



ORNGE

Accredited with Exemplary Standing

ORNGE has gone beyond the requirements of the Qmentum accreditation program and demonstrates excellence in quality improvement.

ORNGE is participating in the Accreditation Canada Qmentum accreditation program. Qmentum helps organizations strengthen their quality improvement efforts by identifying what they are doing well and where improvements are needed.

Organizations that become accredited with Accreditation Canada do so as a mark of pride and as a way to create a strong and sustainable culture of quality and safety.

Accreditation Canada commends **ORNGE** for its ongoing work to integrate accreditation into its operations to improve the quality and safety of its programs and services.

ORNGE (2022)

Ornge, a not-for-profit, charitable organization, is Ontario's provider of air ambulance and related services. Established in 2006, Ornge is responsible for approximately 21,000 patient-related transports each year, serving a population of more than 13 million people across 1 million square kilometres. With a fleet that includes airplanes, helicopters and land ambulances, Ornge crews perform emergent and urgent inter-facility transports and emergent on-scene responses while supporting healthcare in remote communities across Ontario. The Ornge team consists of paramedics, pilots, aircraft maintenance engineers, communications officers, physicians, educators and corporate support staff.

Accreditation Canada

We are independent, not-for-profit, and 100 percent Canadian. For more than 55 years, we have set national standards and shared leading practices from around the globe so we can continue to raise the bar for health quality.

As the leader in Canadian health care accreditation, we accredit more than 1,100 health care and social services organizations in Canada and around the world.

Accreditation Canada is accredited by the International Society for Quality in Health Care (ISQua) www.isqua.org, a tangible demonstration that our programs meet international standards.

Find out more about what we do at www.accreditation.ca.

Demonstrating a commitment to quality and safety

Accreditation is an ongoing process of evaluating and recognizing a program or service as meeting established standards. It is a powerful tool for quality improvement. As a roadmap to quality, Accreditation Canada's Qmentum accreditation program provides evidence-informed standards, tools, resources, and guidance to health care and social services organizations on their journey to excellence.

As part of the program, most organizations conduct an extensive self-assessment to determine the extent to which they are meeting the Accreditation Canada standards and make changes to areas that need improvement. Every four years, Accreditation Canada surveyors, who are health care professionals from accredited organizations, visit the organization and conduct an on-site survey. After the survey, an accreditation decision is issued and the ongoing cycle of assessment and improvement continues.

This Executive Summary highlights some of the key achievements, strengths, and opportunities for improvement that were identified during the on-site survey at the organization. Detailed results are found in the organization's Accreditation Report.

On-site survey dates

October 31, 2022 to November 4, 2022

Locations surveyed

- 5 locations were assessed by the surveyor team during the on-site survey. Locations and sites visited were identified by considering risk factors such as the complexity of the organization, the scope of services at various sites, high or low volume sites, patient flow, geographical location, issues or concerns that may have arisen during the accreditation cycle, and results from previous on-site surveys. As a rule, sites that were not surveyed during one accreditation cycle become priorities for survey in the next.
- All sites and services are deemed **Accredited with Exemplary Standing** as of the date of this report.

See **Appendix A** for a list of the locations that were surveyed.

Standards used in the assessment

- 3 sets of standards were used in the assessment.

Summary of surveyor team observations

These surveyor observations appear in both the Executive Summary and the Accreditation Report.

During the on-site survey, the surveyor team undertook a number of activities to determine the extent to which the organization met the accreditation program requirements. They observed the care that was provided; talked to staff, clients, families and others; reviewed documents and files; and recorded the results.

This process, known as a tracer, helped the surveyors follow a client's path through the organization. It gives them a clear picture of how service is delivered at any given point in the process.

The following is a summary of the surveyor team's overall observations.

Ornge is the province of Ontario's air ambulance and land-based critical care provider. Ornge is a non-profit charitable organization servicing a population of 14 million people and over 1 million square kilometers. Ornge's fleet consists of owned and operated assets of 8 fixed-wing and 12-rotor wing (helicopters) aircraft. In addition, there are 14 land-based critical care transport ambulances (including contracts with Toronto Paramedic Service). There are 7 rotor wing bases, 3 fixed wing bases, and 4 critical care land bases. In addition, Ornge uses contracted aircraft, pilots, and paramedics through service agreements (SA) primarily focused on transporting low-acuity calls.

