

27 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.





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





Triggers



Alerts







Mobile App



ESRI Maps



Interactive Data Visualization (IDV)

FirstPass® (Over 22 Million Records Processed)



Risk IDentification for Emergency Services (RIDES)



Performance Plus



System
Enhancement
Modules



Fire Operations
Analytics/Accreditation
Module (FOAM)



Online Compliance Utility (OCU)



Demand Analysis



Custom Reports





Transfer of Care (TOC)



Hospital Status Dashboard





Resource Planner[™]





About FirstWatch

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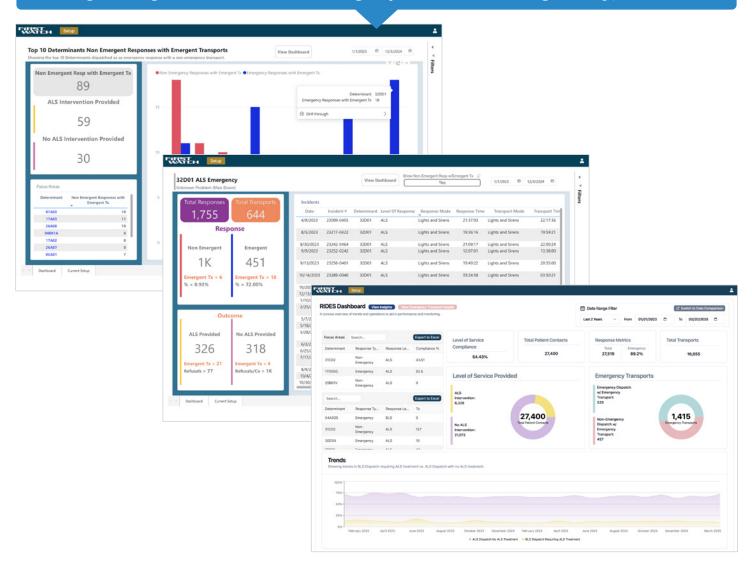
Risk IDentification for Emergency Services (RIDES)



RIDES is an interactive, data-driven tool that helps Public Safety leaders:

- Safely reduce the use of lights and siren response
- Test the effects on your system of alternative system designs
- Accurately predict the outcomes of schedule, crew, or response changes
- Use your data to analyze the need for ALS vs. BLS resources
- Evaluate response assignments for efficiency and effectiveness
- Is my EMD or Priority Dispatch system working the way we think it is?
- Change the variables in your system and evaluate the impacts unit types, medications, response priorities

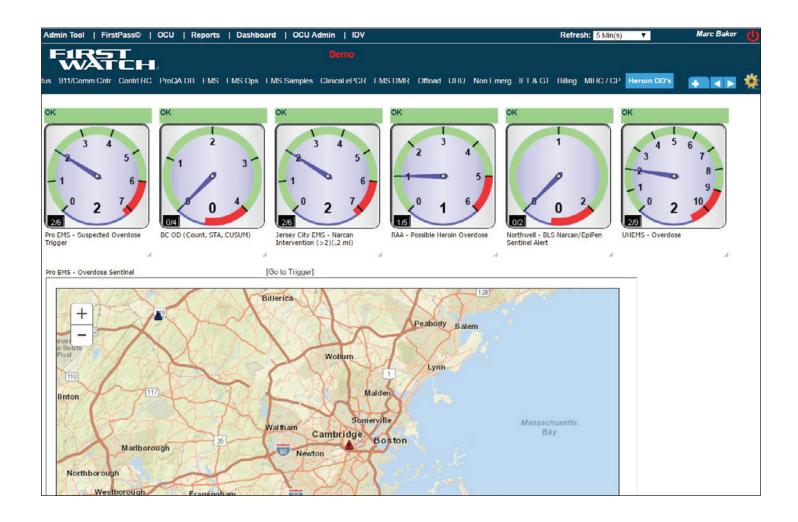
Getting the right resources to the right problem in the right way, with RIDES

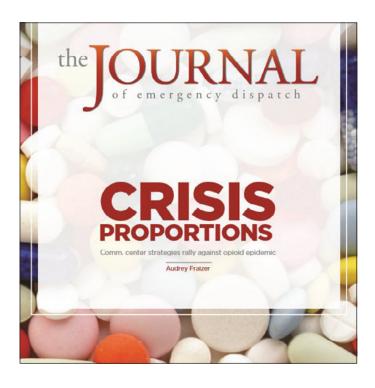


Test your assumptions, evaluate alternatives, and provide data-driven solutions for your community.



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/



For 25 years FirstWatch has provided real-time, automated situational awareness visualizations & alerts for our 9-1-1, Law, Fire, EMS, Public Health, and Homeland Security customer partners (across the US).



HELPING MORE **HELPERS**

Expand your FirstWatch data view by including other regional partners

We're Helping MORE Helpers than ever before! Our FirstWatch customer partners are strategically leveraging their investment in FirstWatch tools and technology by inviting other Public Safety agencies (dispatched via the same CAD, or using same ePCR, RMS, or ProQA data systems, or even completely disparate CADs, or different ePCR, RMS, or other data systems). Using FirstWatch, all teams can share data & benefit via automated, real-time situational awareness, data visualizations, and automated alerts across the entire operational area, region, or even State!



