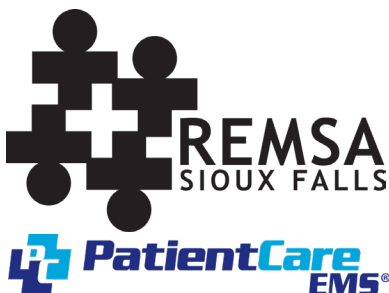




# *Ambulance Contract Performance Report*

*Contract Year ending May 20, 2025*

*Submitted July 15, 2025*



This page left intentionally blank

# AMBULANCE CONTRACT PERFORMANCE REPORT

CONTRACT YEAR ENDING MAY 20, 2025

**A** Franchise Agreement ["Agreement"] between the City of Sioux Falls and Paramedics Plus (now PatientCare EMS) for ground ambulance service within the city went into effect on May 21, 2015. This Agreement was extended for a five-year term by City Ordinance approved on December 11, 2018. This Agreement was extended for an additional six-year term and expires on May 20, 2026.

The Agreement requires an annual report from Sioux Falls Regional Emergency Medical

Services Authority (REMSA) to the City Council detailing performance in these areas:

- **Response Time Performance**
- **Clinical Performance**
- **System Improvements**
- **Workforce Stability**
- **Pricing Compliance**
- **Reporting Compliance**

**This report details the hard work, dedication, and commitment of our EMS colleagues. The efforts of all our EMS responders contribute to the excellent care our community receives day in and day out. Dedication to prehospital care goes beyond emergency response. It is about constantly striving to improve the system to create a healthier and safer community. Congratulations on another great year of caring for our community.**

*—Matt McQuisten, REMSA Chair*



## Response Time Performance

Response time performance is the result of a coordinated effort of the PatientCare EMS contractor's total operation.

Response time requirements:

### ■ 911 calls:

#### • **Priority 1**

(Life-threatening emergencies) require a Paramedic ambulance on the scene within 8 minutes, 59 seconds, for not less than 90 percent of all Priority 1 response requests.

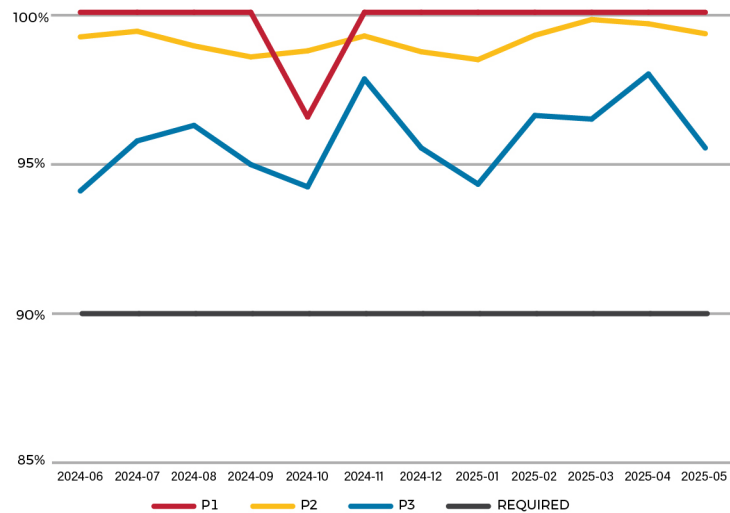
#### • **Priority 2**

(Non-life-threatening emergencies) require a Paramedic ambulance on the scene within 11 minutes, 59 seconds, for not less than 90 percent of all Priority 2 response requests.

#### • **Priority 3**

(Nonemergency 911 ambulance requests) require a Paramedic ambulance on the scene within 15 minutes, 59 seconds, for not less than 90 percent of all Priority 3 response requests.

