

ORNGE

2024/25 Quality Improvement Plan

YEAR END REPORT

June 2025





Ornge Quality Improvement Plan - FY 2024/25

June 2025

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 Health Quality Ontario’s framework for quality improvement.

Objective	Measure/ Indicator	Target 2024/25	Fourth Quarter FY 2025	Trend	Target Justification	Report and Commentary																											
Quality Element: Effective Care																																	
Improve Clinical Quality	TMP E1 Interfacility Patients 90 th Percentile Patients Serviced and Transported First Review Needed time to First TMP Status time (based on TMP review status) Excludes: Teams and Scene Requests	Requested By CritiCall Baseline: 8 Target: 6 minutes Ornge Baseline: 15 Target: 10.5 minutes	5	<div>Quarterly Trend of TMP E1 Interfacility Patients</div> <table><caption>Quarterly Trend of TMP E1 Interfacility Patients (90th Percentile in Minutes)</caption><thead><tr><th>Quarter</th><th>CritiCall</th><th>Ornge</th></tr></thead><tbody><tr><td>FY23-24 Q1</td><td>8</td><td>14.9</td></tr><tr><td>FY23-24 Q2</td><td>8</td><td>16</td></tr><tr><td>FY23-24 Q3</td><td>7</td><td>13</td></tr><tr><td>FY23-24 Q4</td><td>7</td><td>13</td></tr><tr><td>FY24-25 Q1</td><td>7</td><td>12.2</td></tr><tr><td>FY24-25 Q2</td><td>8</td><td>15</td></tr><tr><td>FY24-25 Q3</td><td>8</td><td>13</td></tr><tr><td>FY24-25 Q4</td><td>5</td><td>13</td></tr></tbody></table>	Quarter	CritiCall	Ornge	FY23-24 Q1	8	14.9	FY23-24 Q2	8	16	FY23-24 Q3	7	13	FY23-24 Q4	7	13	FY24-25 Q1	7	12.2	FY24-25 Q2	8	15	FY24-25 Q3	8	13	FY24-25 Q4	5	13	<p>As part of the overall organizational approach to improving our responsiveness to the most critically unwell patients, every step in the process from initial request to asset “on the way” requires review for opportunities to improve.</p> <p>The time required from when the patient details are complete to when the Transport Medicine Physician (TMP) assigns Level of Care (LOC) and OTAS Acuity contributes to the overall timeliness of response. It is possible that changes to TMP workflow may shorten the time required to dispatch an appropriate asset.</p> <p>In review of baseline data, while the Mean (7min) and Median (5min) times remain quite low, the 90th percentile values at 17min and 13min may reflect an opportunity to improve.</p> <p>For the FY25 QIP, Ornge will continue to target a 25% reduction in the 90th percentile time for the TMP to process and assign LOC and OTAS Acuity for E1 transport requests.</p>	<p>Analysis</p> <p>Target achieved and exceeded on requests originated through CritiCall (5 mins.)</p> <p>The previously observed improvements in TMP review time for Ornge originated E1’s have remained at 13min.</p> <p>E1 responses that do not originate from CritiCall require more TMP processing as contact with sending facilities is often required to determine acuity. Further delays due to sequential processing of multiple simultaneous transport requests also impact TMP acuity assignment.</p> <p>Timeliness is one of the strategic domains in Ornge’s new 2024-2029 Strategic Plan and is the main focus of their FY25/26 QIP.</p> <p>Action Plan</p> <ul style="list-style-type: none">Continue to reinforce with the TMP group that E1 transport acuity is selected as soon as possible to enable timely dispatch of available transport assets.
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Objective	Measure/ Indicator	Target 2024/25	Fourth Quarter FY 2025	Trend	Target Justification	Report and Commentary
Quality Element: Timely Care						
Improve Efficiency	E1 Responsiveness 90th percentile time from T0 to aircraft moving towards patient Exclusions - Weather Delays excluded; Moosonee (793) transports excluded; Negative response times and missing times excluded; Excludes Teams and Organ			Quarterly Trend of E1 Responsiveness – T-0 to Aircraft Moving Towards Patient for Interfacility		
		Inter-facility				
		Ornge Rotor Wing Baseline: 115 min Target: 104 min	85			
		Ornge Fixed Wing Baseline: 279 min Target: 238 min	277			
		Scene		Quarterly Trend of E1 Responsiveness T-0 to Aircraft Moving Towards Patient for RW Scene		
		Ornge Rotor Wing Baseline: 52 min Target: 47 min	53			

