



2017 4th Quarter Report to the
Lowell, Massachusetts
Board of Health

Reporting Period: Oct 1- Dec 31 2017

- **INTRODUCTION:**

This is the 4th quarter 2017 Report for the Lowell Board of Health.

Any questions or concerns surrounding the contents of this report should be directed to:

Trinity EMS, Inc.

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Thank you,

Management Team

Trinity EMS, Inc

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TIMES:	Q1 2017 Performance Score 95.38%			Q2 2017 Performance Score 95.50%		
	Trinity BLS	Trinity ALS	LGH ALS	Trinity BLS	Trinity ALS	LGH ALS
Avg out of chute	25 sec	51 sec	1 min 30 sec	22 sec	48 sec	52 sec
Avg resp time	4 min 48 sec	5 min 29 sec	5 min 4 sec	4 min 57 sec	6 min 30 sec	5 min 40 sec
Avg on scene time	13 min 22 sec	13 min 29 sec	14 min 48 sec	11 min 40 sec	8 min 54 sec	9 min 16 sec
Avg transport time	11 min 48 sec	10 min 55 sec	13 min 9 sec	8 min 37 sec	12 min 16 sec	8 min 27 sec
# of events >7:59 response time	251	27	122	249	25	100
# of events using Non Trinity BLS units	0			3		
	Q3 2017 Performance Score 94.09%			Q4 2017 Performance Score 92.48%		
	Trinity BLS	Trinity ALS	LGH ALS	Trinity BLS	Trinity ALS	LGH ALS
Avg out of chute	27 sec	1 min 5 sec	1 min 2 sec	28 sec	1 min 8 sec	1 min 7 sec
Avg resp time	5 min 23 sec	6 min 47 sec	6 min 11 sec	5 min 26 sec	6 min 53 sec	6 min 4 sec
Avg on scene time	12 min 51 sec	16 min 37 sec	16 min 7 sec	10 min 31 sec	8 min 45 sec	11 min 53
Avg transport time	7 min 3 sec	8 min 50 sec	14 min 45 sec	6 min 21 sec	6 min 36 sec	10 min 24 sec
# of events >7:59 response time	339	49	109	419	35	130
# of events using Non Trinity BLS units	0			4	3 happened in a 15 minute frame. 9,10, and 11th 911 call	

	Q1 2016	Q2 2016	Q3 2016	Q4 2016	Q1 2017	Q2 2017	Q3 2017	Q4 2017
TEMS BLS	94.34%	93.51%	94.66%	94.79%	95.38%	95.50%	94.09%	92.48%

BLS OUTLIERS:	2015 Total		2016 Total		Last 4 Qs Total		Q1 2017		Q2 2017		Q3 2017		Q4 2017	
1st Emergency	204	19%	243	21%	319	25%	89	35%	49	20%	76	22%	105	25%
2nd Emergency	271	25%	210	18%	303	24%	59	24%	60	24%	81	24%	103	25%
3rd Emergency	207	19%	206	18%	225	18%	37	15%	48	19%	56	17%	84	20%
4th Emergency	167	15%	166	15%	174	14%	28	11%	43	17%	49	14%	54	13%
5th Emergency	155	14%	191	17%	121	10%	25	10%	25	10%	41	12%	30	7%
6th Plus Emergency	96	9%	124	11%	109	9%	13	5%	24	10%	36	11%	36	9%

BLS REASONS OVER 7:59:	2015 Yearly Total		2016 Yearly Total		Last 4 Qs Total		Q1 2017		Q2 2017		Q3 2017		Q4 2017	
Total	903		1189		1214		251		249		339		418	
Couldn't locate house/lost	96	11%	22	2%	76	6%	14	6%	9	4%	29	9%	24	6%
Crew took long route	82	9%	60	5%	102	8%	24	10%	19	8%	21	6%	38	9%
Distance	194	21%	555	47%	475	39%	111	44%	119	48%	130	38%	115	28%
Dispatch delay	87	10%	56	5%	10	1%	5	2%	0	0%	5	1%	0	0%
Highway	20	2%	32	3%	22	2%	7	3%	4	2%	8	2%	3	1%
Out of chute	102	11%	188	16%	150	12%	24	10%	23	9%	37	11%	66	16%
TEMS Dispatch error	17	2%	45	4%	55	5%	6	2%	11	4%	22	6%	16	4%
Weather	84	9%	5	0%	21	2%	16	6%	0	0%	1	0%	4	1%
EMD- Delta													43	10%
911 Call volume	126	14%	115	10%	207	17%	36	14%	44	18%	71	21%	56	13%
others/blank	95	11%	111	9%	96	8%	8	3%	20	8%	15	4%	53	13%

NO TRANSPORTS:	2015 Total		2016 Total		Last 4 Qs Total		Q1 2017		Q2 2017		Q3 2017		Q4 2017	
Cancelled via ALS	275	4%	308	4%	413	6%	85	6%	87	4%	127	6%	114	6%
Cancelled via BLS	107	1%	114	2%	158	2%	35	2%	40	2%	43	2%	40	2%
Cancelled closer unit	111	1%	150	2%	205	3%	56	4%	66	3%	55	3%	28	1%
Cancelled by fam/staff	61	1%	56	1%	48	1%	12	1%	18	1%	12	1%	6	0%
Cancelled via Fire	700	9%	579	8%	639	9%	140	9%	167	9%	182	9%	150	8%
Cancelled via Police	1315	17%	1262	17%	1219	16%	265	18%	337	17%	350	17%	267	14%
No EMS needed	1090	14%	650	9%	931	13%	151	10%	240	12%	227	11%	313	16%
No pt found	476	6%	482	6%	449	6%	94	6%	94	5%	154	7%	107	6%
Pt deceased on arrival	167	2%	133	2%	134	2%	24	2%	32	2%	29	1%	49	3%
Other	66	1%	146	2%	72	1%	4	0%	34	2%	33	2%	1	0%
Pt refusal	3167	42%	3607	48%	3151	42%	629	42%	826	43%	866	42%	830	44%

VOLUME:	2015 Total		2016 Total		Last 4 Qs Total		Q1 2017		Q2 2017		Q3 2017		Q4 2017	
Total responses (ALS & BLS)	27317		29696		31085		7587		7651		7984		7863	
Total ALS Responses	7417	27%	8196	28%	8476	27%	2158	28%	2116	28%	2238	28%	1964	25%
TEMS ALS Responses	846	11%	871	11%	1017	12%	246	11%	213	10%	316	14%	242	12%
LGH ALS Responses	6571	89%	7325	89%	7459	88%	1912	89%	1903	90%	1922	86%	1722	88%

INCIDENTS:	19900	21500	22609	5429	5535	5746	5572
BLS Incident	12483	13304	14133	3271	3419	3508	3600
ALS and BLS Incident	7417	8196	8476	2158	2116	2238	1972
Needle pick ups					175	179	95
Non Emergent Lift assists					126	84	55

TRANSPORTS:	2015 Total		2016 Total		Last 4 Qs Total		Q1 2017		Q2 2017		Q3 2017		Q4 2017	
Total Transports (ALS & BLS)	14303		14781		14743		3731		3679		4020		4044	
Total BLS Transports	11498	80%	11735	79%	11716	79%	2893	78%	2935	80%	3331	83%	3288	81%
Total ALS Transports	2805	20%	3046	21%	3027	21%	838	22%	744	20%	689	17%	756	19%
TEMS ALS Transports	504	18%	434	14%	417	14%	105	13%	79	11%	116	17%	117	15%
LGH ALS Transports	2301	82%	2612	86%	2610	86%	733	87%	665	89%	573	83%	639	85%

