

Milwaukee County EMS Performance Measure

Performance measures that are tied to the 1.5 million “Performance Measure” (PM) funding shall be created through a “Consensus Development Process” (CDP). Members of the CDP workgroup shall include representation from contracting fire departments, medical director and County EMS management team. Members of the CDP-PM workgroup shall meet twice a year to evaluate performance data and develop strategic plans for the next year’s PM.

A four (4) year PM plan is listed below. The intent of identifying a four year PM plan is to assist the Milwaukee County EMS system to provide high quality out-of-hospital care. A four year plan will also allow the fire departments from contracting municipalities to know what measures they will be accountable to meet in order to receive 100% of their allocation of the 1.5 million which is determined by the ICC. While the plan presented below is a four year PM plan, it is a challenge to predict best practices and new trends in out-of-hospital care in the future. That having been said, members of the CDP-PM workgroup may bring forth proposals to be submitted to change a given year’s PM to address current best practices in EMS. Any changes must be agreed upon by the CDP-PM workgroup.

PM data will be made available to municipal fire department in manners that will allow the fire department administrators and managers to monitor their department’s progress in meeting the PM and to establish corrective action plans as needed. Data will be reported monthly, quarterly or per semester for education PM. MC EMS will take into considerations and make adjustments to the data calculations as a result of noted exceptions such as an inability to upload data because of technical problems (ex. computer crashes etc.) An explanation as to why adjustments have been made and revisions to calculations (ex. data calculated on 27 days Vs 30 days within a measured month) will be noted on the reports.

PM plan is progressive and cumulative. In years 2,3 and 4, municipalities will be required to continue to meet PM from previous years. (Ex In year 2, PM for year 1 must also be met, in year 3, PM for years 1 & 2 will be required to be met and in year 4, PM from years 1,2 & 3 will also be required to be met.)

If a municipality does not fully meet a given year’s PM and receives less than 100% of their funds the appeal process will be as follows:

1. Corrective Action Grace Period: Municipality fire department EMS officer will prepare and submit a ‘Corrective Action’ plan to Milwaukee County EMS addressing the steps the fire department will take to meet the PM. The corrective action plan will in effect for six (6) months following the end of the PM period which the fire department failed to fully meet. If the PMs are met after the six (6) month corrective action period, the municipality will be paid the funds according to the level of PM met. (PM met, vs PM marginally met). Funds not awarded will be encumbered from the year they are withheld for up to 1 year to allow for corrective actions to take place.
2. At the end of the Corrective Action Grace Period, if a fire department has not achieved 100% funding due to not fully meeting their PMs, MC EMS administration and EMS program director will meet municipality administration and fire department leadership to address why corrective action plan did not achieve the 100% goal and decide on next-step (s).

Grievance process: All source data will be available for review by fire department administration if there are questions on the validity of data used to make calculations.

Year #1 (1/1/2013-12/31 2013) "Task" focus

Category	Performance Measure (s)	PM Data Source (s) <u>Reported :</u>	Expected activity	Criteria	PM payment based on points awarded VS available
Clinical PM	End tidal CO ² monitoring	ZOLL cardiac monitor, available on ECG screen to EMS providers <u>Reported monthly</u>	End-tidal CO ² readings are documented on patients with an advanced airway; King Airway or ETT	95-100 % patients with advanced airways have End-tidal CO ² documented (waveform and numeric value)= 100 pts & PM met 90-94% patients with advanced airways have End-tidal CO ² documented = 75 pts & PM marginally met <89% patients with advanced airways have End-tidal CO ² documented = 0 pts & PM unmet	
Ops PM	Controlled Substance monitoring	County Internet based Oracle application <u>Reported monthly</u>	Paramedic vehicle controlled substances counts	95-100 % Controlled substance counts submitted daily per P&P = 100 pts & PM met 90-94% Controlled substance counts submitted daily per P&P = 75 pts & PM marginally met <89% Controlled substance counts submitted daily per P&P= 0 Pts & PM unmet	
Admin. PM	Education session attendance	County EMS Education Center and fire department attendance records <u>Reported at end of Fall/Spring semesters</u>	<ul style="list-style-type: none"> Attendance at refresher classes Completion of distance learning (DL) modules on time Completion of psychomotor skills competencies on time 	95-100 % Attendance at regularly scheduled refresher class = 100 pts & PM met 90-94% Attendance at regularly scheduled refresher class = 75 pts & PM marginally met <89 % Attendance at regularly scheduled refresher class = 0 Pts & PM unmet <hr/> 95-100 % Complete DL modules by due scheduled date = 100 pts & PM met 90-94% Complete DL modules by due scheduled date = 75pts & PM marginally met <89 % Complete DL modules by due scheduled date = 0 pts & PM unmet <hr/> 95-100 % Complete r skill competencies = 100 pts & PM met 90-94% Complete skill competencies = 75 pts & PM marginally met <89 % Complete r skill competencies = 0 pts & PM unmet	376-500 pts = PM met = 100% funded 251-375 pts =PM marginally met = 75% funded < 250 pts= PM unmet = 50% funded

