent to which the ambulance arrived in a timely manner	95.19	.820957644
Cleanliness of the ambulance	96.79	.780732347
Degree to which the medics listened to you and/or your family	96.00	.779521901
Helpfulness of the person you called for ambulance service	92.20	.765524878
Concern shown by the person you called for ambulance service	91.17	.76064753
Extent to which our staff eased your entry into the medical facility	92.86	.754618081
Degree to which the medics took your problem seriously	96.38	.740633872
Extent to which you were told what to do until the ambulance arrived	91.39	.693019692
Skill of the person driving the ambulance	94.48	.690017348
Willingness of the staff in our billing office to address your needs	89.47	.670452009
Extent to which the services received were worth the fees charged	90.73	.63167298
Degree to which the medics relieved your pain or discomfort	93.66	.586793667
Professionalism of the staff in our ambulance service billing office	88.46	.557145979
Comfort of the ride	91.90	.433180485



Company Comparisons — The following chart gives a comparison of the mean score for each question as scored by comparable companies. Your company is highlighted. There is also a green-shaded highlight of the highest score for each question. This will show how you compare to similar companies.

	Your Company	Comparison Companies					
		A	B	C	D	E	F
Helpfulness of the person you called for ambulance service	92.20	89.77	89.24	91.52	91.97	92.86	90.81
Concern shown by the person you called for ambulance service	91.17	89.41	90.79	92.73	91.19	93.19	89.18
Extent to which you were told what to do until the ambulance	91.39	86.49	88.91	88.82	89.27	90.85	85.28
Extent to which the ambulance arrived in a timely manner	95.19	91.25	90.91	89.85	92.32	93.06	90.12
Cleanliness of the ambulance	96.79	93.04	93.44	90.88	92.29	94.04	93.83
Comfort of the ride	91.90	84.65	87.29	78.81	90.08	89.88	83.22
Skill of the person driving the ambulance	94.48	92.98	93.15	91.37	94.42	93.76	93.67
Care shown by the medics who arrived with the ambulance	95.67	94.21	94.23	93.66	95.79	94.21	90.11
Degree to which the medics took your problem seriously	96.38	94.43	93.25	93.44	96.02	93.39	90.08
Degree to which the medics listened to you and/or your family	96.00	93.87	92.46	93.00	96.55	94.04	90.15
Skill of the medics	96.05	94.83	94.84	93.32	97.07	94.04	90.42
Extent to which the medics kept you informed about your	95.07	93.08	92.86	91.38	95.49	92.12	88.69
Extent to which medics included you in the treatment decisions (if	95.00	90.02	93.48	91.51	94.53	93.43	91.15
Degree to which the medics relieved your pain or discomfort	93.66	89.85	92.31	89.17	91.57	90.05	85.29
Medics' concern for your privacy	93.12	91.53	93.98	93.20	94.39	91.97	91.68
Extent to which medics cared for you as a person	95.89	93.42	93.64	92.69	97.07	94.16	90.25
Professionalism of the staff in our ambulance service billing office	88.46	86.14	90.34	80.29	85.71	87.50	79.44
Willingness of the staff in our billing office to address your needs	89.47	86.43	90.70	80.52	87.04	89.84	79.75
How well did our staff work together to care for you	94.57	91.76	95.42	93.29	94.77	93.18	86.83
Extent to which our staff eased your entry into the medical facility	92.86	90.17	93.97	93.07	95.62	92.40	87.33
Appropriateness of Emergency Medical Transportation treatment	94.79	92.83	95.45	94.83	96.01	93.29	89.25
Extent to which the services received were worth the fees charged	90.73	85.21	91.38	88.44	92.81	88.62	81.15
Overall rating of the care provided by our Emergency Medical	95.00	92.96	93.65	93.42	95.07	93.22	88.90
Likelihood of recommending this ambulance service to others	94.72	89.89	93.55	92.33	95.53	93.10	89.57
Overall score	94.05	90.98	92.52	91.03	93.89	92.52	88.68
National Rank	9	48	24	47	11	25	61
Comparable Size (Medium) Company Rank	3		7				21

