

23 Years Of Improving Performance & Harnessing The Power Of Your Data



FirstWatch helps public safety and healthcare professionals serve their communities through the use of technology and the science of quality improvement. Drawing on deep experience in emergency services, the FirstWatch team develops software and personalized solutions to help organizations continuously improve at what they do. Founded in 1998, and based in Carlsbad, Calif., FirstWatch has partnered with more than 500 communities across North America to improve outcomes, efficiency, safety, and operations.



FirstWatch.net

Product Innovation Awards



Check out our COVID-19 handout to see how we are helping

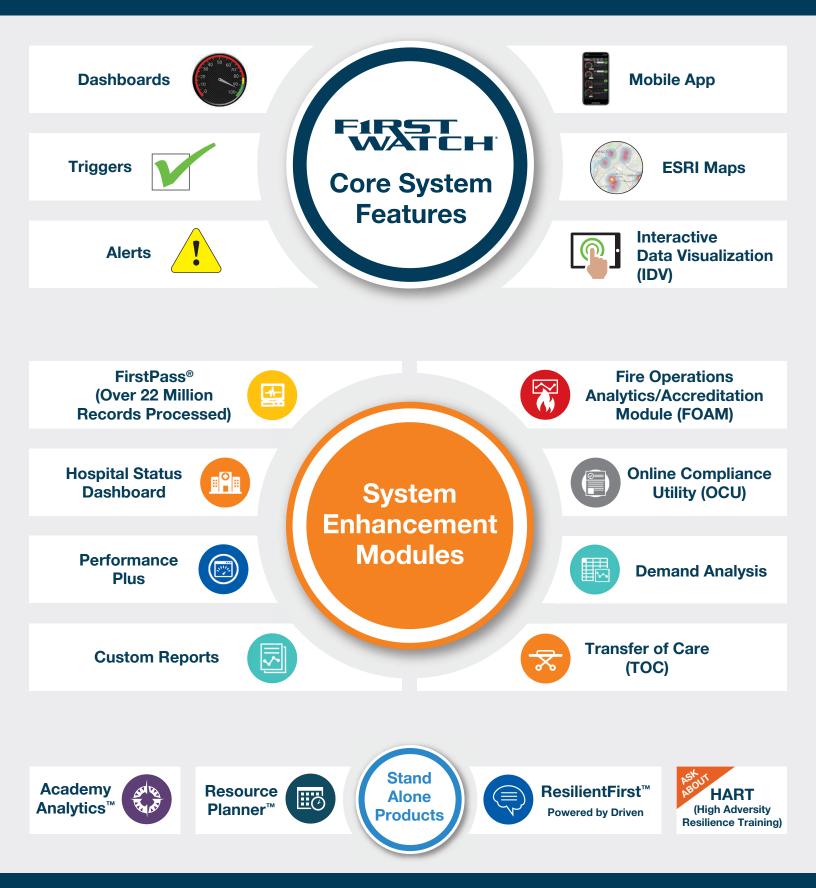


Helping the Helpers

through COVID-19



Real-Time data from your CAD, ProQA, ePCR, RMS, Phone, Nurse Triage, Billing, or Hospital ED systems

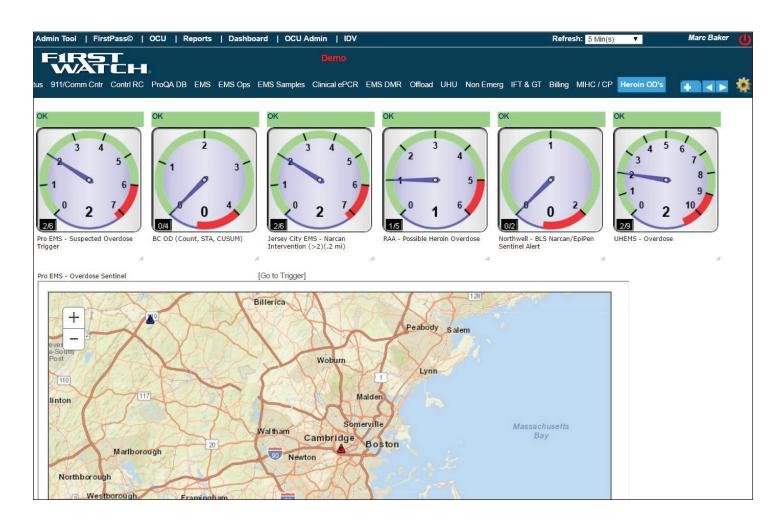


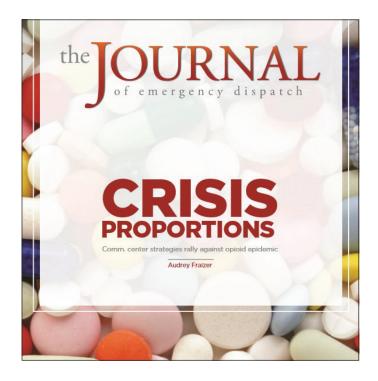
About FirstWatch

FirstWatch helps public safety and healthcare professionals serve their communities through the use of technology and the science of quality improvement. Drawing on deep experience in emergency services, the FirstWatch team develops software and personalized solutions for over 500 communities across North America. **firstwatch.net**



Real-Time Tracking of Opiates Overdoses





IAED March/April 2017 Issue

Crisis Proportions: Comm center strategies rally against opioid epidemic

Surveillance and multi-agency cooperation using and sharing CAD and electronic patient care reporting (ePCR) data is a strategy with the persistence to escalate the war against opioid abuse.

This article features FirstWatch customers like RAA, VA and ProEMS, MA who both use FirstWatch to track potential opioid-related calls by searching ePCRs for terms such as "Narcan" or "heroin". Read the full article here:

https://iaedjournal.org/crisis-proportions/





ResilientFirst is an AI-powered virtual coach helping emergency service professionals build resilience and improve wellness.

HART – High Adversity Resilience Training

This **NEW** training is part of ResilientFirst and specifically designed for those who deal with high-pressure situations and difficult work on a regular basis.





Easy, familiar interaction, like texting with a wise friend.

It's like taking your mind to the gym. Building strength to deal with day to day stress and critical incidents without developing burnout, depression, or PTSD.

Daily 3-5 min "micro-tasks" make skill building easy, effective, and sustainable.



To find out more information or schedule a demo, visit: **firstwatch.net/rf** or contact: **resilient@firstwatch.net** 5

Interact with data visualizations, displayed your way



IDV

What does IDV stand for?

IDV stands for Interactive Data Visualization and like the name suggests, its intended to enable users to create dashboard visualizations offering interactive drill-downs into their FirstWatch data.



What is IDV?

IDV is a module with a modernized look and feel designed to allow users to interact with the data that is populated from a FirstWatch trigger. Users can create and save an unlimited number of widgets or tabs to display data in a manner that is meaningful to them and their organization.

Once designed, IDV allows users to answer common questions about what may be going on in their system. IDV supports the ability for users to search or filter data and save custom filters for each user profile to be used at a later time.

IDV provides the ability to group multiple data elements and compare to previous day, month, or year. Interval breakdowns can include day of week, hour of day, by station, unit, shift, battalion or other options important to your organization.

Access to the data at your finger tips on screen or multiple export options are part of the core feature set. All widgets can be exported in various formats to add to your reports. The IDV Grid allows the end user to group by, hide or sort columns, reorder the data columns, apply filters just to the grid and if needed export to Excel.

How would it help my organization?

IDV helps organizations setup and see information at a glance in an easy-to-read visual display. IDV can be shared to other individuals within your organizations or entities that you report to. Because information can be exported out, many agencies use IDV to assist in reporting or providing information in an easy-to-understand manner for authorities, councils, etc.