Year #2 (1/1/2014-12/31 2014) "Task" focus

Category	Performance Measure (s)	PM Data Source (s) Reported :	Expected activity	Criteria	PM payment based on points awarded VS available
Clinical PM	12 Lead ECG acquisition	ZOLL ECG monitor Reported monthly	12 Lead ECGs labeled with patient identifier (initials acceptable) and case number	95-100 % 12 lead ECGs properly labeled = 100 pts & PM met 90-94% 12 lead ECGs properly labeled = 75 pts & PM marginally met <89 % 12 lead ECGs properly labeled = 0 pts & PM unmet	
	Blood sugar measurements	Patient Care Records (PCRs) Reported monthly	BS obtained on all patients with Alt consciousness, repeat BS on patients treated for low BS	95-100 % BS obtained = 100 pts & PM met 90-94% BS obtained = 75 pts & PM marginally met <89 % BS obtained = 0 pst & PM unmet	
Ops PM	Medical supply ordering process	Fire department supply officer	Orders submit medical supply orders by 1500 hrs the Friday prior to assigned delivery week.	95-100 % orders submitted on time = 100 pts & PM met 90-94% orders submitted on time = 75 pts & PM marginally met <89 % orders submitted on time = 0 pts & PM unmet	
		Fire department supply officer	Inventories for medical supplies should be at a level to not require emergency orders 95-100 % supply orders submitted on time = PM met 90-94% supply orders submitted on time = PM marginally met	100% - 2 or less Med/Supply Orders Per Year Per Department = 100 pts. & PM met 75% - 4 or less Med/Supply Orders Per Year Per Department= 75 pts & PM marginally met 50% - More than 4 Med/Supply Orders for any Department in a given year= 0 pts & PM unmet 100% - 2 or less Narc Orders Per Year Per Med Unit = 100 pts & PM met 75% - 4 or less Narc Orders Per Year Per Med= 75 pts & PM marginally met 50% - More than 4 Emerg Narc Orders for any one Med unit in a given year= 0 pts & PM unmet	

Year #2 (1/1/2014-12/31 2014) "Task" focus

Category	Performance Measure (s)	PM Data Source (s) <u>Reported :</u>	Expected activity	Criteria	PM payment based on points awarded VS available
Admin. PM	Upload of ECG and patient care record data	FD station upload computers <u>Reported monthly</u>	ECG files uploaded daily	95-100 % ECGs uploaded -= 100 pts & PM met 90-94% ECGs uploaded within 24 hrs = 75 pts & PM marginally met <89 % ECGs uploaded within 24 hrs= 0 pts & PM unmet	451-600 pts = PM met = 100% funded 300-450 pts = PM marginally met = 75% funded < 300pts = PM unmet = 0% funded
		FD administration, FD ePCR vendors <u>Reported monthly</u>	Patient care records (PCR) exported to MC EMS daily (after completed PCRs are 72 hrs old)	95-100 % PCRs exported -= 100 pts & PM met 90-94% PCRs exported within 24 hrs = 75 pts & PM marginally met <89 % PCRs exported within 24 hrs = 0 pts & PM unmet = 50 pts & PM unmet	

Year #3 (1/1/2015-12/31 2015) "Medical Chief Complaint" focus

Performance Measure (s)	PM Data Source (s) Reported :	Expected activity	Criteria	PM payment
Heart attack (STEMI) patients	Patient care Record (PCR) Reported quarterly	Patient contact to 12 lead obtained	100% - 12 Lead ECG obtained \leq 10 after EMS arrival 90% of the time= 100 pts & PM met 75% - 12 Lead ECG obtained < 10 after EMS arrival 80% of the time = 75 pts & PM marginally met 50% - 12 Lead ECG obtained < 10 after EMS arrival less than 80% of the time = 0 pts & PM unmet	
	County EMS Medical Command database Reported quarterly	STEMI 12 lead to physician contact	100 pts - Contact made to medical control STEMI DX 90% of the time (YES/NO) 75 pts - Contact made to medical control for STEMI DX 80% of the time (YES/NO) 0 pts - Contact made to medical control for STEMI DX less than 80% of the time (YES/NO)	
	Patient care Record (PCR) Reported quarterly	At patient to transport Proper medications; ASA, NTG	100 pts - At patient time to transport < <u>30</u> minutes 90% of the time 75 pts - At patient time to Transport < 30minutes 80% of the time 0 pts - At patient time to Transport < 30 minutes more than 20% of the time	
	Patient care Record (PCR) Reported quarterly	Transport to appropriate hospital	100 Pts - Field DX STEMI Pt transported to appropriate STEMI receiving hospital (CATH LAB) 95-100% of the time 75 pts - Field DX STEMI Pt transported to appropriate STEMI receiving hospital (CATH LAB) 90% - 94% of the time 0 pts - Field DX STEMI Pt transported to appropriate STEMI receiving hospital (CATH LAB) less than 89% of the time	