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.

> For more IDV FAQs, please visit: firstwatch.net/idv

Manatee County EMS Customer Spotlight

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.

Sean Dwyer cial Operations see County EMS



Assistant Chief, Special Operations Manatee County EMS



Cypress Creek EMS Customer Spotlight

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

Frequent Patients / Hot Spots

PGFD - ePCRs - Frequent Patient Current Call Information

Geo Valid CAD	Time Sent To Queue	Box #	<u>First Name</u>	<u>Last Name</u>	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	
✓	2/5/2017 11:56:35 PM		[Deidentified]	[Deidentified]	1	
✓	2/6/2017 12:01:44 AM		[Deidentified]	[Deidentified]	4	1
✓	2/6/2017 1:28:51 AM		[Deidentified]	[Deidentified]	3	
√	2/6/2017 1:59:52 AM		[Deidentified]	[Deidentified]	1	
1	2/6/2017 2:19:14 AM		[Deidentified]	[Deidentified]	14	1

		O PGFD - e	PCRs - Freque	ent Patient - Goo	gle Chrome
		■ Secure	https://sa	nbsubscriber.f	irstwatch.net/W
u)		Prehospi		nt Care Rej	
	ı		Previous	Patient Past Y	ear Same DOB
o	ı	INC_DT	Incident ID	Primary Impression	First Name La
	9	01/18/2017 03:37:30	6936150	Altered Mental Status	DE-IDENTIFIED DE
		12/26/2016 14:02-59	6826400	Diabetic Symptoms (Hypoglycemia)	DE-IDENTIFIED DE
		12/ :8/2016 07:03:56	6794038	Diabetic Symptoms (Hypoglycemia)	DE-IDENTIFIED DE
		12/14/2016 09:55:35	6781013	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	6733310	Diabetic Symptoms (Hypoglycemia)	DE-IDENTIFIED DE
		11/08/2016 02:39:46	6646629	Diabetic Symptoms (Hypoglycemia)	DE-IDENTIFIED DE
1		10/31/2016 14:06:33	6618639	Diabetic Symptoms (Hypoglycemia)	DE-IDENTIFIED DE
		10/09/2016 01:23:27	6538038	Diabetic Symptoms (Hypoglycemia)	DE-IDENTIFIED DE
		09/09/2016 10:37:44	6425159	Diabetic Symptoms (Hypoglycemia)	DE-IDENTIFIED DE
		08/24/2016	6365585	Altered Mental	DE-IDENTIFIED DE

Status

Diabetic

Symptoms (Hypoglycemia) DE-IDENTIFIED DE

Critical / Special Incidents

AHEMS - Critical Incidents Current Call Information

Calls displayed represent active or performed calls between the hours of 1/1/2017 and 2/6/2017 11:59:59 PM.

Data and Report from the FirstWatchTM Internet Server

13:58:16

03:15:14

08/19/2016

6345784

INFO: MATCHING PROBLEM TYPES: 07 Burns / Explosions 14 Drowning / Diving / SCUBA 22 Industrial / Machine Accid. 27 Stab/ Gunshot / Penetrating AND MATCHING DETERMINANTS: 7% 14C% 14D% 14E% 22% 27B% 27D% OR 4 OR MORE UNITS ARE ON SCENE OR HAS BRAIN MATTER IN THE PCR NARRATIVE OR PCR HAS PT AGE <= 18 WITH PRIMARY/SECONDARY IMPRESSION OF CARDIAC ARREST. EXCLUDES: TEST, MIS-ASSIGNED, DUPLICATE CALLS AND PRIORITY 99 CALLS, SEA ALS Special Event Ded., SEA ALS Special Event Nondedic

<u>Geo</u> <u>Valid</u>	ePCR	Time Sent To Queue ▲	<u>Pri</u>	Problem	ProQA	Incident #	Address/Location
~	1	1/1/2017 3:31:32 PM	10	27 Stab/ Gunshot / Penetrating	27D04Y	010117-0255	From AHEMS
V	1	1/1/2017 8:52:26 PM	10	27 Stab/ Gunshot / Penetrating	27D02X	010117-0340	From AHEMS
V	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	1/13/2017 5:42:40 AM	10	27 Stab/ Gunshot / Penetrating	27D04G	011317-0056	From AHEMS
√	1	1/14/2017 9:10:22 AM	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
✓	1	1/14/2017 9:10:22 AM	10	27 Stab/ Gunshot / Penetrating	27D05G	011417-0099	From AHEMS