TRIAGE:	2015 Total		2016 Total		Last 4 Qs Total		Q1 2017		Q2 2017		Q3 2017		Q4 2017	
Total Triage	993	13%	1102	13%	1105	13%	298	14%	286	14%	282	13%	239	12%
TEMS Triage	74	7%	60	5%	70	6%	11	4%	13	5%	27	10%	19	8%
LGH ALS Triage	919	93%	1042	95%	1035	94%	287	96%	273	95%	255	90%	220	92%

INTUBATIONS:	2015 Total			2016 Total			Last 4 Qs Total			Q1 2017			Q2 2017			Q3 2017			Q4 2017									
Trinity company total	56	of	68	82%	48	of	98	49%	78	of	92	85%	16	of	21	76%	19	of	23	83%	8	of	9	89%	35	of	39	90%
Trinity Lowell only	7	of	14	50%	2	of	7	29%	13	of	15	87%	2	of	4	50%	3	of	3	100%	3	of	3	100%	5	of	5	100%
LGH ALS Lowell only	140	of	144	97%	166	of	174	95%	166	of	168	99%	34	of	34	####	42	of	43	98%	42	of	43	98%	48	of	48	100%
LGH ALS MAI* in Lowell only	44			55			70			16			17			20			17									

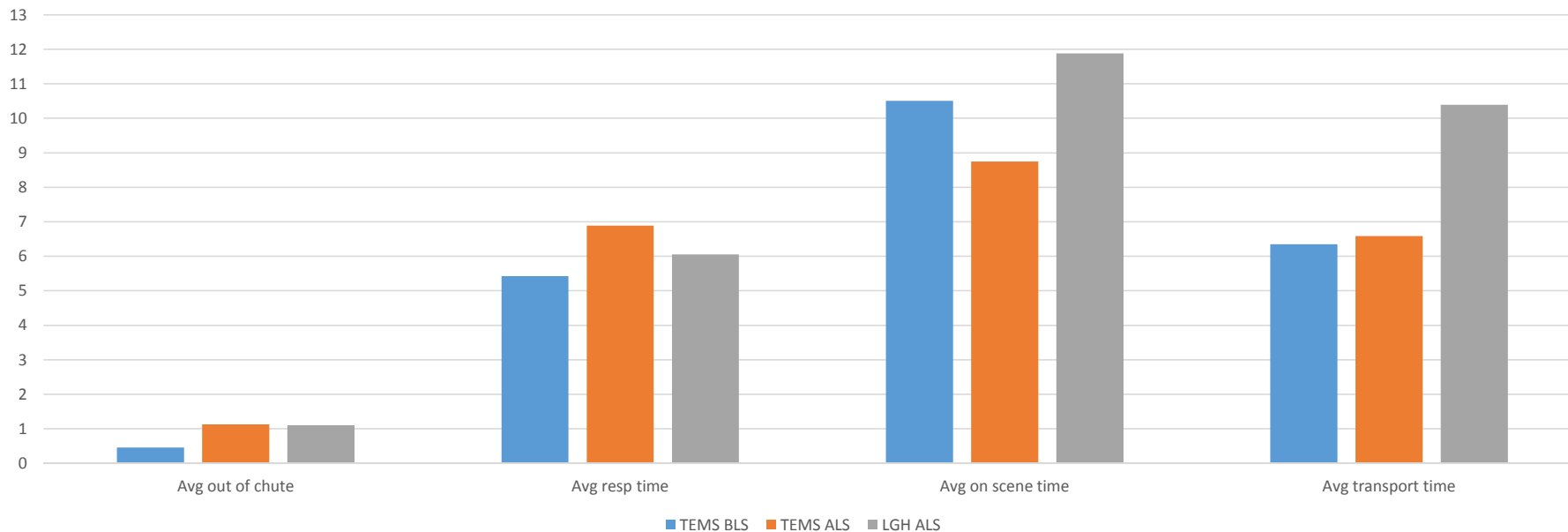
IO SUCCESS RATE:	2015 Total			2016 Total			Last 4 Qs Total			Q1 2017			Q2 2017			Q3 2017			Q4 2017									
Trinity company total	77	of	79	97%	65	of	69	94%	95	of	97	98%	27	of	28	96%	19	of	19	100%	15	of	15	100%	34	of	35	97%
Trinity Lowell only	10	of	10	100%	6	of	6	100%	18	of	18	100%	5	of	5	100%	4	of	4	100%	5	of	5	100%	4	of	4	100%
LGH ALS Lowell only	45	of	47	96%	72	of	75	96%	85	of	87	98%	10	of	10	100%	17	of	19	89%	30	of	30	100%	28	of	28	100%

Airways:	2015 Total			2016 Total			Last 4 Qs Total			Q1 2017			Q2 2017			Q3 2017			Q4 2017						
Trinity company wide- King tube success rate-post ETT failure	###			###			###			4	of	5	80%	2	of	4	50%	1	of	1	100%	4	of	4	100%
Trinity Lowell- King tube success rate-post ETT failure	###			###			###			2	of	2	100%	0	of	0	0%	0	of	0	0%	0	of	0	0%

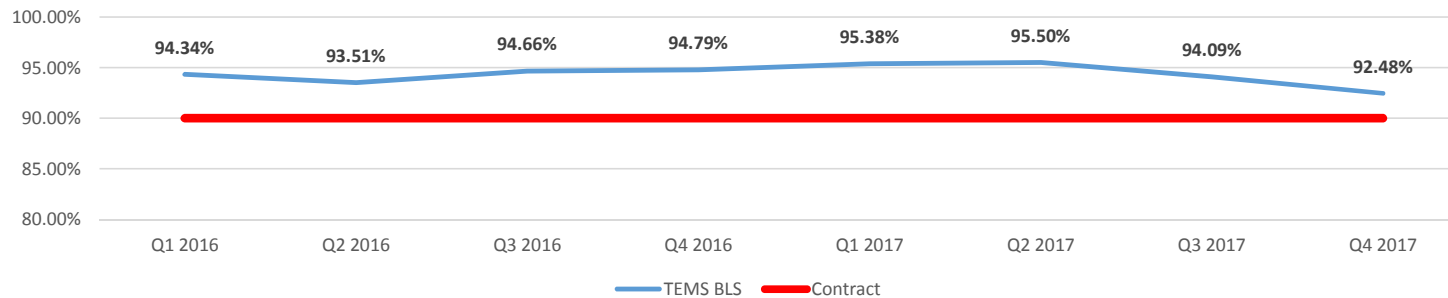
* Intubation total- Total patients intubated/ Total Patients intubated attempted.

** Medication Assisted Intubation, in MA, this requires the use of a Paralytic which is controlled & monitored by a special project waive that Trinity EMS Inc is not included in.

