



Title Incident Reports-The new look	Date 02/25/2019
CDE Number M-1902005	CDE Credit Hours .5 HRS

Due to a software upgrade, the incident reports that everyone is receiving from us have changed. This is because we upgraded our AQUA software to the latest and greatest version. With these changes, we just wanted to make sure you understood how to read them and where to look for our feedback throughout the incident report (IR).

The top of our IRs have not changed too much and look just like the previous IRs. One thing to note in this area is the **Complaint Description**. The only thing that will show here is what was typed in the ProQA field of "Tell me exactly what happened". If nothing is typed, this field will be blank. We can no longer edit this field and add anything to it. We will try to put it in comments so you know what type of call it was.

Incident Performance

Agency: Colorado Springs Police Department
Calltaker: Kathie Fish

Case number: 19070170
Shift/Team: Mids

Discipline: EMD
Position: ERT

Complaint Description: RP STS CHEST HURTING, COPD ACTING UP

Caller party: 1st

Code Selected: 10 - D - 4

How Obtained: E911

Call Date: 2/20/2019 5:09:30 AM

Code Reviewed: 10 - D - 2



As we move down our IR, it will list everything in the same order it is in protocol (Case Entry, Key Questions, DLS, and Customer Service). Every question has a color-coding to it. (There is a legend at the very bottom that will show you exactly what every color means) Be sure to read everything even if it is a high compliant case. We like to add educational tips and feedback throughout the call.



Case Entry

-  Address
-  Callback number
-  Primary discipline choice
-  Tell me exactly what happened.
-  Choking question
-  ECHO/Fast Track used
-  With the patient now
-  Patient count question
-  Age question
-  Age subquestion
-  Gender
-  Awake question
-  Breathing question
-  Breathing subquestion
-  Questions asked in order
-  Chief Complaint selection
-  Freelance questions
-  Freelance instructions
-  All questions/instructions given in the appropriate area
-  Obvious questions
-  Clarifiers
-  Calming techniques



Key Questions

-  Sub-Chief Complaint
-  Key Questions asked in order
-  Freelance questions
-  Freelance instructions
-  All questions/instructions given in the appropriate area
-  Obvious questions
-  Clarifiers
-  Calltaker Initiated Shunt
-  Shunted appropriately (new or updated information)
-  Followed appropriate protocol links
-  Calming techniques
-  Is the caller completely alert (responding appropriately)?
-  Is your breathing normal for you?
-  Does the caller have difficulty speaking between breaths?
-  Are you clammy or having cold sweats?
-  Have you ever had a heart attack or angina (heart pains)?
-  Did you take any drugs or medications in the past 12 hours?
-  Did you take any drugs or medications in the past 12 hours?

Comment: The caller was having a hard time speaking in full sentences and had to catch his breath before responding. Key Question, "Does the caller have difficulty speaking between breaths?" was self answered as "no" when it should have been recorded as "yes".

Comments will show at the bottom of a section. We try to give tips, kudos, and feedback as we go through so that there is a better understanding of what needs to occur.

If there is a color box in this column, it is grading the answer to the question

The Final Coding section and Dispatch Life Support sections are next. These look just like the Key Questions section. Under the Dispatch Life Support is where you will see freelance questions/instructions, followed all appropriate DLS links, and all of the diagnostics.



Final Coding

- Determinant Code
- Determinant Level
- Determinant Descriptor
- Determinant Suffix
- Did not use Malicious Final Code

Dispatch Life Support

- PAIs
- PDIs
- Freelance questions
- Freelance instructions
- All questions/instructions given in the appropriate area
- Obvious questions
- Clarifiers
- Followed appropriate DLS Links
- Met the minimum Standards of Practice
- Followed appropriate protocol links
- Calming techniques
- Breathing Verification Diagnostic
- Pulse Diagnostic
- Stroke Diagnostic
- Aspirin Diagnostic
- Compression Diagnostic
- Contraction Diagnostic
- Chemical Suicide Diagnostic

Customer service also looks the same. There will be comments from us through here as well especially if there was something done that is exceptional. Be sure to look for these comments!

Customer Service

- Calltaker attitude
- Use correct volume, tone, and rate
- Display compassion
- Avoid gaps
- Explain actions
- Provided reassurance
- Did not create uncontrollable expectations
- Avoided prohibited behaviors



The final area of the IR is the bottom where the overall performance is and the comments. We know that some only look here for their compliance level and the comments and then move on. We like to give praise throughout the IR, so as stated before, look throughout the IR to find these so you know what you are doing well. There are calls that can be difficult and even if it is a low or non-compliant call you still may have rocked it. We like to point out when you guys do a good job! This area is where you will find the color legend for the IR.

Overall Performance: Low Compliance

Comments:

Great job asking all questions as written and remembering to give the Aspirin Diagnostic! You did an excellent job continuously checking up on the patient while waiting for responders to arrive!

Legend:

47		Correct	0		Not As Scripted
1		Not Correct	0		Not Read
7		Obvious	16		N/A
			1		Input Error

Filter by:

'(No filter applied)'

We are hoping the incident reports are easier to read now and are easier to understand with the color-coding and legend available. A big thing to remember is that even if there are no comments in the bottom or final comments section, there could be comments throughout the different areas of the IR. We want to make sure you get as much information from us as possible. Always review everything in this report to make sure it is accurate and ask questions if you come across something you are unsure of. If there are suggestions on how to improve this please let us know. The IAED is working on the next version of AQUA and they want input on what we want to see on these reports.



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I verify that I read and am familiar with the contents of this document.

Please return this to your agency's training coordinator for CDE credit. If you have any questions please contact us at 911training@elpasoteller911.org

X _____
Signature _____
DATE

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Agency