



2023/24

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.





Ornge Quality Improvement Plan – FY 2023/24 – Year End Results

September 2024 – Publication

Quality Improvement Plan

Each year, Ornge prepares and publishes its annual Quality Improvement Plan (QIP) as prescribed by the Performance Agreement with the Ministry of Health. The QIP is a framework for monitoring key aspects and metrics in Ornge’s delivery of its critical care service to the patients of Ontario and focusses on 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 healthcare organizations. Additionally, our patient and healthcare 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 and reviewed internally with our quality groups and our Board of Directors.

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 2023/24 Year End Report and our 2024/25 Proposed QIP Targets.

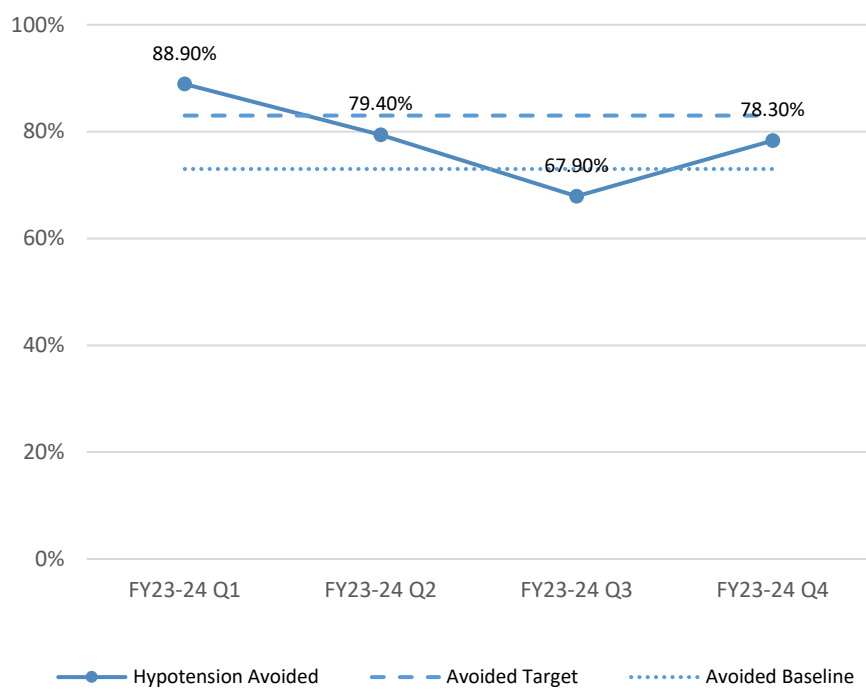
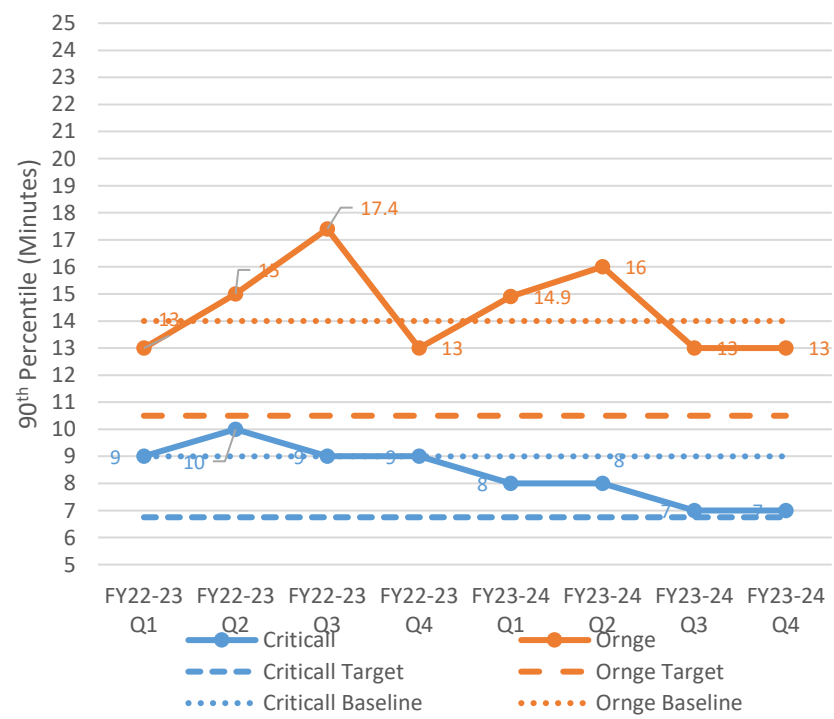