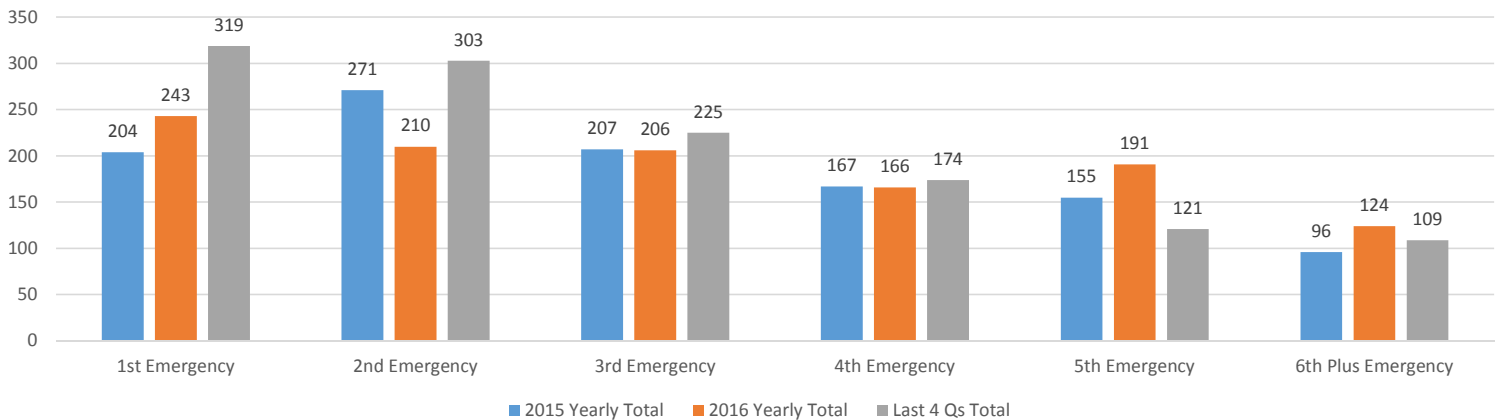
4th Qrt 2017



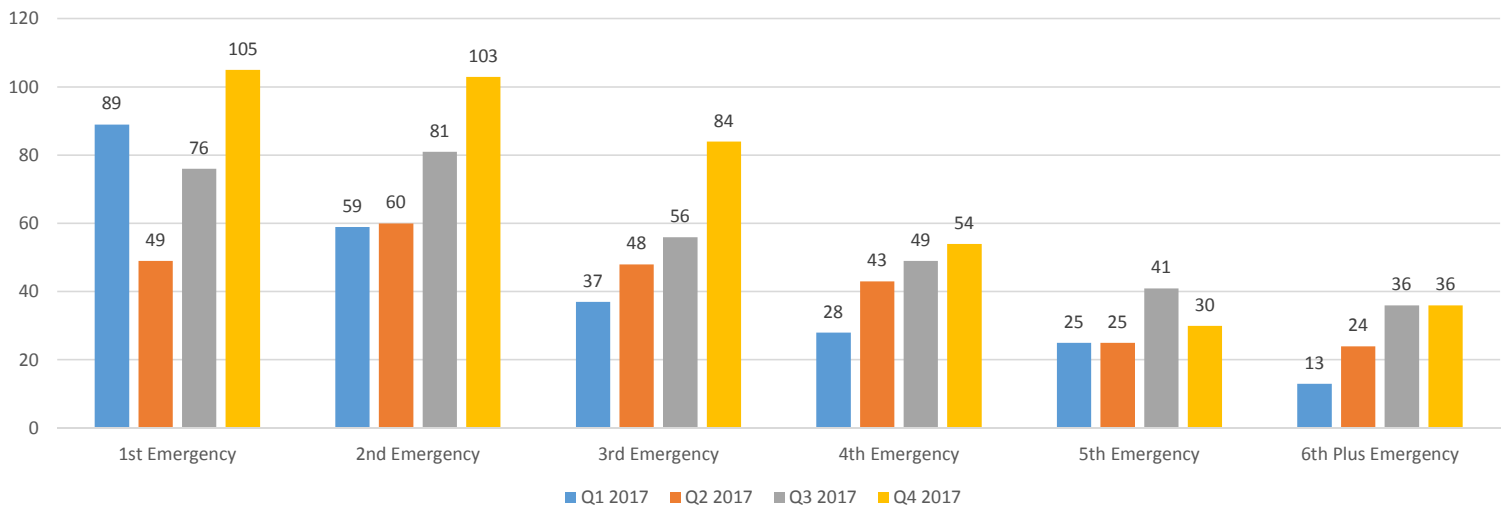
BLS Fracile Response % (under 8:00)