Hospital Status Dashboard



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 - MURRIETA	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		
RIVERSIDE COMMUNITY HOSPITAL	0	4	22:12	35:45
Central Zone Hospitals	Enroute	Arrived	Elapsed - Avg	Elapsed - Max
MORENO VALLEY COMMUNITY HOSPITAL - (AISER	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		Enroute 7/17/2018 8:48:17 AM	(Elapsed) 01:35	Arrived	(Elapsed)	Problem/Nature 1A1 ABD_PN
TS - 9990		arm Rd	, Riverside, CA				
Agency AMR_RC	Unit 4115		Enroute 7/17/2018 8:19:39 AM	(Elapsed) 30:13	Arrived		Problem/Nature 5150 HOLD
EMET VAL	LEY MED	ICAL CE	NTER - 1117 E. DEVO	NSHIRE AVE	, HEMET, CA		
Agency AMR_RC	Unit 5502	TOC	Enroute 7/17/2018 8:00:24 AM	(Elapsed) 11:46	Arrived 7/17/2018 8:12:10 AM	(Elapsed) 37:42	Problem/Nature 12D2 SEIZ_MULTI SEIZ
NLAND VA		IONAL I	MEDICAL CENTER - 36			OMAR, CA	V
Agency AMR_RC	Unit 4460	TOC	Enroute 7/17/2018 8:06:28 AM	(Elapsed) 18:18	Arrived 7/17/2018 8:24:46 AM	(Elapsed) 25:06	Problem/Nature 30B1 TRAUMA_DANG BODY AREA
		SITY ME	EDICAL CENTER - MUR				
Agency	Unit		Enroute	(Elapsed)			Problem/Nature
AMR_RC	4440	TOC	7/17/2018 8:15:54 AM	12:02	7/17/2018 8:27:56 AM		SICK PERSON_26
AMR_RC AMR_RC	4428 4443	TOC	7/17/2018 8:19:09 AM 7/17/2018 8:19:23 AM	16:51 20:23	7/17/2018 8:36:00 AM 7/17/2018 8:39:46 AM		UNKNOWN MEDICAL ASSISTANCE_3: 26B1 SICK_UNK
IVERSIDE	COMMUNI	TY HOS	PITAL - 4445 MAGNOI	LIA AVE, RIV	ERSIDE, CA		
Agency	Unit		Enroute	(Elapsed)			Problem/Nature
AMR_RC	3334	TOC	7/17/2018 8:25:41 AM	04:55	7/17/2018 8:30:36 AM		SICK PERSON_26
AMR_RC	3338	TOC	7/17/2018 8:17:52 AM	23:02	7/17/2018 8:40:54 AM		HEADACHE_18
AMR_RC	3359	TOC	7/17/2018 8:00:55 AM	17:47	7/17/2018 8:18:42 AM		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.

- Hospital Drop R Current - Data between the hours View: Current MTD Last	of 12/1/2015	12:20:41 AM	and 12/1/20				nload to Excel:	B							
		and the same of th	rrent			MTD			Last Mo	principal and the second		Last 30 [Charles Section 1997		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
THE RESERVE THE RE	1	0	100.00	00:00:28	1	0	100.00	155	107	30.97	155	107	30.97	1512	103
	8	2	75.00	00:22:24	8	2	75.00	301	147	51.16	301	147	51.16	3990	207
	7	3	57.14	00:32:09	7	3	57.14	382	226	40.84	382	224	41.36	4632	279
	4	2	50.00	00:40:20	4	2	50.00	138	89	35.51	142	91	35.92	1501	110
	18	9	50.00	00:34:08	20	11	45.00	1313	962	-	1314	963	26.71	13998	1024
	6	3	50.00	00:36:31	6	3	50.00	414	206	50.24	413	203	50.85	4184	234
Hospital Drop	87	52		00:37:28	-	55	38.89	_	3886	-	5894	3885		-	
	11	7		00:43:28	-	7	36.36	_	497		-		-	-	
	19	14	26.32	00:44:19	19	14	26.32	1181	879	25.57	1184	884	25.34	12973	982
	9	8		00:40:50		8	11.11	674	396	41.25	668	396	40.72	7370	483
	0	0		00:00:00	_	0	27.7	170	121		161	115	28.57	1804	126
	1	1	Charles and the Charles and th	01:19:34		2	0.00	172	138	19.77	168	136		2086	
	2	2	A CONTRACTOR OF THE PARTY OF TH	00:33:03	-	2	0.00	146	68	1074,012677	-	70	150000		
	1	1	0.00	00:32:24	1	1	0.00	95	50	47.37	94	51	45.74	1006	54

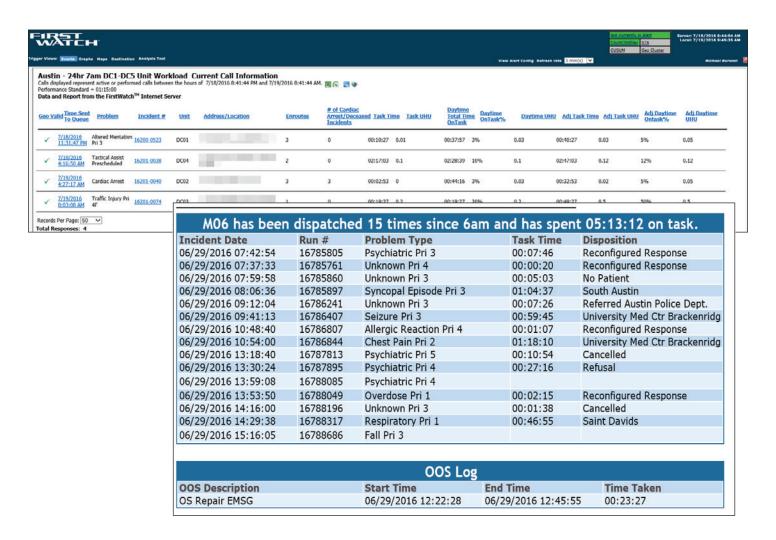
Example Performance Plus Triggers:

