



2019/2020

Ornge Quality Improvement Plan

Year End Report



The purpose of this Quality Improvement Plan is to provide a framework for Ornge initiatives that are designed to improve patient experience and care, clinical practice, and operational service delivery to meet the transport needs of Ontario residents within a broader healthcare system.

Quality Improvement Plan

In keeping with the amended Performance Agreement, Ornge prepares an annual Quality Improvement Plan (QIP). The QIP is a framework for monitoring key aspects of Ornge’s service delivery, such as patient experience and care, clinical practice, and operational service delivery.

QIP indicators are chosen each year and reflect organizational priorities, including some identified areas for improvement. The indicators are aligned with Ornge’s strategic priorities, and Health Quality Ontario’s six quality elements for health care organizations. Ornge’s patient and health care partner surveys help to inform the QIP.

QIP indicators change from one year to the next so that the organization’s areas of focus remain current. Progress is measured on a quarterly basis.

By monitoring QIP results and other key performance indicators, Ornge maintains a steady watch over organizational quality with an overall goal of improving the effectiveness of our service delivery. Attached are Ornge’s 2019/2020 Year End Report, and 2020/2021 Targets.

A high-quality health system is defined as “a health system that delivers world-leading safe, effective, patient-centred services, efficiently and in a timely fashion, resulting in optimal health status for all communities.” This definition includes six elements of quality and forms the basis of Ontario Health – Quality’s framework for quality improvement.