Ornge transports approximately 20,000 patients annually. More than 90% of the call volume is inter-facility transfers (IFT) in addition to providing over 700 organ-related transports. Ornge Operation Control Centre (OCC) is the central coordination center for all IFT transfer logistics and all flight planning. The OCC has a team of 51 unionized coordinators to track, plan, and medically coordinate patient transport across the province. Through the OCC the transport medical physician (TMP) provides real-time support to their direct Ornge clinical staff and their SA partners.

Since the last survey, the organization has developed a new strategic plan called iPropel that uses the four blades of an aircraft propeller to simulate the four pillars of the plan. This strategic plan is in place until 2024 focusing on:

- Invent Practice in Transport Medicine
- Improve our Processes to achieve operational excellence
- Integrate Provincially
- Inspire our People

With the inclusion of the organization's motto of "health equity in motion", Ornge has set itself up well with not only an excellent strategic focus but a unique lens of health equity through its role in provincial IFT's. The organization's experience over the pandemic has solidified its role in providing health access to rural communities and health equity to underserved populations.

This was a passion and focus for not only the senior leadership of Ornge but a palpable value of the board of directors. In addition, Ornge has been innovative in looking at transport needs of specific

vulnerable populations and has put in place a mental health transport team consisting of an RN, Paramedic, and hospital security officer. This unique approach better addresses the transportation needs of the patients through a trauma-informed approach.

Ornge is very aware of its organizational risks both from the micro level and enterprise level. Health human resources (HHR) is the number one concern both for the executive leadership and the board. The HHR problem is not unique to Ornge as every aspect of the health sector is being faced with this challenge. The organization is doing the best it can with mitigating this risk and creatively looking at all aspects to recruit and retain staff to maintain their current and future needs.

Ornge has prepared itself well for this Qmentum process which is not only shown in its compliance with the standards but also genuine conversation with the board, leadership, and frontline staff. The organization has used the Accreditation Canada standards to focus its attention on quality, improvement, and patient safety. This has also resonated with the frontline staff in both their understanding of the accreditation process and their roles in patient safety.

During the base visits, the survey team was not able to do any fly or ride-outs with crews due to liability issues with Accreditation Canada and Ornge. As such, the surveyors did their best in assessing the episode of care standard with the crews. The observations and feedback from the surveyor are based on conversations on the standards with the crews and are not witnessed in practice.

The organization's medical staff follows clinical practice guidelines and standardized protocols are used to assess the physical, emotional, and mental status of patients. The results of the assessment are used to identify the patient's immediate needs, make care decisions, and select the best destination setting. There is an open, transparent, and respectful relationship with each patient, and the patient's wishes regarding family involvement in their care are respected and followed where appropriate.

Ethics-related issues are proactively identified, managed, and addressed with escalation to TMP as required. The organization has developed a clear and usable ethical framework. There is evidence that staff has been orientated to this process. In addition, the organization demonstrated that patients and families are provided with information about how to file a complaint or report violations of their rights.









Ornge is an innovative industry leader in IFT and HEMS operations. The organization continues to expand its role in the community and demonstrates its strategic quality focus in all corners of the province. The organization's leaders and frontline staff have an intrinsic passion for patient care, which is demonstrated in their daily work. The organization will need to continue to embed the patient and family voices of all the communities Ornge services on their journey of continuous improvement.

Overview: Quality dimensions results

Accreditation Canada uses eight dimensions that all play a part in providing safe, high quality health care.

These dimensions are the basis for the standards, and each criteria in the standards is tied to one of the quality dimensions.