What type of data does IDV look at?

The majority of clients using IDV are using CAD or ePCR data, but IDV can be setup against any data source you have flowing to a trigger in FirstWatch – CAD, ePCR, ProQA, RMS, or a combination of data sources.

Manatee County EMS Customer Spotlight

⁴⁴We use IDV to communicate with our hospital partners daily. We provide them with data that showcases their Transfer of Care times, Nurse Signature Times for Transfer and Volume. This helps us have a continual pulse on their performance as it relates to getting our units turned around at their facilities.

We also use IDV to provide senior leadership within our organization a view of how our system is performing. Some of the most desired data is presented to them through IDV to quickly show trends in our teams performance.³⁷



Sean Dwyer Assistant Chief, Special Operations Manatee County EMS





Cypress Creek EMS Customer Spotlight

"FirstWatch IDV gives administrators the ability to view response data in a clear and concise report. We share this data with the various fire departments we provide emergency communications services saving my Communications Manager three days of work."



Wren Nealy Jr. Chief Executive Officer Cypress Creek EMS

HOT Trigger Examples

alid CAD	Time Sent To Queue Box #	<u>First Name</u>	Last Name	Count of Duplicates	
~	2/5/2017 11:44:22 PM	[Deidentified]	[Deidentified]	3	
~	2/5/2017 11:53:26 PM	[Deidentified]	[Deidentified]	11	
~	2/5/2017 11:53:26 PM	[Deidentified]	[Deidentified]	11	
4	2/5/2017 11:56:35 PM	[Deidentified]	[Deidentified]	1	
v	2/6/2017 12:01:44 AM	[Deidentified]	[Deidentified]	4	7
~	2/6/2017 1:28:51 AM	[Deidentified]	[Deidentified]	3	
~	2/6/2017 1:59:52 AM	[Deidentified]	[Deidentified]	1	
v	2/6/2017 2:19:14 AM	[Deidentified]	[Deidentified]	14	

Frequent Patients / Hot Spots

🕥 PGFD - e	PCRs - Frequ	ent Patient - Goo	gle Chrome
Secure	https://sa	nbsubscriber.f	irstwatch.net/W
Prehosp	ital Patie	nt Care Rep	port
			ear Same DOB
INC_DT	Incident ID	Primary Impression	First Name Las
01/18/2017 03:37:30	6936150	Altered Mental Status	DE-IDENTIFIED DE
12/26/2016 14:02 9	<u>6826400</u>	Diabetic Symptoms (Hypoglycemia)	DE-IDENTIFIED DE-
12/ 8/2016 07 03:56	<u>6794038</u>	Diabetic Symptoms (Hypoglycemia)	DE-IDENTIFIED DE-
12/14/2016 09:55:35	<u>6781013</u>	Diabetic Symptoms (Hypoglycemia)	DE-IDENTIFIED DE
12/07/2016 09:24:36	6754275	Diabetic Symptoms (Hypoglycemia)	DE-IDENTIFIED DE-
12/02/2016 10:36:07	<u>6733310</u>	Diabetic Symptoms (Hypoglycemia)	DE-IDENTIFIED DE
11/08/2016 02:39:46	6646629	Diabetic Symptoms (Hypoglycemia)	DE-IDENTIFIED DE
10/31/2016 14:06:33	<u>6618639</u>	Diabetic Symptoms (Hypoglycemia)	DE-IDENTIFIED DE
10/09/2016 01:23:27	<u>6538038</u>	Diabetic Symptoms (Hypoglycemia)	DE-IDENTIFIED DE-
09/09/2016 10:37:44	<u>6425159</u>	Diabetic Symptoms (Hypoglycemia)	DE-IDENTIFIED DE-
08/24/2016 13:58:16	6365585	Altered Mental Status	DE-IDENTIFIED DE
08/19/2016 03:15:14	<u>6345784</u>	Diabetic Symptoms (Hypoglycemia)	DE-IDENTIFIED DE-

Critical / Special Incidents

Calls displayed re Data and Repor	present ac t from the	e FirstWatch TM Interne	ween th t Server	e hours of 1/1/2017 and 2/6/2017 11:			
MATCHING DET OR PCR HAS PT	ERMINA AGE <=	NTS: 7% 14C% 14D% 1 18 WITH PRIMARY/SE	14E% 2 CONDAI	2% 27B% 27D% OR 4 OR MORE U	NITS ARE (ON SCENE OR H	Accid. 27 Stab/ Gunshot / Penetrating AND AS BRAIN MATTER IN THE PCR NARRATIVE S-ASSIGNED, DUPLICATE CALLS AND BLS Special Event Nondedic Address/Location
Valid	epck	Time Sent To Queue	A <u>PN</u>	Problem	PIQA	Incident #	Address/Location
1	1	1/1/2017 3:31:32 PM	10	27 Stab/ Gunshot / Penetrating	27D04Y	010117-0255	From AHEMS
~	1	<u>1/1/2017 8:52:26 PM</u>	10	27 Stab/ Gunshot / Penetrating	27D02X	010117-0340	From AHEMS
~	1	1/1/2017 8:52:26 PM	10	27 Stab/ Gunshot / Penetrating	27D02X	010117-0340	From AHEMS
~		1/7/2017 11:28:26 AM	15	FS Fire Standby		010717-0163	From AHEMS
~	1	<u>1/13/2017 5:42:40 AM</u>	10	27 Stab/ Gunshot / Penetrating	27D04G	011317-0056	From AHEMS
1	1	<u>1/14/2017 9:10:22 AM</u>	10	27 Stab/ Gunshot / Penetrating	27D05G	011417-0099	From AHEMS
1	1	<u>1/14/2017 9:10:22 AM</u>	10	27 Stab/ Gunshot / Penetrating	27D05G	011417-0099	From AHEMS
1	1	1/14/2017 9:10:22 AM	10	27 Stab/ Gunshot / Penetrating	27D05G	011417-0099	From AHEMS





The **Hospital Transport Status Dashboard** lists each primary hospital in the area, showing how many units are currently en route to, or at each facility. Additionally, the dashboard provides: count of units transporting to and arrived at each hospital, average elapsed time and maximum time at hospital, visual warnings by hospital, pre-defined counts and time thresholds, summary and detailed view of each hospital, custom sorting by hospital - allowing each hospital to see transports and times.

Southwest Zone Hospitals	Enroute	Arrived	Elapsed - Avg	Elapsed - Max
INLAND VALLEY REGIONAL MEDICAL CENTER	0	1	22:59	22:59
LOMA LINDA UNIVERSITY MEDICAL CENTER -	0	3	13:11	19:49
MENIFEE VALLEY MEDICAL CENTER	0	0		
RANCHO SPRINGS MEDICAL CENTER	0	0		
TEMECULA VALLEY HOSPITAL	0	1	25:04	25:04
Hemet/Pass Zone Hospitals	Enroute	Arrived	Elapsed - Avg	Elapsed - Max
HEMET VALLEY MEDICAL CENTER	0	1	35:35	35:35
SAN GORGONIO MEMORIAL HOSPITAL	0	0		
Desert Zone Hospitals	Enroute	Arrived	Elapsed - Avg	Elapsed - Max
DESERT REGIONAL MEDICAL CENTER	0	0		
EISENHOWER MEDICAL CENTER	0	0		
JOHN F. KENNEDY MEMORIAL HOSPITAL	0	0		
Northwest Zone Hospitals	Enroute	Arrived	Elapsed - Avg	Elapsed - Max
CORONA REGIONAL MEDICAL CENTER	0	0		
ETS	1	0		
KAISER HOSPITAL - RIVERSIDE	0	0		
PARKVIEW COMMUNITY HOSPITAL	0	0		
	0	4	22:12	35:45
Central Zone Hospitals	Enroute	Arrived	Elapsed - Avg	Elapsed - Max
MORENO VALLEY COMMUNITY HOSPITAL -	0	0		
RIVERSIDE COUNTY REGIONAL MEDICAL ENTER	0	0		
Out of Area Hospitals	Enroute	Arrived	Elapsed - Avg	Elapsed - Max
ARROWHEAD REGIONAL MEDICAL CENTER	0	0		

Available as an add-on feature to the Hospital Status Transport Dashboard, the Transfer of Care module is a web enabled system that records and tracks the transfer and acceptance of a patient to the Emergency Department. In addition to capturing the date and time stamp for the transfer of care at each facility, the TOC tool can be configured to capture delay reasons over a user defined threshold.