Ornge Quality Improvement Plan - FY 2023/24

September 2024 - Publication

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 2023/24	Fourth Quarter FY 2024	Trend	Year End Result																																																																
Quality Element: Effective Care																																																																					
Improve Clinical Quality	Responsiveness to Mental Health Patients 90 th percentile time from first call received (T0) to arrival at sending facility for Urgent (OTAS 3) transports	90 th Percentile (Minute)			Analysis Response times for all categories have decreased or remained the same in Q4 with more significant decreases in LHIN 13. Overall we continue to observe above target response times in LHIN 14 primarily due to lack of overall asset availability which could be mitigated by the addition of a second 12 hour MHT shift. This is suggested by the proportion of appropriate transports being performed by PCP LOC and by the prolonged response time. In Q4 we observed that the MHT response was faster than non-MHT responses. Action Plan <ul style="list-style-type: none">A briefing note regarding the one year MHT trial has been submitted to the MOH for review with a request for two MHT assets per day to improve responsiveness.This metric will not be included in FY25 but will continue to be monitored for performance.																																																																
		LHIN 13	PCP LOC Baseline (F2223): 2424 Target: 2182	1199		<div><div>Quarterly Trend of Responsiveness to Mental Health LHIN 13</div><table><caption>Quarterly Trend of Responsiveness to Mental Health - LHIN 13</caption><thead><tr><th>Quarter</th><th>PCP (Minutes)</th><th>ACP/CCP (Minutes)</th><th>PCP Target (Minutes)</th><th>ACP/CCP Target (Minutes)</th><th>PCP Baseline (Minutes)</th><th>ACP/CCP Baseline (Minutes)</th></tr></thead><tbody><tr><td>FY22-23 Q1</td><td>2572</td><td>1543</td><td>2200</td><td>2200</td><td>2424</td><td>2424</td></tr><tr><td>FY22-23 Q2</td><td>1647</td><td>1571</td><td>2200</td><td>2200</td><td>2424</td><td>2424</td></tr><tr><td>FY22-23 Q3</td><td>2673</td><td>3030</td><td>2200</td><td>2200</td><td>2424</td><td>2424</td></tr><tr><td>FY22-23 Q4</td><td>1463</td><td>2673</td><td>2200</td><td>2200</td><td>2424</td><td>2424</td></tr><tr><td>FY23-24 Q1</td><td>2451</td><td>2424</td><td>2200</td><td>2200</td><td>2424</td><td>2424</td></tr><tr><td>FY23-24 Q2</td><td>1784</td><td>2518</td><td>2200</td><td>2200</td><td>2424</td><td>2424</td></tr><tr><td>FY23-24 Q3</td><td>1984</td><td>2820</td><td>2200</td><td>2200</td><td>2424</td><td>2424</td></tr><tr><td>FY23-24 Q4</td><td>1199</td><td>1616</td><td>2200</td><td>2200</td><td>2424</td><td>2424</td></tr></tbody></table></div>	Quarter	PCP (Minutes)	ACP/CCP (Minutes)	PCP Target (Minutes)	ACP/CCP Target (Minutes)	PCP Baseline (Minutes)	ACP/CCP Baseline (Minutes)	FY22-23 Q1	2572	1543	2200	2200	2424	2424	FY22-23 Q2	1647	1571	2200	2200	2424	2424	FY22-23 Q3	2673	3030	2200	2200	2424	2424	FY22-23 Q4	1463	2673	2200	2200	2424	2424	FY23-24 Q1	2451	2424	2200	2200	2424	2424	FY23-24 Q2	1784	2518	2200	2200	2424	2424	FY23-24 Q3	1984	2820	2200	2200	2424	2424	FY23-24 Q4	1199	1616	2200	2200	2424	2424
		Quarter	PCP (Minutes)	ACP/CCP (Minutes)		PCP Target (Minutes)	ACP/CCP Target (Minutes)	PCP Baseline (Minutes)	ACP/CCP Baseline (Minutes)																																																												
		FY22-23 Q1	2572	1543		2200	2200	2424	2424																																																												
		FY22-23 Q2	1647	1571		2200	2200	2424	2424																																																												