When time is of the essence, when it is literally “Life or Limb”, the measure our patients and stakeholders value is how fast can we consistently launch an aircraft to transport the patient to definitive care. In Ontario, we are often challenged with long distances to centres capable of providing specialized care (lead trauma hospitals, dedicated stroke centres capable of endovascular therapy, interventional cardiology sites capable of percutaneous coronary interventions as examples). Simply put, our mission is to save lives, restore health, create capacity and preserve dignity and when minutes matter, we must be responsive. Many variables impact our timeliness of response: asset availability, maintenance, staffing, weather, proximity of the scene to our bases.

This measure will focus on how quickly (90th percentile) we can launch or turn a rotor/fixed wing asset towards a patient with an absolute time sensitive emergency known as an Emergent 1/Life or Limb. This calculation will exclude weather precluding launch and eliminates the data confounder of variable distance to each scene from the based tasked with response.

Our goal is to reduce the time to launch an aircraft by 10%.

- Analysis**
- Targets were not achieved and remain closer to baseline than target for FW Inter-facility and RW Scene calls. RW inter-facility has improved significantly to below target.
- Timeliness is one of the strategic domains in Ornge’s new 2024-2029 Strategic Plan and is the main focus of their FY25/26 QIP.
- Action Plan**
- A continued focus on improving staffing should continue to show benefits in asset availability and reduce delays.
 - Developing systems that support return to service following a call may also help reduce response times in the setting of crews that are already assigned.
 - A review of duty day insufficiency delays and implementation of a duty out tool within the OCC
 - A focus on working with front line teams to improve chute times for FW aircraft.