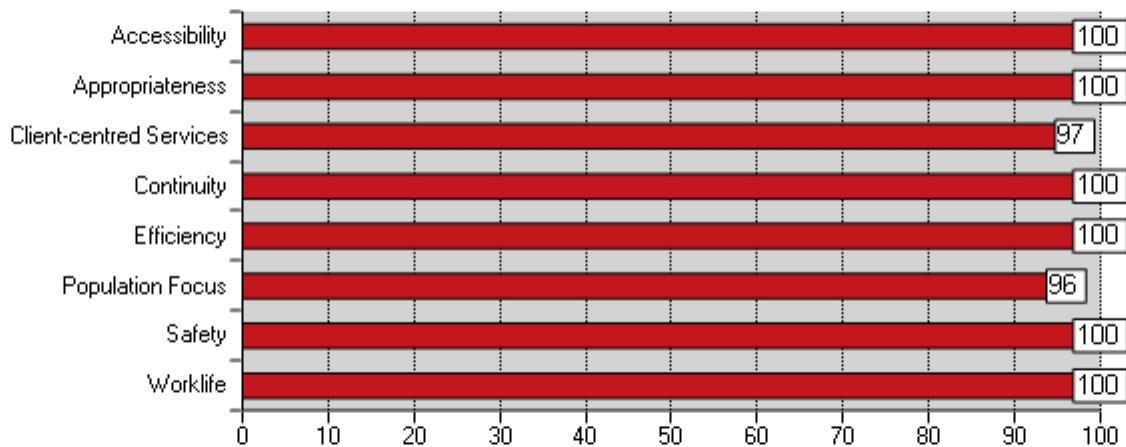
The quality dimensions are:

-  **Accessibility:** Give me timely and equitable services
-  **Appropriateness:** Do the right thing to achieve the best results
-  **Client-centred Services:** Partner with me and my family in our care
-  **Continuity:** Coordinate my care across the continuum
-  **Efficiency:** Make the best use of resources
-  **Population Focus:** Work with my community to anticipate and meet our needs
-  **Safety:** Keep me safe
-  **Worklife:** Take care of those who take care of me

Taken together, the dimensions create a picture of what a high quality health care program or service “looks like.” It is easy to access, focused on the client or patient, safe, efficient, effective, coordinated, reflective of community needs, and supportive of wellness and worklife balance.

This chart shows the percentage of criteria that the organization met for each quality dimension.

Quality Dimensions: Percentage of criteria met



Overview: Standards results

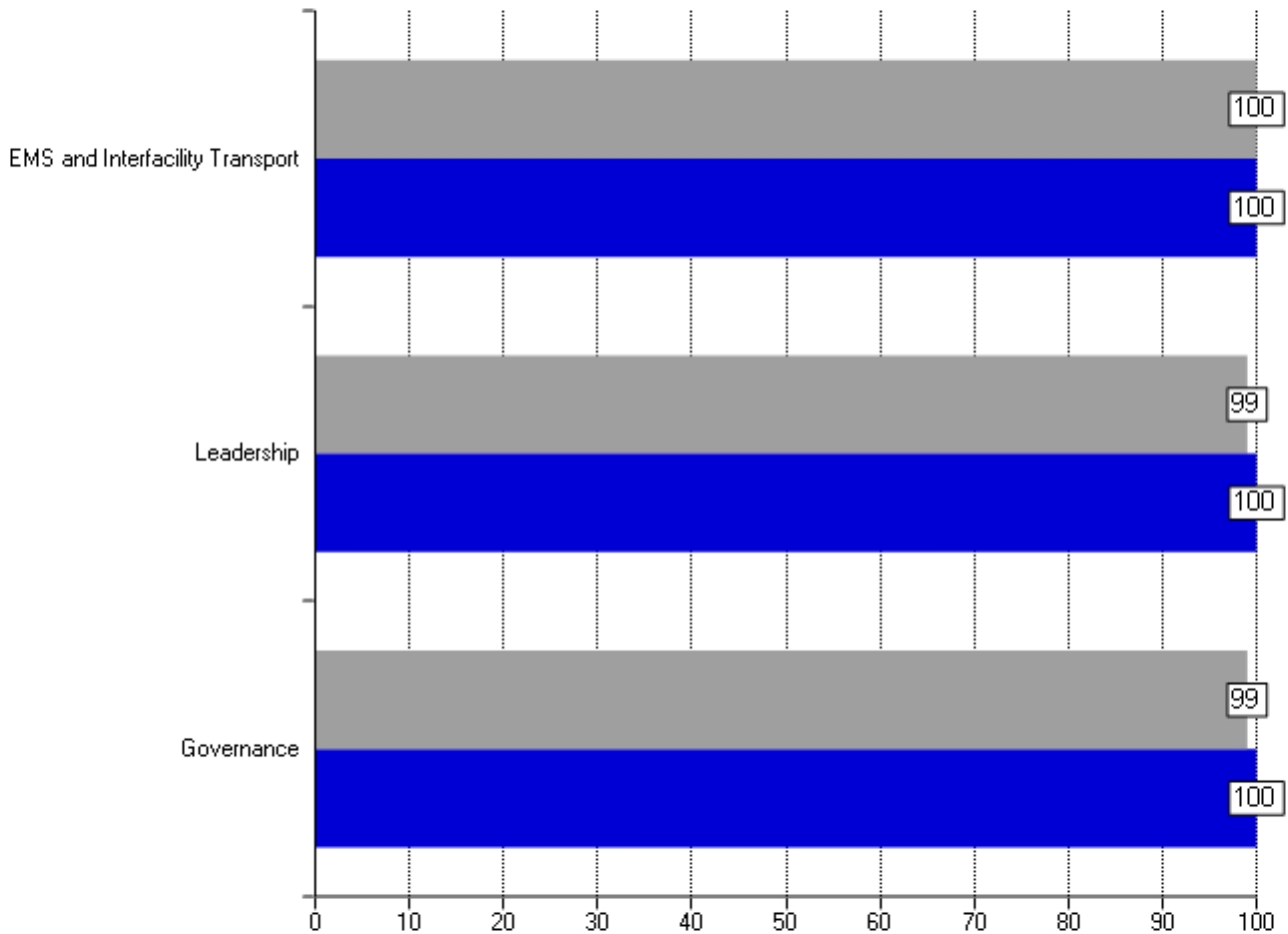
All of the standards make a difference to health care quality and safety. A set of standards includes criteria and guidelines that show what is necessary to provide high quality care and service.