		FY22-23 Q3	2673	3030		2200	2200	2424	2424																																																												
FY22-23 Q4	1463	2673	2200	2200	2424	2424																																																															
FY23-24 Q1	2451	2424	2200	2200	2424	2424																																																															
FY23-24 Q2	1784	2518	2200	2200	2424	2424																																																															
FY23-24 Q3	1984	2820	2200	2200	2424	2424																																																															
FY23-24 Q4	1199	1616	2200	2200	2424	2424																																																															
ACP/CCP LOC Baseline (F2223): 2446 Target: 2201	1616																																																																				
LHIN 14	PCP LOC Baseline (F2223): 1378 Target: 1240	2786	<div><div>Quarterly Trend of Responsiveness to Mental Health LHIN 14</div><table><caption>Quarterly Trend of Responsiveness to Mental Health - LHIN 14</caption><thead><tr><th>Quarter</th><th>PCP (Minutes)</th><th>ACP/CCP (Minutes)</th><th>PCP Target (Minutes)</th><th>ACP/CCP Target (Minutes)</th><th>PCP Baseline (Minutes)</th><th>ACP/CCP Baseline (Minutes)</th></tr></thead><tbody><tr><td>FY22-23 Q1</td><td>1205</td><td>1354</td><td>1240</td><td>1500</td><td>1378</td><td>1632</td></tr><tr><td>FY22-23 Q2</td><td>1651</td><td>1651</td><td>1240</td><td>1500</td><td>1378</td><td>1632</td></tr><tr><td>FY22-23 Q3</td><td>2548</td><td>1755</td><td>1240</td><td>1500</td><td>1378</td><td>1632</td></tr><tr><td>FY22-23 Q4</td><td>923</td><td>1581</td><td>1240</td><td>1500</td><td>1378</td><td>1632</td></tr><tr><td>FY23-24 Q1</td><td>1269</td><td>1750</td><td>1240</td><td>1500</td><td>1378</td><td>1632</td></tr><tr><td>FY23-24 Q2</td><td>2062</td><td>1720</td><td>1240</td><td>1500</td><td>1378</td><td>1632</td></tr><tr><td>FY23-24 Q3</td><td>3178</td><td>2262</td><td>1240</td><td>1500</td><td>1378</td><td>1632</td></tr><tr><td>FY23-24 Q4</td><td>2786</td><td>2263</td><td>1240</td><td>1500</td><td>1378</td><td>1632</td></tr></tbody></table></div>	Quarter	PCP (Minutes)	ACP/CCP (Minutes)	PCP Target (Minutes)	ACP/CCP Target (Minutes)	PCP Baseline (Minutes)	ACP/CCP Baseline (Minutes)	FY22-23 Q1	1205	1354	1240	1500	1378	1632	FY22-23 Q2	1651	1651	1240	1500	1378	1632	FY22-23 Q3	2548	1755	1240	1500	1378	1632	FY22-23 Q4	923	1581	1240	1500	1378	1632	FY23-24 Q1	1269	1750	1240	1500	1378	1632	FY23-24 Q2	2062	1720	1240	1500	1378	1632	FY23-24 Q3	3178	2262	1240	1500	1378	1632	FY23-24 Q4	2786	2263	1240	1500	1378	1632			
Quarter	PCP (Minutes)	ACP/CCP (Minutes)	PCP Target (Minutes)	ACP/CCP Target (Minutes)	PCP Baseline (Minutes)	ACP/CCP Baseline (Minutes)																																																															
FY22-23 Q1	1205	1354	1240	1500	1378	1632																																																															
FY22-23 Q2	1651	1651	1240	1500	1378	1632																																																															
FY22-23 Q3	2548	1755	1240	1500	1378	1632																																																															
FY22-23 Q4	923	1581	1240	1500	1378	1632																																																															
FY23-24 Q1	1269	1750	1240	1500	1378	1632																																																															
FY23-24 Q2	2062	1720	1240	1500	1378	1632																																																															
FY23-24 Q3	3178	2262	1240	1500	1378	1632																																																															
FY23-24 Q4	2786	2263	1240	1500	1378	1632																																																															
ACP/CCP LOC Baseline (F2223): 1670Target: 1503	2263																																																																				