Objective	Measure/Indicator	Target	Trend	Notes																																				
Quality Element: Effective Care																																								
Improve Clinical Quality	% Documentation of temperature in:		<p>Quarterly Trend of Temperature Documented</p> <table border="1"> <thead> <tr> <th>Quarter</th> <th>Stroke (%)</th> <th>Trauma (%)</th> <th>ROSC (%)</th> </tr> </thead> <tbody> <tr> <td>FY18-19 Q1</td> <td>54%</td> <td>59%</td> <td>90%</td> </tr> <tr> <td>FY18-19 Q2</td> <td>66%</td> <td>53%</td> <td>84%</td> </tr> <tr> <td>FY18-19 Q3</td> <td>51%</td> <td>66%</td> <td>88%</td> </tr> <tr> <td>FY18-19 Q4</td> <td>78%</td> <td>69%</td> <td>84%</td> </tr> <tr> <td>FY19-20 Q1</td> <td>84%</td> <td>93%</td> <td>88%</td> </tr> <tr> <td>FY19-20 Q2</td> <td>86%</td> <td>87%</td> <td>90%</td> </tr> <tr> <td>FY19-20 Q3</td> <td>90%</td> <td>81%</td> <td>100%</td> </tr> <tr> <td>FY19-20 Q4</td> <td>85%</td> <td>85%</td> <td>88%</td> </tr> </tbody> </table>	Quarter	Stroke (%)	Trauma (%)	ROSC (%)	FY18-19 Q1	54%	59%	90%	FY18-19 Q2	66%	53%	84%	FY18-19 Q3	51%	66%	88%	FY18-19 Q4	78%	69%	84%	FY19-20 Q1	84%	93%	88%	FY19-20 Q2	86%	87%	90%	FY19-20 Q3	90%	81%	100%	FY19-20 Q4	85%	85%	88%	<p>Monitoring temperature is part of vital signs monitoring and important for stroke/trauma/ROSC patients. Hypothermia can be detrimental to patient outcomes. Effective and simple interventions exist to prevent and treat hypothermia. Hypothermia, however, cannot be treated unless it is identified.</p> <p>Documentation confirms whether temperature was monitored.</p>
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(i) Stroke patients	90%																																							
(ii) Trauma patients	90%																																							
(iii) Return of Spontaneous Circulation (ROSC) patients	90%																																							
Improve Clinical Quality	% non-intubated trauma patients with documentation of adequately controlled pain	70% with a pain score of <4	<p>Quarterly Trend of Non-Intubated Trauma Patients with Adequately Controlled Pain</p> <table border="1"> <thead> <tr> <th>Quarter</th> <th>Percentage (%)</th> </tr> </thead> <tbody> <tr> <td>FY18-19 Q1</td> <td>63%</td> </tr> <tr> <td>FY18-19 Q2</td> <td>48%</td> </tr> <tr> <td>FY18-19 Q3</td> <td>66%</td> </tr> <tr> <td>FY18-19 Q4</td> <td>60%</td> </tr> <tr> <td>FY19-20 Q1</td> <td>66%</td> </tr> <tr> <td>FY19-20 Q2</td> <td>55%</td> </tr> <tr> <td>FY19-20 Q3</td> <td>44%</td> </tr> <tr> <td>FY19-20 Q4</td> <td>50%</td> </tr> </tbody> </table>	Quarter	Percentage (%)	FY18-19 Q1	63%	FY18-19 Q2	48%	FY18-19 Q3	66%	FY18-19 Q4	60%	FY19-20 Q1	66%	FY19-20 Q2	55%	FY19-20 Q3	44%	FY19-20 Q4	50%	<p>A pain score <4 represents mild pain. Analgesia is an important way of managing the patient’s pain.</p> <p>Increased pain in trauma patients can be a sign that fractures are inadequately immobilized. Increased pain is also associated with worse patient perception of the quality of care provided.</p> <p>Documentation confirms whether pain was monitored.</p>																		
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Objective	Measure/Indicator	Target	Trend	Notes																														
Quality Element: Patient and Staff Safety																																		