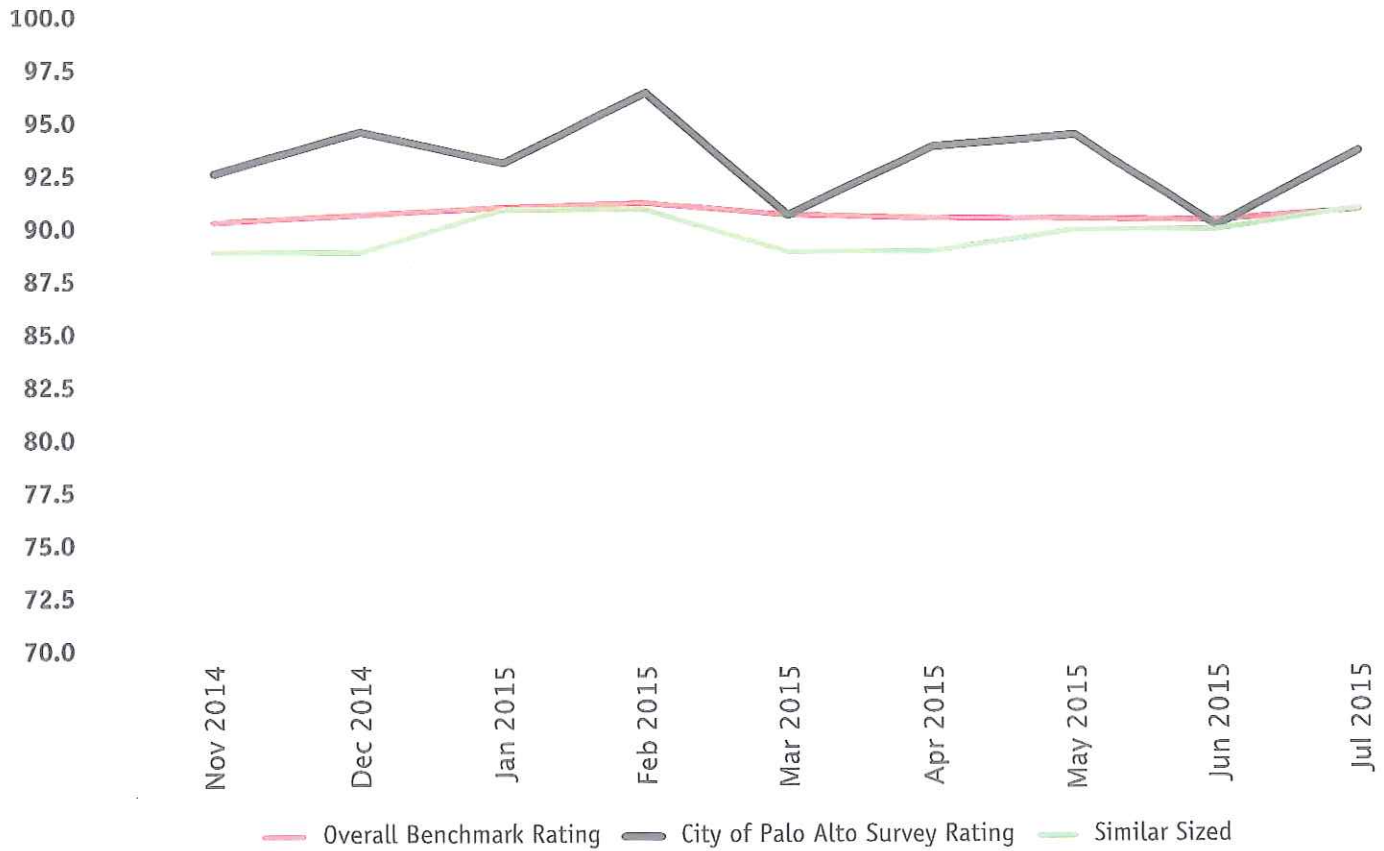


Benchmark Comparison

	Your Company	Total DB	Similar Sized
Total Score	94.05	91.93	91.36
Helpfulness of the person you called for ambulance service	92.20	92.30	91.87
Concern shown by the person you called for ambulance service	91.17	92.08	91.77
Extent to which you were told what to do until the ambulance	91.39	90.39	89.92
Extent to which the ambulance arrived in a timely manner	95.19	91.67	90.93
Cleanliness of the ambulance	96.79	93.67	92.80
Comfort of the ride	91.90	86.64	85.61
Skill of the person driving the ambulance	94.48	93.11	92.73
Care shown by the medics who arrived with the ambulance	95.67	94.05	93.41
Degree to which the medics took your problem seriously	96.38	93.91	93.33
Degree to which the medics listened to you and/or your family	96.00	93.51	93.02
Skill of the medics	96.05	93.89	93.29
Extent to which the medics kept you informed about your	95.07	92.27	91.84
Extent to which medics included you in the treatment decisions	95.00	91.99	91.19
Degree to which the medics relieved your pain or discomfort	93.66	90.31	89.87
Medics' concern for your privacy	93.12	92.95	92.71
Extent to which medics cared for you as a person	95.89	93.85	93.60
Professionalism of the staff in our ambulance service billing	88.46	88.31	87.65
Willingness of the staff in our billing office to address your	89.47	88.52	87.76
How well did our staff work together to care for you	94.57	92.99	92.74
Extent to which our staff eased your entry into the medical	92.86	93.01	92.59
Appropriateness of Emergency Medical Transportation treatment	94.79	93.20	92.33
Extent to which the services received were worth the fees	90.73	87.59	86.32
Overall rating of the care provided by our Emergency Medical	95.00	93.37	92.86
Likelihood of recommending this ambulance service to others	94.72	92.79	92.38
Number of Surveys for the period	82		

City of Palo Alto
April 1, 2015 to June 30, 2015

Benchmark Trending Graphic - Below are the monthly scores for your service. It details the overall score for each month as well as your subscribed benchmarks for that month.





Cumulative Comparisons

This section lists a synopsis of the information about your individual questions and overall scores over the entire lifetime of the dataset. The first column shows the company score and the second column details the total database score.

	Your Score	Total DB
Overall Facility Rating	94.87	91.60
Dispatch	94.66	91.42
Helpfulness of the person you called for ambulance service	95.66	92.20
Concern shown by the person you called for ambulance service	95.00	91.90
Extent to which you were told what to do until the ambulance	93.31	90.16
Ambulance	95.51	91.24
Extent to which the ambulance arrived in a timely manner	95.85	91.57
Cleanliness of the ambulance	96.98	93.74
Comfort of the ride	92.77	86.93
Skill of the person driving the ambulance	96.45	92.72
Medic	95.8	92.59
Care shown by the medics who arrived with the ambulance	96.88	93.62
Degree to which the medics took your problem seriously	96.79	93.53
Degree to which the medics listened to you and/or your family	96.24	93.29
Skill of the medics	96.69	93.72
Extent to which the medics kept you informed about your treatment	95.40	91.67
Extent to which medics included you in the treatment decisions (if	94.66	91.49
Degree to which the medics relieved your pain or discomfort	93.97	90.11
Medics' concern for your privacy	94.98	92.48