Objective	Measure/ Indicator	Target 2023/24	Fourth Quarter FY 2024	Trend	Year End Result																																																															
Improve Clinical Quality	Paediatric Mechanical Ventilation - frequency of hypotension (i) % of hypotension avoided in paediatric mechanical ventilation	% of hypotension avoided Baseline: 73% Target: 83%	67.9%	<div>Quarterly Trend of Hypotension Avoided in Paediatric Mechanical Ventilation</div>  <table><thead><tr><th>Quarter</th><th>Hypotension Avoided (%)</th><th>Avoided Target (%)</th><th>Avoided Baseline (%)</th></tr></thead><tbody><tr><td>FY23-24 Q1</td><td>88.90%</td><td>83%</td><td>73%</td></tr><tr><td>FY23-24 Q2</td><td>79.40%</td><td>83%</td><td>73%</td></tr><tr><td>FY23-24 Q3</td><td>67.90%</td><td>83%</td><td>73%</td></tr><tr><td>FY23-24 Q4</td><td>78.30%</td><td>83%</td><td>73%</td></tr></tbody></table>	Quarter	Hypotension Avoided (%)	Avoided Target (%)	Avoided Baseline (%)	FY23-24 Q1	88.90%	83%	73%	FY23-24 Q2	79.40%	83%	73%	FY23-24 Q3	67.90%	83%	73%	FY23-24 Q4	78.30%	83%	73%	Analysis Hypotension in mechanically vented paediatric patients was avoided 78% in Q4 which is an improvement. Similar to previous quarters, the number of paediatric mechanically vented patients remains low leading to significant variability in results. In summary, through Clinical Affairs and Paediatric Medical Director case reviews, 22/23 paediatric mechanically vented paediatric patients were appropriately managed. Action Plan <ul style="list-style-type: none">Continue to emphasize appropriate management of hypotension in mechanically vented paediatric patientsThis measure will continue to be monitored in the Clinical Metrics but removed from the 2025 QIP.																																											
Quarter	Hypotension Avoided (%)	Avoided Target (%)	Avoided Baseline (%)																																																																	
FY23-24 Q1	88.90%	83%	73%																																																																	
FY23-24 Q2	79.40%	83%	73%																																																																	
FY23-24 Q3	67.90%	83%	73%																																																																	
FY23-24 Q4	78.30%	83%	73%																																																																	
Improve Clinical Quality	TMP E1 Interfacility Patients 90th 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: 9 Target: 6.75 minutes Ornge Baseline: 14 Target: 10.5 minutes	7 13	<div>Quarterly Trend of TMP E1 Interfacility Patients</div>  <table><thead><tr><th>Quarter</th><th>Criticall 90th Percentile (Minutes)</th><th>Ornge 90th Percentile (Minutes)</th><th>Criticall Target (Minutes)</th><th>Ornge Target (Minutes)</th><th>Criticall Baseline (Minutes)</th><th>Ornge Baseline (Minutes)</th></tr></thead><tbody><tr><td>FY22-23 Q1</td><td>9</td><td>13</td><td>6.75</td><td>10.5</td><td>9</td><td>14</td></tr><tr><td>FY22-23 Q2</td><td>10</td><td>15</td><td>6.75</td><td>10.5</td><td>9</td><td>14</td></tr><tr><td>FY22-23 Q3</td><td>9</td><td>17.4</td><td>6.75</td><td>10.5</td><td>9</td><td>14</td></tr><tr><td>FY22-23 Q4</td><td>9</td><td>13</td><td>6.75</td><td>10.5</td><td>9</td><td>14</td></tr><tr><td>FY23-24 Q1</td><td>8</td><td>14.9</td><td>6.75</td><td>10.5</td><td>9</td><td>14</td></tr><tr><td>FY23-24 Q2</td><td>8</td><td>16</td><td>6.75</td><td>10.5</td><td>9</td><td>14</td></tr><tr><td>FY23-24 Q3</td><td>7</td><td>13</td><td>6.75</td><td>10.5</td><td>9</td><td>14</td></tr><tr><td>FY23-24 Q4</td><td>7</td><td>13</td><td>6.75</td><td>10.5</td><td>9</td><td>14</td></tr></tbody></table>	Quarter	Criticall 90 th Percentile (Minutes)	Ornge 90 th Percentile (Minutes)	Criticall Target (Minutes)	Ornge Target (Minutes)	Criticall Baseline (Minutes)	Ornge Baseline (Minutes)	FY22-23 Q1	9	13	6.75	10.5	9	14	FY22-23 Q2	10	15	6.75	10.5	9	14	FY22-23 Q3	9	17.4	6.75	10.5	9	14	FY22-23 Q4	9	13	6.75	10.5	9	14	FY23-24 Q1	8	14.9	6.75	10.5	9	14	FY23-24 Q2	8	16	6.75	10.5	9	14	FY23-24 Q3	7	13	6.75	10.5	9	14	FY23-24 Q4	7	13	6.75	10.5	9	14	The TMP review time for Ornge E1 and CritiCall initiated Life or Limb transport requests remained stable in Q4. TMP continue to receive ongoing feedback as to this QIP performance measure at TMP Staff Meetings, TMP CME Day and TMP Annual Performance Reviews. Action Plan <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.This metric will continue to be monitored in the 24/25 QIP.
Quarter	Criticall 90 th Percentile (Minutes)	Ornge 90 th Percentile (Minutes)	Criticall Target (Minutes)	Ornge Target (Minutes)	Criticall Baseline (Minutes)	Ornge Baseline (Minutes)																																																														
FY22-23 Q1	9	13	6.75	10.5	9	14																																																														
FY22-23 Q2	10	15	6.75	10.5	9	14																																																														
FY22-23 Q3	9	17.4	6.75	10.5	9	14																																																														
FY22-23 Q4	9	13	6.75	10.5	9	14																																																														
FY23-24 Q1	8	14.9	6.75	10.5	9	14																																																														
FY23-24 Q2	8	16	6.75	10.5	9	14																																																														
FY23-24 Q3	7	13	6.75	10.5	9	14																																																														
FY23-24 Q4	7	13	6.75	10.5	9	14																																																														