<p>Improve Patient Safety</p>	<p>% charts of Standing Agreement (SA) carrier primary care (PCP) transports audited where clinical deterioration documented</p>	<p>90% of charts audited</p>	<p style="text-align: center;">Quarterly Trend of SA PCP Charts Audited</p> <table border="1"> <caption>Quarterly Trend of SA PCP Charts Audited</caption> <thead> <tr> <th>Quarter</th> <th>No Deterioration</th> <th>Triage Issue</th> <th>Unexpected Deterioration</th> <th>Clinical Issue</th> <th>Expected</th> </tr> </thead> <tbody> <tr> <td>FY19-20 Q1 (13 Charts)</td> <td>6</td> <td>1</td> <td>3</td> <td>2</td> <td>1</td> </tr> <tr> <td>FY19-20 Q2 (16 Charts)</td> <td>3</td> <td>3</td> <td>3</td> <td>1</td> <td>6</td> </tr> <tr> <td>FY19-20 Q3 (15 Charts)</td> <td>4</td> <td>1</td> <td>1</td> <td>1</td> <td>9</td> </tr> <tr> <td>FY19-20 Q4 (19 Charts)</td> <td>3</td> <td>0</td> <td>3</td> <td>0</td> <td>13</td> </tr> </tbody> </table>	Quarter	No Deterioration	Triage Issue	Unexpected Deterioration	Clinical Issue	Expected	FY19-20 Q1 (13 Charts)	6	1	3	2	1	FY19-20 Q2 (16 Charts)	3	3	3	1	6	FY19-20 Q3 (15 Charts)	4	1	1	1	9	FY19-20 Q4 (19 Charts)	3	0	3	0	13	<p>SA carriers transport half of Ornge patient volumes. Although these transports are of stable, low acuity patients, medical deterioration during transport is risky because these patients are being treated only by a single PCP paramedic. Clinical deterioration may reflect a triage error, whereby the patient was allowed to be transported by an SA carrier.</p> <p>100% of SA carrier charts with documented clinical deterioration (and no medical escort was present) were audited.</p> <p>Data on audit results is presented by category. Expected deterioration indicates that care was anticipated and provided within the PCP paramedic’s scope of practice.</p>
Quarter	No Deterioration	Triage Issue	Unexpected Deterioration	Clinical Issue	Expected																													
FY19-20 Q1 (13 Charts)	6	1	3	2	1																													
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<p>Improve Patient Safety</p>	<p>% hand hygiene compliance</p>	<p>92% compliance</p>	<p style="text-align: center;">Quarterly Trend of Hand Hygiene Education and Compliance</p> <table border="1"> <caption>Quarterly Trend of Hand Hygiene Education and Compliance</caption> <thead> <tr> <th>Quarter</th> <th>Self-Reporting</th> </tr> </thead> <tbody> <tr> <td>FY18-19 Q2</td> <td>80%</td> </tr> <tr> <td>FY18-19 Q3</td> <td>87%</td> </tr> <tr> <td>FY18-19 Q4</td> <td>89%</td> </tr> <tr> <td>FY19-20 Q1</td> <td>90%</td> </tr> <tr> <td>FY19-20 Q2</td> <td>91%</td> </tr> <tr> <td>FY19-20 Q3</td> <td>90%</td> </tr> <tr> <td>FY19-20 Q4</td> <td>91%</td> </tr> </tbody> </table>	Quarter	Self-Reporting	FY18-19 Q2	80%	FY18-19 Q3	87%	FY18-19 Q4	89%	FY19-20 Q1	90%	FY19-20 Q2	91%	FY19-20 Q3	90%	FY19-20 Q4	91%	<p>Hand washing has been clearly linked to improved patient outcomes and reduced likelihood of infections. Hand hygiene is self-reported and documented during charting.</p>														
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Objective	Measure/Indicator	Target	Trend	Notes														