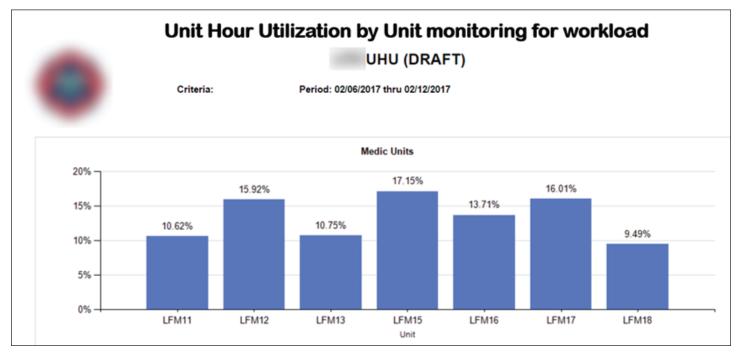
- Call processing times performance by individual call taker
- Dispatch assignment performance by individual dispatcher
- Total call processing performance performance by individual
- Call-taker/dispatcher performance by priority

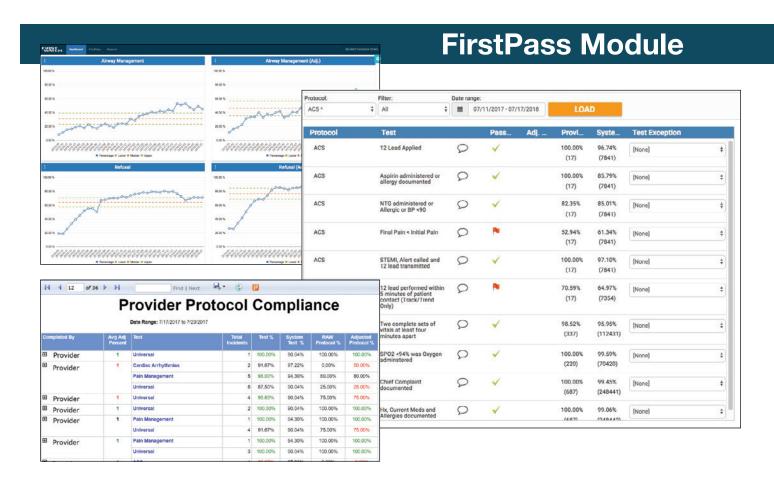
- Call-taker call completeness/accuracy
- Geovalidation by call-taker
- Call-taker overides
- 1st unit assignment accuracy
- Unit/crew times performance by unit, by station, by battalion, and individual