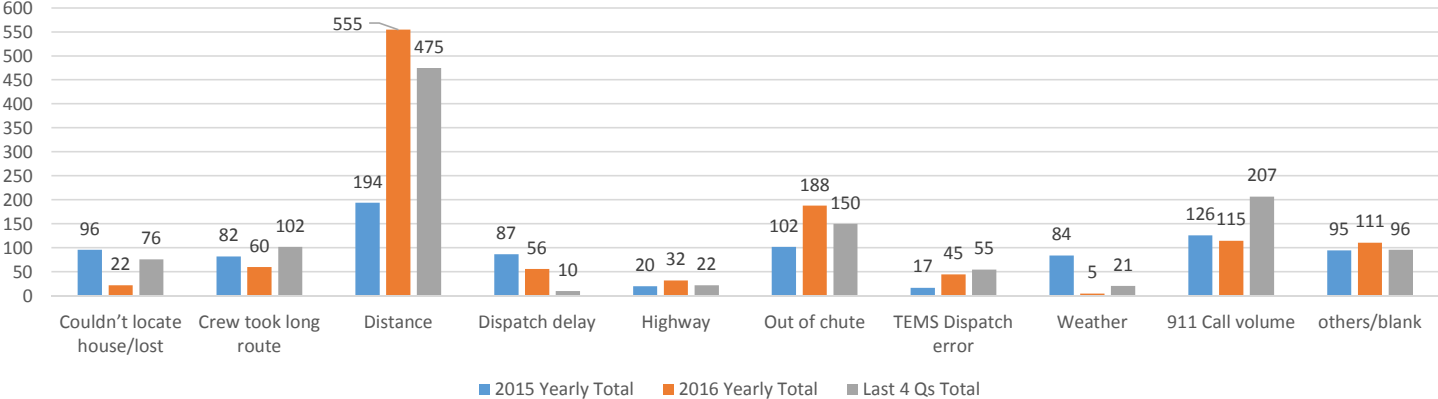
Q4 2017 BLS OUTLIERS: Yearly view



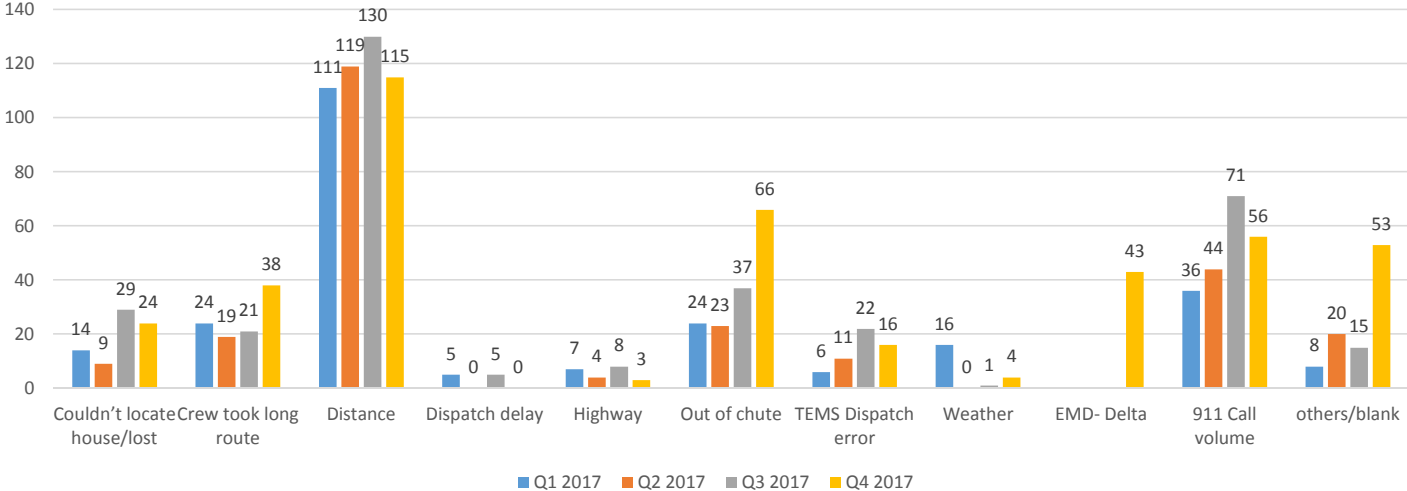
Q4 2017 BLS OUTLIERS: Qrts View



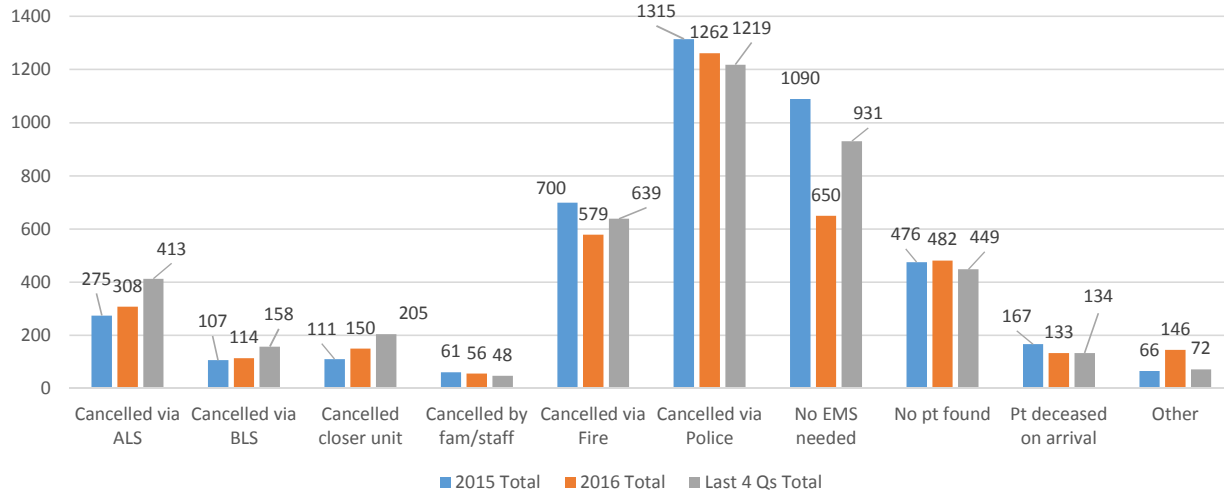
Q4 2017 BLS REASONS OVER 7:59: Yearly view



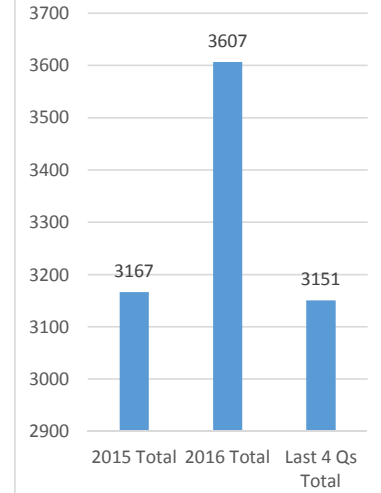
Q4 2017 BLS REASONS OVER 7:59: Qrts View