Some criteria—specifically those related to safety, ethics, risk management, or quality improvement—are considered high priority and carry more weight in determining the accreditation decision.

This chart shows the percentage of high priority criteria and the percentage of all criteria that the organization met in each set of standards.

Standards: Percentage of criteria met

■ High priority criteria met
 ■ Total criteria met



Overview: Required Organizational Practices results

Accreditation Canada defines a Required Organizational Practice (ROP) as an essential practice that must be in place for client safety and to minimize risk. ROPs are part of the standards. Each one has detailed tests for compliance that the organization must meet if it is to meet the ROP.

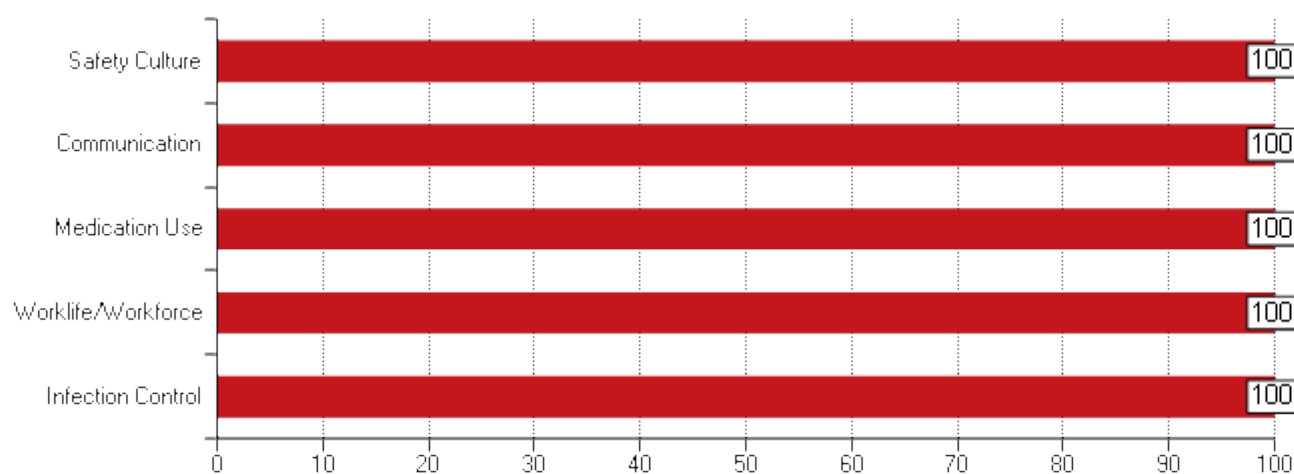
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes how select ROPs are being met across the country.