**Priority 1, 2, and 3 Response Time Compliance**



### ■ Interfacility Transfers:

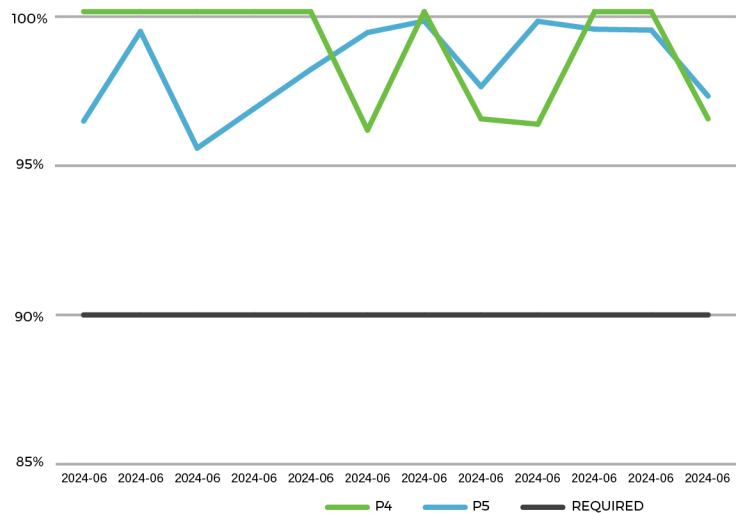
#### • **Priority 4**

(Scheduled interfacility ambulance requests) require a Paramedic ambulance on the scene within 30 minutes of the requested pick up time 90 percent of the time.

#### • **Priority 5**

(Unscheduled interfacility ambulance requests) are scheduled with a goal of a Paramedic response within 90 minutes of the request. This is a customer service target not a compliance requirement.