Objective	Measure/ Indicator	Target 2023/24	Fourth Quarter FY 2024	Trend	Year End Result																																																															
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			<div>Quarterly Trend of E1 Responsiveness – T-0 to Aircraft Moving Towards Patient for Interfacility</div> <table><tr><th>Quarter</th><th>RW</th><th>FW</th><th>RW Target</th><th>FW Target</th><th>RW Baseline</th><th>FW Baseline</th></tr><tr><td>FY22-23 Q1</td><td>118</td><td>215</td><td>125</td><td>238</td><td>125</td><td>264</td></tr><tr><td>FY22-23 Q2</td><td>128</td><td>194</td><td>125</td><td>238</td><td>125</td><td>264</td></tr><tr><td>FY22-23 Q3</td><td>160</td><td>371</td><td>125</td><td>238</td><td>125</td><td>264</td></tr><tr><td>FY22-23 Q4</td><td>113</td><td>342</td><td>125</td><td>238</td><td>125</td><td>264</td></tr><tr><td>FY23-24 Q1</td><td>115</td><td>209</td><td>125</td><td>238</td><td>125</td><td>264</td></tr><tr><td>FY23-24 Q2</td><td>120</td><td>263</td><td>125</td><td>238</td><td>125</td><td>264</td></tr><tr><td>FY23-24 Q3</td><td>107</td><td>309</td><td>125</td><td>238</td><td>125</td><td>264</td></tr><tr><td>FY23-24 Q4</td><td>114</td><td>392</td><td>125</td><td>238</td><td>125</td><td>264</td></tr></table>	Quarter	RW	FW	RW Target	FW Target	RW Baseline	FW Baseline	FY22-23 Q1	118	215	125	238	125	264	FY22-23 Q2	128	194	125	238	125	264	FY22-23 Q3	160	371	125	238	125	264	FY22-23 Q4	113	342	125	238	125	264	FY23-24 Q1	115	209	125	238	125	264	FY23-24 Q2	120	263	125	238	125	264	FY23-24 Q3	107	309	125	238	125	264	FY23-24 Q4	114	392	125	238	125	264	<p>FW response times remain high as a result of limited asset availability and pilot shortages.</p> <p>RW response times are at or close to target.</p> <p>RW scene response times have exceeded target indicator.</p> <p>Action Plan</p> <ul style="list-style-type: none">• A continued focus on improving serviceability through increased staffing and increased asset redundancy through various proposals and programs currently underway.• This metric will continue to be monitored on the 24/25 QIP.
	Quarter	RW	FW	RW Target	FW Target	RW Baseline	FW Baseline																																																													
	FY22-23 Q1	118	215	125	238	125	264																																																													
	FY22-23 Q2	128	194	125	238	125	264																																																													
	FY22-23 Q3	160	371	125	238	125	264																																																													
FY22-23 Q4	113	342	125	238	125	264																																																														
FY23-24 Q1	115	209	125	238	125	264																																																														
FY23-24 Q2	120	263	125	238	125	264																																																														
FY23-24 Q3	107	309	125	238	125	264																																																														
FY23-24 Q4	114	392	125	238	125	264																																																														
	Inter-facility																																																																			
	Ornge Rotor Wing Baseline: 125 min Target: 113 min		114																																																																	
	Ornge Fixed Wing Baseline: 264 min Target:238 min		392																																																																	
	Scene																																																																			
	Ornge Rotor Wing Baseline: 61min Target: 55 min		46	<div>Quarterly Trend of E1 Responsiveness T-0 to Aircraft Moving Towards Patient for RW Scene</div> <table><tr><th>Quarter</th><th>RW Scene</th><th>Target</th><th>Baseline</th></tr><tr><td>FY22-23 Q1</td><td>51</td><td>55</td><td>61</td></tr><tr><td>FY22-23 Q2</td><td>64</td><td>55</td><td>61</td></tr><tr><td>FY22-23 Q3</td><td>63</td><td>55</td><td>61</td></tr><tr><td>FY22-23 Q4</td><td>70</td><td>55</td><td>61</td></tr><tr><td>FY23-24 Q1</td><td>51</td><td>55</td><td>61</td></tr><tr><td>FY23-24 Q2</td><td>60</td><td>55</td><td>61</td></tr><tr><td>FY23-24 Q3</td><td>51</td><td>55</td><td>61</td></tr><tr><td>FY23-24 Q4</td><td>46</td><td>55</td><td>61</td></tr></table>	Quarter	RW Scene	Target	Baseline	FY22-23 Q1	51	55	61	FY22-23 Q2	64	55	61	FY22-23 Q3	63	55	61	FY22-23 Q4	70	55	61	FY23-24 Q1	51	55	61	FY23-24 Q2	60	55	61	FY23-24 Q3	51	55	61	FY23-24 Q4	46	55	61																												
Quarter	RW Scene	Target	Baseline																																																																	
FY22-23 Q1	51	55	61																																																																	
FY22-23 Q2	64	55	61																																																																	
FY22-23 Q3	63	55	61																																																																	
FY22-23 Q4	70	55	61																																																																	
FY23-24 Q1	51	55	61																																																																	
FY23-24 Q2	60	55	61																																																																	
FY23-24 Q3	51	55	61																																																																	
FY23-24 Q4	46	55	61																																																																	