Cumulative Comparisons (Continued)

	Your Score	Total DB
Overall Facility Rating	94.87	91.60
Medic	95.8	92.59
Extent to which medics cared for you as a person	96.57	93.44
Billing Staff Assessment	89.7	87.98
Professionalism of the staff in our ambulance service billing office	89.20	87.96
Willingness of the staff in our billing office to address your needs	90.19	88.01
Overall Assessment	94.9	91.65
How well did our staff work together to care for you	96.37	92.68
Extent to which our staff eased your entry into the medical facility	96.13	92.89
Appropriateness of Emergency Medical Transportation treatment	96.26	92.64
Extent to which the services received were worth the fees charged	88.06	86.41
Overall rating of the care provided by our Emergency Medical	96.51	92.82
Likelihood of recommending this ambulance service to others	96.07	92.48



Top Box Comparisons

The Top Box Analysis displays the number of responses for the entire survey by question and rating. The Top Box itself shows the percentage of "Very Good" responses, the highest rating, for each question. Next to the company rating is the entire EMS DB rating for those same questions.

	Very Poor	Poor	Fair	Good	Very Good	Company % Very Good	EMS DB % Very Good
Overall Company Rating	3	3	15	340	1281	78.01%	74.44%
Dispatch	2	0	2	52	134	70.53%	72.74%
Helpfulness of the person you called for ambulance service	1	0	0	16	47	73.44%	74.49%
Concern shown by the person you called for ambulance service	1	0	0	19	45	69.23%	73.53%
Extent to which you were told what to do until the ambulance arrived	0	0	2	17	42	68.85%	70.20%
Ambulance	1	0	3	57	249	80.32%	72.39%
Extent to which the ambulance arrived in a timely manner	0	0	1	13	64	82.05%	73.31%
Cleanliness of the ambulance	0	0	0	10	68	87.18%	77.27%
Comfort of the ride	1	0	1	19	56	72.73%	62.45%
Skill of the person driving the ambulance	0	0	1	15	61	79.22%	76.52%
Medic	0	2	2	114	533	81.87%	77.81%
Care shown by the medics who arrived with the ambulance	0	0	0	13	62	82.67%	80.52%
Degree to which the medics took your problem seriously	0	0	0	11	65	85.53%	80.73%
Degree to which the medics listened to you and/or your family	0	0	0	12	63	84.00%	79.60%
Skill of the medics	0	0	0	12	64	84.21%	79.97%
Extent to which the medics kept you informed about your treatment	0	0	0	15	61	80.26%	75.64%



Top Box Comparisons (Continued)

	Very Poor	Poor	Fair	Good	Very Good	Company % Very Good	EMS DB % Very Good
Overall Company Rating	3	3	15	340	1281	78.01%	74.44%
Extent to which medics included you in the treatment decisions (if applicable)	0	0	1	10	49	81.67%	75.41%
Degree to which the medics relieved your pain or discomfort	0	1	0	15	55	77.46%	71.25%
Medics' concern for your privacy	0	1	0	16	52	75.36%	76.51%
Extent to which medics cared for you as a person	0	0	1	10	62	84.93%	80.62%
Billing Staff Assessment	0	0	4	26	47	61.04%	62.30%
Professionalism of the staff in our ambulance service billing office	0	0	2	14	23	58.97%	61.65%
Willingness of the staff in our billing office to address your needs	0	0	2	12	24	63.16%	62.94%
Overall Assessment	0	1	4	91	318	76.81%	75.67%
How well did our staff work together to care for you	0	0	0	15	54	78.26%	76.85%
Extent to which our staff eased your entry into the medical facility	0	1	1	15	53	75.71%	76.97%
Appropriateness of Emergency Medical Transportation treatment	0	0	0	15	57	79.17%	77.49%
Extent to which the services received were worth the fees charged	0	0	3	17	42	67.74%	66.17%
Overall rating of the care provided by our Emergency Medical Transportation service	0	0	0	14	56	80.00%	78.62%
Likelihood of recommending this ambulance service to others	0	0	0	15	56	78.87%	77.94%

