



## *THE BASIC FACTS*

### **PREHOSPITAL EMS TRACKING AND REPORTING SYSTEM**



#### *Facilitating quality improvement in EMS service delivery in Florida*

Florida continues its commitment to providing quality Emergency Medical Services for its citizens and visitors, a service that is founded on the principles of quality improvement to ensure that an optimal, uniform and standard of prehospital emergency medical care is available to everyone in Florida.

To make this commitment a reality, the Florida Prehospital EMSTAR program was created. This program provides for the collection and analysis of incident level data from EMS agencies for benchmarking and quality improvement initiatives. This program has been implemented with the guidance of a constituency based advisory group who has defined and maintains a Data Dictionary ensuring the standardized collection of EMS incident data into the state repository. The greatest asset of this program continues to be its composition of, for, and by Florida's EMS community, as evidenced by the 30 member constituent-based data committee providing project oversight and steering.

#### ***There is no opportunity to analyze or improve quality or program efficiencies without reliable data***

In 2004, The Florida Department of Health (FDOH) signed a memorandum of understanding to participate in a national project that would standardize data collection for EMS agencies nationwide. The National Emergency Medical Services Information System (NEMSIS) is the national repository used to aggregate and analyze prehospital data from all participating states.



The **Prehospital EMSTAR Program** is Florida's contribution to this national effort. This program provides for the collection and analysis of incident level data from EMS agencies for benchmarking and quality improvement initiatives. This program has been implemented with the guidance of a constituency based advisory group who has defined and maintains a Data Dictionary ensuring the standardized collection of EMS incident data into the state repository. This program will make available to our state's EMS administrators, quality managers, educators, physicians, researchers and public policy makers new facts and new tools to measure and improve prehospital medical care for Florida's citizens and visitors. Currently, biospatial is our repository for data collection and analysis for the Prehospital EMSTAR Program. These two programs are referred to as EMSTAR/biospatial.

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***EMSTAR program has been implemented under the guidance of a standing EMSAC Data Committee made up exclusively of EMS providers and constituency groups.***

#### **Objectives**

- To define and maintain a common Florida EMS data set including federally mandated data elements plus additional elements important to our state
- To collect incident level patient care records from provider agencies across the state
- To provide automated validation for submissions
- To provide meaningful analysis and reporting
- To export Florida's EMS incident level data to NEMSIS ☐☐
- To conduct all project activities in partnership with the 266 EMS provider agencies across the state



## Participation in EMSTARS

Participation in the EMSTARS program, and the transmission of electronic incident level data from EMS Providers to Florida Department of Health, is voluntary. However, EMS Providers who have chosen to participate in data exchange with the Florida Department of Health and the EMSTARS database must adhere to all the policies and procedures in the EMSTARS Program Manual. The complete provision of incident level data, and full participation in the EMSTARS Program, fulfills EMS Provider prehospital reporting requirements stipulated in subsection 64J-1.014(1), F.A.C.

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#### What Data is Collected?

EMSTARS collects a minimum set of data elements provides specific, useful, actionable information to facilitate the continued improvements in EMS service and patient care statewide. The following is representative of the data collection scope:

- All NHTSA “National” data elements for demographic data and EMS event data
- Other selected elements identified by participants and other stakeholders
- Demographic elements for the provider agency, its personnel, and patients
- Incident & unit times
- Situation & scene information
- Patient care information including vital signs, injury assessment, trauma score, and intervention & procedural information
- Outcome and disposition information



## Benefits

- Provides ability to measure and improve prehospital patient care in Florida
- Provides a reliable way to evaluate the responsiveness and effectiveness of emergency medical services on a state and national level
- Allows Florida the ability to identify areas or levels of service that may need further evaluation for improvement.
- Gives the department a method for dissemination of accurate public information and development of meaningful education and prevention programs.
- Provides all EMS organizations an avenue to promote decision making and resource allocation that are based on solid evidence rather than on isolated occurrences, assumption, emotion, politics, etc.



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#### **Information Usage and Protection**

##### **PROTECTED HEALTH INFORMATION**

Electronic Protected Health Information (ePHI) as defined by HIPAA is securely transmitted to the EMSTARS program from provider agencies across the state. However, this ePHI with personal identifiable information on patients is not accessible by unauthorized users and is not be displayed on reports that are generated.

##### **CONFIDENTIALITY**

EMSTARS is a collection of electronic patient care records submitted by licensed EMS agencies. These records are confidential and exempt pursuant to 401.30(4), Florida Statutes (F.S.). Beyond protected patient information; the EMSTARS program also contains confidential information on Florida's EMS program and the delivery of services by local provider agencies. The information contained within the program and its reports is intended for use by the department and local Quality Assurance Committees from which the data was submitted. The department may develop aggregated benchmark reports but no patient or agency identifying information should be used.

*The greatest asset of this program continues to be its composition of, for, and by Florida's EMS community, as evidenced by the 30 member constituent-based data committee of the EMS Advisory Council.*