**Interfacility Response Time Compliance**

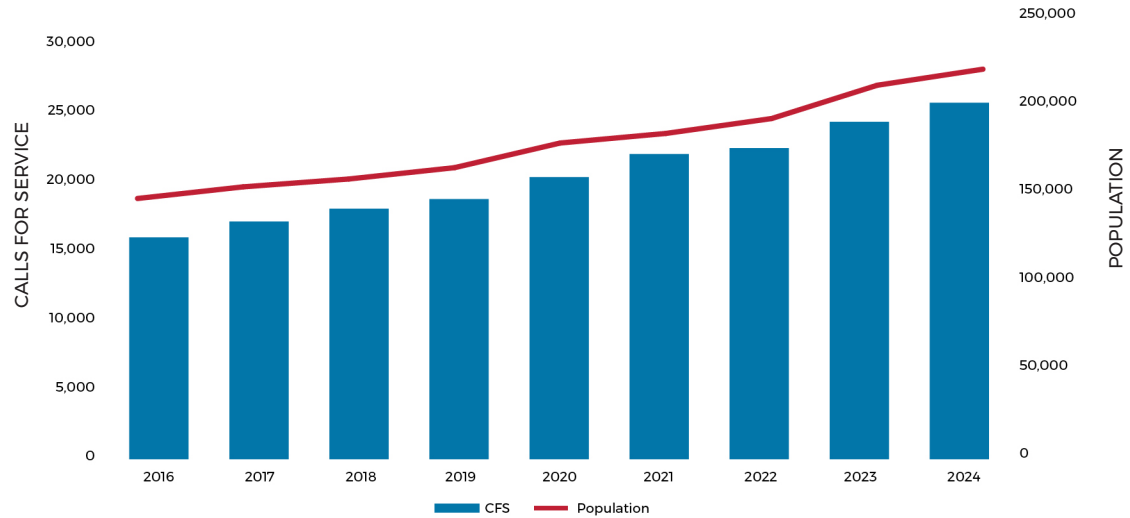




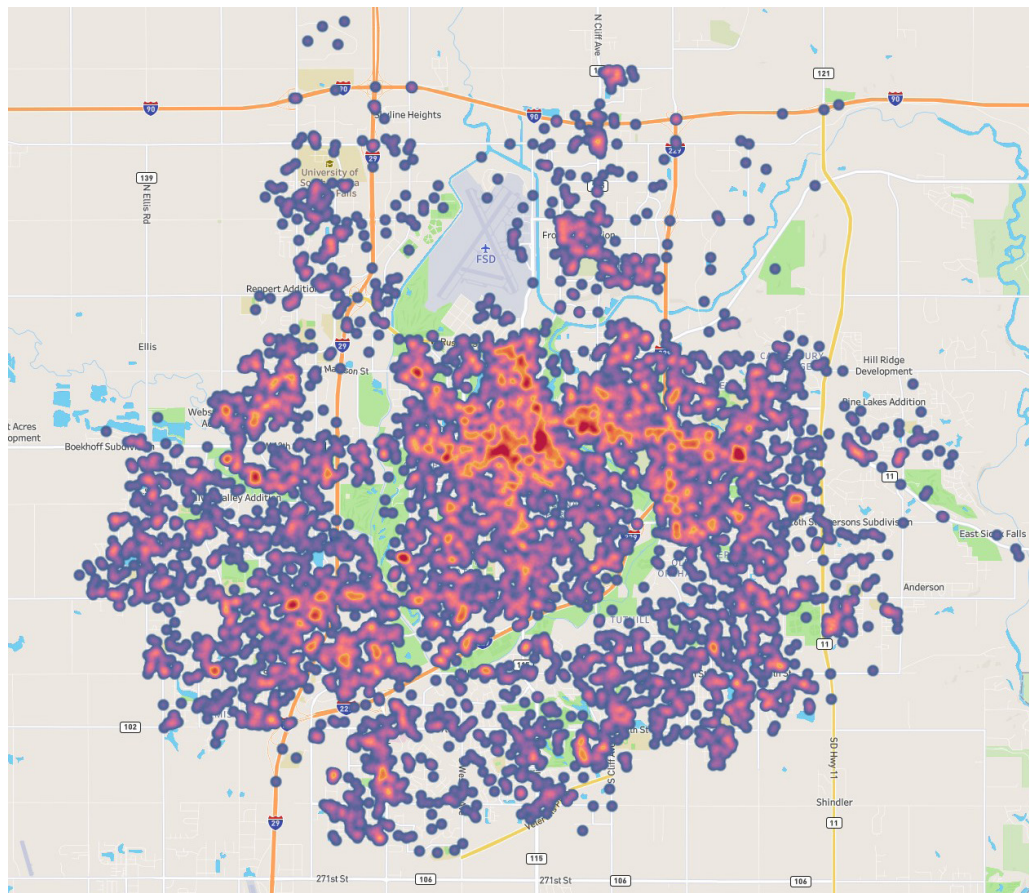
Findings:

- In the face of remarkable growth in EMS calls for service, PatientCare EMS has been compliant with all response time requirements each month this contract year. EMS calls for service have increased 26 percent over the past five years—nearly double the rate of Sioux Falls' population growth over the same period.

EMS Calls for Service vs Population



EMS CALL HEAT MAP



## Clinical Performance

REMSA utilizes local patient care protocols based on national standards and evidence-based best practices. The REMSA Medical Director and REMSA Medical Board approve these protocols that are then adopted by REMSA. REMSA, PatientCare EMS, and Sioux Falls Fire Rescue worked for over one year to develop new integrated EMS protocols that were implemented in 2020 and updated yearly since.

External quality assurance is provided under the direction of the REMSA Medical Board and REMSA Medical Director. Random ambulance calls are audited to ensure compliance with protocols. High-risk calls, including all medication-assisted airway management calls, are reviewed by the REMSA Medical Director, who found no calls outside the expected performance. All pediatric calls, cardiac arrests, strokes, heart attacks, and major trauma calls are reviewed. Additionally, the FirstPass system provides 100 percent chart review and flags any calls needing in-person review.



## Additional Clinical Highlights

### CARDIAC

12 Lead EKG done on patients with sustained pulses after cardiac arrest	96.0%	Heart attack patients transported to appropriate hospital	100.0%
12 Lead EKG done on patients with Acute Coronary Syndrome	100.0%	Hospital notification within 10 minutes from an EKG that shows a heart attack	88.9%
12 lead EKG done on patients ≥ 35 with chest pain within 10 minutes	83.6%	STEMI Alert if STEMI	100.0%
Aspirin given for patients with cardiac chest pain	100.0%	STEMI scene time < 15 minutes	91.2%