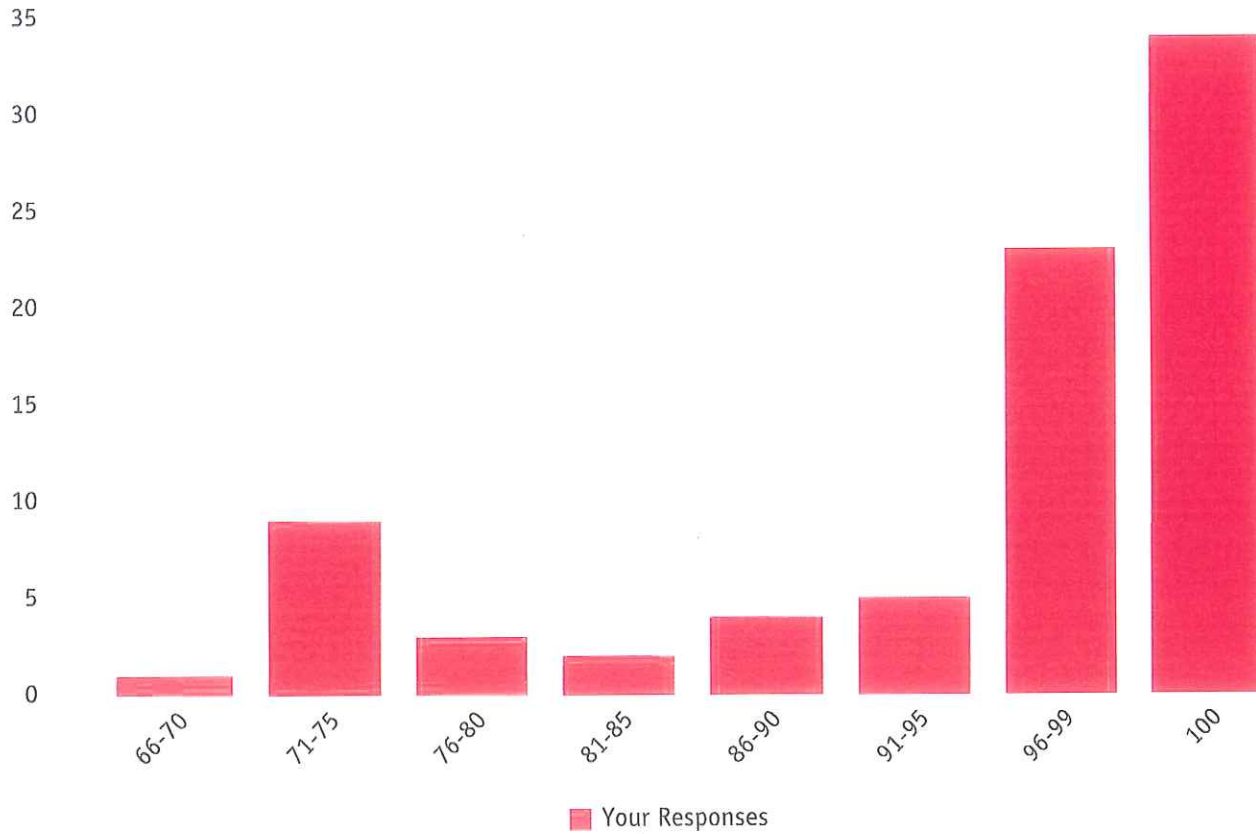


Standard Deviation by Question

	Your Score	Total DB	Company Standard Deviation	Database Standard Deviation	SD Variance
Helpfulness of the person you called for ambulance service	92.20	92.30	15.767	15.148	-0.62
Concern shown by the person you called for ambulance service	91.17	92.08	15.984	15.045	-0.94
Extent to which you were told what to do until the ambulance arrived	91.39	90.39	13.494	17.37	3.88
Extent to which the ambulance arrived in a timely manner	95.19	91.67	10.635	15.994	5.36
Cleanliness of the ambulance	96.79	93.67	8.358	12.747	4.39
Comfort of the ride	91.90	86.64	15.758	20.632	4.87
Skill of the person driving the ambulance	94.48	93.11	11.125	14.07	2.95
Care shown by the medics who arrived with the ambulance	95.67	94.05	9.463	13.966	4.50
Degree to which the medics took your problem seriously	96.38	93.91	8.796	14.579	5.78
Degree to which the medics listened to you and/or your family	96.00	93.51	9.165	15.027	5.86
Skill of the medics	96.05	93.89	9.116	14.025	4.91
Extent to which the medics kept you informed about your	95.07	92.27	9.95	15.805	5.85
Extent to which medics included you in the treatment decisions (if applicable)	95.00	91.99	10.992	16.543	5.55
Degree to which the medics relieved your pain or discomfort	93.66	90.31	13.08	18.19	5.11
Medics' concern for your privacy	93.12	92.95	13.381	14.565	1.18
Extent to which medics cared for you as a person	95.89	93.85	10.148	14.802	4.65
Professionalism of the staff in our ambulance service billing office	88.46	88.31	14.813	17.343	2.53
Willingness of the staff in our billing office to address your needs	89.47	88.52	14.77	17.606	2.84
How well did our staff work together to care for you	94.57	92.99	10.312	14.692	4.38
Extent to which our staff eased your entry into the medical facility	92.86	93.01	14.106	14.665	0.56
Appropriateness of Emergency Medical Transportation treatment	94.79	93.20	10.153	14.519	4.37
Extent to which the services received were worth the fees charged	90.73	87.59	14.364	21.035	6.67
Overall rating of the care provided by our Emergency Medical Transportation service	95.00	93.37	10.00	14.783	4.78
Likelihood of recommending this ambulance service to others	94.72	92.79	10.205	16.14	5.94
Overall Survey Rating	94.05	92.17	11.83	15.8	3.97



Responses vs Score Histogram — This graph shows the number of responses on the Y axis vs the average score on the X axis.