Year #3 (1/1/2015-12/31 2015) "Medical Chief Complaint" focus

Performance Measure (s)	PM Data Source (s) <u>Reported :</u>	Expected activity	Criteria	PM payment
Resuscitated (ROSC) patients	Patient care Record (PCR) ZOLL ECG monitor <u>Reported quarterly</u>	12 Lead ECGs obtained upon ROSC	100 pts - 12 Lead ECG obtained post ROSC > 90% of the time 75 pts - 12 Lead ECG Obtained post ROSC 80% -89% of the time 0 pts - 12 Lead ECG Obtained post ROSC less than 80% of the time	
	ZOLL ECG monitor <u>Reported quarterly</u>	End-tidal CO ² (waveform as well as numeric value) documented	100 pts - End-tidal CO ² documented 95-100 % of the time on required patients 75 pts - End-tidal CO ₂ documented 90-94% of the time on required patients 0 pts - End-tidal CO ₂ documented less than 89% of the time on required patients.	
	Patient care Record (PCR) <u>Reported quarterly</u>	Transport to appropriate hospital	100 pts - Transport to ROSC hospital 100% of the time 75 pts - Transports to ROSC hospital 95 -99% of the time 0 pts - Transports to ROSC hospital less than 95% of the time	
	Patient care Record (PCR) County EMS Medical Command database <u>Reported quarterly</u>	Contact Medical Control per P&P	100 pts - Medical Control contacted post ROSC if patient hypotensive, presence of ectopic beats 90-100 % of the time 75 pts - Medical Control contacted post ROSC if patient hypotensive, presence of ectopic beats 80-89% of the time 0 pts Medical Control contacted post ROSC if patient hypotensive or presence of ectopic beats less than 80% of the time	601-800 pts PM met = 100% funded 400-600-PM marginally met = 75% funded < 400 pts PM unmet = 0% funded

Year #4 (1/1/2016-12/31 2016) Medical Chief Complaint focus

Performance Measure (s)	PM Data Source (s) <u>Reported :</u>	Expected activity	Criteria	PM payment
Quality of CPR	ZOLL ECG monitor Rescus Net computer software program (loaded on each FD ECG upload computer) <u>Reported quarterly</u>	Percent time CPR performed on cardiac arrest patients (Time on chest)	100 pts - Chest compressions fraction is > 70% % of time in 90% of cases 75 pts - Chest compression fraction is > 70% in 80 - 89% of the Cardiac Arrest cases 0 pts - Chest compression fraction is > 70% less than 80% of the time	301-400 pts =PM met = 100% funded 300 pts =PM marginally met = 75% funded < 300,pts =PM unmet = 0% funded
	ZOLL ECG monitor Rescus Net computer software program <u>Reported quarterly</u>	Depth of CPR compressions	100 pts - Depth of chest compressions per County P&P 90% of the time (2 inches in adults 80% of the time) 75 pts - Depth of chest compressions 2 inches or more 80% of the time achieved in 80% to 89% of adult Cardiac Arrest patients 0 pts - Depth of chest compressions 2 inches or more 80% of the time achieved in less than 80% of adult Cardiac Arrest patients	
	ZOLL ECG monitor & ZOLL ECG monitor Rescus Net computer software program <u>Reported quarterly</u>	Rate of CPR compressions	100 pts - Rate of chest compressions per County P&P 90% of the time between 90 and 120/minute 75 pts - Rate of chest compressions between 90 and 120 /minute 90% of the time achieved in 80% to 89% of Cardiac Arrest patients 0 pts - Rate of chest compressions between 90 and 120/minute 90% of the time achieved in less than 80% of Cardiac Arrest patients	
	FD completed debriefing worksheet <u>Reported quarterly</u>	Evidence of case review debriefing by EMS team	100 pts - EMS crew completed debriefing form for cardiac arrest patients 90% of the time 75 pts - EMS crew completed debriefing form for cardiac arrest patients 80% to 89% of the time 0 pts - EMS crew completed debriefing form for cardiac arrest patients less than 80% of the time	