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Objective	Measure/ Indicator	Target 2024/25	Fourth Quarter FY 2025	Trend	Target Justification	Report and Commentary																																				
Improve Efficiency	<p>E1 Responsiveness – T-0 to PDC</p> <p>90th percentile time from ticket creation to Patient Details Complete (PDC) time stamp</p>	FW Interfacility Baseline: 17 minutes Target: 14 minutes	22	<p>Quarterly Trend of E1 Responsiveness - T-0 - PDC</p> <table><tr><th>Quarter</th><th>FW Interfacility</th><th>Target</th><th>Baseline</th></tr><tr><td>FY23-24 Q1</td><td>16</td><td>14</td><td>17</td></tr><tr><td>FY23-24 Q2</td><td>16</td><td>14</td><td>17</td></tr><tr><td>FY23-24 Q3</td><td>17</td><td>14</td><td>17</td></tr><tr><td>FY23-24 Q4</td><td>18</td><td>14</td><td>17</td></tr><tr><td>FY24-25 Q1</td><td>18</td><td>14</td><td>17</td></tr><tr><td>FY24-25 Q2</td><td>19</td><td>14</td><td>17</td></tr><tr><td>FY24-25 Q3</td><td>16</td><td>14</td><td>17</td></tr><tr><td>FY24-25 Q4</td><td>22</td><td>14</td><td>17</td></tr></table>	Quarter	FW Interfacility	Target	Baseline	FY23-24 Q1	16	14	17	FY23-24 Q2	16	14	17	FY23-24 Q3	17	14	17	FY23-24 Q4	18	14	17	FY24-25 Q1	18	14	17	FY24-25 Q2	19	14	17	FY24-25 Q3	16	14	17	FY24-25 Q4	22	14	17	<p>The medical intake is the first step in initiating an Ornge response. Patient information is collected by our agents and reviewed by the Transport Medicine Physician (TMP) for priority and level of care. Once assigned, the OCC can dispatch an appropriate resource. The lengthy process can prove to be a source of frustration for our stakeholders and may delay asset assignment until completion.</p> <p>Our goal is to reduce time on task from a baseline of 17 mins down to 14 mins. We will measure 90th percentile calculated by T0 to Patient Details Complete time stamp.</p>	<p>Analysis</p> <p>Ornge did not achieve target of 14 mins. Several outliers involving bridge line calls and where the sending facility was not ready to proceed with the booking, skewed the metric by extending the duration of the call unnecessarily.</p> <p>When these outliers are excluded, the 90th percentile for medical intake time decreases to 17 minutes for the quarter – more reflective of true operational performance.</p> <p>Timeliness is one of the strategic domains in Ornge’s new 2024-2029 Strategic Plan and is the main focus of their FY25/26 QIP.</p> <p>Action Plan</p> <ul style="list-style-type: none">• <u>Continue Outlier Analysis</u> Maintain ongoing review of outlier data to better understand the drivers behind extended intake durations and refine reporting methodologies accordingly.• <u>Pilot TMP Engagement on CritiCall Life or Limb</u> Launch a pilot project in which the on-duty Transport Medicine Physician (TMP) supports medical intakes for CritiCall Life or Limb (E1) calls. This initiative aims to expedite call handling and improve the overall experience of our stakeholders.
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Improve Efficiency	<p>E1 Responsiveness – Weather Check</p> <p>Definition: Difference of times from Weather check to the First Accept/Decline/Conditional accept</p> <p>Exclusions - Weather Delays excluded; Moosonee (793) transports excluded; Negative response times and missing times excluded; Excludes Teams and Organ</p>	Fixed Wing Baseline: 31 minutes Target: 27 minutes	24	<p>Quarterly Trend of E1 Responsiveness - Weather Check</p> <table><tr><th>Quarter</th><th>FW</th><th>Target</th><th>Baseline</th></tr><tr><td>FY23-24 Q1</td><td>22</td><td>27</td><td>31</td></tr><tr><td>FY23-24 Q2</td><td>27</td><td>27</td><td>31</td></tr><tr><td>FY23-24 Q3</td><td>38</td><td>27</td><td>31</td></tr><tr><td>FY23-24 Q4</td><td>30</td><td>27</td><td>31</td></tr><tr><td>FY24-25 Q1</td><td>25</td><td>27</td><td>31</td></tr><tr><td>FY24-25 Q2</td><td>24</td><td>27</td><td>31</td></tr><tr><td>FY24-25 Q3</td><td>30</td><td>27</td><td>31</td></tr><tr><td>FY24-25 Q4</td><td>24</td><td>27</td><td>31</td></tr></table>	Quarter	FW	Target	Baseline	FY23-24 Q1	22	27	31	FY23-24 Q2	27	27	31	FY23-24 Q3	38	27	31	FY23-24 Q4	30	27	31	FY24-25 Q1	25	27	31	FY24-25 Q2	24	27	31	FY24-25 Q3	30	27	31	FY24-25 Q4	24	27	31	<p>A timely weather check process allows the OCC to efficiently assign appropriate assets and reduce notification times with stakeholders. There is variability in weather check times associated with day of weather phenomena and specific airport weather and runway condition reporting capabilities. The lengthy process can prove to be a source of frustration for our stakeholders and may delay asset assignment until completion.