Agency AMR_RC	Unit 8437		route /17/2018 8:48:17 AM	(Elapsed) 01:35	Arrived	(Elapsed)	Problem/Nature 1A1 ABD_PN
TS - 9990	County F	arm Rd, R	iverside, CA				
Agency AMR_RC	Unit 4115		route /17/2018 8:19:39 AM	(Elapsed) 30:13	Arrived	(Elapsed)	Problem/Nature 5150 HOLD
IEMET VAL	LEY MED	ICAL CENT	ER - 1117 E. DEV	ONSHIRE AVE	, HEMET, CA		
Agency	Unit	Er	route	(Elapsed)	Arrived	(Elapsed)	Problem/Nature
AMR_RC	<u>5502</u>	TOC 7	/17/2018 8:00:24 AM	11:46	7/17/2018 8:12:10 AM	37:42	12D2 SEIZ_MULTI SEIZ
NLAND VA	LLEY REG	IONAL ME	DICAL CENTER - 3	6485 INLAND	VALLEY DRIVE, WILD	OMAR, CA	
Agency	Unit	Er	route	(Elapsed)	Arrived	(Elapsed)	Problem/Nature
AMR_RC	4460	тос 7	/17/2018 8:06:28 AM	18:18	7/17/2018 8:24:46 AM	25:06	30B1 TRAUMA_DANG BODY AREA
OMA LIND	A UNIVER	SITY MEDI	CAL CENTER - MU	IRRIETA - 280	62 Baxter Rd, Murrie	ta, CA	
Agency	Unit		route	(Elapsed)	Arrived	(Elapsed)	Problem/Nature
AMR_RC	4440	TOC 7	/17/2018 8:15:54 AM	12:02	7/17/2018 8:27:56 AM	21:56	SICK PERSON_26
AMR_RC	4428	TOC 7	/17/2018 8:19:09 AM	16:51	7/17/2018 8:36:00 AM	13:52	UNKNOWN MEDICAL ASSISTANCE_3
AMR_RC	<u>4443</u>	тос 7	/17/2018 8:19:23 AM	20:23	7/17/2018 8:39:46 AM	10:06	26B1 SICK_UNK
IVERSIDE	соммині	TY HOSPIT	AL - 4445 MAGN	OLIA AVE, RIV	ERSIDE, CA		
Agency	Unit	Er	route	(Elapsed)	Arrived	(Elapsed)	Problem/Nature
AMR_RC	3334	TOC 7	/17/2018 8:25:41 AM	04:55	7/17/2018 8:30:36 AM	19:16	SICK PERSON_26
AMR_RC	3338	TOC 7	/17/2018 8:17:52 AM	23:02	7/17/2018 8:40:54 AM	08:58	HEADACHE_18
AMR_RC	3359	TOC 7	/17/2018 8:00:55 AM	17:47	7/17/2018 8:18:42 AM	31:10	23C2 OVERDOSE_ABN BREATHING
AMR_RC	3316	TOC 7	/17/2018 7:58:13 AM	13:47	7/17/2018 8:12:00 AM	37:52	FALLS 17

Performance by Individual, by Unit, or Shift



FirstWatch Performance Plus is an enhancement module to existing FirstWatch standard Performance Triggers. While standard Performance Triggers are great at providing the overall compliance perspective, they do not provide compliance monitoring at the various individual or specific component levels. For example, standard Performance Triggers can monitor overall Priority 1 calls processed within 45 seconds, ninety percent of the time. However, they cannot measure or monitor the individual Call-Taker's performance against the same standard (John Smith's performance).

The Performance Plus module is designed to do just that, by analyzing both the overall and the specific components that make up the overall compliance. By automating these performance measures, it increases situational awareness and early detection of potential problem areas, which in turn allows for early mitigation – resulting in improved performance, compliance, and operational efficiencies. Real-time alerts on individual performance keep your finger on the pulse of performance in your agency.

gger Views: Events Graphs Maps [Viev	Alert Config	terresh	rate o min(s)			Jessica Smith
- Hospital Drop I Current = Data between the hours View: Current MTD Last	of 12/1/2015	12:20:41 AM	and 12/1/20				nload to Excel:	X							
		Cu	rrent			MTD		1	Last Mo	nth		Last 30 D	avs		YTD
Individual Performance	Total	Out of Compliance	Compliance %	Avg Time	Total	Out of Compliance	Compliance %		Out of Compliance	Compliance %		Out of Compliance	Compliance %		Out of Compliance
and the second second second	1	0	100.00	00:00:28	1	0	100.00	155	107	30.97	155	107	30.97	1512	1038
	8	2	75.00	00:22:24	8	2	75.00	301	147	51.16	301	147	51.16	3990	2075
	7	3	57.14	00:32:09	7	3	57.14	382	226	40.84	382	224	41.36	4632	2792
	4	2	50.00	00:40:20	4	2	50.00	138	89	35.51	142	91	35.92	1501	1106
	18	9	50.00	00:34:08	20	11	45.00	1313	962	26.73	1314	963	26.71	13998	10244
the second se	6	3	50.00	00:36:31	6	3	50.00	414	206	50.24	413	203	50.85	4184	2342
Hospital Drop	87	52	40.23	00:37:28	90	55	38.89	5910	3886	34.25	5894	3885	34.09	65122	43803
	11	7	36.36	00:43:28	10 0000	7	36.36	769		35.37	765	498	34.90	8364	
	19	14	26.32	00:44:19	19	14	26.32	1181	879	25.57	1184	884	25.34	12973	9822
	9	8		00:40:50	10 A	8	11.11	674	396	41.25	668	396	40.72	7370	4839
	0	0		00:00:00		0				28.82		115		1804	1. Cale 24 (A
	1	1	1	01:19:34		2	0.00	172	138	19.77		136		2086	1
	2	2	the second s	00:33:03		2	0.00	146		53.42	100000000	70	k contraction		
	1	1	0.00	00:32:24	1	1	0.00	95	50	47.37	94	51	45.74	1006	549

Example Performance Plus Triggers:

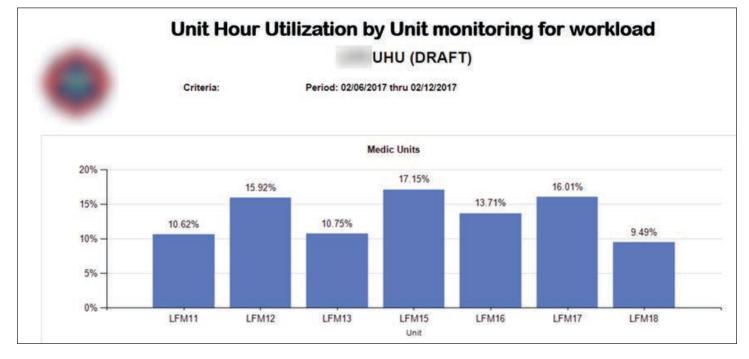
- Call processing times performance by individual call taker
- Dispatch assignment performance by individual dispatcher
- Total call processing performance performance by individual
- Call-taker/dispatcher performance by priority

- Call-taker call completeness/accuracy
- · Geovalidation by call-taker
- Call-taker overides
- 1st unit assignment accuracy
- Unit/crew times performance by unit, by station, by battalion, and individual

Workload Monitoring

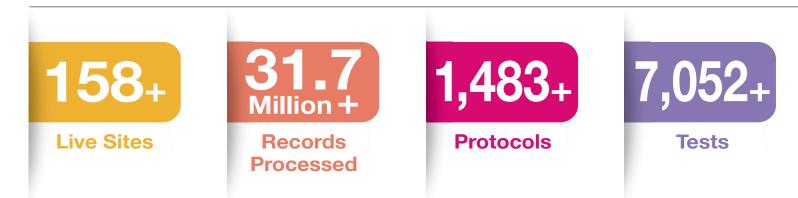
Make informed, real-time decisions when sending your crews on calls based on their current total task time for that shift.