<p>Improve Patient Safety</p>	<p>% of time pre-determined areas are cleaned below the relative light units (RLU) threshold on monthly audits</p>	<p>90%</p>	<p style="text-align: center;">Quarterly Trend of RLU Readings</p> <table border="1"> <caption>Quarterly Trend of RLU Readings</caption> <thead> <tr> <th>Quarter</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>FY19-20 Q1</td> <td>37%</td> </tr> <tr> <td>FY19-20 Q2</td> <td>45%</td> </tr> <tr> <td>FY19-20 Q3</td> <td>55%</td> </tr> <tr> <td>FY19-20 Q4</td> <td>69%</td> </tr> </tbody> </table>	Quarter	Percentage	FY19-20 Q1	37%	FY19-20 Q2	45%	FY19-20 Q3	55%	FY19-20 Q4	69%	<p>It is important for Ornge to verify the efficacy of its cleaning procedures to reduce the risk of infection. Protocols are in place for cleaning stretchers, loading systems, and all surfaces in the ambulance vehicles, including being vigilant about the cleaning of high touch surfaces such as handles, buttons and switches.</p> <p>A Hygenia Luminometer was newly introduced to detect biological matter and high touch areas have been pre-determined for consistency of testing. This was the first year using the new device. Performance is expected to improve as protocols are finetuned. This indicator will continue to be measured on the 2020/2021 QIP.</p>				
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<p>Improve Patient Safety</p>	<p>% Usage of a standardized patient care hand-off Checklist</p>	<p>85%</p>	<p style="text-align: center;">Quarterly Trend of Hand-Off Checklist Used</p> <table border="1"> <caption>Quarterly Trend of Hand-Off Checklist Used</caption> <thead> <tr> <th>Quarter</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>FY18-19 Q3</td> <td>75%</td> </tr> <tr> <td>FY18-19 Q4</td> <td>79%</td> </tr> <tr> <td>FY19-20 Q1</td> <td>81%</td> </tr> <tr> <td>FY19-20 Q2</td> <td>82%</td> </tr> <tr> <td>FY19-20 Q3</td> <td>82%</td> </tr> <tr> <td>FY19-20 Q4</td> <td>85%</td> </tr> </tbody> </table>	Quarter	Percentage	FY18-19 Q3	75%	FY18-19 Q4	79%	FY19-20 Q1	81%	FY19-20 Q2	82%	FY19-20 Q3	82%	FY19-20 Q4	85%	<p>% of total patient transports on Ornge dedicated asset showing documented use of a standardized hand-off checklist.</p> <p>Evidence suggests that structured handover between health care professionals can improve transitions of care and may be linked to better patient outcomes. Ornge introduced a measurement of compliance in Q3 2018/19.</p>
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Objective	Measure/Indicator	Target	Trend	Notes										
Improve Staff Safety	Soft tissue/musculoskeletal injury rate	4.0/100 employees	<p style="text-align: center;">Quarterly Trend of Soft Tissue/MSK Injury</p> <table border="1"> <caption>Quarterly Trend of Soft Tissue/MSK Injury</caption> <thead> <tr> <th>Quarter</th> <th>Injury Rate</th> </tr> </thead> <tbody> <tr> <td>FY19-20 Q1</td> <td>4.9</td> </tr> <tr> <td>FY19-20 Q2</td> <td>4.0</td> </tr> <tr> <td>FY19-20 Q3</td> <td>5.2</td> </tr> <tr> <td>FY19-20 Q4</td> <td>2.6</td> </tr> </tbody> </table>	Quarter	Injury Rate	FY19-20 Q1	4.9	FY19-20 Q2	4.0	FY19-20 Q3	5.2	FY19-20 Q4	2.6	<p># incidents per 100 paramedic and pilot employees resulting in soft tissue and musculoskeletal injuries from loading/unloading/carrying patient or lifting/pushing/pulling medical equipment. Soft tissue/musculoskeletal injuries are the most frequent on the job injury at Ornge.</p>
Quarter	Injury Rate													
FY19-20 Q1	4.9													
FY19-20 Q2	4.0													
FY19-20 Q3	5.2													
FY19-20 Q4	2.6													

