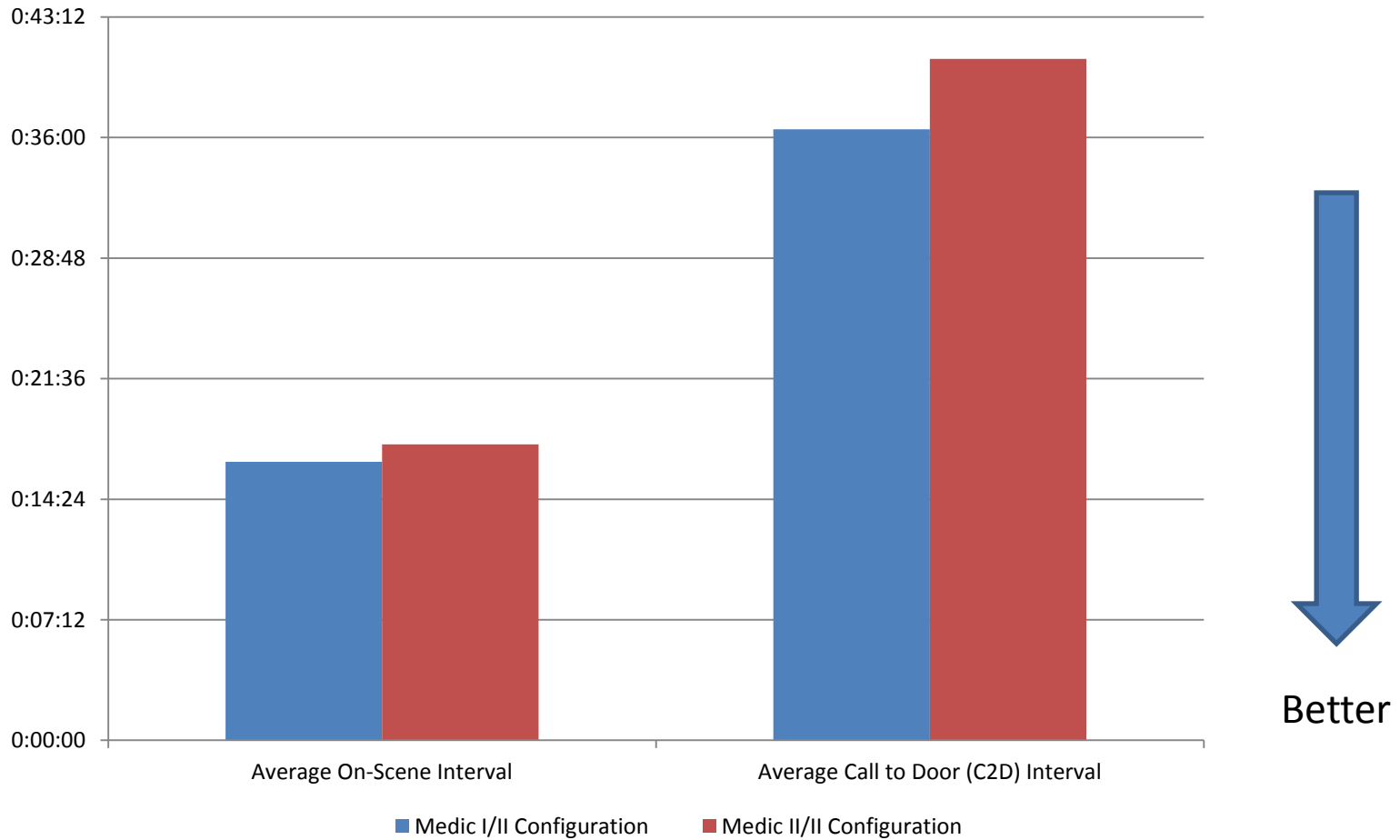


EMS Medic I Update

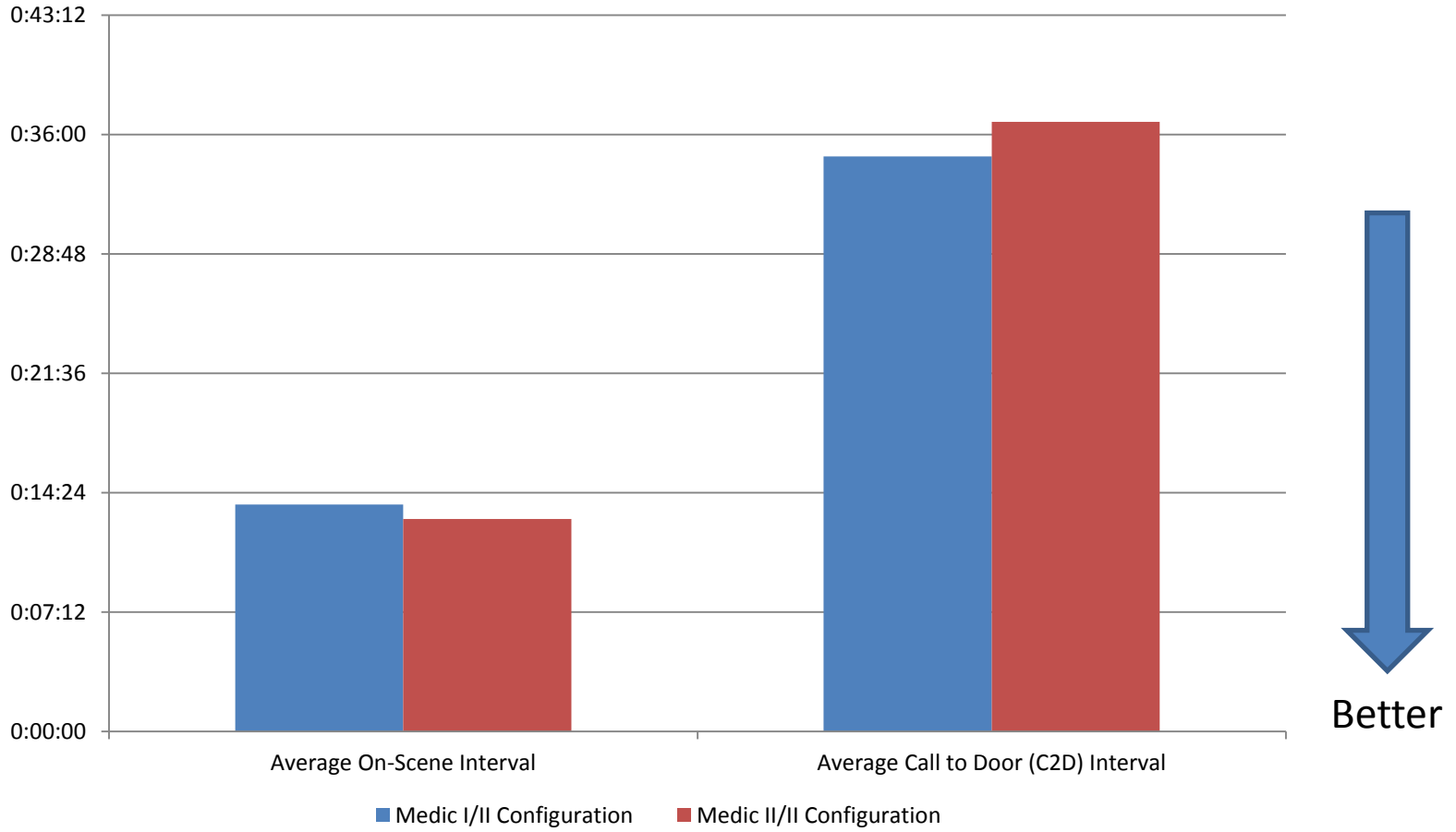