Views: Events Graphs Maps Destination Analysis T	101			Viev	/ Aiert Config Refresh rate <mark>3 n</mark>	Not cur Count/S CUSUM	rently in Alert StdDev STA Geo Cluster	Server: 7/19/2016 6:4 Local: 7/19/2016 9:4 Michael B
Istin - 24hr 7am DC1-DC5 Unit W Is displayed represent active or performed calls be formance Standard = 01:15:00 ta and Report from the FirstWatch [™] Interne	tween the hours of 7/18/2016 8:41:44 PM and 7/1	n 19/2016 8:41:44 AM. 🖼 📧 🔜	\$					
o Valid Time Sent Problem Incident	# Unit Address/Location	# of Card Enroutes Arrest/De Incidents	eceased Task Time Task UHU	<u>Daytime</u> <u>Total Time</u> <u>OnTask</u> <u>OnTask</u>	<u>Daytime UHU</u> <u>Adi</u>	<u>Task Time</u> <u>Adi Task</u>	<u>CUHU</u> Adj Daytim Ontask%	e Adj Daytime UHU
7/18/2016 Altered Mentation 11:31:47 PM Pri 3	DC01	3 0	00:10:27 0.01	00:37:57 3%	0.03 00:40:	27 0.03	5%	0.05
Z/19/2016 Tactical Assist 4:16:50 AM Prescheduled 16201-003	DC04	2 0	02:17:03 0.1	02:28:39 10%	0.1 02:47:	03 0.12	12%	0.12
7/19/2016 4:27:17 AM Cardiac Arrest 16201-0044	DC02	3 3	00:02:53 0	00:44:16 3%	0.03 00:32:	53 0.02	5%	0.05
7/19/2016 Traffic Injury Pri 8:03:08 AM 4F 16201-0074	DC03	1 0	00:19:27 0.2	00:19:27 20%	0.2 00:49:	0.5	50%	0.5
ds Per Page: 50 V	M06 has be	en dispatche	ed 15 times sin	ce 6am an	d has sper	- nt 05:13:	:12 on t	ask.
Responses: 4	Incident Date	Run #	Problem Type		Task Time	Dispositi		
	06/29/2016 07:42:54		Psychiatric Pri 3		00:07:46		red Respon	nse
	06/29/2016 07:37:33	16785761	Unknown Pri 4		00:00:20		ired Respoi	
	06/29/2016 07:59:58	16785860	Unknown Pri 3		00:05:03	No Patien	t	
	06/29/2016 08:06:36	16785897	Syncopal Episode	Pri 3	01:04:37	South Aus	stin	
	06/29/2016 09:12:04	16786241	Unknown Pri 3		00:07:26	Referred	Austin Polic	ce Dept.
	06/29/2016 09:41:13	16786407	Seizure Pri 3		00:59:45	University	/ Med Ctr B	rackenridg
	06/29/2016 10:48:40	16786807	Allergic Reaction I	Pri 4	00:01:07	Reconfigu	ired Respoi	nse
	06/29/2016 10:54:00	16786844	Chest Pain Pri 2		01:18:10	University	/ Med Ctr B	rackenridg
	06/29/2016 13:18:40	16787813	Psychiatric Pri 5		00:10:54	Cancelled		
	06/29/2016 13:30:24		Psychiatric Pri 4		00:27:16	Refusal		
	06/29/2016 13:59:08	16788085	Psychiatric Pri 4					
	06/29/2016 13:53:50	16788049	Overdose Pri 1		00:02:15	Reconfigu	ired Respoi	nse
	06/29/2016 14:16:00	16788196	Unknown Pri 3		00:01:38	Cancelled		
	06/29/2016 14:29:38	16788317	Respiratory Pri 1		00:46:55	Saint Dav	rids	
	06/29/2016 15:16:05	16788686	Fall Pri 3					
				.				
			1000 Mail	S Log			-	
	OOS Description		Start Time	End			e Taken	
	OS Repair EMSG		06/29/2016 12:22	:28 06/2	9/2016 12:45:	55 00:2	3:27	



FirstPass Module





FirstPass® by the Numbers

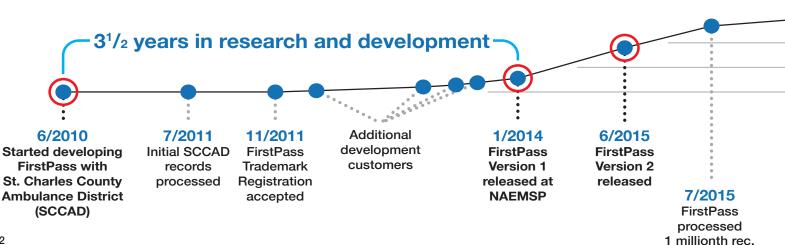
3 100.00%

Universal

90.04%

100.00%

100.00%



WATCH Destoord

FirstPass Module

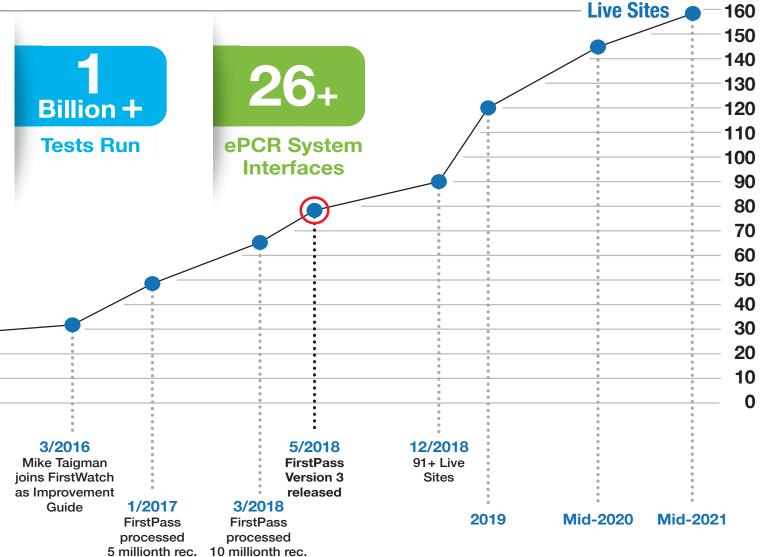


Automates Performance Improvement

Know how your system is performing on the things that matter most in near real-time

The NEW FirstPass Dashboard includes a customizable display of a tiled summary of where your calls are in your FirstPass queues, and Statistical Process Control (SPC) charts for each of your system's Protocols.