</p> <p>Our goal is to reduce the 90th percentile weather check time by 10% by reducing procedural deviations and inefficiencies in the weather check process, including its recording, tracking, and reporting.</p>	<p>Analysis</p> <p>Target achieved and exceeded to 24 minutes and can be contributed to ongoing awareness and monitoring initiatives.</p> <p>Timeliness is one of the strategic domains in Ornge’s new 2024-2029 Strategic Plan and is the main focus of their FY25/26 QIP.</p> <p>Action Plan</p> <ul style="list-style-type: none">• (Aviation) Continue to monitor weather check metrics at monthly departmental performance reviews and implement corrective actions as required.• (Operations) Continue with dispatch efficiency mapping initiatives (NADRAG / OPRC and Call to Deployment Project – KPMG) and identify and implement recommendations for improvements.
Quarter	FW	Target	Baseline																																							
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Improve Efficiency	E1 Responsiveness – % CCP Level of Care targets	<div><div>%CCP Level of Care Targets</div><div><div>System Overall</div><div>Baseline: 64%</div><div>Target: 75%</div></div><div><div>Dedicated Fixed-Wing</div><div>Baseline: 60%</div><div>Target: 80%</div></div><div><div>RW South</div><div>Baseline: 78%</div><div>Target: 90%</div></div><div><div>RW North (YQK/YQT/YMO)</div><div>Baseline: 54%</div><div>Target: 60%</div></div></div>	<div><div>80%</div><div>69%</div><div>96%</div><div>76%</div></div>	<div><div>Quarterly Trend of E1 Responsiveness – % CCP Level of Care Targets</div><div><table><tr><th>Category</th><th>FY23-24 Q1</th><th>FY23-24 Q2</th><th>FY23-24 Q3</th><th>FY23-24 Q4</th><th>FY24-25 Q1</th><th>FY24-25 Q2</th><th>FY24-25 Q3</th><th>FY24-25 Q4</th></tr><tr><td>Overall</td><td>69%</td><td>61%</td><td>70%</td><td>78%</td><td>75%</td><td>72%</td><td>77%</td><td>80%</td></tr><tr><td>FW</td><td>58%</td><td>50%</td><td>61%</td><td>73%</td><td>70%</td><td>66%</td><td>68%</td><td>69%</td></tr><tr><td>RW South</td><td>77%</td><td>70%</td><td>78%</td><td>89%</td><td>85%</td><td>83%</td><td>92%</td><td>96%</td></tr><tr><td>RW North</td><td>72%</td><td>65%</td><td>70%</td><td>73%</td><td>70%</td><td>66%</td><td>72%</td><td>76%</td></tr></table></div></div>	Category	FY23-24 Q1	FY23-24 Q2	FY23-24 Q3	FY23-24 Q4	FY24-25 Q1	FY24-25 Q2	FY24-25 Q3	FY24-25 Q4	Overall	69%	61%	70%	78%	75%	72%	77%	80%	FW	58%	50%	61%	73%	70%	66%	68%	69%	RW South	77%	70%	78%	89%	85%	83%	92%	96%	RW North	72%	65%	70%	73%	70%	66%	72%	76%	<p>As Ornge works toward the goal of single level of care at the CCP level through ambitious recruitment and training efforts, targets should reflect current realities and strategic training plans. An overall target of 75% CCP system-wide reflects the targets established in the performance agreement while also providing a meaningful expansion target to include all bases (versus the current exclusion of Kenora and Moosonee). A higher target value of 80% is set for fixed-wing bases in view of their role in supporting health equity in northern Ontario, especially remote communities. A target of 60% is set for northern rotor wing bases which includes Kenora, Thunder Bay and Moosonee. This represents a reasonable target with CCP training expanding to those bases for this year and Thunder Bay staffing CCP preferentially on fixed wing aircraft.</p>	<div><div>Analysis</div><div>Target achieved and exceeded for System, RW South and RW North. System saw an overall improvement to 80%, well above target.</div><div>Fixed-wing, an important area of focus saw continued modest improvement from 68% to 69% driven largely by additional staff achieving full certification at the CCP level at those bases during the quarter.</div><div>Timeliness is one of the strategic domains in Ornge’s new 2024-2029 Strategic Plan and is the main focus of their FY25/26 QIP.</div><div><div>Action Plan</div><div><ul style="list-style-type: none">Continue recruitment and retention efforts.Continue to support and monitor the enhanced CCP program delivery modelContinue to refine data collection & analysis to ensure all CCP LOC accurately capturedContinue to support implementation of the Sioux Lookout Fly-in/Fly-Out (FIFO) staffing modelContinue to explore opportunities for recruitment of northern Ontario paramedics including PCP with training opportunities to ACP/CCP</div></div></div>
Category	FY23-24 Q1	FY23-24 Q2	FY23-24 Q3	FY23-24 Q4	FY24-25 Q1	FY24-25 Q2	FY24-25 Q3	FY24-25 Q4																																											
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ORNGE

