



MEMO

WCICC/Communications

TO: Glenn Sedivy

FROM: Wendi Hess *W Hess*

DATE: January 10, 2022

RE: Quarterly performance measures

The following is a summary and analysis of the second quarter FY2022 (October 1, 2021 to December 31, 2021) performance measurements. Included in the report is a full year of data as a reference point so that the same quarter from the last year can be compared.

Priority 1 call start to dispatch time: We did well all quarter getting calls answered and dispatched achieving our goal of call start to dispatch in under 1 minute. September and December were busier compared to last year and we continued to achieve our goals getting calls dispatched timely. We also experienced some severe weather December 15, 2021 and staff did an outstanding job handling the workload.

Priority 1 call start to dispatch time

Month	Number of Calls	Average Call Start to Dispatch
Oct-2020	1549	01:22
Nov-2020	1590	00:42
Dec-2020	1480	00:38
Jan-2021	1320	00:36
Feb-2021	1369	00:42
Mar-2021	1442	00:46
Apr-2021	1554	00:38
May-2021	1531	00:39
Jun-2021	1593	00:47
Jul-2021	1589	00:54
Aug-2021	1775	00:39

Sep-2021	1793	00:42
Oct-2021	1709	00:38
Nov-2021	1584	00:46
Dec-2021	1617	00:43

911 Ring Time: We had a much busier quarter compared to last year; both October and December had much more activity and November was just a slight increase. Average ring time until answer continues to be achieved in under 10 seconds. We had a busy quarter and provided consistent service. Again, the severe weather December 15th contributed to the extra workload and call volume.

911 Ring Time

Month	Number of Incoming 911 Calls	Average ring time	Average call duration	Average hold time	Number of calls placed on hold
Oct-2020	4599	00:05	02:04	01:46	86
Nov-2020	4396	00:05	02:01	01:00	57
Dec-2020	3980	00:04	02:05	00:58	78
Jan-2021	3955	00:04	01:59	00:46	81
Feb-2021	3530	00:05	02:06	00:52	76
Mar-2021	4374	00:05	02:04	00:44	97
Apr-2021	4518	00:06	01:58	00:51	82
May-2021	4938	00:05	01:56	00:41	105
Jun-2021	4997	00:05	01:54	00:48	119
Jul-2021	5322	00:05	01:47	00:59	99
Aug-2021	5279	00:05	01:52	00:57	94
Sep-2021	5345	00:05	02:04	00:53	96
Oct-2021	5308	00:05	01:55	00:53	71
Nov-2021	4591	00:05	01:54	01:05	49
Dec-2021	4738	00:05	01:58	01:13	64

EMD Protocol Compliance:

The current scoring standards and corresponding goal benchmarks are:

- High Compliance & Compliant – total of both is greater than 70%
- Partial Compliance- less than 10%
- Low Compliance- less than 10%
- Non-Compliant- less than 10%

This quarter we were more consistent in reviewing calls and had a great quarter meeting our compliance goals. We did review fewer calls during shorter staffing during the holiday time period, but we will get back on track for the new year. We continue to provide individual feedback to operators and will continue to monitor to see if there is any need for performance improvement plans.

EMD Protocol Compliance

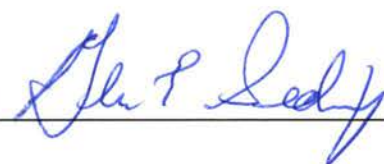
Month	Number of EMD Calls Reviewed	High Compliance & Compliant Goal >70%	Partial Compliance Goal <10%	Low Compliance Goal <10%	Non-Compliant Goal <10%
Oct- 2020	0				
Nov- 2020	0				
Dec 2020	0				
Jan 2021	51	84.1%	5.7%	2.3%	8.0%
Feb 2021	42	85.2%	1.6%	3.3%	9.8%
Mar 2021	STAFF ON LEAVE				
Apr-2021	33	75.8%	3.0%	9.1%	12.1%
May-2021	17	94.1%	0.0%	5.9%	0.0%
Jun-2021	5	100.0%	0.0%	0.0%	0.0%
Jul-2021	21	90.5%	4.8%	0.0%	4.8%
Aug-2021	47	83.0%	6.4%	0.0%	10.6%
Sep-2021	48	77.1%	10.4%	2.1%	10.4%
Oct-2021	103	81.6%	4.9%	3.9%	9.7%
Nov-2021	55	83.6%	7.3%	1.8%	7.3%
Dec-2021	26	92.3%	7.7%	0.0%	0.0%

Policy: This quarter we are back to full staff doing EMD reviews, a total of 5 EMD-Q reviewers now to help us keep on track getting calls reviewed and timely feedback to our staff.

We continue to ask additional questions on all calls for COVID screening and continue to receive positive feedback from emergency responders on the information we provide. We will continue to use these additional questions and work with EMS and Medical Control on our protocols.

Training: We will continue to give individual feedback on EMD calls and monitor to see if any additional training is necessary to those that consistently score in the non-compliant range.

Remedial Actions: No remedial actions have been taken related to performance measures.

Report Approved by  Date: 1-11-22