- Real-time Automated Performance Improvement Use one tool to monitor Protocol compliance, documentation, and improvement success
- Measure Protocol Compliance Prioritize and monitor the protocols that are most important to your system
- Enhance Documentation Quality Real-time review of completion of required ePCR fields
- Provide Meaningful Feedback Ask questions and provide medics with feedback before they end their shift
- Save Time & Resources Let the computer do the work and save the human for what is most important
- Monitor Medic Performance Track individual performance to overall system objectives



Critical Incident Notification

Allina Health EMS and Las Vegas Fire uses their Critical Incidents triggers to alert their Chaplain in real-time.

Calls displ	layed re	epresent ac		d calls bet	ween the	nformation hours of 5/12/2017 and 5/18/2017 :	11:59:59 PM	М. 🔣 🔜				
14D% 14 CARDIA	4E% 2 C ARRI Event M	2% 27B%	% 27D% OR 4 (OR MORE	UNITS A	ARE ON SCENE OR HAS BRAIN M	ATTER IN	THE PCR NARRA	e Accid. 27 Stab/ Gunshot / Penetrating Al ITIVE OR PCR HAS PT AGE <= 18 WITH PR I Event Ded., SEA ALS Special Event Nonde	IMARY/SECONDA	RY IMPRESSION	N OF
	<u>Geo</u> <u>Valid</u>	<u>ePCR</u>	<u>Time Sent To</u> ▲	Queue	<u>Pri</u>	Problem	ProQA	Incident #	Address/Location	<u>City</u>	<u>County</u>	Division
	✓	1	<u>5/12/2017 1:32</u>	2:56 AM	15	FS Fire Standby		051217-0028	From AHEMS	ARDEN HILLS	RAMSEY	Allina North
	✓	1	5/12/2017 1:32	2:56 AM	15	FS Fire Standby		051217-0028	From AHEMS	ARDEN HILLS	RAMSEY	Allina North
	✓	1	5/12/2017 10:5	50:32 AM	5	27 Stab/ Gunshot / Penetrating		051217-0180	From AHEMS	MOUNDS VIEW	RAMSEY	Allina North
	✓	1	5/14/2017 10:2	27:50 AM	5	29 Traffic Accident / PI		<u>051417-0138</u>	From AHEMS	ANOKA	ANOKA	Allina North

LVFR - Critical Incident Notification C	Current Call Information
Calle displayed convergent active or performed calls between	the house of 4/17/2016 and 4/10/2016 11-50-50

Calls displayed represent active or performed calls between the hours of 4/17/2016 and 4/18/2016 11:59:59 PM. 📓 底 🔊

Geo

Valid ePCR	Time Sent To Queue Incident #	<u>Pri</u>	Problem	<u>ProQA</u>	
 ✓ 1 	<u>4/17/2016 12:07:58 AM</u> 04172016-6108729		•	U U	ants: GSW (explosive to) - "27D05G" Building Fire
✓ 3	<u>4/17/2016 1:04:56 AM</u> 04172016-6108772				est Obvious Death - 6" Traffic Accident - "29D%"
*	4/18/2016 12:33:27 AM 04182016-6109705	OR Matc	hing Problems	s Types: "27B-Stab	/Gunshot Wound" "27D-
Records Per Page: 50 Total Responses:	3	Cardiac/ ePCR nai	Respiratory Ar rrative. Unit m	nust be on scene >	inging" or "Jumper" in the 2 minutes Does not include
DRAFT - LVFR - Critical Incide Includes Priorities: 1, 10, 11, 12,	ent Notification Filter Criteria 13, 14, 15, 16, 17, 18, 2, 3, 4, 5, 6, 7, 8, 9 Only.	"unable	to locate" or "	no patient contac	t" in ePCR narrative

and in the call comments and had a corresponding

Trigger Criteria Include the Following Categories (with Matching Free-Text Entries with Call Comments): Critical Incidents, No Patient Contact

(Drill down into each call's detail to see which free-text words or phrases were Category.)

Other Information: LVFR units only AND matching determinants: GSW (explosive to head) - "27B05G" GSW (multiple victims) - "27D05G" Building Fire with person inside - "07C01" Cardiac Arrest Obvious Death - "09B1%" Drownings - "14P0%" and "14B%" Traffic Accident - "29D%" OR Matching Problems Types: "27B-Stab/Gunshot Wound" "27D-Stab/Gunshot Wound" "7C-Burns/Explosion" "9B-Cardiac/Respiratory Arrest" OR With "Hanging" or "Jumper" in the ePCR narrative. Unit must be on scene > 2 minutes Does not include "unable to locate" or "no patient contact" in ePCR narrative

orkforce						Live Wo	rkload Rep	oort					
	it # Schedule Start Tim		Total Time on Duty	# of Responses	# of Arrivals	Total Task Time	Task Time UHU	# of Times Out of Service	Out of Service Time	# of Post Movements	Time not at Post	@ Post > 30 Min	Active Time UH
ALS	Units												
	05:00:0		08:46:04	4	4	04:43:17	0.54	1	00:34:57	6	06:30:03	0	0.74
	334 05:30:0		08:34:02	5	2	05:13:53	0.61		00:51:17	4	06:15:15	0	0.73
	331 05:30:0		08:33:13	4	3	05:56:19	0.69		00:47:26	6	07:43:04	0	0.90
3	385 06:00:0	0 06:23:05	07:40:51	3	3	05:47:11	0.75			6	06:48:45	0	0.89
eal-time.	340 06:00:0	0 06:43:44	07:20:12	6	5	04:11:53	0.57			9	05:26:22	0	0.74
	336 06:30:0	0 05:44:34	07:19:22	3	3	03:32:27	0.48		00:40:47	4	04:21:10	0	0.59
	06:30:0		07:17:38	3	3	05:40:41	0.78			0	00:00:00	0	1.00
	338 07:00:0		07:00:31	4	4	03:49:44	0.55			7	05:26:09	1	0.78
	07:30:0		06:33:13	7	2	02:29:57	0.38			8	05:09:15	1	0.79
3	339 07:30:0	0 07:53:44	06:10:12	3	3	04:09:10	0.67			6	05:37:21	0	0.91
3	343 08:00:0		06:02:55	0	0	00:00:00	0.00		05:51:38	0	00:00:00	0	0.03
3	08:00:0	0 08:02:46	06:01:10	3	3	05:40:46	0.94			0	00:00:00	0	1.00
	364 08:00:0		06:00:17	2	1	02:22:00	0.39			4	02:54:27	0	0.48
3	327 08:00:0	0 08:17:24	05:46:32	1	1	04:37:47	0.80			3	05:03:41	0	0.88
	332 08:00:0	0 08:17:50	05:46:06	3	2	04:23:44	0.76		00:50:50	2	04:41:52	0	0.81
3	344 09:00:0	0 09:16:14	04:47:42	0	0	00:00:00	0.00		04:47:44	0	00:00:00	0	0.00
3	342 09:00:0	0 09:42:03	04:21:53	3	3	04:12:16	0.96			2	00:00:00	0	1.00
3	09:30:0	10:07:35	03:56:21	1	1	02:45:59	0.70			0	00:00:00	0	1.00
3	365 10:00:0	10:08:16	03:55:40	2	2	02:18:20	0.59			3	03:07:19	0	0.79
3	10:00:0	10:09:40	03:54:16	1	1	03:23:33	0.87			1	03:37:19	0	0.93
3	366 11:00:0	11:38:43	02:25:13	2	2	01:15:56	0.52			5	02:13:12	0	0.92
3	06:00:0) 12:44:12	01:19:44	1	1	01:18:20	0.98		-	0	00:00:00	0	1.00
3	11:00:0	13:29:44	00:34:12	0	0	00:00:00	0.00			1	00:32:52	0	0.96
3	13:00:0	13:32:26	00:31:30	0	0	00:00:00	0.00			1	00:30:11	0	0.96
BLS	Units												
4	190 07:30:0	08:46:26	1.05:17:30	18	10	10:43:07	0.37	1	00:53:28	5	12:30:40	6	0.43
3	341 06:00:0	0 06:04:29	07:59:27	3	2	04:54:59	0.62			1	05:36:07	0	0.70
3	07:00:0	0 07:11:12	06:52:44	2	2	01:39:03	0.24			2	06:20:02	1	0.92
3	348 07:30:0	07:38:55	06:25:01	2	2	01:53:12	0.29			3	06:23:29	0	1.00
4	41 08:30:0	0 08:40:27	05:23:29	2	2	03:50:31	0.71			0	00:00:00	0	1.00