Quality Element: Timely Care

Improve Timeliness	Length of Stay at Sending Hospital After Handover to Ornge: Package time for patients intubated <i>BEFORE</i> Ornge arrival	40 minutes by end of 2020/2021	<p style="text-align: center;">Quarterly Trend of Timely Care</p> <table border="1"> <caption>Quarterly Trend of Timely Care</caption> <thead> <tr> <th>Quarter</th> <th>Length of Stay (minutes)</th> </tr> </thead> <tbody> <tr> <td>FY18-19 Q1</td> <td>46</td> </tr> <tr> <td>FY18-19 Q2</td> <td>45</td> </tr> <tr> <td>FY18-19 Q3</td> <td>45</td> </tr> <tr> <td>FY18-19 Q4</td> <td>45</td> </tr> <tr> <td>FY19-20 Q1</td> <td>45</td> </tr> <tr> <td>FY19-20 Q2</td> <td>47</td> </tr> <tr> <td>FY19-20 Q3</td> <td>45</td> </tr> <tr> <td>FY19-20 Q4</td> <td>48</td> </tr> </tbody> </table>	Quarter	Length of Stay (minutes)	FY18-19 Q1	46	FY18-19 Q2	45	FY18-19 Q3	45	FY18-19 Q4	45	FY19-20 Q1	45	FY19-20 Q2	47	FY19-20 Q3	45	FY19-20 Q4	48	<p>Improved timeliness for specific life-threatening conditions is associated with better patient outcomes. The reasons for in-hospital time are multi-factorial and require ongoing partnership. Ornge and hospital EDs will continue to work together in preparing patients for rapid packaging.</p>
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Objective	Measure/Indicator	Target	Trend	Notes																											
<p>Improve Timeliness</p>	<p>Overall Base Response Time: % within threshold</p> <p>(i) Fixed wing</p> <p>(ii) Land ambulance</p>	<p>≥ 80% within 15 minutes (25 minutes if fuel required)</p> <p>≥ 90% within 10 minutes</p>	<p style="text-align: center;">Quarterly Trend of Overall Base Response Time</p> <table border="1"> <caption>Quarterly Trend of Overall Base Response Time</caption> <thead> <tr> <th>Quarter</th> <th>FW (%)</th> <th>Land Ambulance (%)</th> </tr> </thead> <tbody> <tr> <td>FY18-19 Q1</td> <td>83%</td> <td>73%</td> </tr> <tr> <td>FY18-19 Q2</td> <td>81%</td> <td>60%</td> </tr> <tr> <td>FY18-19 Q3</td> <td>71%</td> <td>65%</td> </tr> <tr> <td>FY18-19 Q4</td> <td>73%</td> <td>78%</td> </tr> <tr> <td>FY19-20 Q1</td> <td>76%</td> <td>81%</td> </tr> <tr> <td>FY19-20 Q2</td> <td>74%</td> <td>77%</td> </tr> <tr> <td>FY19-20 Q3</td> <td>57%</td> <td>81%</td> </tr> <tr> <td>FY19-20 Q4</td> <td>53%</td> <td>79%</td> </tr> </tbody> </table>	Quarter	FW (%)	Land Ambulance (%)	FY18-19 Q1	83%	73%	FY18-19 Q2	81%	60%	FY18-19 Q3	71%	65%	FY18-19 Q4	73%	78%	FY19-20 Q1	76%	81%	FY19-20 Q2	74%	77%	FY19-20 Q3	57%	81%	FY19-20 Q4	53%	79%	<p>Improved timeliness for specific life-threatening conditions is associated with better patient outcomes.</p> <p>There are more challenges to dispatching fixed wing aircraft than other vehicle types, particularly in the spring and fall seasons. In 2019-2020, there was a lengthy facility challenge at one of the three fixed wing bases which required Ornge to dispatch its aircraft from a different hangar, contributing to the decline shown. This issue has since been resolved.</p>
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Quality Element: Equitable Care																															
<p>Improve Workplace Culture</p>	<p>% of Ornge staff who have completed eLearning module on diversity and cultural sensitivity</p>	<p>90%</p>	<p style="text-align: center;">Diversity and Sensitivity Training</p> <table border="1"> <caption>Diversity and Sensitivity Training</caption> <thead> <tr> <th>Quarter</th> <th>Phase 1 (F2F) (%)</th> <th>Phase 2a (online) (%)</th> </tr> </thead> <tbody> <tr> <td>FY19-20 Q1</td> <td>80%</td> <td>88%</td> </tr> <tr> <td>FY19-20 Q2</td> <td>88%</td> <td>88%</td> </tr> <tr> <td>FY19-20 Q3</td> <td>88%</td> <td>94%</td> </tr> <tr> <td>FY19-20 Q4</td> <td>88%</td> <td>94%</td> </tr> </tbody> </table>	Quarter	Phase 1 (F2F) (%)	Phase 2a (online) (%)	FY19-20 Q1	80%	88%	FY19-20 Q2	88%	88%	FY19-20 Q3	88%	94%	FY19-20 Q4	88%	94%	<p>Training on diversity and cultural sensitivity supports a workplace culture of respect and equity. It promotes staff in interacting appropriately with peers, patients and stakeholders. Moreover, it improves working relationships amongst team members, effective communication and skill development in problem-solving and conflict resolution.</p>												
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Objective	Measure/Indicator	Target	Trend	Notes																									
Quality Element: Efficient Care																													