Workload Monitoring

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









FirstPass® by the Numbers



FirstPass Module

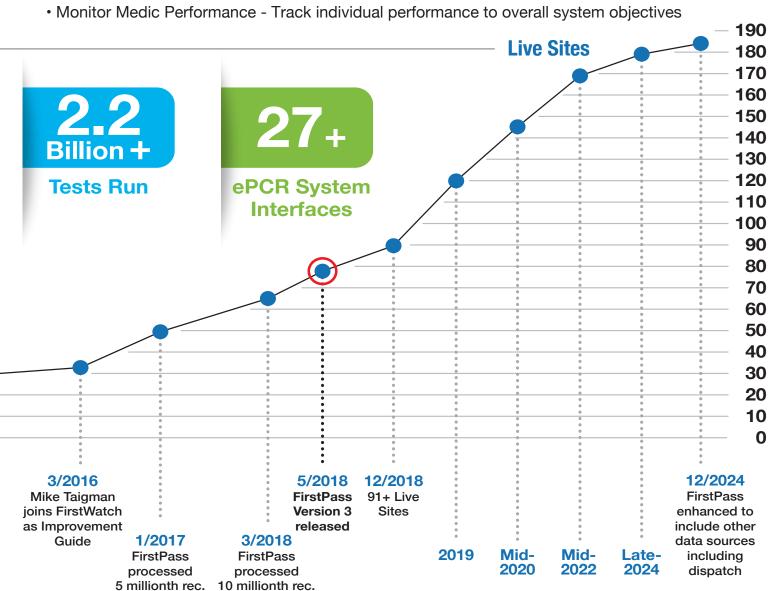


Automates Performance Improvement

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

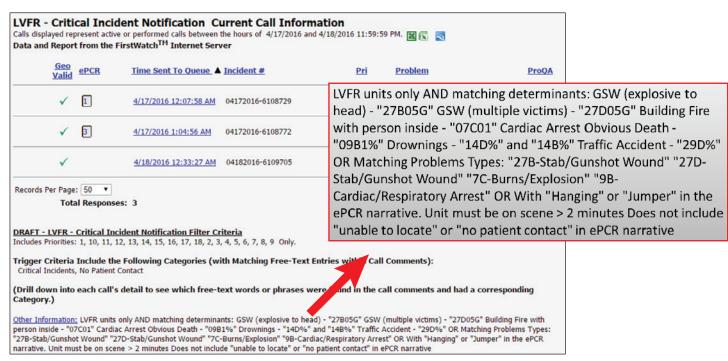


Telecommunicator & Provider Wellness

Critical Incident Notification

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





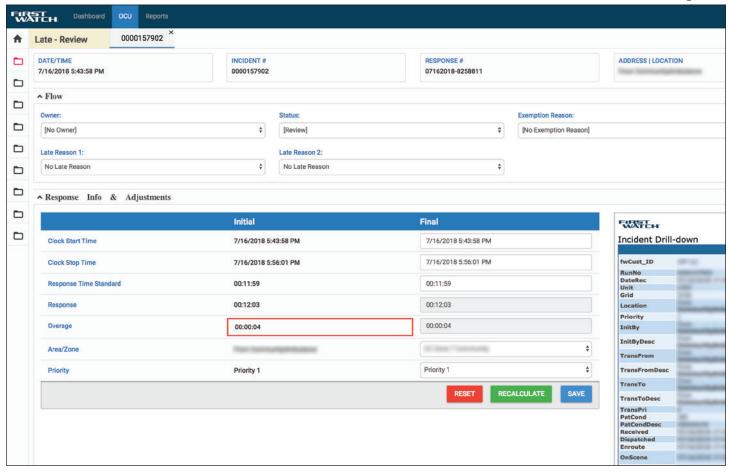
Workforce Safety

Monitor unit activity in real-time.

Unit 8	Scheduled Start Time	Actual Start Time	Total Time on Duty	# of Responses	# of Arrivals	Total Task Time	Task Tin UHU	ne	# of Times Out of Service	Out of Service Time	# of Post Movements	Time not at Post	@ Post > 30 Min	Active Tim	e UHL
ALS Units															
3333	05:00:00	05:17:52	08:46:04	4	4	04:43:17	0.54		1	00:34:57	- 6	06:30:03	0	0.74	
3334	05:30:00	05:29:54	08:34:02	5	2	05:13:53	0.61		1	00:51:17	4	06:15:15	0	0.73	
3331	05:30:00	05:30:43	08:33:13	4	3	05:56:19	0.69		1	00:47:26	6	07:43:04	0	0.90	
3385	06:00:00	06:23:05	07:40:51	3	3	05:47:11	0.75				6	06:48:45	0	0.89	
3340	06:00:00	06:43:44	07:20:12	6	5	04:11:53	0.57				9	05:26:22	0	0.74	
3336	06:30:00	06:44:34	07:19:22	3	3	03:32:27	0.48		1	00:40:47	4	04:21:10	0	0.59	
3101	06:30:00	05:46:18	07:17:38	3	3	05:40:41	0.78			**	0	00:00:00	0	1.00	
3338	07:00:00	07:03:25	07:00:31	4	4	03:49:44	0.55				7	05:26:09	1	0.78	
3317	07:30:00	07:30:43	06:33:13	7	2	02:29:57	0.38				8	05:09:15	1	0.79	
3339	07:30:00	07:53:44	06:10:12	3	3	04:09:10	0.67			**	6	05:37:21	0	0.91	
3343	06:00:00	08:01:01	06:02:55	0	0	00:00:00	0.00		2	05:51:38	0	00:00:00	0	0.03	
3107	08:00:00	08:02:46	06:01:10	3	3	05:40:46	0.94				0	00:00:00	0	1.00	
3364	08:00:00	08:03:39	06:00:17	2	1	02:22:00	0.39				4	02:54:27	0	0.48	
3327	08:00:00	08:17:24	05:46:32	1	1	04:37:47	0.80				3	05:03:41	0	0.88	
3332	08:00:00	08:17:50	05:46:06	3	2	04:23:44	0.76		1	00:50:50	2	04:41:52	0	0.81	
3344	09:00:00	09:16:14	04:47:42	0	0	00:00:00	0.00		1	04:47:44	0	00:00:00	0	0.00	_
3342	09:00:00	09:42:03	04:21:53	3	3	04:12:16	0.96				2	00:00:00	0	1.00	
3103	09:30:00	10:07:35	03:56:21	1	1	02:45:59	0.70				0	00:00:00	0	1.00	
3365	10:00:00	10:08:16	03:55:40	2	2	02:18:20	0.59				3	03:07:19	0	0,79	
3104	10:00:00	10:09:40	03:54:16	1	1	03:23:33	0.87				1	03:37:19	0	0.93	
3366	11:00:00	11:38:43	02:25:13	2	2	01:15:56	0.52				5	02:13:12	0	0.92	
3102	06:00:00	12:44:12	01:19:44	1	1	01:18:20	0.98				0	00:00:00	0	1.00	
3113	11:00:00	13:29:44	00:34:12	0	0	00:00:00	0.00				1	00:32:52	0	0.96	
3108	13:00:00	13:32:26	00:31:30	0	0	00:00:00	0.00				1	00:30:11	0	0.96	
LS Units						10									
4490	07:30:00	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	
3341	06:00:00	06:04:29	07:59:27	3	2	04:54:59	0.62	ă		00.33.20	1	05:36:07	0	0.70	ă
3302	07:00:00	07:11:12	06:52:44	2	2	01:39:03	0.24	ä			2	06:20:02	1	0.92	ä
3348	07:30:00	07:38:55	06:25:01	2	2	01:53:12	0.29	ŏ			3	06:23:29	0	1.00	ă
4441	08:30:00	08:40:27	05:23:29	2	2	03:50:31	0.29	ä			0	00:23:29	0	1.00	-