Facilities in Database

Adair EMS	Kirksville, MO	Air San Juan Island	Friday Harbor, WA
Alliance Mobile Health	Troy, MI	AMT	Peoria, IL
Bay State	Springfield, MA	Bay Village	Bay Village, OH
Beaumont	Troy, MI	Carilion Clinic	Roanoke, VA
Cetronia	Allentown, PA	City of Palo Alto	Palo Alto, CA
Columbus Connection	Cols, OH	Community Ambulance	Macon, GA
Community Care EMS	Ashtabula, OH	Community EMS MI	Southfield, MI
Community EMS OH	Columbus, OH	Cumberland	Carlisle, PA
Cy-Fair	Houston, TX	Cypress Creek	Spring, TX
DMC Care	Detroit, MI	Edward	Naperville, IL
Emergent Health Partners	Ann Arbor, MI	EMSA	Oklahoma City, OK
Genesis Community	Zanesville, OH	Gold Cross	Menasha, WI
Guilford EMS	Greensboro, NC	Harris County Emergency	Houston, TX
Health East	St. Paul, MN	Health Link	Taylor, MI
HEMSI	Hunsville, AL	Hennepin County EMS	Minneapolis, MN
Hot Springs	Hot Springs, AR	Hot Springs Village	Hot Springs, AR
Howard County	Nashville, AR	Humboldt	Winnemucca, NV
HVA	null	LifeCare Ambulance	Battle Creek, MI
LifeCare Medical EMS	Sterling, CO	Life EMS Ambulance	Grand Rapids, MI
LifeNet EMS	Texarkana, TX	Malvern	Malvern, AR
MCHD	Conroe, TX	Medcare Ambulance	Columbus, OH
Medic 1 Ambulance	Canton, MI	Medic EMS	Davenport, IA
Medstar	Clinton Twp., MI	Medstar Mobile Healthcare	Fort Worth, TX
Mercy Flights	Medford, OR	Mercy Ohio	Cincinnati, OH
Metro West	Hillsboro, OR	Mobile Life Support	New Windsor, NY
Mobile Life Support	New Windsor, NY	Mobile Medical Response	Saginaw, MI
Nature Coast	Lecanto, FL	North Memorial	Robbinsdale, MN
North Shore LLJ	Syosset, NY	Oceana	Hart, MI
Pearland EMS	Pearland, TX	Portage County	Stevens Point, WI
Pro EMS	Cambridge, MA	ProMed	Muskegon, MI
Prompt Ambulance	Highland, IN	PTS	Loveland, OH
Puckett	Austell, GA	Regional EMS	Flint, MI
REMSA	Reno, NV	REMSA Air Transport	Reno, NV
Ridgefield Fire Department	Ridgefield, CT	San Juan Island	Friday Harbor, WA
Scott & White	Temple, TX	Senior Care	Bronx, NY
Sioux Land	Sioux City, IA	SMCAS	Niles, MI
Snohomish County Fire	Snohomish, WA	St. Charles	St. Peters, MO
Stillwater	Stillwater, OK	Suburban	Palmer, PA
Swartz	Flint, MI	Texarkana	Texarkana, TX
Tri-Hospital	Port Huron, MI	University Medical Center	Lubbock, TX
Van Buren EMS	Paw Paw, MI	York Regional EMS	Yoe, PA



Palo Alto Fire Department Quarterly Performance Report Fiscal Year 2015, Fourth Quarter

Calls for Service

The Palo Alto Fire Department (PAFD) responded to a total of 2,164 calls for service in the fourth quarter of Fiscal Year 2015. This includes responses within Palo Alto, Stanford, and neighboring cities to provide Auto and Mutual Aid. Approximately seventy-nine (79%) of calls were generated from Palo Alto, fifteen percent (15%) from Stanford, and the remainder from neighboring cities or requests for regional fire deployment.

The majority of calls continue to be for Emergency Medical Services, making up sixty-two percent (62%) of the responses. Table 1 below shows the main categories of the calls to which PAFD responded. Calls are classified based on the actual event occurred, rather than the initial call request.

Table 1. Calls for Service: FY15 Q4

Type	Number of Calls	Percent
Emergency Medical Service	1347	62.2%
Good Intent	366	16.9%
False Alarm & False Call	254	11.7%
Service Call	109	5.0%
Rescue & Hazardous Material	43	2.0%
Fire	43	2.0%
Explosion – No Fire	2	0.1%
Grand Total	2164	100.0%

Good Intent and False Alarm calls make up the second largest types of responses. Most calls for service that may be a true threat of fire, gas or other emergency hazard are actually found to be something else after Firefighters investigate the situation. These calls are coded as Good Intent calls. As well, many fire alarm activations are from causes other than fire or emergency hazard. These situations are categorized as False Alarm calls.

Emergency Medical Services

Emergency Medical Service (EMS) is the primary service that the Palo Alto Fire Department provides to Palo Alto and Stanford. While this shift toward EMS is being seen across the region, the Palo Alto Fire Department is the only Fire Department in the County that provides ambulance and transport services.

Of the 1,347 Emergency Medical Service calls the PAFD responded to in the fourth quarter of Fiscal Year 2015, the overwhelming majority were for medical, trauma and cardiac calls that did not involve a vehicle accident.

Table 2. EMS Performance Measures FY15 Q4

Calls for Service

<u>NFIRS Code</u>	<u>Description</u>	
321	EMS call, excluding vehicle accident with injury	1275
322	Vehicle accident with injuries	47
324	Motor vehicle accident with no injuries	10
323	Motor vehicle/pedestrian accident	15
	Total	1347

Transports

Number of Transports	990
Percent of EMS Calls resulting in transport	73.5%

Response Times

Percent of first responder arriving on scene to EMS calls within 8 minutes	94.4%
Percent of paramedic responder arriving on scene to EMS calls within 12 minutes	98.7%
Median response time for first responder arriving on scene to EMS calls	04:51

This quarter the number of ambulance transports remained steady, making up seventy three percent (73%) of all EMS calls.



Response Time Goal Met: At least 90% of first responder arriving on scene to EMS calls within 8 minutes.

This quarter the PAFD first responder arrived on scene to EMS calls within 8 minutes ninety-four percent (94%) of the time.



Response Time Goal Met: At least 99% of paramedic responder arriving on scene to EMS calls within 12 minutes.