January 7, 2013

STEMI Alert Average Intervals 10-1-2012 - 12-31-2012

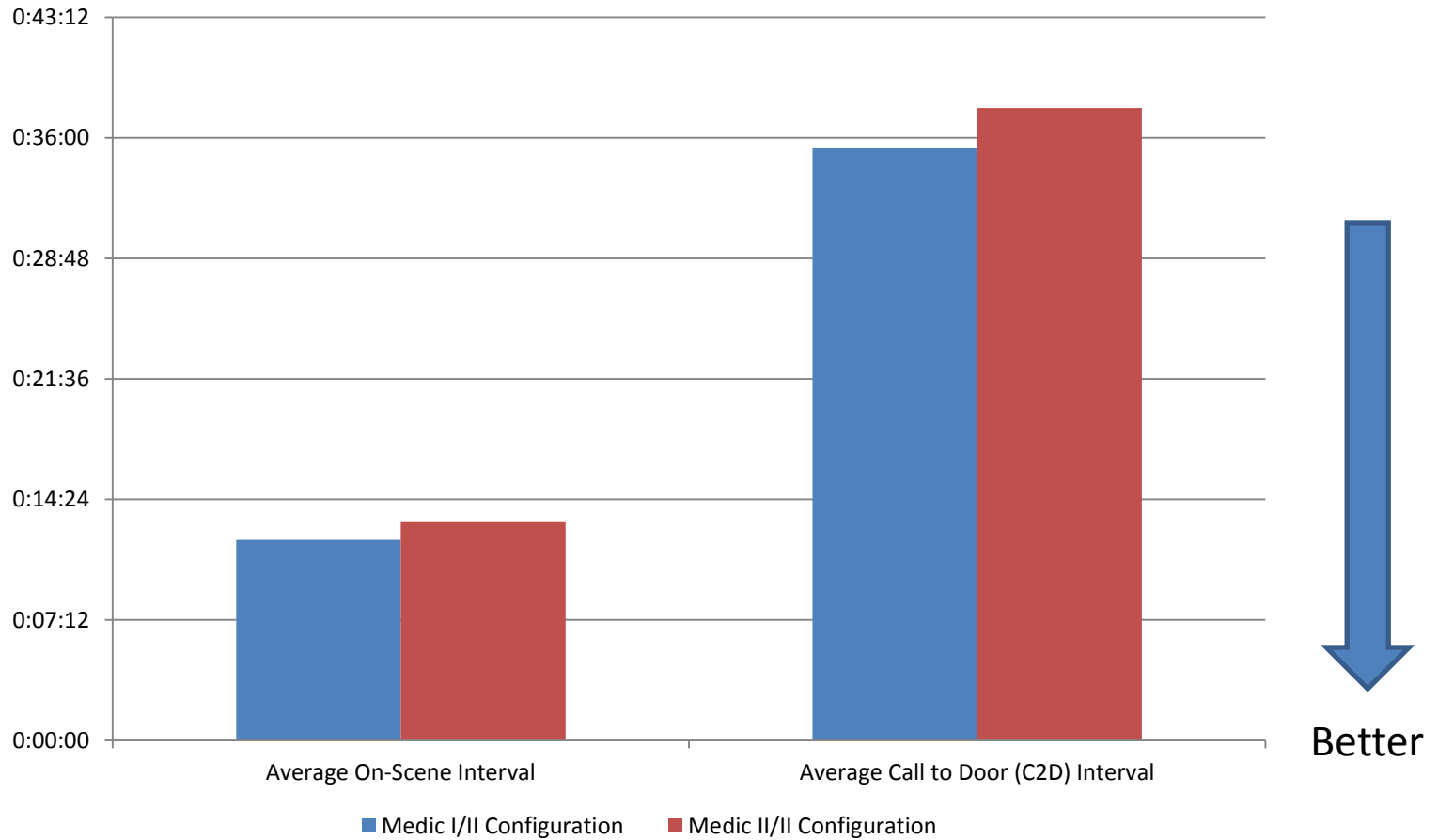


ST Elevation Myocardial Infarction - *Heart Attack* (STEMI)