2025/26 Quality Improvement Plan

PROPOSED TARGETS

September 2025

QUALITY @ ORNGE

Each year, Ornge prepares and publishes its annual Quality Improvement Plan (QIP) as prescribed by the Performance Agreement with the Ministry of Health. Our Quality Improvement Plan (QIP) is only one of the many tools we use to track our performance in a selection of high-priority areas. QIP indicators are chosen each year and reflect organizational priorities, consider Health Quality Ontario's Domains of Quality and include some identified areas for improvement.

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 and reviewed internally with our quality groups (QRSM) and our Board of Directors.

By monitoring QIP results along with other key performance indicators, Ornge maintains a steady watch over organizational quality with an overall goal of improving the effectiveness of our service delivery.

As part of this year's QIP, we will be tracking six (6) key measures aligning with our new Strategic Plan: We Respond 2024-2029 which include timeliness, health equity, accountability and partnerships and our internal team and culture.

Attached are our 2025/26 Proposed QIP Targets.

QUALITY INDICATOR 1

Strategic Priority:

Timeliness – Serviceability – Optimizing Our Assets
Improving Response Time to Sending in Northern locations

QIP Metric:

% time target achieved for acuity E1 and E2
in North West (NW) Ontario

Current Performance:

(Avg Q4 FY24; Q1, Q2, Q3 FY25)

E1 NW to Sending = 77%

E2 NW to Sending = 81%

Target:

E1 NW to Sending – 85%

E2 NW to Sending – 83%

Change Ideas:

Recruitment / training of

Paramedic /Pilots

Improved response at base

Improved serviceability

Implementation of Sudbury FW base

Process Measures:

E1, E2 target performance

ICN serviceability

Northern bases serviceability

Receiving destination impact

QUALITY INDICATOR 2

Strategic Priority:

Timeliness – Serviceability – Optimizing Our Assets
Improving Response Time to Sending in Northern locations

QIP Metric:

% time target achieved for acuity E1 and E2
in North East (NE) Ontario

Current Performance:

(Avg Q4 FY24; Q1, Q2, Q3 FY25)

E1 NE to Sending = 82%

E2 NE to Sending = 79%

Target:

E1 NE to Sending – 85%

E2 NE to Sending – 83%

Change Ideas:

Recruitment / training of

Paramedic /Pilots

Improved response at base

Improved serviceability

Implementation of Sudbury FW base

Process Measures:

E1, E2 target performance

ICN serviceability

Northern bases serviceability

Receiving destination impact

QUALITY INDICATOR 3

Strategic Priority:
Timeliness - Optimizing Our Team
Recruitment and training of CCP paramedics

QIP Metric:
% of **CCP LOC** for all bases and shifts

Current Performance:
FY25: 72%

Target for FY26:
75% CCP LOC

Change Ideas:
Successful Recruitment
Efficient Training

Process Measures:
Training time
Initial education to CCR4
Number of ACP(l) hired

QUALITY INDICATOR 4

Strategic Priority:

Health Equity - Accountability and Strong Partnerships
Commencement and establishment of the Emergency First Response Team program

QIP Metric:

Number of Emergency First Response Teams
functional in communities

Current Performance:

No EFRT in
communities

Target:

5 teams established
in communities

Change Ideas:

EFRT Program Developed and
Deployed

Process Measures:

Number of contracts signed
Vehicle in community
24/7 coverage in community

QUALITY INDICATOR 5

Strategic Priority:

One Team, One Mission – Health Equity- Timeliness
Increasing number of calls completed FRN

QIP Metric:

Number of calls completed FRN program

Current Performance:

203 serviced in
10 months (20/month)

Target:

360 calls serviced during FY26
(30/month)

Change Ideas:

FRN Training and certification
Improved dispatch efficiency

Process Measures:

Number of trained / certified F-RN
SA FRN availability - % of days with
1 or 2 FRN available

QUALITY INDICATOR 6

Strategic Priority:

One Team, One Mission – Ornge Team
Enrolled and completed Just Culture and High Reliability Training

QIP Metric:

% of frontline staff trained in Level 1 Just Culture and High Reliability Training

Current Performance:

Zero front line staff trained in Level 1

Target:

90% of frontline (476)
completed by Q4
(Pilots, Medics, OCC and AMEs)

Change Plan:

Conduct JCHR Training

Process Measures:

Number of staff completed training by Q3