<p>Improve Efficiency</p>	<p>% of Emergent 1 cases where Transport Medicine Physician (TMP) pre-patches with paramedic</p>	<p>35%</p>	<p style="text-align: center;">Quarterly Trend of TMP Pre-patches</p> <table border="1"> <caption>Quarterly Trend of TMP Pre-patches</caption> <thead> <tr> <th>Quarter</th> <th>Percentage</th> </tr> </thead> <tbody> <tr><td>FY18-19 Q1</td><td>35%</td></tr> <tr><td>FY18-19 Q2</td><td>32%</td></tr> <tr><td>FY18-19 Q3</td><td>28%</td></tr> <tr><td>FY18-19 Q4</td><td>30%</td></tr> <tr><td>FY19-20 Q1</td><td>30%</td></tr> <tr><td>FY19-20 Q2</td><td>45%</td></tr> <tr><td>FY19-20 Q3</td><td>40%</td></tr> <tr><td>FY19-20 Q4</td><td>36%</td></tr> </tbody> </table>	Quarter	Percentage	FY18-19 Q1	35%	FY18-19 Q2	32%	FY18-19 Q3	28%	FY18-19 Q4	30%	FY19-20 Q1	30%	FY19-20 Q2	45%	FY19-20 Q3	40%	FY19-20 Q4	36%	<p>Pre-patching allows the Transport Medicine Physician and paramedics to discuss the patient condition and plan for patient management prior to arrival at the sending hospital. This allows for more efficient use of time in the sending hospital by allowing the paramedics to focus on packaging the patient. This is particularly important for the most time sensitive (Emergent 1) patients to reduce time to definitive care.</p>							
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Quality Element: Patient-Centred Care																													
<p>Improve patient satisfaction</p>	<p>% Satisfied Patients as transported by contracted providers</p>	<p>70% positive response to the question on quality of care received</p>	<p style="text-align: center;">Quarterly Trend of Satisfied Patients (Contracted Providers)</p> <table border="1"> <caption>Quarterly Trend of Satisfied Patients (Contracted Providers)</caption> <thead> <tr> <th>Quarter</th> <th>Provider 1</th> <th>Provider 2</th> <th>Provider 3</th> <th>Provider 4</th> </tr> </thead> <tbody> <tr><td>FY19-20 Q1</td><td>98%</td><td>100%</td><td>96%</td><td>100%</td></tr> <tr><td>FY19-20 Q2</td><td>96%</td><td>94%</td><td>98%</td><td>100%</td></tr> <tr><td>FY19-20 Q3</td><td>100%</td><td>100%</td><td>97%</td><td>100%</td></tr> <tr><td>FY19-20 Q4</td><td>100%</td><td>97%</td><td>93%</td><td>100%</td></tr> </tbody> </table>	Quarter	Provider 1	Provider 2	Provider 3	Provider 4	FY19-20 Q1	98%	100%	96%	100%	FY19-20 Q2	96%	94%	98%	100%	FY19-20 Q3	100%	100%	97%	100%	FY19-20 Q4	100%	97%	93%	100%	<p>% of respondents who selected a positive score in response to the question: "Overall how would you rate the quality of care you received?" Positive responses include excellent, very good and good.</p> <p>Starting in May 2019 Ornge expanded its patient survey to include patients transported by Ornge's contracted providers. As this was the first year, a conservative target was set. Target will be adjusted in future years.</p> <p>Results are strong for all contracted providers. Contracted providers include Standing Agreement (SA) carriers, which are separate for-profit air carriers contracted by Ornge to provide air ambulance services, largely for low acuity patients. SA carriers employ their own pilots and paramedics.</p>
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FY19-20 Q1	98%	100%	96%	100%																									
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Objective	Measure/Indicator	Target	Trend	Notes																				
<p>Improve patient and stakeholder satisfaction</p>	<p>Timely Acknowledgement of External Complaints and Inquiries:</p> <ul style="list-style-type: none"> (i) Acknowledgment (ii) Investigation (iii) Closure 	<p>99% in 2 business days 70% in 7 business days 53% in 30 business days</p>	<p style="text-align: center;">Quarterly Trend of Timely Acknowledgement of External Complaints and Inquiries</p> <table border="1" style="margin-top: 10px;"> <caption>Quarterly Trend Data</caption> <thead> <tr> <th>Quarter</th> <th>Acknowledged (2 days)</th> <th>Investigated (7 days)</th> <th>Closed (30 days)</th> </tr> </thead> <tbody> <tr> <td>FY19-20 Q1</td> <td>100%</td> <td>43%</td> <td>49%</td> </tr> <tr> <td>FY19-20 Q2</td> <td>100%</td> <td>85%</td> <td>37%</td> </tr> <tr> <td>FY19-20 Q3</td> <td>100%</td> <td>79%</td> <td>40%</td> </tr> <tr> <td>FY19-20 Q4</td> <td>98%</td> <td>100%</td> <td>53%</td> </tr> </tbody> </table>	Quarter	Acknowledged (2 days)	Investigated (7 days)	Closed (30 days)	FY19-20 Q1	100%	43%	49%	FY19-20 Q2	100%	85%	37%	FY19-20 Q3	100%	79%	40%	FY19-20 Q4	98%	100%	53%	<p>All targets are set with reference to date of receipt of the complaint/inquiry. Only a subset of complaints requires investigation. Closure of complaints/inquiries may involve complex issues and multiple departments; the target represents a 10% improvement from Q1 to Q4).</p>
Quarter	Acknowledged (2 days)	Investigated (7 days)	Closed (30 days)																					
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2020/2021