Online Compliance Utility (OCU)

HANCEME
MODULE

	CU Reports									
ŧ	Late - Review 0000157902 ×									
	DATE/TIME 7/16/2018 5:43:58 PM	INCIDENT # 0000157902	RESPONSE # 07162018-8258811	A	ADDRESS LOCATION					
	∧ Flow									
	Owner:	Status:		Exemption Reason:						
	[No Owner]	[Review]	\$	[No Exemption Reason]						
	Late Reason 1:	Late Reason 2:								
	No Late Reason	♣ No Late Reason	\$							
	∧ Response Info & Adjustments									
		Initial	Final		WATEH .					
	Clock Start Time	7/16/2018 5:43:58 PM	7/16/2018 5:43:58 PM	I	ncident Drill-down					
	Clock Stop Time	7/16/2018 5:56:01 PM	7/16/2018 5:56:01 PM		fwCust_ID					
	Response Time Standard	00:11:59	00:11:59	1	RunNo DateRec Unit Grid					
	Response	00:12:03	00:12:03	1	Location					
	Overage	00:00:04	00:00:04		Priority InitBy					
	Area/Zone	Test Connumber States		\$	InitByDesc TransFrom					
	Priority	Priority 1	Priority 1	\$	TransFromDesc					
			RESET		TransTo					
					TransPri PatCond PatCondDesc Received Dispatched					
					Enroute OnScene					

OCU Key Benefits:

- · Real-time access to calls outside defined standards
- · Web-enabled, late run call analysis completed anywhere
- Simple, universal tool designed for both Authority and Provider
- · Automated rules designed to simplify and streamline the process
- 3rd party transparency
- · Save time, money and resources
- A suite of OCU reports

" ...OCU has truly revolutionized our ambulance response compliance program." "Before we implemented our FirstWatch OCU, I would spend 20-30 hours every month processing the late responses and exemption requests which included manually verifying the call information and personally calculating the penalty amounts by ambulance zone and then individually generating 10 invoices that were delivered via U.S. mail. Due to the time commitment, we were often 30-45 days behind in completing the process and getting the invoices sent out. Now, with OCU, I spend an hour or two a few times a month to go through the current late responses and exemption requests. FirstWatch generates the invoices and they are emailed to providers directly, which has reduced our invoicing process as much as 45 days. FirstWatch OCU has truly revolutionized our ambulance response compliance program."

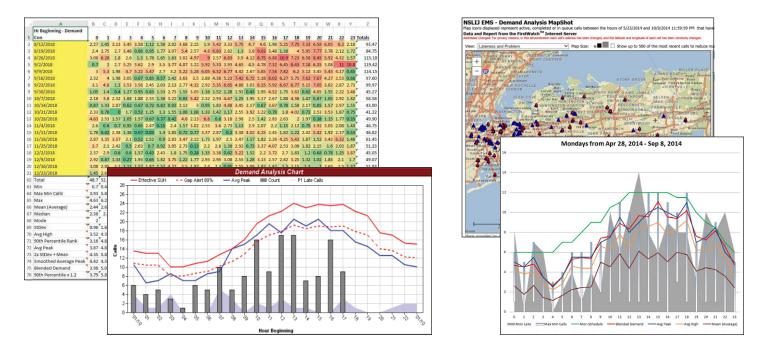
Steve Carroll, EMS Administrator, Ventura County, CA

Demand, Consumption, and Analysis



One of the many challenges faced by agencies is making the most effective use of the resources they have available. A common way to forecast needs for staffing, scheduling and resource deployment is to analyze historical patterns of demand for service, both by day of week and hour of day and geographically. This time proven approach is referred to as "Demand Analysis."

Variations of this approach have been used for more than 20 years all around the world. In the past, the process of compiling and creating a complete temporal and geographic Demand Analysis was tedious, time-consuming, and too often, very manual.

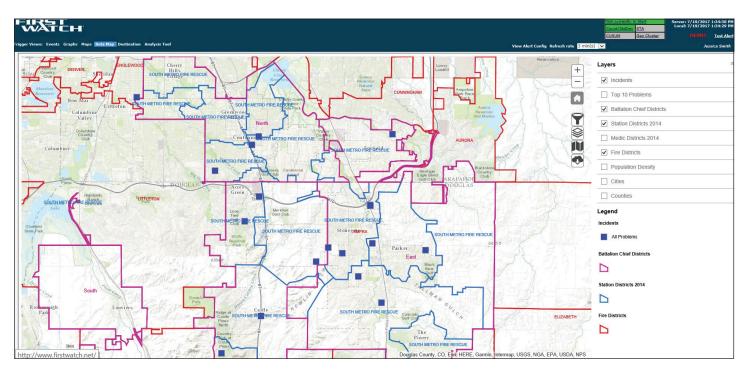


FirstWatch has created a real time, dynamically updated and calculated Demand Analysis Module which offers views of select customer data. The Demand Analysis calculations in the data can be downloaded into an Excel spreadsheet, with all formulas intact. We're working to enhance the Demand Analysis module by adding a Demand Consumption-based approach, as well as addressing geographical demands by creating up-to-the minute problem/solution maps for each hour of the day and each day of the week and/or other user-defined intervals.

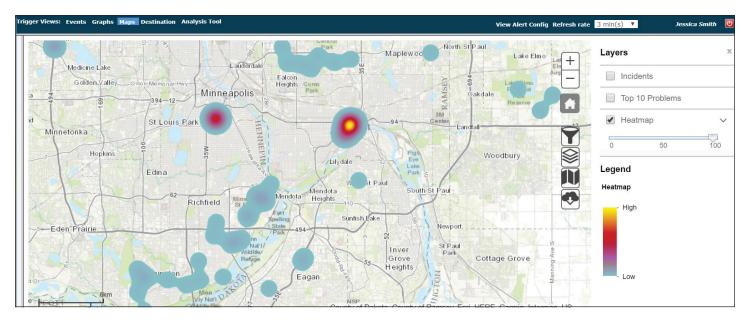
Microsoft Excel - Downloa	dDA-2	0060											
Eile Edit View Insert	F <u>o</u> rma	t <u>T</u> o	ols 🖸	<u>ata</u>	<u>W</u> indo			do <u>b</u> e P			_ & ×		
i 🗅 💕 🖬 🔓 🔒 🖨 🕰	ABC 🕯	S X		° -	V	i) -	(Ci -	8	Σ -	Z	A	В	C
	=Sun!Y	1	Hr Ending	1									
A	В	С	D	E	F	G	Н		J		¥	<u>_</u>	4
1 Hr Ending	<u>1</u> 6	27	<u>3</u> 4	<u>4</u> 3	<u>5</u> 3	<u>6</u> 3	7	<u>8</u>	9	22	Total	145	110
2 20060501		7	4	3				- 11	8	23	Min	2	1
3 20060508 4 20060515	6 2	2	4	3	3	0	6 8.	2	3 7	24	Max	15	13
22 Total	145	110	119	83	59	79	101	122	147	25	Mean	7.25	5.5
23 Min	2	1	1	0	0	0	0	0	3	26	Median	6	f
24 Max	15	13	12	7	7	9	8	11	16	27	Mode	6	
25 Mean	7.25	5.5	5.95	4.15	2.95	3.95	5.05	6.1	7.35			-	
26 Median	6	5	5	4	3	3	5.5	6	6.5	28	StDev	3.32	2.93
27 Mode	6	5	4	3	3	3	6	6	6	29	Avg High	10.6	8.6
28 StDev 29 Avg High	3.32 10.6	2.93	3.07	223	1.82	2.42	1.96	3.08	3.53 11.8	30	90th Percentile Rank	12	9.1
30 90th Percentile Rank	12	9.1	10/2	7	5	7.1	7.1	11	11.4	31	Avg Peak	13.5	11.5
31 Avg Peak	13.5	11.5	11	7	6	7.5	7	11	13.5	32	2x StDev + Mean	13.9	11.4
32 2x StDev + Mean	13.9		12.1	8.22	6.59	8.78	8.97	12.3	14.4				11.4
33 Smoothed Average Peak	12.9	11.8	10.3	7.6	6.5	71		10.7	13.8	33	Smoothed Average Peak	12.9	11.8
34 Blended Demand	12.9	10.8	10.9	7.61	6.03	7.66	7.99	11.3	13.2	34	Blended Demand	12.9	10.8
Mon Tue Wed	/ Thu ,	/ Fri /	Sat /	Sun /	(ISER	A /	<			Ш			
Ready											NUM		