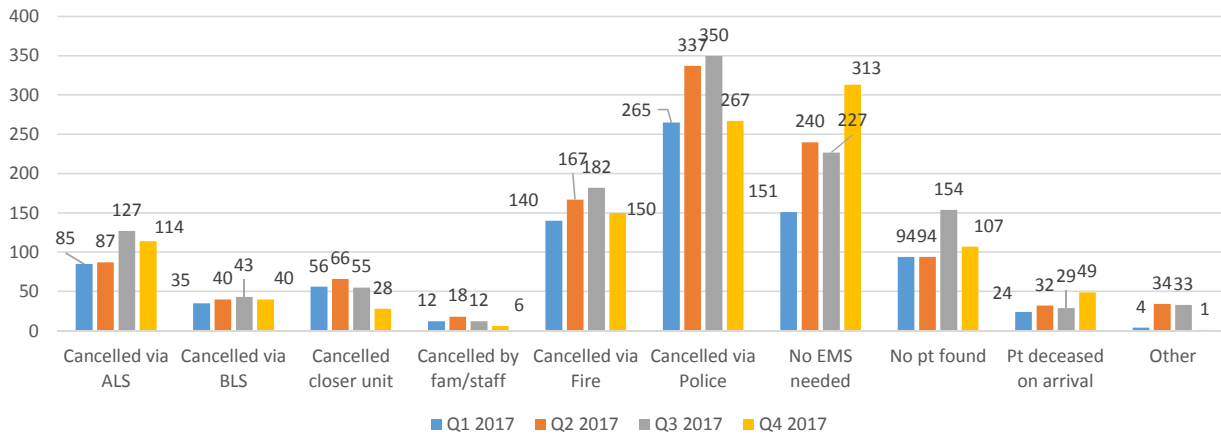
BLS No Transports: Years View



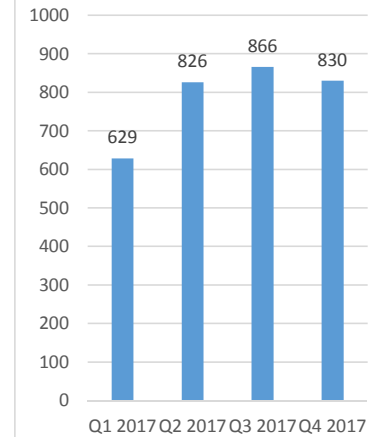
Pt refusal- Year



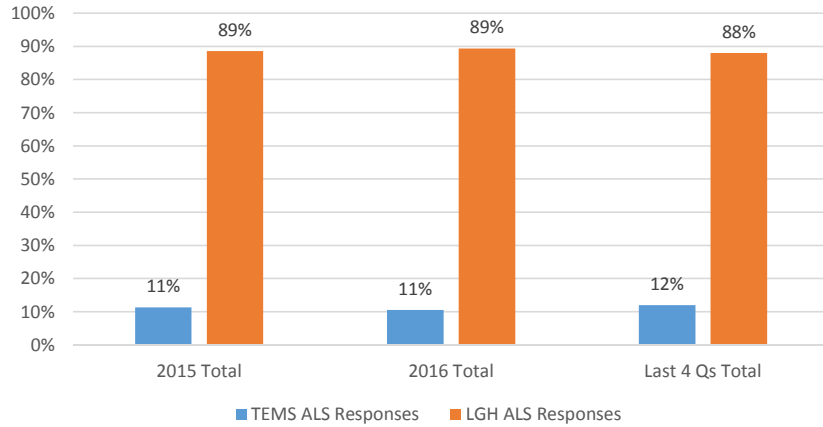
BLS No Transports: Qrts View



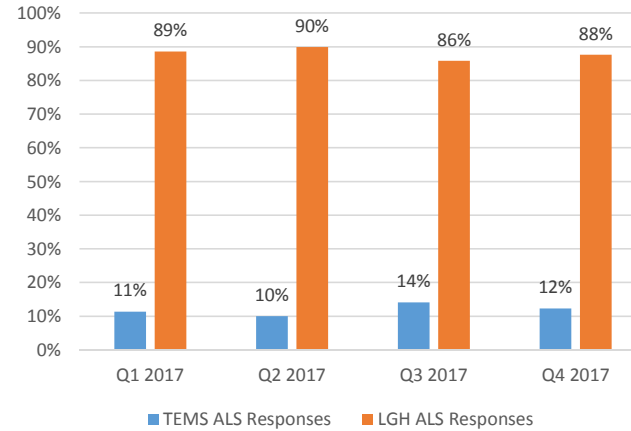
Pt refusal-Qrts



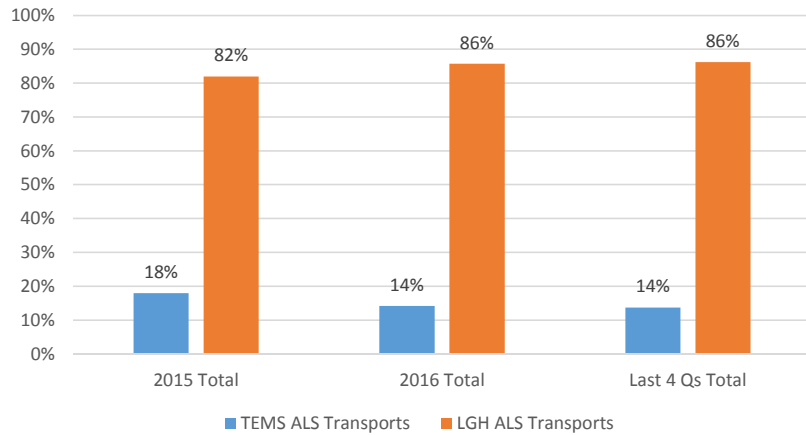
Q4 2017 ALS Response %: Yearly View



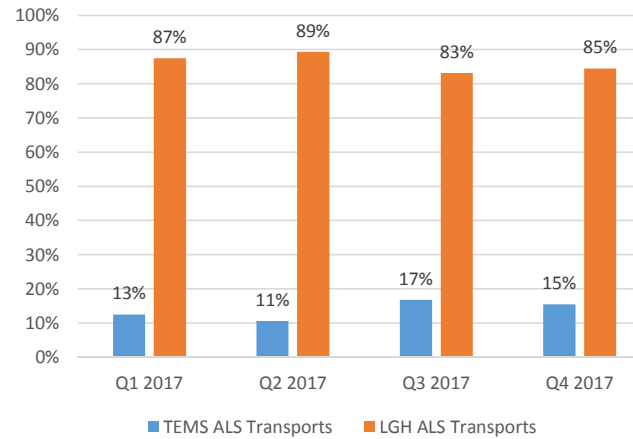
Q4 2017 ALS Response %: Qrts View



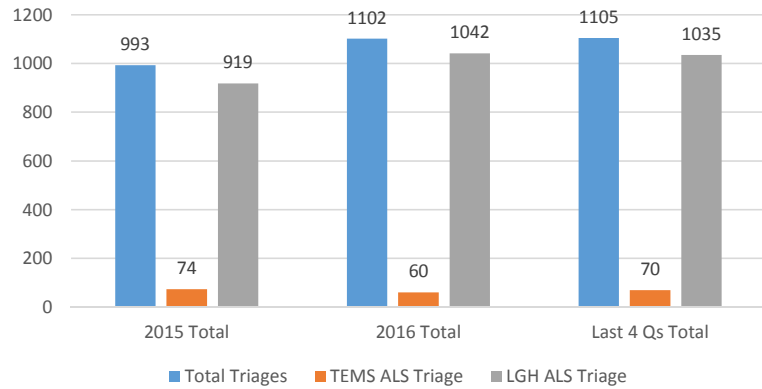
Q4 2017 ALS Transports %: Yearly View



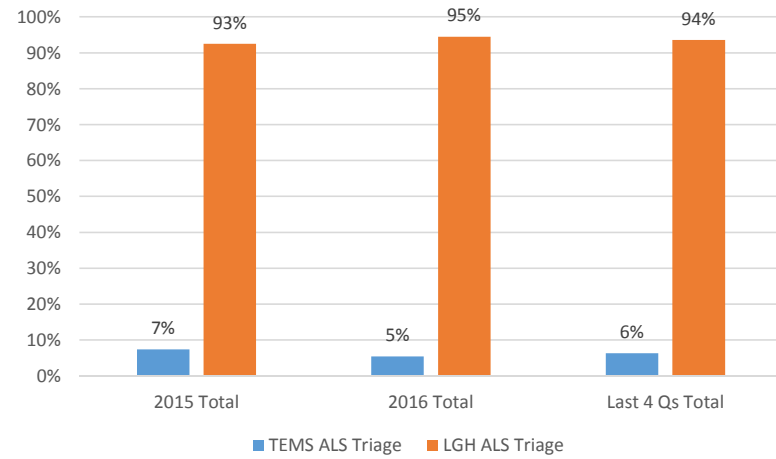
Q4 2017 ALS Transports %: Qrts View



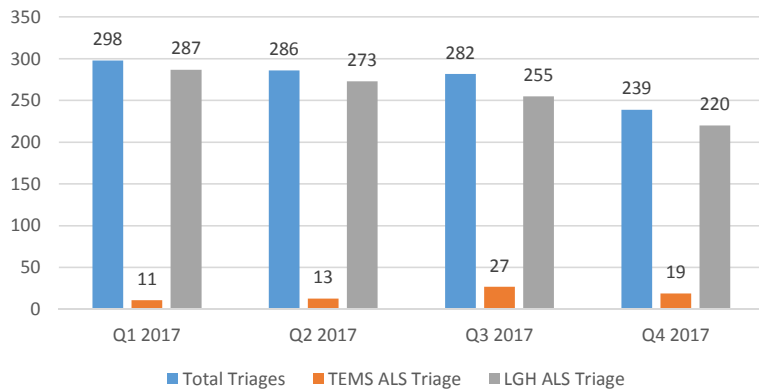
Q4 2017 Triaged: Yearly View



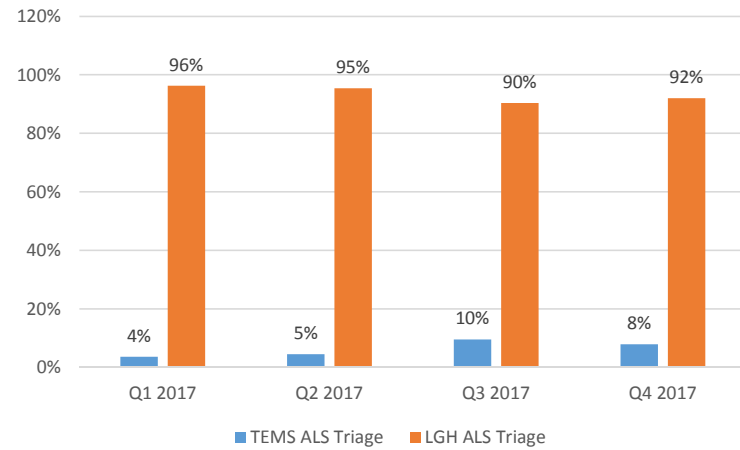
Q4 2017 Triaged: Yearly View %

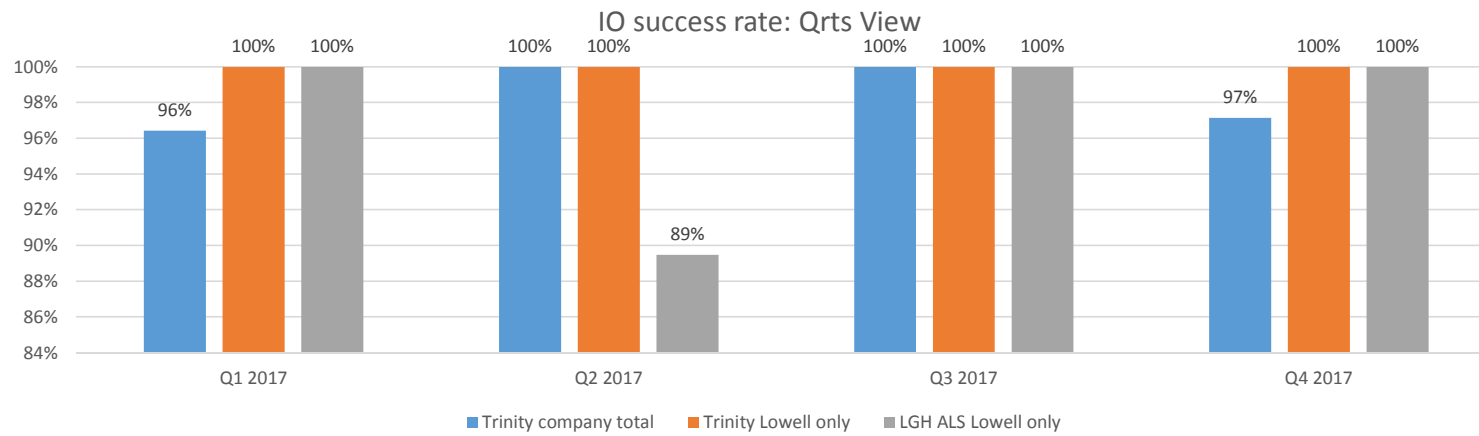
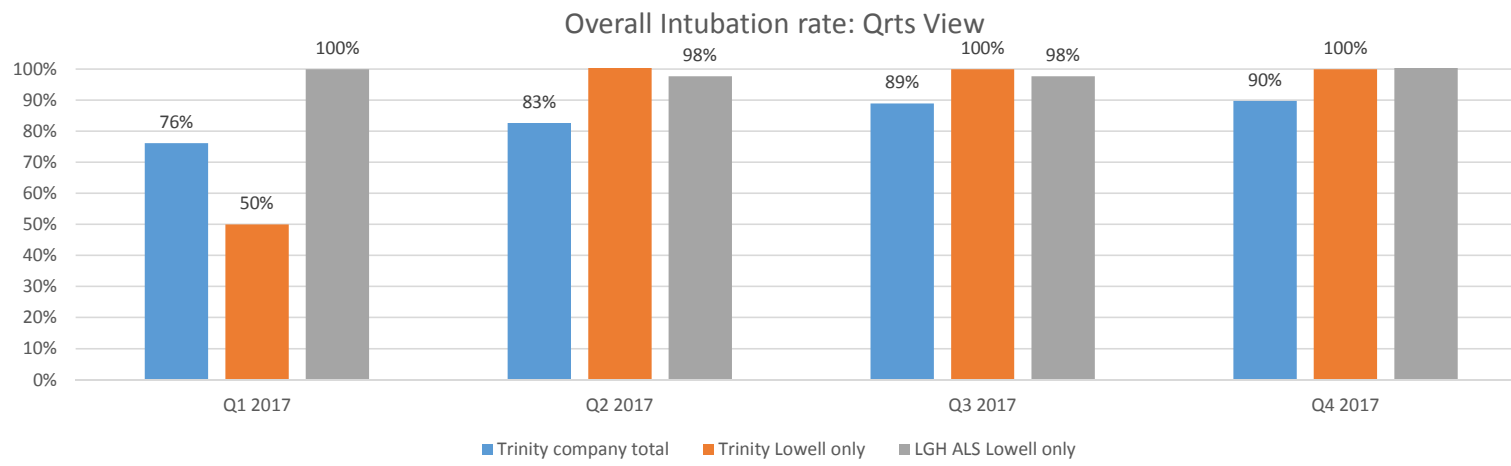


Q4 2017 Triaged: Qrts View



Q4 2017 Triaged: Qrts View %





New to Trinity EMS Q4 2017

Last Name	First Name	Title	Hire Date	Position	MA Certification #	MA Certification Exp	National Registry Certification	National Registry Exp.
Anderson	Cody	(FT) EMT-B	2017-11-13	EMT-B	E0911273	2020-04-01	E3352826	2021-03-31
Lian	Zhifeng	(PT) EMT-P	2017-11-13	EMT-P	P0902744	2020-04-01	M5048972	2020-03-31
Ratte	Emily	(FT) EMT-B	2017-11-13		E0910348	2020-04-01		
Tapley	Dyllan	(FT) EMT-P	2017-11-13	EMT-P	P0902754	2020-04-01	M5052212	2020-03-31
Chidester	Sandra	(PT)EMT-B EMD (BLS TFE)	2017-10-30	EMT-B	E901100	2018-04-01	E3098302	2018-03-31