Ornge Quality Improvement Plan

Targets



The purpose of this Quality Improvement Plan is to provide a framework for Ornge initiatives that are designed to improve patient experience and care, clinical practice, and operational service delivery to meet the transport needs of Ontario residents within a broader healthcare system.

A high-quality health system is defined as “a health system that delivers world-leading safe, effective, patient-centred services, efficiently and in a timely fashion, resulting in optimal health status for all communities.” This definition includes six elements of quality and forms the basis of Ontario Health – Quality’s framework for quality improvement.

Objective	Measure/Indicator	Target 2020/2021	Notes
Quality Element: Effective Care			
Improve Clinical Quality	% non-intubated trauma patients with documentation of adequately controlled pain	70% non-intubated trauma patients with a pain score of <4	<p>A pain score <4 represents mild pain. Analgesia is an important way of managing the patient’s pain. Increased pain in trauma patients can be a sign that fractures are inadequately immobilized. Increased pain is also associated with worse patient perception of the quality of care provided.</p> <p>Documentation confirms whether pain was monitored. An electronic flag was recently added to Ornge’s patient chart to reinforce the practice of pain scoring and documentation.</p> <p>This indicator will be continued through 2020/2021 as it is a meaningful patient-centred outcome variable which requires ongoing improvement.</p>
Improve Clinical Quality	% of ventilated adult and pediatric patients with HCO3 documented	90% of all adult and pediatric patients with HCO3 documented	<p>Documentation of HCO3 in ventilated patients has been noted via clinical metrics to be below standard. For 2019/2020 Q2/Q3, HCO3 was documented for 63% of adult and 81% of pediatric ventilated patients.</p> <p>The HCO3 level is important to ensure appropriate ventilation to maintain adequate pH. Previously we have not had the ability to obtain this in all ventilated patients. By implementing iSTATs on all transport assets, we will now have the ability to provide more appropriate ventilation strategies by obtaining HCO3 values.</p>
Improve Clinical Quality	% Documentation of two temperatures in:	No baseline data available. 2019/2020 Q4 and/or 2020/2021 Q1 data will provide baseline to determine goals	<p>Monitoring temperature is part of vital signs monitoring and important for stroke/trauma/ROSC patients. Hypothermia can be detrimental to patient outcomes. Effective and simple interventions exist to prevent and treat hypothermia. Hypothermia, however, cannot be treated unless it is identified.</p> <p>Over the last two years we have improved temperature documentation to target for stroke/trauma/ROSC patients. However, we are uncertain how we are performing in <i>maintaining</i> temperature with our patients given we are not auditing two temperatures.</p> <p>For 2020/2021 the QIP indicator will be changed to reflect two temperatures documented: one on initial assessment and one prior to transfer of care as well as if the appropriate temperature was maintained for the patient condition. This will allow us to measure our impact with maintenance of temperature and reflect more of a patient-centred outcome variable.</p>
	(iv) Stroke patients	TBD	
	(v) Trauma patients	TBD	
	(vi) ROSC patients	TBD	
	Maintenance of appropriate temperature in:		
	(i) Stroke patients	TBD	
(ii) Trauma patients	TBD		
(iii) ROSC patients	TBD		
Quality Element: Patient and Staff Safety			
Improve Patient Safety	% hand hygiene education and compliance	<p>90% of active duty staff complete education on annual basis</p> <p>92% compliance based on documented self-reporting</p>	<p>Hand washing has been clearly linked to improved patient outcomes and reduced likelihood of infections. Hand hygiene is self-reported and documented during charting.</p> <p>Hand hygiene measurement is a required organizational practice for Accreditation. With the COVID-19 outbreak, there is a heightened need for appropriate hand hygiene. We will continue this indicator 2020/2021.</p>

Objective	Measure/Indicator	Target 2020/2021	Notes
Improve Patient Safety	% of time pre-determined areas are cleaned below the relative light units (RLU) threshold on monthly audits	90% compliance with results equal to or below the RLU reading on monthly checks	<p>Infective agents can persist on the surfaces of air ambulances for a prolonged period of time and may put subsequent patients at risk for nosocomial infection. Aircraft must be cleaned between patient encounters but it is important for Ornge to verify the efficacy of its cleaning procedures.</p> <p>RLU measurement is an ROP for accreditation and remains below target measure for FY20. There is a heightened need for appropriate aircraft cleaning due to the COVID-19 outbreak..</p> <p>This measure will remain for 2020/2021 to ensure focus and improvement on reduced RLU readings.</p>
Improve Patient Safety	% Usage of a standardized patient care hand-off Checklist	85%	<p>% of total patient transports on Ornge dedicated asset showing documented use of a standardized hand-off checklist.</p> <p>This indicator is a required organizational practice for Accreditation so it is important to keep monitoring.</p> <p>Evidence suggests that structured handover between health care professionals can improve transitions of care and may be linked to better patient outcomes.</p>
Improve Staff Safety	Soft tissue/musculoskeletal injury rate	4.0/100 employees	<p># incidents per 100 paramedic and pilot employees resulting in soft tissue and musculoskeletal injuries from loading/unloading/carrying patient or lifting/pushing/pulling medical equipment. Soft tissue/musculoskeletal injuries are the most frequent on the job injury at Ornge.</p> <p>With implementation of the new power-load stretcher in Ornge’s helicopters in 2019, it is important to continue monitoring for expected improvement to the injury rate in 2020/2021.</p>
Quality Element: Timely Care			
Improve Timeliness	<p>Length of stay at sending hospital after handover to Ornge:</p> <p>Package time for patients intubated <i>BEFORE</i> Ornge arrival</p>	40 minutes by end of 2020/2021	<p>Feedback from stakeholders is that Ornge spends too much time packaging patients. Improved timeliness for specific life-threatening conditions is associated with better patient outcomes. The reasons for in-hospital time are multi-factorial and require ongoing partnership. Ornge and hospital EDs can work together in preparing patients for rapid packaging.</p> <p>This measure will remain for 2020/2021 with a goal of reducing the average time, over a two year period, to 40 minutes.</p>
Improve Timeliness	<p>Overall Base Response Time: % meeting threshold</p> <p>(iii) Fixed wing</p> <p>(iv) Land ambulance</p> <p>(v) Helicopter</p>	<p>≥ 80% of the time response < 15 minutes (< 25 minutes if fuel required)</p> <p>≥ 90% of the time response < 10 minutes</p> <p>≥ 90% of the time response < 15 minutes (< 25 minutes if fuel required)</p>	<p>Improved timeliness for specific life-threatening conditions is associated with better patient outcomes.</p> <p>Fixed wing and land ambulance overall base response times continue to be below target. We aim to improve this performance. There are more challenges to dispatching fixed wing aircraft than other vehicle types, particularly in the spring and fall seasons.</p> <p>Helicopter response times have been added back to the metric to ensure a comprehensive review of base response times.</p>
Quality Element: Efficient Care			
Improve Efficiency	% of Emergent 1 cases where Transport Medicine Physician pre-patches with paramedic	50%	<p>Pre-patching allows the Transport Medicine Physician (TMP) and paramedics to discuss the patient condition and plan for patient management prior to arrival at the sending hospital. This allows for more efficient use of time in the sending hospital by allowing the paramedics to focus on packaging the patient. This is particularly important for the most time sensitive (Emergent 1) patients to reduce time to definitive care. In ultra-time sensitive patients, having a TMP pre-patch may decrease time at the sending facility by enabling paramedics to prepare prior to patient contact.</p> <p>Currently, on average TMPs pre-patch on approximately 36% of Emergent 1 patients. Our target is to increase this to 50% for 2020/2021.</p>