### STROKE

Stroke scale documented	100.0%
Stroke Alert performed	100.0%
Last known well time documented	100.0%
Blood glucose documented	100.0%
Large vessel occlusion stroke patients transported to stroke center	100.0%

### CARDIAC ARREST

Advanced airway used	91.1%	Defib < 5 minutes from initial shockable rhythm	100.0%
CPR performed	100.0%	AED used prior to arrival	86.9%
Pulses returned	28.1%	Appropriate cardiac arrest medications given	100.0%

### TRAUMA

Trauma scene time < 10 minutes	78.3%
Trauma patients transported to trauma center	100.0%
Early notification of trauma alert	52.6%

### OTHER MEASURES

2 sets of vital signs documented	92.4%	History, medications, and allergies documented	84.0%
Glasgow coma scale documented	100.0%	Oxygen administered if oxygen saturation is below 94%	96.5%
Narrative completed	100.0%	Broslow tape used if age < 12	97.8%
Transport percent	78.1%	Weight recorded when medications administered	100.0%
Average Hospital offload time	16.9 mins	PCR completion in 24 hours or less	99.7%
Transport without lights and siren		94.8%	

### AIRWAY MANAGEMENT

Ventilation assistance provided	100.0%
Single airway type used	95.2%
Confirmation of placement with ET/CO2	100.0%
Multiple ET/CO2 values	100.0%
RSI (medication-assisted airway management)	20.0%
Overall airway success	100.0%

**PatientCare and their partner agencies continue to provide high-quality, expedient, and comprehensive care to our residents and visitors. They have met and exceeded industry benchmarks and contractual requirements. It has been a pleasure to provide quality assurance to this agency as well as their EMS partners. Notwithstanding nationwide personnel challenges, PatientCare EMS has continued to fill their ranks with qualified and committed EMS professionals. The people of Sioux Falls can be assured they are being provided with the highest quality prehospital care in the region.**

—Jeff Luther, MD FACEP, REMSA Medical Director



## Mission: Lifeline® Gold Recognition

Mission: Lifeline® is the American Heart Association's national initiative to advance the SYSTEM OF CARE for patients with acute, high-risk, time-sensitive life, and/or quality of life-threatening disease states, such as ST-Elevation Myocardial Infarction (STEMI Heart Attack), Stroke, and Out-of-Hospital Cardiac Arrest. The overarching goals of Mission: Lifeline are to bring stakeholders together in a collaborative manner and to reduce mortality and morbidity for these patients while improving overall quality of care and patient outcomes.

For 2025, PatientCare EMS received the Gold Award. Mission: Lifeline awards represent a commitment to both cardiac and stroke systems of care.

Mission: Lifeline awards are achieved with collaboration from hospitals and other responding agencies. Mission: Lifeline communities are communities that strive to achieve the highest levels of care for cardiac and stroke patients.

## Cardiac Arrest Outcomes (2024)

Sioux Falls has participated in the Cardiac Arrest Registry to Enhance Survival (CARES) since 2007.





This registry allows our community to compare our cardiac arrest causes and outcomes to an aggregate of other communities' results.

EMS-treated out-of-hospital cardiac arrest (OHCA) affects more than 250,000 Americans each year and is the third leading cause of disability-adjusted life years (DALY) in the United States, behind cardiovascular disease and back pain. Typically, one in ten patients survives to hospital discharge, with 80 percent having no or moderate neurological disability. Cardiac arrest resuscitation is an important measure of a community's emergency response readiness. Successful resuscitation requires involvement by a range of individuals including bystanders, emergency medical dispatchers, first responders, paramedics, and hospital providers.

2023 data taken from the CARES Registry,  
comparing cardiac arrest survival in Sioux Falls  
to survival in all CARES registry communities,

shows the excellent cardiac arrest outcomes our community achieves. Cardiac arrest survival in our community continues to exceed that in the aggregate CARES communities.