Corliss	Ryan	(PT) EMT-B	2017-10-23	EMT-B	E0909355	2019-04-01	E3306594	2019-03-31
Fleming	Matthew	(FT) EMT-P	2017-10-23	EMT-P	P834005	2019-04-01		
Guzman	Champagne	(PT) EMT-B	2017-10-23	EMT-B	E0907933	2019-04-01	E3264530	2018-03-31
Hentz	Courtney	(FT) EMT-B	2017-10-23	EMT-B	E0910924	2020-04-01		
LaCarbonara	Joseph	(FT) EMT-B	2017-10-23	EMT-B	E0911294	2020-04-01	E3347672	2020-03-31
Lavallee	Joel	(PT) EMT-B	2017-10-23	EMT-B	E0911145	2020-04-01	E3346723	2020-03-31
Lombard	Kevin	(PT) EMT-B	2017-10-23	EMT-B	E0905244	2018-04-01	E3204278	2018-03-31
Ouellette	Kerri	(FT) EMT-B	2017-10-23	EMT-B	E0908283	2019-04-01	E3278009	2019-03-31
Walsh	Alexander	(FT) EMT-B	2017-10-23	EMT-B	E0911121	2020-04-01	E3349707	2020-03-31

	2015 Total	2016 Total	Last 4 Qs Total	Q1 2017	Q2 2017	Q3 2017	Q4 2017
Total ORI in Lowell	579	687	802	176	211	250	165
Priority 1 ORI in Lowell	284	382	468	109	122	147	90
Trinity wide ORI	971	1122	1255	285	313	396	261
Trinity wide Priority 1	542	586	752	181	195	228	148

ORI in Lowell by setting:

	2015 Total	2016 Total	Last 4 Qs Total	Q1 2017	Q2 2017	Q3 2017	Q4 2017							
Inside Private home	286	49%	334	49%	348	43%	89	51%	94	45%	94	38%	71	43%
Public location inside	73	13%	78	11%	55	7%	20	11%	14	7%	10	4%	11	7%
Public location outside	187	32%	250	36%	370	46%	59	34%	97	46%	137	55%	77	47%
Other	33	6%	25	4%	29	4%	8	5%	6	3%	9	4%	6	4%