At the beginning of 2015, the Fire Department implemented a new deployment model with all units staffed with a paramedic providing 24 hour all Advanced Life Support service. This quarter the Department was able to meet this response time goal, with a paramedic responder arriving on scene to EMS calls within 12 minutes ninety-nine percent (99%) of the time.

Fire Suppression

This quarter the department experienced an increase in the number of fire incidents. This trend is primarily due to chimney fires, which are more common in the winter months. All calls that PAFD responded to where fire was present were all local, with the majority (81.4%) of fires within Palo Alto or Stanford. The department exceeded its containment goal, with all building fires contained to the area of origin.

The most notable fire incident this quarter occurred the afternoon of July 3rd, 2015 on Stanford University's Lake Lagunita. This event was a vegetation fire caused by a drone crashing into the dry lake bed. Palo Alto Fire responded with 7 apparatus and 17 personnel, and also received mutual aid assistance from Cal Fire that included a bulldozer, and a hand crew to help control the fire line. There were no civilian or fire personnel injured on this incident.

Table 3. Fire Performance Measures FY15 Q4

Calls for Service

<u>NFIRS Code</u>	<u>Description</u>	
118	Trash or rubbish fire, contained	9
113	Cooking fire, confined to container	6
150	Outside rubbish fire, other	5
111	Building fire	4
131	Passenger vehicle fire	4
151	Outside rubbish, trash or waste fire	2
154	Dumpster or other outside trash receptacle fire	2
160	Special outside fire, other	2
100	Fire, other	1
112	Fires in structures other than in a building	1
130	Mobile property (vehicle) fire, other	1
140	Natural vegetation fire, other	1
142	Brush, or brush and grass mixture fire	1
143	Grass fire	1
162	Outside equipment fire	1
163	Outside gas or vapor combustion explosion	1
170	Cultivated vegetation, crop fire, other	1
	Total	43

Response Times

Percent of first responder arriving on scene to Fire calls within 8 minutes	86.2%
Median response time for first responder arriving on scene to Fire calls	5:31

Fire Containment


Percent of building and structure fires contained to the room or area of origin	100%
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Response Time Goal Not Met: At least 90% of first responder arriving on scene to Fire calls within 8 minutes.

This quarter the PAFD first responder arrived on scene to Fire calls within 8 minutes eighty-six percent (86%) of the time. This is a slight improvement from historical performance on this measure, which typically is near eighty-two percent (82%). The Fire Department is in the process of conducting a

Community Focused Integrated Risk Management Assessment, which is expected to help management identify data informed ways to improve performance in this area.

- 
Fire Containment Goal Met: At least 90% of building and structure fires contained to the room or area of origin.

This quarter the PAFD contained one hundred percent (100%) of building and structure fires to the room or area of origin.

Rescue and Hazardous Materials

The Fire Department responded to a total of forty-three (43) rescue and hazardous material calls. The most common rescue calls are for lock-in situation or removal of victims from a stalled elevator, which accounts for twenty-six percent (26%) of these call types. Many of the other calls this quarter included hazardous material spills or gas leaks.

Table 4. Rescue and Hazardous Materials Measures FY15 Q4

Calls for Service

<u>NFIRS Code</u>	<u>Description</u>	
331	Lock-in	6
353	Removal of victim(s) from stalled elevator	5
365	Watercraft rescue	1
410	Flammable gas or liquid condition, other	3
411	Gasoline or other flammable liquid spill	9
412	Gas leak (natural gas or LPG)	6
413	Oil or other combustible liquid spill	2
421	Chemical hazard (no spill or leak)	1
440	Electrical wiring/equipment problem, other	2
441	Heat from short circuit (wiring), defective/worn	2
442	Overheated motor	1
443	Light ballast breakdown	1
445	Arcing, shorted electrical equipment	1
451	Biological hazard, confirmed or suspected	1
460	Accident, potential accident, other	1
412U	Gas leak (natural gas or LPG) - PA Utilities Related	1
	Total	43

Response Times

Median response time for first responder arriving on scene to Rescue & Hazardous Materials calls	5:43
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Mutual and Automatic Aid

In this quarter, the PAFD provided mutual or automatic aid to two other jurisdictions on a total of 121 incidents. Five agencies provided mutual or automatic aid for calls within Palo Alto or Stanford on a total of 104 incidents.

The Fire Department has automatic aid agreements with five regional Fire Departments, including Mountain View, Menlo Park, Woodside, Los Altos, and Santa Clara County Fire. The Department implemented a virtual consolidation effort with the cities of Mountain View and Los Altos. This included an expanded and enhanced CAD system, a dedicated radio channel for the three cities, and multi-band radios that can communicate with other public safety agencies. All resources from the three cities are now able to be dispatched directly based on Automatic Vehicle Location (AVL), so the closest resource is dispatched no matter the city designation.

We continue to closely monitor the impact of this, and preliminary data shows an increase in the number of automatic aid calls Palo Alto has responded to in Mountain View. The Department is currently monitoring this impact and is working closely with Mountain View to increase coordination efforts and ensure Palo Alto's resources are not overly relied upon.

Table 5. Mutual and Automatic Aid Performance Measures FY15 Q4

Mutual and Auto Aid Provided

<u>Agency</u>	<u>Count</u>	<u>Percent</u>
Mountain View Fire	100	82.6%
Santa Clara County Fire	21	17.4%
<i>All Mutual and Auto Aid Provided</i>	121	100.0%

Mutual and Auto Aid Received

<u>Agency</u>	<u>Count</u>	<u>Percent</u>
Mountain View Fire	77	74.0%
Menlo Park Fire	18	17.3%
Santa Clara County Fire	4	3.8%
Woodside Fire	4	3.8%
Cal Fire	1	1.0%
<i>All Mutual and Auto Aid Received</i>	104	100.0%

Fire Prevention

The Fire Prevention Bureau ensures compliance with the Fire Code for the safety of occupants and protection of property. Fire Inspectors perform fire sprinkler and fire alarm plan checks, permitting, and field inspections with the goal of ensuring all construction complies with local and national codes.

