

2023 Key Performance Indicators and Response Time Performance Plan

Community & Health Services Committee – March 5, 2024

John Riches, Chief

#### **2023 KPI Results**

- Vehicles responses increased but at a much slower rate than 2022
- Unit Utilization decreased compared to 2022 but remains above the Master Plan Benchmark of 35%
- Offload Delay increased
- Response times remained consistent
- Code Yellows/Reds decreased in frequency and proportion of time although the median and maximum durations increased



## Vehicle Responses and Unit Utilization

- Vehicle responses increased 1% over 2022, but this is still much higher than in 2021
- Unit Utilization: 2023 = 49% vs 2022 = 52%

- Mitigation Strategies all of these are working!
  - Council approved Paramedic Services Masterplan shift to high growth scenario
  - Addition of frontline resources to address call demand and unsustainable Unit Utilization
  - Further advancement of Community Paramedicine program to address high utilization 911 users

## **Offload Delays**

Resulted in 625 ambulance days lost - equivalent of losing 3 1/2 –
 Hour ambulance shifts per day

- Mitigation Strategies
  - Advocate to and work with hospital partners to address system pressures that cause offload delays
  - Received increased Provincial funding from the Ministry of Health for the Designated Offload Nurse Program.
    - All 3 hospitals have expanded coverage to 24 hours per day, 7 days per week.
  - Expand Patient Care Model Standards options such as Treat & Release, Treat
     & Refer, Alternative Destination

### **Response Times**

- Response Time: 1 second faster in 2023 on the 80<sup>th</sup> percentile
  - $\bullet$  2023 = 09:14
  - 2022 = 09:15
- Mitigation Strategies:
  - Hospital partners working on Offload Delays
  - Prepare for Implementation of MPDS at Cambridge CACC
  - Council approved Paramedic Services Masterplan shift to high growth scenario and addition of frontline resources to address call demand



#### **Code Red and Code Yellow**

- Code Yellow:
  - Percentage of time spent in code yellow:
    - 2023 = 7.9% (2022 = 10.3%)
- Code Red:
  - Percentage of time spent in code red:
    - 2023 0.8% (2022– 0.9%)
- Mitigation Strategies:
  - Council approved Paramedic Services Masterplan shift to high growth scenario and addition of frontline resources to address call demand
  - Update Deployment Plan to address periods of peak call demand



#### **Code Red and Code Yellow**

- Need to update the names, definitions, and criteria to more accurately reflect our system status and prepare for MPDS:
  - The current names and definitions have been in effect for almost 20 years and has never been adjusted in proportion to the number of resources deployed
  - MPDS implementation in 2026 using a colour coded dispatch system (Code Green, Code Yellow, Code Orange, Code Red, Code Purple)
  - Current Definitions/Criteria:
    - Code Red 0 ambulances available
    - Code Yellow 3 ambulances available or less



#### **Code Red and Code Yellow**

- Future Definition/Criteria (in draft):
  - Change to a "System Status" approach with 3 levels
    - Code Zero = 0 ambulances available
    - Code Critical = 3-6 ambulances available or less in proportion to the number of resources deployed
    - Code Capacity = 6-10 ambulances available or less in proportion to the number of resources deployed



## Response Time Performance Plan Highlights

- Paramedic Services met all of the Ministry of Health compliance targets for 2023
- Results indicate that 2023 was comparable to 2022 with respect to average response times.
- Despite all the system pressures, Paramedic Services continues to provide excellence in patient care and respond as quickly as possible to calls.



#### **CTAS and Sudden Cardiac Arrest**

- Paramedics apply the Canadian Triage and Acuity Scale (CTAS) to each patient they encounter. The Service is then required to use CTAS to measure compliance under the Real Time Performance Plan.
- Sudden Cardiac Arrest (SCA)
  - Ministry of Health Target: 50% of the time a defibrillator to arrive on scene in 6 minutes or less.
  - ROW Service Target: 70% of the time a defibrillator to arrive on scene in 6 minutes or less.
  - 2023 Result = 72%
    - 2023 70<sup>th</sup> percentile = 5 minutes 45 seconds or less
    - 2022 70<sup>th</sup> percentile = 7 minutes 7 seconds or less



## Response Time Performance Plan

Targets	2023	2022
CTAS 1 (8 minutes or less 70 % of the time)	<b>74%</b> 70 <sup>th</sup> percentile = 7:42	<b>74%</b> 70 <sup>th</sup> percentile = 7:31
CTAS 2 (10 minutes or less 80% of the time)	<b>81%</b> 80 <sup>th</sup> percentile = 9:54	<b>81%</b> 80 <sup>th</sup> percentile = 9:50
CTAS 3 (11 minutes or less 80% of the time)	<b>81%</b> 80 <sup>th</sup> percentile = 10:50	<b>81%</b> 80 <sup>th</sup> percentile = 10:53
CTAS 4 (12 minutes or less 80% of the time)	<b>83%</b> 80 <sup>th</sup> percentile = 11:21	<b>83%</b> 80 <sup>th</sup> percentile = 11:21
CTAS 5 (12 minutes or less 80% of the time)	<b>82%</b> 80 <sup>th</sup> percentile = 11:41	<b>80%</b> 80 <sup>th</sup> percentile = 11:57



# Changing the Response Time Performance Plan for 2025

- These targets have not been adjusted in a number of years and need to be updated to:
  - Employ best practices that are comparable to similar Paramedic Services in Ontario
  - Prioritize the highest acuity patients
  - Manage staff workload
  - Prepare for the implementation of the Medical Priority Dispatching System (MPDS) at the Cambridge Central Ambulance Communications Centre (CACC) in 2026
    - Adjust deployment plans to protect our resources for the highest acuity patients



# Changing the Response Time Performance Plan for 2025

Comparison of Response Time Performance Plan Targets

Measure	Region of Waterloo	Other Services' Targets
Sudden Cardiac Arrest	6 minutes	6 minutes
CTAS 1	8 minutes	8 minutes
CTAS 2	10 minutes	10 to 11 minutes
CTAS 3	11 minutes	15 minutes
CTAS 4	12 minutes	15 to 20 minutes
CTAS 5	12 minutes	25 to 30 minutes

Council Report in August or September seeking approval for changes

## Questions?