Online Compliance Utility (OCU)





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."

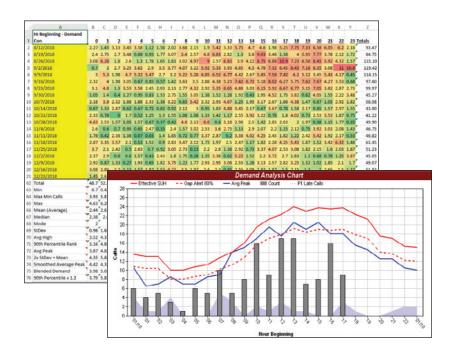
- Steve Carroll, EMS Administrator, Ventura County, CA

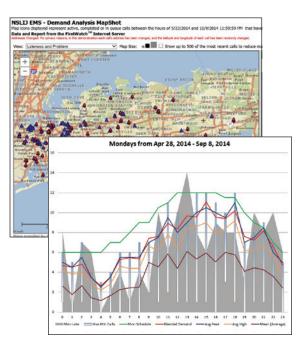
Demand, Consumption, and Analysis



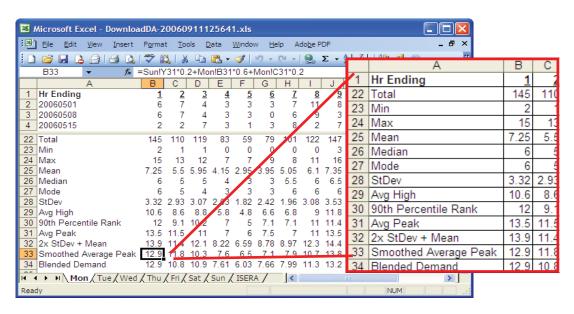
One of the many challenges faced by agencies is making the most effective use of the resources they have available. A common way to forecast needs for staffing, scheduling and resource deployment is to analyze historical patterns of demand for service, both by day of week and hour of day and geographically.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



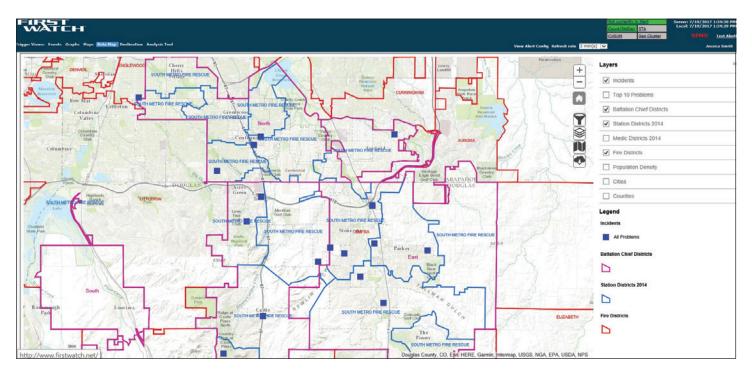


FirstWatch has created a real time, dynamically updated and calculated Demand Analysis Module which offers views of select customer data. The Demand Analysis calculations in the data can be downloaded into an Excel spreadsheet, with all formulas intact. We're working to enhance the Demand Analysis module 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.

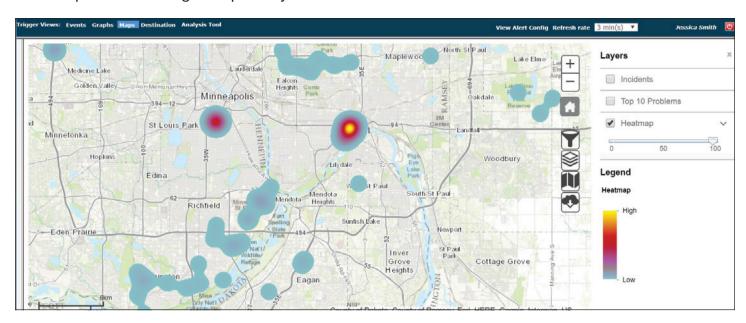


NEW: Mapping Features

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.