- 25 lives were saved in Sioux Falls in 2024
- All nontraumatic cardiac arrests
  - Sioux Falls—15 percent survival
  - All CARES—11 percent survival
- Witnessed cardiac arrests of cardiac etiology with a rhythm that can be helped with defibrillation
  - Sioux Falls—50 percent survival
  - All CARES—33 percent survival
- Bystander CPR Rates
  - Sioux Falls—75 percent
  - All CARES—42 percent





	OVERALL CARES	SIoux FALLS
<b>2024 REGISTRY STATISTICS</b>		
Non-Traumatic arrests in 2024	137,119	171
<b>2024 EMS STATISTICS</b>		
EMS transporting agencies	2,600	1
Cardiac arrests who were female	37%	40%
Median age of cardiac arrests	65	64
Arrests in the home	71%	76%
<b>2024 BYSTANDER STATISTICS</b>		
Bystander witnessed arrests	38%	42%
Bystander CPR	42%	75%
Bystander AED	23%	18%
<b>2024 HOSPITAL STATISTICS</b>		
Hospitals	2,500	3
Patients survived to hospital admission	26%	28%
Patients discharged alive from the hospital	10%	15%
Utstein survival (witnessed with shockable rhythm)	33%	46%
Cardiac Etiology Utstein survival	33%	50%
Lives saved in 2024	14,300	25

## Medical Audits/CASE Review

PatientCare EMS participates in quarterly case reviews with all EMS system agencies and local hospitals. Specific calls with learning opportunities or other insights are reviewed by all agencies participating in care. This on-going multi-discipline review process is a valuable process for all agencies involved in the response process. Additionally, specific cases are reviewed with the REMSA Medical Director as needed.

## Other Clinical Measures

Drugs and alcohol continue to be a problem in the community. One hundred ninety-four patients received the opioid reversal agent Narcan in the last year by police, fire or ambulance personnel. There is good news in that the percentage of cardiac arrests due to drug overdose was down to 12%, compared to nearly 25% in the previous year. EMS continues to see ambulance calls daily due to alcohol and meth abuse.

As required by contract, every ambulance rendering emergency care services has been staffed and equipped to provide paramedic-level care and transport with a minimum of one (1)

state certified and locally certified paramedic and one (1) state and locally certified EMT.

As required, every call had a REMSA-certified paramedic providing care to the patient in the back of the ambulance during transport.

All Paramedic and EMT staff have the required license and certifications. All required staff training has been completed and documented.

## System Improvements

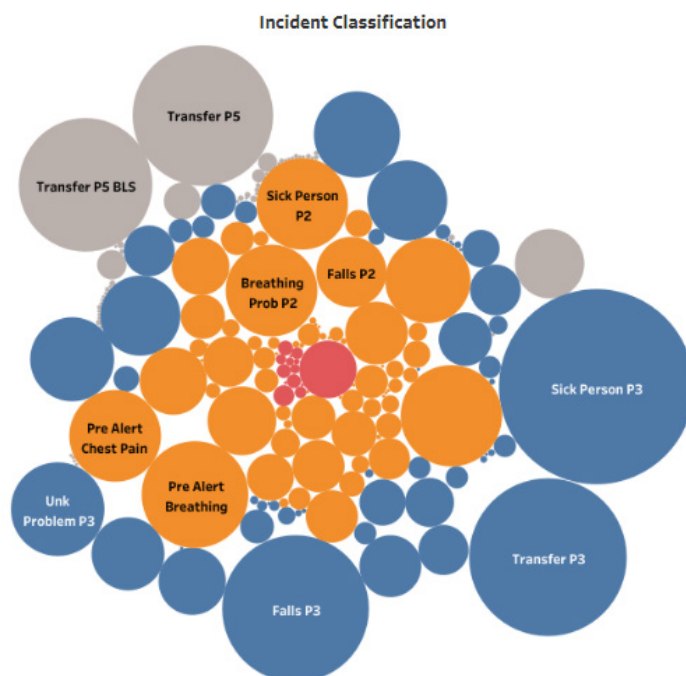
PatientCare EMS takes an active role in improving system performance within the City of Sioux Falls. Some examples of system performance improvement include:

### ■ CAAS Accreditation

PatientCare EMS completed a reaccreditation process through the Commission on Accreditation of Ambulance Services in the fall of 2022. This reaccreditation process requires the organization to complete a self-assessment, a comprehensive application, an off-site review of the application documents, an on-site review conducted by three industry experts, a panel review of findings, and ultimately accreditation.