NEW: Mapping Features

Toggle on/off to layer different mapping components such as Planning Zones, Station Districts, Fire Districts, Population Density, Cities and Counties. Display calls by Top 10 Problems in order to see what/where your most common calls are happening.



Heat maps with a sliding transparency scale



Fire Operations Analytics Module (FOAM)

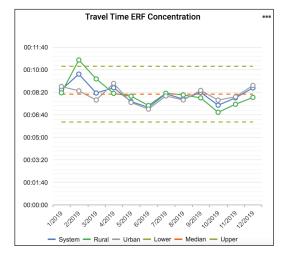


- The Fire Operations and Analytics Module provides fully automated and dynamic reporting of your Fire Department's Operational Metrics and Key Performance Indicators.
- Full integration with your Department's Standards of Cover and Strategic Planning Documents.
- Provides GIS/Mapping display capabilities to illustrate community risks, demands and coverage.
- Data is integrated into a true Quality Improvement framework that tracks performance over time and identifies trends that require attention.
- Suite of dynamically updated and auto-distributed reports on operational performance factors including turnout and travel times and demand for services.

Every Record. In Real Time. Automat				1/2015 07:30:0	Se Perfor 0 to 01/01/2020 derate, High, S	07:29:59			
Fire Supress	sion - 90th Percen	tile Times	2015 - 2019	2019	2018	2017	2016	2015	Benchmark
Alarm Handling	Pick-up to Dispatch	Urban	02:15	01:53	02:17	02:26	02:17	02:16	01:00
Turnout Time	Turnout Time 1st Unit	Urban	01:31	01:29	01:28	01:34	01:32	01:29	01:20
Travel Time	Travel Time 1st Unit Distribution	Urban	07:49	07:40	07:24	07:56	08:07	07:44	04:00
Traver Time	Travel Time ERF Concentration	Urban	08:35	08:19	08:05	08:52	08:48	08:42	08:00
	Total Response	Linkson	08:51	08:45	08:33	09:08	08:58	08:44	05:20
Total Response	Time 1st Unit Distribution	Urban	n = 14,459	n = 2,625	n = 2,771	n = 3,176	n = 2,983	n = 2,904	
Time	Total Response Time ERF	Urban	09:33	09:17	09:08	09:52	09:37	09:40	09:20
	Concentration	orban	n = 13,384	n = 2,440	n = 2,571	n = 2,949	n = 2,758	n = 2,666	

very Record. In Rea	_	tomatically	.		Servic		[ion(s):	Date R 1, 10,	ange: 4 Ca	01/01. II Type	/2020 e(s): F	07:30: ire, EN 108, 2	00 to (//S, Ha	02/01/2 azMat,	2020 0 Bomb	7:29:5 , Publi	9 c Assi	st, Oth		9					
	Hour of Day														Í.	1									
DOW	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	Total :
Sunday	38	57	27	30	35	39	35	33	34	50	65	42	48	51	64	59	70	78	62	60	63	52	50	49	1,191
Monday	49	40	32	26	16	26	39	42	61	57	75	81	69	57	69	89	77	77	68	53	48	51	45	47	1,294
Tuesday	29	50	19	37	27	47	45	46	41	64	81	76	47	96	86	83	61	68	79	79	60	46	45	40	1,352
Wednesday	26	28	29	19	42	43	36	54	73	73	57	66	85	64	96	86	91	115	99	84	80	72	64	38	1,520
Thursday	39	60	27	29	41	41	32	41	80	92	91	112	85	109	94	85	87	108	104	85	79	71	58	48	1,698
Friday	44	34	34	31	34	42	35	53	80	67	66	70	91	89	83	101	98	113	93	81	83	84	86	44	1,630
Saturday	81	49	32	46	39	27	32	45	59	56	54	67	59	66	69	57	70	64	59	45	61	60	69	44	1,31
Total 1	306	318	200	218	234	265	254	314	428	459	489	514	484	532	561	560	554	623	564	487	474	436	417	310	10.00

	Real Time. Aut	н.	Shi		Range: 01	/01/2020	O 07:30:00	to 02/01	1/2020 07		gent	
an a			1		2		3	4		5		
Station	Unit	Resp	%	Resp	%	Resp	%	Resp	%	Resp	%	
1	B1	11	14.67%			4	5.33%	7	9.33%	3	4.00%	
	E1	163	65.99%			7	2.83%	16	6.48%	1	0.40%	
	E201	155	60.08%			12	4.65%	13	5.04%	2	0.78%	
	R1	223	83.21%			5	1.87%	3	1.12%	1	0.37%	
	R201	237	89.43%			5	1.89%	7	2.64%			
	R301	215	85.32%			3	1.19%	7	2.78%			
	T1	136	59.13%			8	3.48%	14	6.09%	2	0.87%	
2	B10			4	16.67%					1	4.17%	
	E2			163	83.16%							
	R2			166	78.30%							
3	CBRN3	4	28.57%			5	35.71%					
	E3	30	15.08%			109	54.77%			20	10.059	
	R3	14	8.59%			93	57.06%			18	11.049	



Academy Analytics[™] for ProQA Data



With Academy Analytics you can:

- Monitor your center's ProQA performance, in near real-time, from anywhere!
- Instantly identify outlier cases for review.
- Provide teammates with a dashboard that shows how they are doing on the things that matter.
- Know when there is an increase in aborted or overridden calls.
- · Balance the workload to help manage employee stress.
- · Coach your team to optimal performance.
- Potentially increase the number of cardiac arrest patients that survive.







Get up-to-date alerts via email!

What's really happening with the flu this season, Ebola, and the opioid crisis? What do our EMS providers need to know about emerging or re-emerging diseases like the novel coronavirus COVID-19, Measles, Ebola, Valley Rift fevers, Lassa, or Marburg? Between news outlets competing for the most exciting headline and social media posts hoping for hundreds of likes, it's hard to know what really matters and what you really need to pay attention to in the world of disease outbreaks, public health crises, and public safety health and protection. FirstWatch's Health Intelligence page is the place you can go for up to date, reliable information about global emerging health issues. Sign up for free, and we will alert you via email when something new is posted.