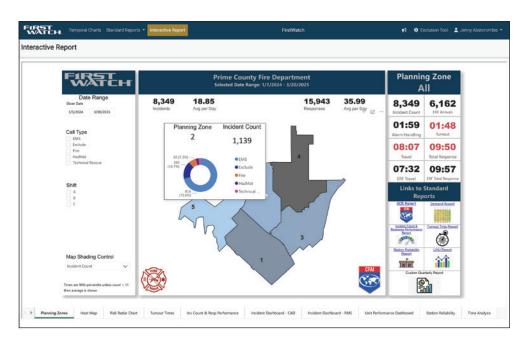
Heat maps with a sliding transparency scale



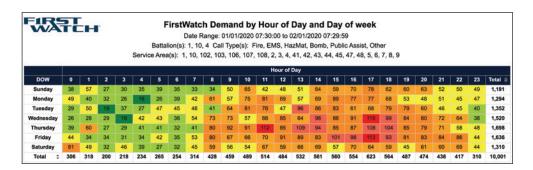
Fire Operations Analytics Module (FOAM)



- 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.



FURSTE	Annual Compliance Report Criteria: 01/01/2019 to 12/31/2020 Shift(s): A, B, C Battalion(s): 1 Service Area(s): 1, 3, 4, 8, 10, 106, 108												
Fire - Critical - 90th Percentile 2019 - 2020 2020 2019 Benchmark G													
Alarm Handling	Pick-up to Dispatch	Urban	02:06	01:39	03:00	01:30	00:36						
Turnout Time	Turnout Time 1st Unit	Urban	00:43	00:37	01:10	01:20	00:37						
Travel Time	Travel Time 1st Unit Distribution	Urban	03:49	05:15	03:19	04:00	00:11						
Traver Time	Travel Time ERF Concentration	Urban	05:21	05:09	05:30	08:00	02:39						
	Total Response Time 1st Unit	Urban	05:20	05:52	04:39	06:30	01:10						
Total Response	Distribution	Urban	n = 19	n = 10	n = 9								
Time	Total Response Time ERF	Urban	05:54	05:16	06:40	10:30	04:36						
	Concentration	O.Baii	n = 16	n = 7	n = 9								



Academy Analytics™ for ProQA Data

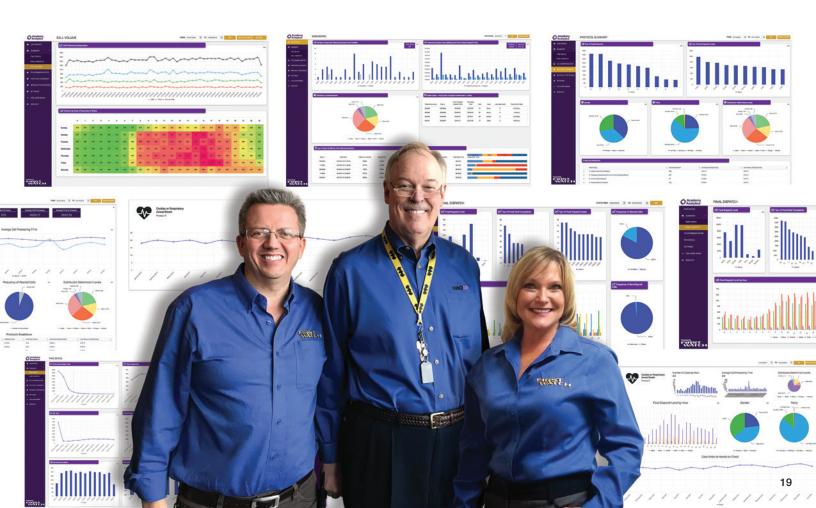


With Academy Analytics you can:

- 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.







FirstWatch Health Intelligence

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 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** 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) **EBOLA OVERDOSES / OPIOIDS** Provides info on upcoming & current seasonal flu(s) & Provides info on past, current, and upcoming Ebola Contains resources related to awareness and reported influenza-like illness (ILI), using reports from outbreaks, using reports from various public health, mitigation of opioids and overdoses in response to this various public health, government & other resources. nationwide but often local crisis. government & other resources. Intro to Seasonal Influenza (Flu) for 2022-2023 EMS1-Ebola virus disease Sudan Strain emerges in FirstWatch Recommendations for Surveillance of **EMS Data for Opioid Overdoses** Seasonal Influenza Resources for 2022 & 2023 October 25, 2022 Updated April 10, 2019 Weekly U.S. Interactive ILI Activity Map Be Careful with Fentanyl but Don't Be Afraid to Ebola (Sudan strain) Outbreak in Uganda October 21, 2022 Updates for Seasonal Influenza (Flu) for 2022-2023 November 1, 2022 November 9, 2022 Ebola in Guinea & the DRC Update PoliceOne article: "How biosurveillance turns March 15, 2021 Intro to Seasonal Influenza (Flu) 101 for 2021-2022 opioids-related data into actionable intelligence December 7, 2021 New Ebola Outbreak in the Democratic Republic of the Seasonal Flu - So NOT in the News in 2020-2021 Synthetic Opioids/Fentanyl and Fentanyl Analogs February 16, 2021 April 26, 2021 April 9, 2018 Ebola Cases in the Democratic Republic of the Congo Seasonal Flu in the Midst of COVID-19 CDC Enhanced State Opioid Overdose Surveillance (DRC) 2017-2018 September 24, 2020 CDC/Government Resources for Opioid Programs and Interactive HHS State & Regional Map Other Drug-Related Publications COVID-19 **OUTBREAKS/EMERGING** KEEPING YOUR EMPLOYEES SAFE Public Safety-oriented information and resources on Contains info & resources to assist in providing for DISEASES/PANDEMICS COVID-19. All COVID-19 items previously posted in employee safety whether during standard operations A listing & description of outbreaks of disease, novel other sections have been consolidated here for or in planning for or responding to disasters. viruses, epidemics, or other infections that convenience. We are proudly assisting more than 160 View All Posts & Resources are making humans sick, even in small numbers. There may customer partners with real-time COVID-19 data be overlap with In the News & Pandemics. analysis & automated alerting.