Ornge Quality Improvement Plan - FY 2023/24

September 2024 - Publication

Objective	Measure/ Indicator	Target 2023/24	Fourth Quarter FY 2024	Trend	Year End Result
Improve Efficiency	E1 Responsiveness – T-0 to PDC 90 th percentile time from ticket creation to Patient Details Complete (PDC) time stamp	 			



Objective	Measure/ Indicator	Target 2023/24	Fourth Quarter FY 2024	Trend	Year End Result												
Improve Efficiency	E1 Responsiveness – % CCP Level of Care targets	<div><div>%CCP Level of Care Targets</div><div>System Overall Baseline: 65% Target: 75%</div><div>Dedicated Fixed-Wing Baseline: 51% Target: 80%</div><div>RW South Baseline: 81% Target: 90%</div><div>RW North (YQK/YQT/YMO) Baseline: 64% Target: 50%</div></div>	<div>78%</div> <div>73%</div> <div>89%</div> <div>73%</div>	<div>Quarterly Trend of E1 Responsiveness – % CCP Level of Care Targets</div> <table><tr><td>Overall</td><td>FW</td><td>RW South</td><td>RW North</td></tr><tr><td>Overall Target</td><td>FW Target</td><td>RW South Target</td><td>RW North Target</td></tr><tr><td>Overall Baseline</td><td>FW Baseline</td><td>RW S Baseline</td><td>RW N Baseline</td></tr></table>	Overall	FW	RW South	RW North	Overall Target	FW Target	RW South Target	RW North Target	Overall Baseline	FW Baseline	RW S Baseline	RW N Baseline	<div>Analysis</div> <ul style="list-style-type: none">Overall a significant positive trend continues this quarter with system overall at 78%, up from 61% last quarter.Introduction of the enhanced field preceptorship/residency model occurred at the end of this Q3 (Nov 25) which has resulted in additional assets achieving a CCP level of care with CCP residents on board. <div>Action Plan</div> <ul style="list-style-type: none">Continue recruitment and retention efforts.Continue to support plans for implementation of an enhanced CCP program delivery model with the aim of reducing overall time to graduation/certification in FY25Monitor the expected positive impacts of enhancements to the model for field preceptorship/residency in Q4 using PDSA to adjust number and distribution of PPM staff as required to drive further improvementsOnboarding of international recruit paramedics in Q1 FY25.Work with HR/LR & Base Management to enhance attendance support mechanisms through FY25.This metric will continue to be monitored on the 24/25 QIP.
Overall	FW	RW South	RW North														
Overall Target	FW Target	RW South Target	RW North Target														
Overall Baseline	FW Baseline	RW S Baseline	RW N Baseline														

Analysis

- Overall a significant positive trend continues this quarter with system overall at 78%, up from 61% last quarter.
- Introduction of the enhanced field preceptorship/residency model occurred at the end of this Q3 (Nov 25) which has resulted in additional assets achieving a CCP level of care with CCP residents on board.

Action Plan

- Continue recruitment and retention efforts.
- Continue to support plans for implementation of an enhanced CCP program delivery model with the aim of reducing overall time to graduation/certification in FY25
- Monitor the expected positive impacts of enhancements to the model for field preceptorship/residency in Q4 using PDSA to adjust number and distribution of PPM staff as required to drive further improvements
- Onboarding of international recruit paramedics in Q1 FY25.
- Work with HR/LR & Base Management to enhance attendance support mechanisms through FY25.
- This metric will continue to be monitored on the 24/25 QIP.



2024/25

Quality Improvement Plan

Proposed 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.