PatientCare EMS has submitted an application for CAAS accreditation this year. They expect an on-site inspection during the summer.

PatientCare EMS is the only CAAS accredited ambulance service within the state of South Dakota.





PatientCare EMS joined the National EMS Quality Alliance (NEMSQA) and is participating in the EMS Quality Improvement Partnership (EQuIP), in an effort to improve airway and respiratory support. They have measured baseline performance and implemented several improvement strategies including one-on-one coaching, additional training and crew feedback to improve performance in these critical areas.

#### ■ System Status Management (SSM)

PatientCare EMS utilizes a SSM model in the City of Sioux Falls that focuses on dynamic deployment, whereby ambulance resources are strategically placed at different locations within the city, based upon the level of available resources and the best possible location for response. PatientCare EMS reviews system status and posting plans regularly to ensure the most efficient response standards.

#### ■ Handtevy Mobile for EMS

PatientCare EMS has been an active participant in the implementation and pending roll-out of a mobile app that gives clinicians access to EMS system-based protocols and medication information. The app provides clinical teams rapid access to lifesaving information proven to save lives and reduce errors. Handtevy Mobile aligns the EMS medication formula to established protocols.

#### ■ Improved Data Analytics

PatientCare EMS worked with system stakeholders and partners to improve data analytics regarding operational efficiencies

and clinical quality assurance. PatientCare EMS uses dashboards to monitor key performance indicators regarding operational and clinical performance. This timely feedback allows for data driven operational and clinical improvements as the EMS system continues to grow.

### **Workforce Stability**

PatientCare EMS prioritizes the recruitment and retention of qualified individuals to support a strong and engaged workforce. An annual employee satisfaction survey is conducted to develop an action plan. PatientCare EMS continuously seeks feedback and creative ideas to support employee engagement.

Staffing shortages within the Emergency Medical Services industry have affected the availability of EMT's and Paramedics. PatientCare EMS has taken proactive steps to recruit, train, and retain qualified candidates including sign-on bonuses, scholarship opportunities and impactful wage increases.

PatientCare EMS uses an engaging onboarding process including a one-week orientation followed by field training tailored to the individual new hires needs.

PatientCare EMS works with the system stakeholders to provide training opportunities for students and other EMS professionals with the system.

---

**NEMSQA unveiled the second national EMS Quality Improvement Collaborative in 2024, focusing on patient outcomes related to airway management practices. The Airway Improvement Collaborative's primary goal is to empower EMS clinicians with the requisite knowledge, skills, and tools to perform airway management procedures safely and effectively, bridging the divide between research findings and clinical practice on a national level. By emphasizing successful strategies that have yielded positive results in various agencies, this collaborative aims to significantly enhance patient outcomes in airway management.**

*—National EMS Quality Alliance (NEMSQA)*

---

## Pricing Compliance

REMSA's review of total billing charges compared to total calls of each type shows that all were billed at the level approved in City Ordinance.

Annually, PatientCare EMS engages a qualified entity to conduct a claims review as described in the Office of Inspector General Compliance Guidance. The independent audit reviews randomly selected Medicare claims for compliance with Centers for Medicare and Medicaid Services rules and regulations, appropriate documentation, medical necessity, and level of service. PatientCare EMS submits this audit report to REMSA within 120 days of the end of each contract year as required in the Agreement.

## Reporting Compliance

All reporting requirements have been met.

- Response time reports have been submitted monthly as required.
- Clinical, operational, and personnel data are available online at all times for REMSA review.
- Community affairs data has been reported monthly at REMSA meetings.





# Ambulance Contract Performance Report



## Summary

REMSA finds the ambulance contractor performance to be acceptable for the past year. The required services were delivered while improving system quality. Specific system improvements and actions to improve workforce stability continue.

There were no breaches of the Agreement. The required performance security bond remains in place. We look forward to PatientCare EMS' next year of service to the community.