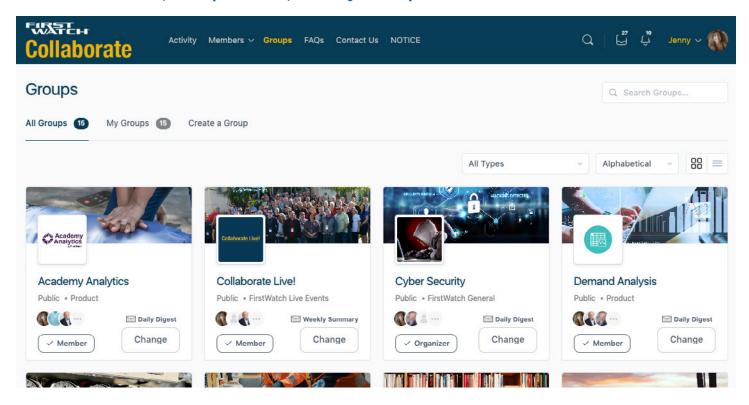
Book: Super-Charge Your Stress Management in

the Age of COVID-19

FirstWatch Collaborate

Share, learn, and improve on our community site

With FirstWatch Collaborate it's 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 26 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:

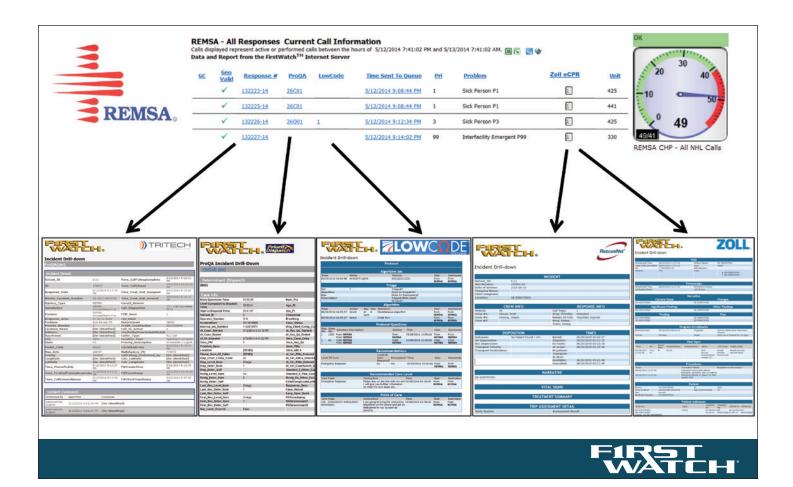
- "You should talk with the folks at ProEMS about how they reduced deaths from opioid overdoses."
- "Heath in Tulsa managed to add over 44 unit hours a day to his system for free by decreasing overall task times and building a culture of trust with their crews, we can connect you."
- "If you're hoping 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 got a library of videos to help you use FirstWatch more effectively and learn leadership principles. We are continually adding new things!



Please direct questions, comments, or ideas on FirstWatch Collaborate to Mike Taigman, FirstWatch Improvement Guide; mtaigman@firstwatch.net or 510-593-5730

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

Apple Devices Android Devices



Contact one of our team members today!

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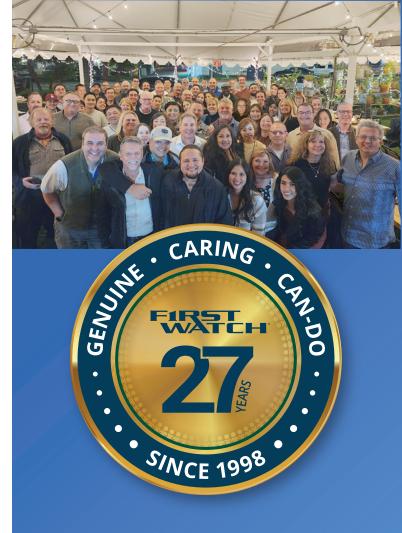
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USING DATA IMPROVES COMMUNITIES TOGETHER