Ornge Quality Improvement Plan - FY 2024/25

March 2024

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	FY 2025	Trend	Target Justification	Improvement Initiatives																																																								
Quality Element: Effective Care																																																														
Improve Clinical Quality	<p>TMP E1 Interfacility Patients</p> <p>90th Percentile</p> <p>Patients Serviced and Transported</p> <p>First Review Needed time to First TMP Status time (based on TMP review status)</p> <p>Excludes: Teams and Scene Requests</p>	<p>Requested By</p> <p>Criticall Baseline: 9 Target: 6.75 minutes</p> <p>Ornge Baseline: 14 Target: 10.5 minutes</p>		<p>Quarterly Trend of TMP E1 Interfacility Patients</p> <table border="1"><thead><tr><th>Quarter</th><th>Criticall 90th Percentile (min)</th><th>Ornge 90th Percentile (min)</th><th>Criticall Target (min)</th><th>Ornge Target (min)</th><th>Criticall Baseline (min)</th><th>Ornge Baseline (min)</th></tr></thead><tbody><tr><td>FY22-23 Q1</td><td>9</td><td>13</td><td>10.5</td><td>10.5</td><td>9</td><td>14</td></tr><tr><td>FY22-23 Q2</td><td>10</td><td>15</td><td>10.5</td><td>10.5</td><td>9</td><td>14</td></tr><tr><td>FY22-23 Q3</td><td>9</td><td>17.4</td><td>10.5</td><td>10.5</td><td>9</td><td>14</td></tr><tr><td>FY22-23 Q4</td><td>9</td><td>13</td><td>10.5</td><td>10.5</td><td>9</td><td>14</td></tr><tr><td>FY23-24 Q1</td><td>8</td><td>14.9</td><td>10.5</td><td>10.5</td><td>9</td><td>14</td></tr><tr><td>FY23-24 Q2</td><td>8</td><td>16</td><td>10.5</td><td>10.5</td><td>9</td><td>14</td></tr><tr><td>FY23-24 Q3</td><td>7</td><td>13</td><td>10.5</td><td>10.5</td><td>9</td><td>14</td></tr></tbody></table>	Quarter	Criticall 90th Percentile (min)	Ornge 90th Percentile (min)	Criticall Target (min)	Ornge Target (min)	Criticall Baseline (min)	Ornge Baseline (min)	FY22-23 Q1	9	13	10.5	10.5	9	14	FY22-23 Q2	10	15	10.5	10.5	9	14	FY22-23 Q3	9	17.4	10.5	10.5	9	14	FY22-23 Q4	9	13	10.5	10.5	9	14	FY23-24 Q1	8	14.9	10.5	10.5	9	14	FY23-24 Q2	8	16	10.5	10.5	9	14	FY23-24 Q3	7	13	10.5	10.5	9	14	<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 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>Through Q3 of FY24 we have observed a steady improvement in Criticall LoL triage times but have not yet been below our target. Our Ornge triage times have fluctuated and remained above target.</p> <p>This item will remain on our FY25 QIP as part of our overall focus to reduce response time on all aspects of E1 response.</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.
Quarter	Criticall 90th Percentile (min)	Ornge 90th Percentile (min)	Criticall Target (min)	Ornge Target (min)	Criticall Baseline (min)	Ornge Baseline (min)																																																								
FY22-23 Q1	9	13	10.5	10.5	9	14																																																								
FY22-23 Q2	10	15	10.5	10.5	9	14																																																								
FY22-23 Q3	9	17.4	10.5	10.5	9	14																																																								
FY22-23 Q4	9	13	10.5	10.5	9	14																																																								
FY23-24 Q1	8	14.9	10.5	10.5	9	14																																																								
FY23-24 Q2	8	16	10.5	10.5	9	14																																																								
FY23-24 Q3	7	13	10.5	10.5	9	14																																																								