With Accela up and running for the entire development center, this quarter the Bureau worked on refining the Fire Inspection module. This will allow Fire Inspectors to complete reports and checklists within the system, enabling greater tracking and data analytic capabilities.

This quarter, a total of 340 permits were issued, 288 sites were inspected, and 261 plans were reviewed. All facilities were inspected as required within this Fiscal Year. The percent of hazardous material facilities inspected is shown as one hundred and fifty-one percent (151%), as some facilities require multiple inspections. This year with the implementation of electronic reporting on CERS, many small businesses have required return visits to ensure proper submission. It is expected the need for multiple visits will decrease as businesses get accustomed to submitting information with this new process.

For state mandated inspections, the required list was further reviewed and additional repetitions and inaccuracies eliminated. The overall percentage completed for this Fiscal Year is slightly above one hundred percent (100%), as the Bureau has completed some multi-unit residential units (apartments, hotels) that are not currently on the required list.

These types of units do not currently have an established inspection fee in the approved municipal fee schedule, and the Development department is working to establish a fee in Fiscal Year 2017.

Table 6. Prevention Bureau Performance Measures FY15 Q4

Permits	
Facility Permits Issued	282
Electric Vehicle Permits Issued	24
Solar Permits Issued	34
Inspections	
Hazardous Material Inspections Completed	171
Number of Hazardous Material Inspections for FY15	270
Percent of Hazardous Material Facilities Inspections Complete	150.7%
State Mandated Inspections Completed	117
Number of State Mandated Inspections for FY15	290
Percent of State Mandated Facilities Inspections Complete	103.8%
Fire and Life Safety Plan Review	
Plans Reviewed	261
Percent of Reviews Completed On-Time	99.0%

Workforce Planning

The Department operates daily emergency response operations with a total of 96.00 FTE line personnel. This includes three battalions of crews that staff six stations in the City and Stanford 24 hours each day. Over the last quarter, the department has operated with 10.0 positions vacant and 5.0 employees off-line creating a total of 15.00 FTE positions that require backfilling.

With the promotion of five Firefighters to Fire Captain, the number of vacancies has shifted to the Firefighter classification. This impacts the number of Acting hours, which will see a significant shift over this quarter and the next.

Training is crucial component of succession planning and to preparing personnel to most effectively respond to emergency incidents. This quarter the training department focused on wildland training to prepare for the upcoming fire season, disaster planning and evacuation, as well as management topics for supervising personnel.

Table 7. Workforce Planning Measures FY15 Q4

Vacancies and Off-Line Employees

<u>Classification</u>	<u>Budgeted FTE</u>	<u>Vacancies</u>	<u>Off-Line Employees (Workers Comp/Light Duty)</u>	<u>Personnel On Line</u>	<u>Percent of Personnel On Line</u>
Battalion Chief	4.00	0.00	0.00	4.00	100%
Fire Captain	22.00	3.00	2.00	17.00	77%
Fire Apparatus Operator & Fire Fighters	70.00	7.00	3.00	60.00	86%
TOTAL	96.00	10.00	5.00	81.00	88%

Succession Planning

Number of Line Personnel Currently Eligible to Retire	16
Number of Line Personnel Eligible to Retire in Five Years	25
Percent of all Line Personnel Eligible to Retire within Five Years	47.7%
Number of Acting Battalion Chief Hours	236
Number of Acting Captain Hours	5,132
Number of Acting Apparatus Operator Hours	7,231

Training

Hours of Training Completed	8,566
Average Hours per Line Personnel	105.75

County of Santa Clara Emergency Medical Services System



Emergency Medical Services Agency

976 Lenzen Avenue, Suite 1200
San Jose, CA 95126
408.885.4250 voice 408.885.3538 fax
www.sccemsagency.org

Date: October 1, 2015
To: Santa Clara County EMS Committee Members
From: Linda Diaz BSN, RN, PHN
Clinical Section Manager
Subject: Hospital Destination, Diversion and Advisory Status Report

History

Diversion is a management process that diverts ambulances to the next closest facility. This may be used temporarily by local hospitals when the patient load exceeds emergency department or specialty center resources.

Facility diversion should be a last resort and utilized only when emergency department/specialty center resources continue to be overwhelmed after internal procedures to manage the situation have been implemented.

Report

The number of EMS transports continues to increase. Regional Medical Center has consistently received the highest number of transports for the last 5 months. Ambulance diversion, however, has seen a significant drop of 26% as compared to the last 6 month report. Notably decreases in diversion hours were seen with Good Samaritan, Palo Alto VA, and Valley Medical Center.

Options

- 1) Recommend to accept report
- 2) Recommend to NOT accept report
- 3) Other options, as determined by the EMS Committee

Recommendation

EMS Committee should accept the "County Hospital Destination, Diversion and Advisory Status Report for March 2015 through August 2015".