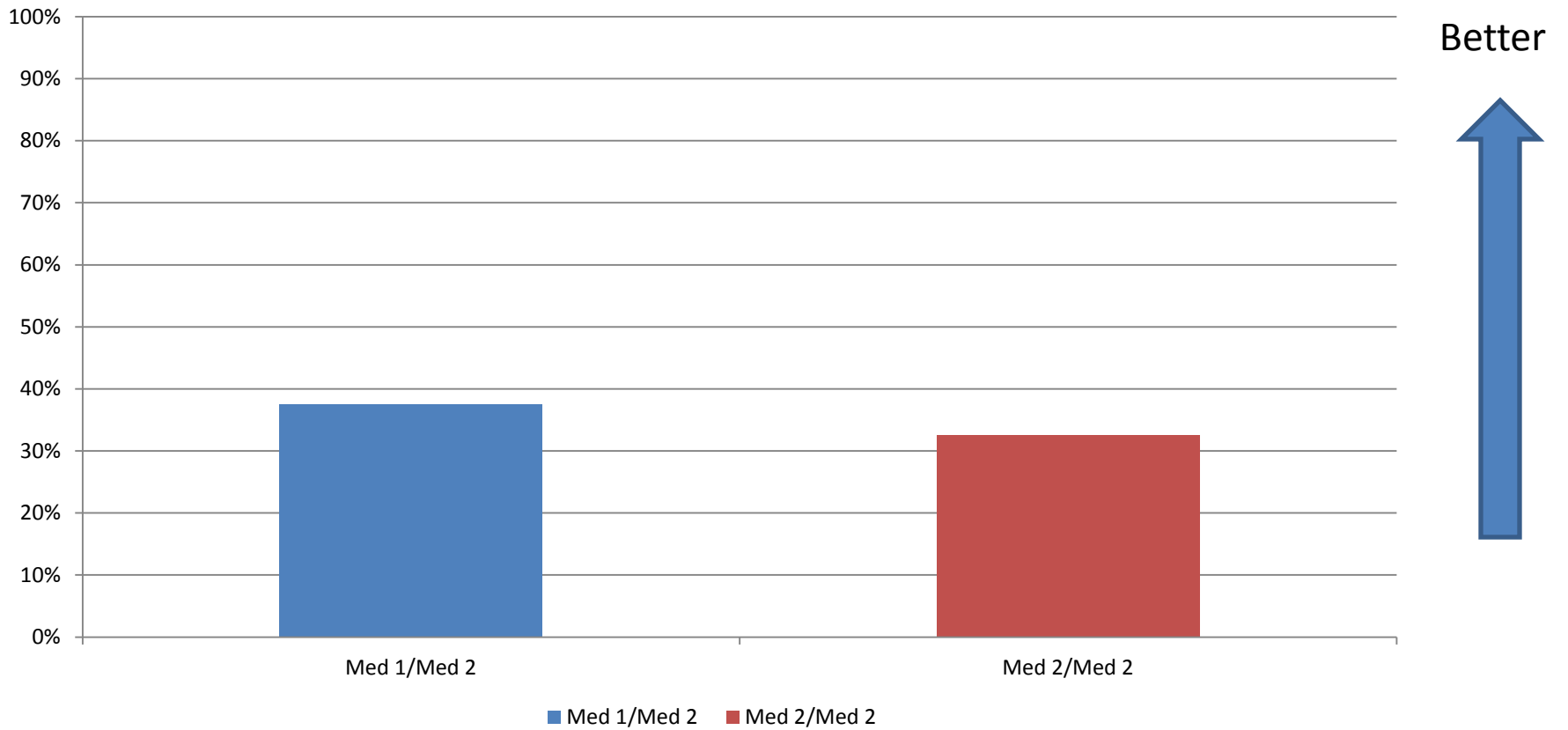
Stroke Alert Average Intervals 10-1-2012 - 12-31-2012



Trauma Activations Average Intervals 10-1-2012 - 12-31-2012



**Percentage of Cardiac Arrest Patients
Arriving at the Emergency Room With Return of Pulse
4-1-2012 - 11-30-2012**



Employee Meeting

- Three Employee Meetings
- We met in-person with every Medic that had worked with a Medic I
 - In a classroom setting with Dr. Hinchey, Chief Gardner and Myself
 - The primary issue brought forward by the Medics was the second ambulance being dispatched on Cardiac Arrest Calls
 - crews said they are canceling the second unit because it creates confusion with the pit-crew model

Second Ambulance Dispatches

Crews canceled the second ambulance prior to arrival on all but 10 Incidents

- Average time for the second ambulance to arrive after the first: 2 minutes 10 seconds
- Maximum time for the second ambulance to arrive after the first: 4 minutes 4 seconds
- Minimum time for the second ambulance to arrive after the first: 0 minutes 10 seconds

EMS Medic I Staffing

- Medic I – 26 employees
 - 10 cleared to independent Duty
 - 16 cleared to a two-person-crew
- 47 Medic I vacancies in the field
- Our next Academy will start February 11, 2013 with 19 Medic I Cadets. This will reduce our field vacancies to 28.
- We are taking applications for a June 3, 2013 Academy.

EMS Staffing Goal

- Medic I – 134 : 40%
- Medic II – 207 : 60%

Medic I / Medic II Target Staffing Ratio