Sign up today

www.firstwatch.net/hi/sign-up

or visit here: www.firstwatch.net/hi

Health Intelligence Public Safety-Specific Information on Emerging Health Issues This page was last updated on May 10, 2021. Sign Up for HI Updates "FirstWatch alerted our supervisors of a potential COVID-19 exposure BEFORE the paramedics arrived on scene." Click for full quote.. SEASONAL INFLUENZA (FLU) COVID-19 **OVERDOSES / OPIOIDS** Public Safety-oriented information and resources on Contains resources related to awareness and mitigation Provides info on upcoming & current seasonal flu(s) & the Novel Coronavirus COVID-19. All COVID-19 items of opioids and overdoses in response to this nationwide reported influenza-like illness (ILI), using reports from various public health, government & other resources. previously posted in other sections have been but often local crisis. consolidated here for convenience. Proudly assisting more than 160 customer partners with real-time COVID-19 data analysis & automated alerting, so far...with more requests coming in daily. Offload Delays and Diversions During COVID -FirstWatch Recommendations for Surveillance of EMS **Data for Opioid Overdoses** Webinar in our Conversations That Matter series Updated April 10, 2019 - Recording Available **Offload Delays and Diversions During COVID -**PoliceOne article: "How biosurveillance turns opioids-Seasonal Flu – So NOT in the News in 2020-2021 Webinar in our Conversations That Matter series related data into actionable intelligence April 26, 2021 - Recording Available November 18, 2018 Seasonal Flu in the Midst of COVID-19 **Snohomish County, Washington Shares Their** Synthetic Opioids/Fentanyl and Fentanyl Analogs September 24, 2020 South County Fire COVID-19 Procedure Manual April 9, 2018 Paramedics Chiefs of Canada: COVID-19 Situation For Week #8 Flu & ILI Decreased for 2nd Week but Report (Update) | Recording May 20th Pinnacle 2017 Session: How EMS Can Fight the Opioid Pediatric Deaths at Record Rate May 20, 2021 **Overdose Crisis** March 3, 2020 November 29, 2017 2019/2020 Seasonal Influenza Overview [&] (Janssen) COVID-19 Vaccination Restart 2019/2020 Seasonal Influenza Resources May 10, 2021 CDC Enhanced State Opioid Overdose Surveillance CDC State and Territorial Regions Map 2017-2018 Weekly U.S. Interactive ILI Activity Map FDA & CDC Recommend Pause in Johnson & CDC/Government Resources for Opioid Programs and Weekly U.S. Interactive Flu Activity Map Johnson (I&I) Vaccinations Other Drug-Related Publications 2019-2020 April 23, 2021 Johnson & Johnson's Janssen Vaccine Information March 29, 2021

IN THE NEWS

A quick briefing on outbreaks and other public healthrelated items in the news or reported via public health

OUTBREAKS/EMERGING DISEASES/PANDEMICS

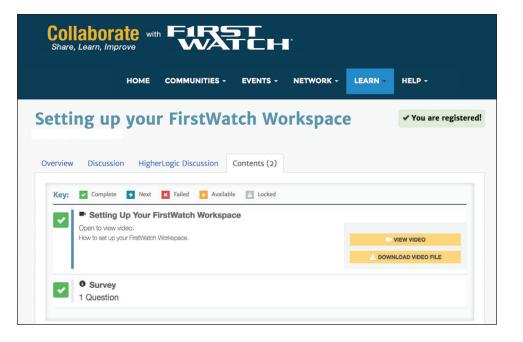
A listing & description of outbreaks of disease, nov

KEEPING YOUR EMPLOYEES SAFE

Contains info & resources to assist in providing for

Share, Learn, Improve on our New Collaborate Site

With FirstWatch Collaborate it will be easy to discuss ideas, share solutions, explore challenges, and more with FirstWatch customers from across the country. You'll be able to share files, ask questions, share your expertise and more.



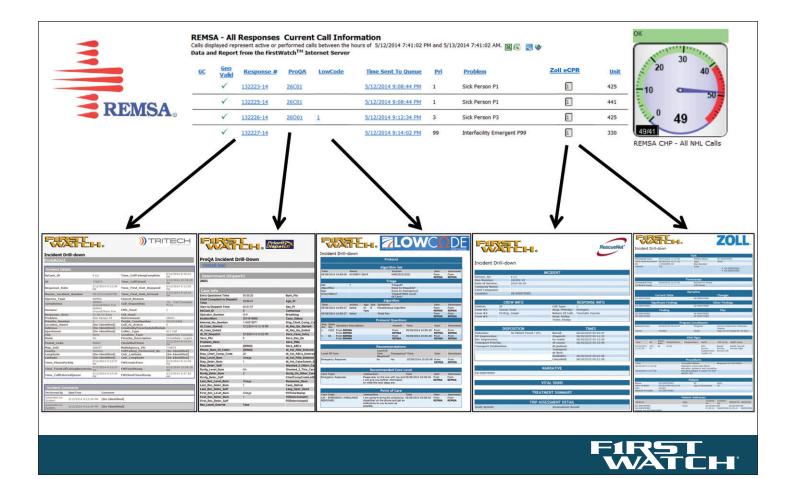


Ever since our inception 20 years ago, FirstWatch customers have talked with each other, tackled shared problems together, and helped each other improve. Several times a week one of us will be talking with someone about an issue and say, "you should really check out what ______ is doing." Here are a few recent examples:

- "You should talk with the folks at ProEMS about how they reduced deaths from opioid overdoses."
- "Heath in Tulsa managed to add over 44 unit hours a day to his system for free by decreasing overall task times and building a culture of trust with their crews, we can connect you."
- "If you're hoping to improve your cardiac arrest resuscitation rate, Chief Grayson and the team from Rialto Fire have made dramatic improvement. I'll introduce you by email."

Would you like to learn how to add a user, make Excel Pivot tables sing, or build an effective quality improvement system? Check out the learning part of FirstWatch Collaborate! We've just started building a library of classes and videos to help you use FirstWatch more effectively and learn leadership principles. We will be adding new things every month.

1 Patient Encounter = 5 Data Sources



REMSA Community Health Early Intervention Team... and the Role FirstWatch Plays

The Regional Emergency Medical Services Authority of Reno, Nevada, a non-profit provider of ground and air ambulance services (and long-time FirstWatch customer), in partnership with Renown Medical Group, the University of Nevada-Reno School of Community Health Sciences, the Washoe County Health District, and the State of Nevada Office of Emergency Medical Services, received an award to create a Community Health Early Intervention Team (CHIT) to respond to lower acuity and chronic Disease situations in urban, suburban, and rural areas of Washoe County, Nevada.

FirstWatch is monitoring REMSA's CAD, ProQA, two ePCR sources and Low Code data source to provide near real-time data and actionable information that can be used to reach the project's goals of reducing: number of non-emergency visits, unreimbursed emergency department costs, hospital admissions, hospital readmissions, hospital stay times, and ambulance transports.

FirstWatch Mobile App for iOS and Android

Real-Time Dashboards for:

- Situational Awareness
- Response Times and KPIs
- Clinical and Operational Performance
- Automated Alerting
- Regional Data Aggregation and Sharing
- Bioterrorism
- Pandemic/Public Health Surveillance





Core System Feature

Google play

Real-Time Alerts

Android Devices



DOWNLOAD the FirstWatch App for iPhone, iPad, Android Phone, and Tablet



Contact one of our team members today!

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Phil Davis - Regional Manager



pdavis@firstwatch.net D: 727.330.3411 C: 727.432.2312

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Terry Fitch - Director of Sales



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Marc Baker - Vice President & Partner



mbaker@firstwatch.net D: 760.658.9848 C: 619.977.4785

Contact us Today for a Live Demo: sales@firstwatch.net 760.943.9123 **FirstWatch.net**