**County of Santa Clara
Emergency Medical Services System**

Monthly Hospital Destination, Diversion and Advisory Status Report

Report for Time Period: August 2015

Table 1: Number of Patients Transported to Hospital ED from 9-1-1 System*

Hospital	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Total
El Camino - Los Gatos	99	113	106	84	83	102	587
El Camino - Mt. View	714	703	740	753	699	739	4348
Good Samaritan	630	620	660	636	677	650	3873
Kaiser - San Jose	621	570	565	546	537	592	3431
Kaiser - Santa Clara	713	733	679	689	728	711	4253
O'Connor	620	544	536	547	445	537	3229
Regional - San Jose	1265	1241	1340	1310	1302	1309	7767
Saint Louise	266	248	280	255	261	257	1567
Stanford	562	565	551	579	557	515	3329
VA - Palo Alto	85	84	84	82	96	88	519
VMC	1355	1231	1255	1191	1173	1292	7497
Total	6930	6652	6796	6672	6558	6792	40400

Source: Santa Clara County Communications & Palo Alto Fire Department

Table 2: Daily Average of 9-1-1 Patients Transported By Hospital*

Hospital	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	6 Mth Avg
El Camino - Los Gatos	3	4	3	3	3	3	3
El Camino - Mt. View	23	23	24	25	23	24	24
Good Samaritan	20	21	21	21	21	21	21
Kaiser - San Jose	20	19	18	18	19	19	19
Kaiser - Santa Clara	23	24	22	23	23	23	23
O'Connor	20	18	17	18	18	17	18
Regional - San Jose	41	41	43	44	42	42	42
Saint Louise	9	8	9	8	9	8	9
Stanford	18	19	18	19	18	17	18
VA - Palo Alto	3	3	3	3	3	3	3
VMC	44	41	40	40	41	42	41
Total Daily Average	224	221	218	222	220	219	

Source: Santa Clara County Communications & Palo Alto Fire Department

*Notes for Tables 1 and 2: These numbers only reflect patients that originated in Santa Clara County and were transported by the County's EOA Ambulance Provider and Palo Alto Fire Department. Data for Stanford does not include patients from San Mateo County. The data includes but, does not differentiate specialty center status (TRAUMA, STROKE, STEMI, BURN)

Table 3: Total Monthly Hours of "AMBULANCE DIVERSION" Status

Hospital	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Total
El Camino - Los Gatos	0.00	0.00	0.00	0.00	0.08	0.00	0.08
El Camino - Mt. View	13.80	7.52	4.50	15.04	1.51	9.03	51.40
Good Samaritan	0.00	10.51	2.16	0.00	2.57	0.82	16.06
Kaiser - San Jose	15.23	28.91	12.04	6.45	2.94	15.91	81.48
Kaiser - Santa Clara	3.01	10.51	0.00	1.50	3.01	6.03	24.06
O'Connor	0.00	6.01	4.28	25.61	1.50	9.04	46.44
Regional - San Jose	0.12	1.50	1.51	3.01	0.00	0.00	6.14
Saint Louise	35.06	13.53	18.24	21.30	20.99	25.31	134.43
Stanford	18.04	26.22	21.06	6.62	25.45	27.08	124.47
VA - Palo Alto	22.27	28.49	0.00	3.95	1.50	3.01	59.22
VMC	21.67	16.53	10.47	16.77	10.10	11.17	86.71
Total	129.20	149.73	74.26	100.25	69.65	107.40	630.49
	Above 37hrs	Above 30hrs	Below 30hrs				

Color Legend for Ambulance

Diversion ONLY

Table 4: Total Monthly Hours of "STROKE / CT DOWN" Status*

Hospital	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Total
El Camino - Los Gatos	0.00	0.11	0.00	0.00	0.00	17.45	17.56
El Camino - Mt. View	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Good Samaritan	0.00	0.00	0.00	0.00	0.00	0.68	0.68
Kaiser - San Jose	0.00	0.07	0.00	0.00	0.95	11.27	12.29
Kaiser - Santa Clara	0.00	0.00	0.00	0.00	0.00	0.00	0.00
O'Connor	2.42	5.17	14.67	0.00	0.00	0.00	22.26
Regional - San Jose	0.00	0.00	4.58	0.00	0.00	0.00	4.58
Saint Louise	2.02	7.24	0.42	0.68	0.37	2.48	13.21
Stanford	0.00	0.00	0.00	0.00	0.00	0.00	0.00
VA - Palo Alto	0.00	0.00	0.00	0.00	0.00	0.00	0.00
VMC	0.00	0.00	4.46	0.00	4.07	0.00	8.53
Total	4.44	12.59	24.13	0.68	5.39	31.88	79.11

Table 5: Total Monthly Hours of "STEMI" Service Advisory Status*

Hospital	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Total
El Camino - Mt. View	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Good Samaritan	0.00	0.00	0.00	0.00	0.00	0.35	0.35
Kaiser - San Jose	0.00	0.00	0.00	0.00	0.00	11.27	11.27
Kaiser - Santa Clara	0.00	0.00	0.00	0.00	0.00	0.00	0.00
O'Connor	0.00	36.34	0.00	0.00	0.00	0.00	36.34
Regional - San Jose	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Stanford	0.00	0.00	0.00	0.00	0.00	0.00	0.00
VMC	0.86	0.00	0.00	0.00	28.81	0.00	29.67
Total	0.86	36.34	0.00	0.00	28.81	11.62	77.63

Table 6: Total Monthly Hours of Trauma Center "BYPASS" Status

Hospital	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Total
Regional - San Jose	1.02	0.00	1.01	0.00	0.00	3.87	5.90
Stanford	0.00	0.00	0.02	0.00	0.00	0.00	0.02
VMC	0.00	0.00	1.51	0.00	0.00	10.62	12.13
Total	1.02	0.00	2.54	0.00	0.00	14.49	18.05