Gender:

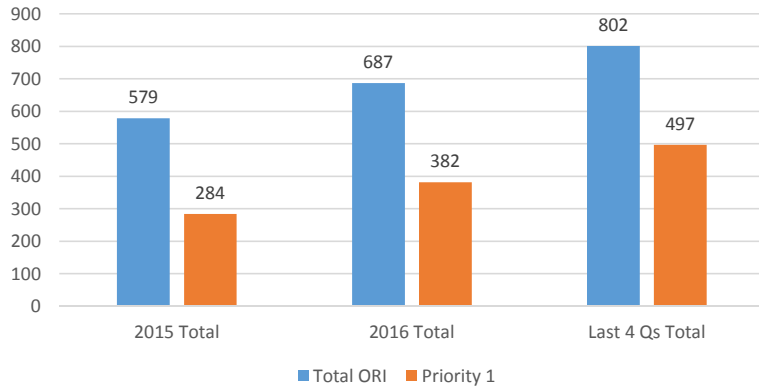
Female	160	28%	194	28%	234	30%	62	35%	62	30%	62	26%	48	29%
Male	419	72%	493	72%	558	70%	114	65%	147	70%	180	74%	117	71%
Females U20	4	2%	3	2%	6	3%	3	2%	1	2%	2	3%	0	0%
Female 20-29	48	29%	55	28%	70	30%	24	14%	19	31%	15	24%	12	25%
Female 30-39	57	34%	67	35%	101	43%	25	14%	24	39%	27	44%	25	52%
Female 40 - 49	38	23%	48	25%	37	16%	5	3%	10	16%	12	19%	10	21%
Female 50- +	21	13%	21	11%	20	9%	5	3%	8	13%	6	10%	1	2%
Male U20	1	0%	5	1%	2	0%	1	1%	0	1%	1	0%	0	1%
Male 20-29	142	34%	122	25%	163	29%	36	20%	36	24%	49	24%	42	27%
Male 30- 39	125	30%	154	31%	194	35%	38	22%	60	41%	57	41%	39	32%
Male 40 - +	67	16%	114	23%	115	21%	22	13%	29	20%	37	20%	27	21%
Male 50- +	84	20%	98	20%	84	15%	17	10%	22	15%	36	15%	9	20%

	2015 Total		2016 Total		Last 4 Qs Total		Q1 2017		Q2 2017		Q3 2017		Q4 2017	
Acre	80	14%	129	19%	106	13%	18	10%	31	15%	44	18%	13	8%
Back Central	77	13%	72	10%	90	11%	18	10%	21	10%	31	12%	20	12%
Belvidere	14	2%	27	4%	21	3%	6	3%	3	1%	8	3%	4	2%
Centralville	79	14%	97	14%	131	16%	28	16%	33	16%	48	19%	22	13%
Downtown	154	27%	162	24%	182	23%	42	24%	45	21%	50	20%	45	27%
Highlands	42	7%	44	6%	53	7%	11	6%	13	6%	12	5%	17	10%
Lower Belvidere	11	2%	16	2%	14	2%	1	1%	8	4%	4	2%	1	1%
Lower Highlands	53	9%	65	9%	97	12%	18	10%	30	14%	28	11%	21	13%
Pawtucketville	36	6%	35	5%	40	5%	17	10%	6	3%	8	3%	9	5%
Sacred Heart	20	3%	29	4%	50	6%	15	9%	17	8%	10	4%	8	5%
South Lowell	12	2%	11	2%	17	2%	2	1%	3	1%	7	3%	5	3%

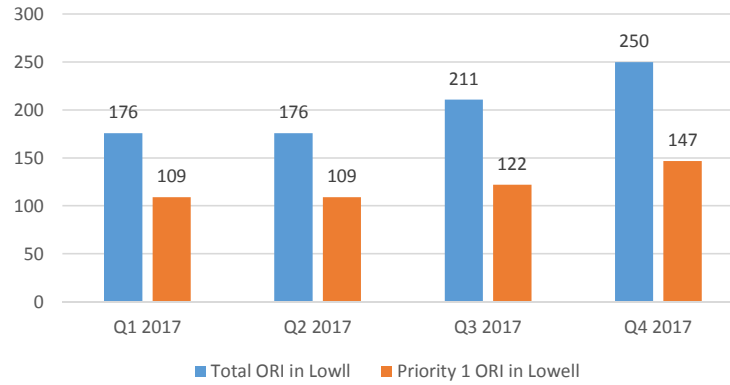
Home towns of patients:

Lowell	361	62%	450	66%	478	60%	111	63%	127	60%	147	59%	93	56%
Dracut	29	5%	22	3%	36	4%	3	2%	20	9%	6	2%	7	4%
Billerica	26	4%	16	2%	23	3%	5	3%	3	1%	11	4%	4	2%
Chelmsford	14	2%	20	3%	12	1%	8	5%	3	1%	0	0%	1	1%
Tewksbury	11	2%	14	2%	20	2%	5	3%	6	3%	6	2%	3	2%
Other/unknow	138	24%	165	24%	233	29%	44	25%	52	25%	80	32%	57	35%

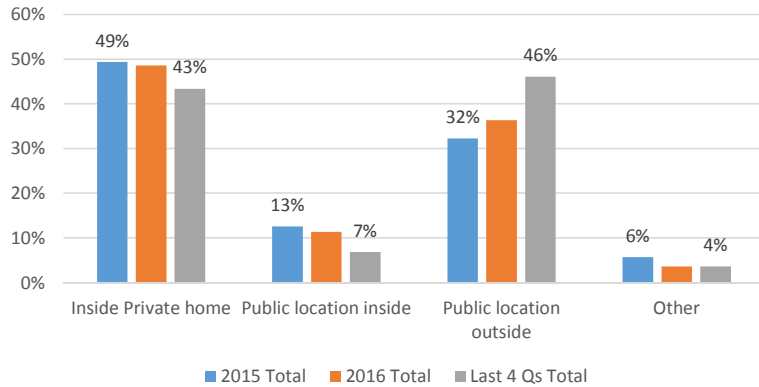
ORI Lowell- Yearly Total



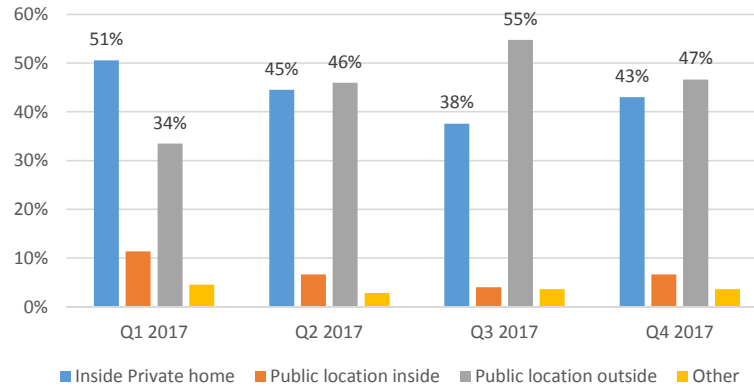
ORI- Qrts View



Setting of ORI - % Yearly View



Setting of ORI - % Qrts View



ALS: Life Support- may refer to vehicles staffed with a least one paramedic or refer to a paramedic level of patient care. Trinity Emergency ALS vehicles are staffed with two paramedics.

