OBJECTIVE
Limit the amount of scene time for Stroke Alert patients

DEFINITIONS

90th Percentile Scene Time Interval
The scene time interval (in HH:MM) at which 90% of the included cases are less than or equal to.

Adult Stroke Patient
Age ≥ 18 years

Stroke Alert
Any adult patient with current presentation and history suggestive of stroke and presentation with at least one positive Cincinnati Prehospital Stroke Scale finding.

Scene Time Interval
The time interval beginning with the Scene Arrival Time for the first on scene transporting unit and ending with the Scene Departure time (from CAD) for the transporting unit.

Performance Objective
Scene Time less than 15 minutes for 90% or more of transported Stroke Alert patients

Appropriate Delay
Cases in which the provider documents an acceptable scene delay (from RescueNet and manual chart review). Examples of appropriate scene delay are: patient access or egress difficulty; unsafe condition (hazards to providers); environmental condition (flooding, snow, ice); clinical findings that require emergent interventions prior to transport (e.g. cardiac arrest).

REPORTING

Indicator Items
The time interval (in HH:MM) for which 90% of the incident scene time intervals are less than or equal.

FORMULA
Arrange the scene time interval data points (for the quarter) from lowest to highest. Count the total number of data points and note the number as n. Multiply 0.90 by the number N (round up if needed) and note as P. Determine the P-th data point in the set counting from the lowest to the highest value. That data point is the 90th percentile scene time interval. This may be accomplished using MS Excel’s percentile function.

EXCLUDED CASES
- Interfacility transfer (Hospital or FSED)
- Patients transported by Air Medical service
- Incidents resulting in no transport
- Appropriate delays
CLINICAL PERFORMANCE INDICATOR

#2.5

SCENE TIME INTERVAL FOR STROKE ALERT PATIENTS

DATA SOURCE(S)  COGNOS report from RescueNet, manual chart review and CAD

REPORTING CRITERIA

Reporting Period  Quarterly; Due to OMD PI at least 2 business days prior to the EMS/OMD PI meeting at which Performance Measures will be discussed

Visual Format  Line Chart (single chart); Y axis = 90th Percentile Scene Time Interval in minutes; X axis = quarter/year; Include the 5 most recent quarters of data; Include raw data in non-PDF format (e.g. Excel) (See chart layout and design example below)

Chart Legend  Include total number of Stroke Alert cases meeting criteria for each quarter

TYPE OF MEASURE  Process

PERFORMANCE IMPROVEMENT  Performance measures are reviewed periodically by the Agency and OMD Performance Improvement staff. Clinical performance is overseen by the System Clinical Performance Improvement Committee and its Subcommittees.

REFERENCES  None

DOCUMENT APPROVAL  All clinical performance measures and revisions to these measures are reviewed and approved by the System Clinical Performance Improvement Committee.