ROPs are categorized into six safety areas, each with its own goal:

- **Safety culture:** Create a culture of safety within the organization
- **Communication:** Improve the effectiveness and coordination of communication among care and service providers and with the recipients of care and service across the continuum
- **Medication use:** Ensure the safe use of high-risk medications
- **Worklife/workforce:** Create a worklife and physical environment that supports the safe delivery of care and service
- **Infection control:** Reduce the risk of health care-associated infections and their impact across the continuum of care/service
- **Risk assessment:** Identify safety risks inherent in the client population

See **Appendix B** for a list of the ROPs in each goal area.

ROP Goal Areas: Percentage of tests for compliance met



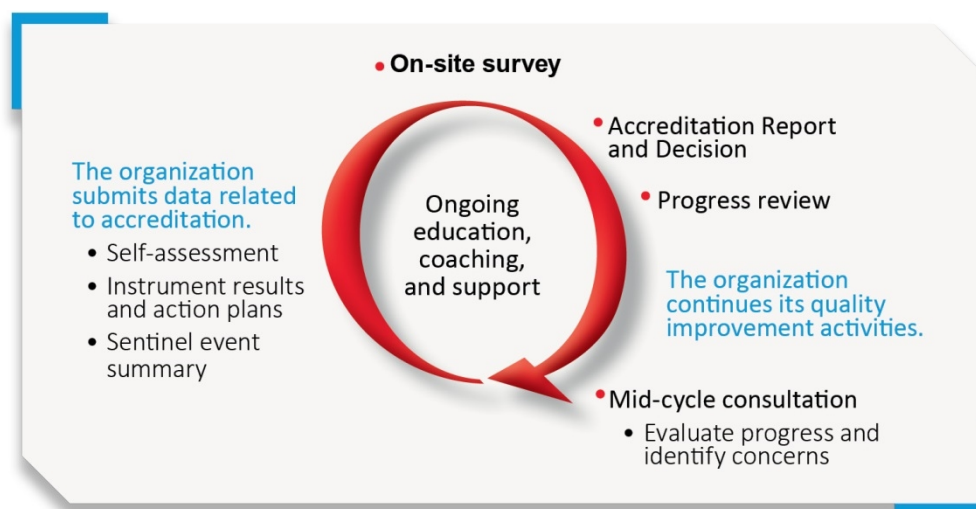
The quality improvement journey

The Qmentum accreditation program is a four-year cycle of assessment and improvement, where organizations work to meet the standards and raise the quality of their services. Qmentum helps them assess all aspects of their operations, from board and leadership, to care and services, to infrastructure.

The program identifies and rewards quality and innovation. The time and resources an organization invests in accreditation pay off in terms of better care, safer clients, and stronger teamwork. Accreditation also helps organizations be more efficient and gives them structured methods to report on their activities and what they are doing to improve quality.

In the end, all Canadians benefit from safer and higher quality health services as a result of the commitment that so many organizations across the country have made to the accreditation process.

Qmentum: A four-year cycle of quality improvement



As **ORNGE** continues its quality improvement journey, it will conduct an in-depth review of the accreditation results and findings. Then a new cycle of improvement will begin as it incorporates any outstanding issues into its overall quality improvement plan, further strengthening its efforts to build a robust and widespread culture of quality and safety within its walls.

Appendix A: Locations surveyed

- 1 Headquarters
- 2 London - RW - 792 - YXU
- 3 Sioux Lookout - FW - 795 - YXL
- 4 Thunder Bay - FW - 790, RW - 797 - YQT
- 5 Toronto - RW - 799 - YTZ

Appendix B

Required Organizational Practices

Safety Culture

- Accountability for Quality
 - Patient safety incident disclosure
 - Patient safety incident management
 - Patient safety quarterly reports
-

Communication

- Client Identification
 - Information transfer at care transitions
-

Medication Use

- High-Alert Medications
 - Infusion Pumps Training
 - Narcotics Safety
-

Worklife/Workforce

- Patient safety plan
 - Patient safety: education and training
 - Preventive Maintenance Program
 - Workplace Violence Prevention
-

Infection Control

- Hand-Hygiene Compliance
 - Hand-Hygiene Education and Training
 - Reprocessing
-