A Response: Is defined as dispatching or sending an ambulance to a request for service. In this report , a response is further sorted to include only emergency responses. These numbers do not include routine transfers such as dialysis patients or radiation treatment patients.

A Transport: Is defined as taking a patient in an ambulance to a destination.

BLS: Basic Life Support- may refer to a vehicle staffed with two emergency medical technicians (EMT) or an EMT level of patient care. Trinity BLS ambulances are staffed with two EMT's

EMD: Emergency Medical Dispatch- a nationally recognized system whereby dispatchers are trained and follow a specific protocol to ascertain the nature of illness/injury and provide patient care instructions to the caller until the First Responders or ambulance arrives.

Intubation Attempt: Is defined as insertion of the laryngoscope blade into the oral cavity for the purpose of inserting an endotracheal tube.

MAI: Medication Assisted Intubation is generally regarded as facilitating an intubation with the use of sedatives. In Massachusetts how ever, this term includes the use of Paralytics. The Massachusetts MAI program is not part of the standard scope of practice for Paramedics. It is controlled through the Department of Public Health's Office of Emergency Medical Services Medical Services Committee.

On scene time: The amount of time that has elapsed from the moment the ambulance is on scene to the moment the ambulance begins transport or is released back into service

Out of chute time: The amount of time that elapses from the moment when the ambulance is dispatched to the moment the ambulance begins moving towards the call.

On time performance score: Is the percentage of calls that meet or exceed the response time criteria.

Request for service: When a dispatcher receives request for an ambulance usually via telephone or radio

Response time: The amount of time that has elapsed from the moment the call is completely entered into the dispatch system to the moment the ambulance arrives on scene.

RSI: Rapid Sequence Intubation is the facilitation of intubation using both sedatives and paralytics

Service Zone Plan: M.G.L. Part 1 Title XVI Chpt. 11C Section 1 defines as "a geographic area defined by and comprised of one or more local jurisdictions, in which a local jurisdiction may select and the department shall designate an EMS first response service and an ambulance service to provide EMD first response and primary ambulance response to the public within the defined area, pursuant to section 10." Massachusetts Regulations 105 CMR 170.249.

Transport time: The amount of time that has elapsed from the moment the ambulances leaves the scene with a patient to the moment the ambulance arrives at the receiving facility

Triage down: When a paramedic units arrives at the patients side and based on the patient condition determines that the patient may be treated and transported at the BS level. Note- There is no protocol for this practice, however, OEMS does address it though an administrative advisory: A/R5=620.

- The following document is a detailed outline of the reporting process used by Trinity EMS.
- **Responding lights and sirens**
 - From Lowell 911
 - All calls require a lights and sirens response regardless of the patients condition except
 - Needle pick ups
 - Pt carry down/up without a medical issue
 - Unless requested to response without lights and sirens by the 911 center.
 - Direct to Trinity calls that Trinity EMD's
 - Bravo, Charlie, Delta, and Echo go with lights and sirens
 - Alpha or Omega level calls go without lights and sirens
 - Direct to Trinity that Trinity doesn't EMD
 - Response lights and sirens for any patients. Unless the calling agency EMD'ed the call to a non-urgent level.
 - This set of calls would include call from UMASS PD, or other ambulance services.
- Incident
 - A request for or by someone within the city limits of Lowell that requires an EMS response.
 - Each request is counted as 1 incident
 - A patient that gets a BLS unit for back pain is counted as 1 incident
 - A 10 car MVC with 20 patients requiring 6 BLS, 2 ALS, and 2 helicopters is counted as 1 incident
- Responses
 - Counts the number of occurrences when EMS vehicles response lights and sirens to a call.
 - An ALS and BLS unit response to a patient with chest pain, that counts as 2 responses. (2 vehicles put their lights on)
- Times:
 - All below are from incidents
 - BLS
 - Priority 1, and 2 incident responses
 - Includes 911 and calls direct to Trinity
 - Any call directly to Trinity from another call center that would require an emergent response
 - (IE- Umass Lowell calls Trinity for a chest pain)
 - Any Charlie, Delta, Echo response called and EMD'ed by Trinity
 - Includes call when ALS and BLS responded as well as call when just BLS responded.
 - **Q# year# Performance score**
 - Is the created by
- Dividing the number of incidents BLS units responded to.

- Into the number of those calls that shows a response time over 08:00 or greater
 - Calls excluded
 - Delta level calls EMD'ed by Trinity that had a total response time of greater than 07:59
- **Avg out of chute**
 - Time from Trinity designated and selected ambulance was assigned call to selected crew to the time selected vehicles starts movement towards this call
 - Excluded-
 - Any time showing more than 10 minutes is excluded as likely time stamp missing
- **Avg response time**
 - From Call saved by Trinity dispatch to time ambulance arrived at geocoded location of the call.
 - Within Trinity CAD- The call saved time is called "call taken". This time is created after Trinity dispatch get an address, apartment, complaint, and any other info 911 passed along.
 - Excluded-
 - Charlie, delta, Echo, and Omega calls direct and EMD'ed by Trinity that result in a response time over 07:59
 - Any time showing more than 20 minutes is excluded as likely time stamp missing
- **Avg on scene time**
 - Includes only calls included above
 - Time from crew arrival on site to time vehicle:
 - Clears
 - Occupies to the hospital
 - Excluded
 - Any time showing more than 30 minutes is excluded as likely time stamp missing
- **Avg transport time**
 - Includes only calls included above
 - Time from crew: Clears or arrives to the hospital
 - Excluded
 - Any time showing more than 20 minutes is excluded as likely time stamp missing
- **# of events >7:59 or greater**
 - Includes any call that includes calls included from reasons earlier in the section
 - That's response time is greater than 07:59
 - Excluded
 - Any call where the unit is canceled prior to arrival
- Called that were EMD'ed by Trinity

- No other calls are excluded- weather, 911 call volume as examples are outliers counted and categories in the “BLS reasons over 07:59”
- **# of events using Non Trinity BLS units**
 - Requests for ambulances to Trinity that Trinity was not able to send a BLS unit on within the State mandated 5 minute dispatch time for
 - Any 911 priority 1 or 2 call
 - Any call directly to Trinity from another call center that would require an emergent response
 - (IE- UMass Lowell calls Trinity for a chest pain)
 - Any Charlie, Delta, Echo response called and EMD’ed by Trinity
- ALS
 - The only difference from the BLS is the ALS times start at dispatch, and not call created
- **BLS Outliers:**
 - For any BLS response over 07:59
 - Trinity will make note and report in this section the number of concurrent emergencies in Lowell at the time this call is created.
 - Includes 911 calls and calls direct to Trinity
 - Non-emergency and call in other cities will not be counted
- **BLS Reasons over 07:59**
 - For any BLS response over 07:59
 - Trinity will conduct a route cause analyses as to the reason for the response time
 - Trinity will take note and report in this section. These reasons will be grouping into 1 of the following
 - Couldn’t location house/lost
 - Crew passes the geo-coded location for the address more than once without getting on arrival
 - Crew took long route
 - Crew did not take the fastest route from their dispatch location to the pickup location
 - Distance
 - Usually this is used when a
 - Dispatcher gives the call out within 60 seconds
 - The crew is enroute within 120 seconds
 - Posting is happening
 - The ambulance crew went the most direct route
 - Circumstances include
 - If there is a second call in a sector of the city before reposting. 2nd call in downtown, this ambulance to the second call has two reports a much greater distance to the patient.