Objective	Measure/Indicator	Target 2020/2021	Notes
Improve Efficiency	% of patients for whom Operations Control Centre staff obtain bed confirmation	90% of inter-facility transport requests	Operations Control Centre staff are required to confirm with the accepting hospital that the patient has a bed available and an accepting physician. This ensures that the transport can be completed without delay and confirms the correct receiving destination. This currently occurs for 77% of patients and the target for 2020/2021 is 90%.
Quality Element: Patient-Centred Care			
Improve patient satisfaction	% Satisfied Patients as transported by contracted providers	90% positive response to the question on quality of care received	<p>% of respondents who selected a positive score in response to the question: “Overall how would you rate the quality of care you received?”</p> <p>Target has been increased from 70% in 2019/2020 to 90% in 2020/2021.</p> <p>Contracted providers include Standing Agreement (SA) carriers, which are separate for-profit air carriers contracted by Ornge to provide air ambulance services, largely for low acuity patients. SA carriers employ their own pilots and paramedics.</p>
Improve patient and stakeholder satisfaction	<p>Timely Acknowledgement of External Complaints and Inquiries:</p> <p>(iv) acknowledged within 2 business days of receipt</p> <p>(v) investigation, where necessary, within 7 business days of receipt</p> <p>(vi) closed within 30 business days of receipt</p>	<p>99% acknowledged within 2 business days</p> <p>70% investigated within 7 business days where investigation is necessary</p> <p>By Q4, 53% closed within 30 days</p>	<p>Ornge has a robust incident reporting system. However, reporting only translates into improve quality of care when there is trending and timely closure. Closure of complaints/inquiries within 30 days is aspirational as multiple departments and external organizations may be involved.</p> <p>We will continue monitoring this indicator in 2020/2021.</p>
Improve patient and stakeholder satisfaction	% patients delayed for transport in whom Operations Control Centre (OCC) staff obtain updates every 6 hours	OCC staff obtain update every 6 hours for 50% of emergent/urgent patients delayed for inter-facility transport	<p>Patient transfers are delayed for various reasons (weather, asset availability, bed availability, triage) which cause logistical challenges with receiving facilities. This is further complicated when patient condition changes.</p> <p>OCC requires patient updates to ensure the appropriate asset and triage acuity is assigned to the patient transfer, and it is OCC’s policy that updates be obtained every 6 hours.</p> <p>Updates are also important to the stakeholders who are waiting for Ornge to respond, as they want to ensure that their transfer is being reviewed regularly and considered for an available asset.</p>