Ornge Quality Improvement Plan - FY 2024/25

March 2024

Objective	Measure/ Indicator	Target 2024/25	FY 2025	Trend	Target Justification	Improvement Initiatives																																																								
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	Inter-facility		<div>Quarterly Trend of E1 Responsiveness – T-0 to Aircraft Moving Towards Patient for Interfacility</div> <table><caption>Quarterly Trend of E1 Responsiveness – T-0 to Aircraft Moving Towards Patient for Interfacility</caption><thead><tr><th>Period</th><th>RW</th><th>FW</th><th>RW Target</th><th>FW Target</th><th>RW Baseline</th><th>FW Baseline</th></tr></thead><tbody><tr><td>FY22-23 Q1</td><td>118</td><td>215</td><td>113</td><td>238</td><td>125</td><td>264</td></tr><tr><td>FY22-23 Q2</td><td>128</td><td>194</td><td>113</td><td>238</td><td>125</td><td>264</td></tr><tr><td>FY22-23 Q3</td><td>160</td><td>371</td><td>113</td><td>238</td><td>125</td><td>264</td></tr><tr><td>FY22-23 Q4</td><td>113</td><td>342</td><td>113</td><td>238</td><td>125</td><td>264</td></tr><tr><td>FY23-24 Q1</td><td>115</td><td>209</td><td>113</td><td>238</td><td>125</td><td>264</td></tr><tr><td>FY23-24 Q2</td><td>120</td><td>263</td><td>113</td><td>238</td><td>125</td><td>264</td></tr><tr><td>FY23-24 Q3</td><td>107</td><td>309</td><td>113</td><td>238</td><td>125</td><td>264</td></tr></tbody></table>	Period	RW	FW	RW Target	FW Target	RW Baseline	FW Baseline	FY22-23 Q1	118	215	113	238	125	264	FY22-23 Q2	128	194	113	238	125	264	FY22-23 Q3	160	371	113	238	125	264	FY22-23 Q4	113	342	113	238	125	264	FY23-24 Q1	115	209	113	238	125	264	FY23-24 Q2	120	263	113	238	125	264	FY23-24 Q3	107	309	113	238	125	264	<p>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.</p> <p>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.</p> <p>Our goal is to reduce the time to launch an aircraft by 10%.</p>	Analysis Over FY23 and FY24 we have observed variable and prolonged E1 response times for FW aircraft but steadily improving and consistently lower response times for RW aircraft. We will continue to focus on this important metric for FY 25 attempting to push response times consistently below our targets. This metric is complex and impacted by a multitude of variables including serviceability (staffing, aircraft), volume and organizational performance.
		Period	RW	FW	RW Target	FW Target	RW Baseline	FW Baseline																																																						
FY22-23 Q1	118	215	113	238	125	264																																																								
FY22-23 Q2	128	194	113	238	125	264																																																								
FY22-23 Q3	160	371	113	238	125	264																																																								
FY22-23 Q4	113	342	113	238	125	264																																																								
FY23-24 Q1	115	209	113	238	125	264																																																								
FY23-24 Q2	120	263	113	238	125	264																																																								
FY23-24 Q3	107	309	113	238	125	264																																																								
Scene	<div>Quarterly Trend of E1 Responsiveness T-0 to Aircraft Moving Towards Patient for RW Scene</div> <table><caption>Quarterly Trend of E1 Responsiveness T-0 to Aircraft Moving Towards Patient for RW Scene</caption><thead><tr><th>Period</th><th>RW Scene</th><th>Target</th><th>Baseline</th></tr></thead><tbody><tr><td>FY22-23 Q1</td><td>51</td><td>55</td><td>61</td></tr><tr><td>FY22-23 Q2</td><td>64</td><td>55</td><td>61</td></tr><tr><td>FY22-23 Q3</td><td>63</td><td>55</td><td>61</td></tr><tr><td>FY22-23 Q4</td><td>70</td><td>55</td><td>61</td></tr><tr><td>FY23-24 Q1</td><td>51</td><td>55</td><td>61</td></tr><tr><td>FY23-24 Q2</td><td>60</td><td>55</td><td>61</td></tr><tr><td>FY 23-24 Q3</td><td>51</td><td>55</td><td>61</td></tr></tbody></table>	Period	RW Scene	Target	Baseline	FY22-23 Q1	51	55	61	FY22-23 Q2	64	55	61	FY22-23 Q3	63	55	61	FY22-23 Q4	70	55	61	FY23-24 Q1	51	55	61	FY23-24 Q2	60	55	61	FY 23-24 Q3	51	55	61	Action Plan <ul style="list-style-type: none">• A continued focus on improving consistent staffing of both pilots and paramedics at all bases including recruitment, retention, training as well as the staffing with certainty proposal.• Reduce down time due to aircraft maintenance as well as increasing RW assets• Continue to improve data available to better understand the root causes of operational performance.<ul style="list-style-type: none">◦ transitioning the asset assignment data into groupings aligned with the QIP intervals will continue to aid in identifying controllable factors within the various intervals as they change over time.• Identify organizational performance issues and ensure barriers are reduced and base managers and OCC managers are tasked and supported to improve daily operational response and readiness.																												
Period	RW Scene	Target	Baseline																																																											
FY22-23 Q1	51	55	61																																																											
FY22-23 Q2	64	55	61																																																											
FY22-23 Q3	63	55	61																																																											
FY22-23 Q4	70	55	61																																																											
FY23-24 Q1	51	55	61																																																											
FY23-24 Q2	60	55	61																																																											
FY 23-24 Q3	51	55	61																																																											



Ornge Quality Improvement Plan - FY 2024/25

March 2024

Objective	Measure/ Indicator	Target 2024/25	FY 2025	Trend	Target Justification	Improvement Initiatives
Improve Efficiency	E1 Responsiveness – T-0 to PDC 90 th percentile time from ticket creation to Patient Details Complete (PDC) time stamp	 				



Ornge Quality Improvement Plan - FY 2024/25

March 2024

Objective	Measure/ Indicator	Target 2024/25	FY 2025	Trend	Target Justification	Improvement Initiatives																																								
Improve Efficiency	E1 Responsiveness – % CCP Level of Care targets	<div><div>%CCP Level of Care Targets</div><div>System Overall Baseline: 65% Target: 75%</div><div>Dedicated Fixed-Wing Baseline: 51% Target: 80%</div><div>RW South Baseline: 81% Target: 90%</div><div>RW North (YQK/YQT/YMO) Baseline: 64% Target: 50%</div></div>		<div><div>Quarterly Trend of E1 Responsiveness – % CCP Level of Care Targets</div><div><table><caption>Quarterly Trend of E1 Responsiveness – % CCP Level of Care Targets</caption><thead><tr><th>Category</th><th>FY22-23 Q1</th><th>FY22-23 Q2</th><th>FY22-23 Q3</th><th>FY22-23 Q4</th><th>FY23-24 Q1</th><th>FY23-24 Q2</th><th>FY23-24 Q3</th></tr></thead><tbody><tr><td>Overall</td><td>66%</td><td>62%</td><td>62%</td><td>69%</td><td>69%</td><td>59%</td><td>61%</td></tr><tr><td>FW</td><td>52%</td><td>45%</td><td>48%</td><td>58%</td><td>58%</td><td>50%</td><td>61%</td></tr><tr><td>RW South</td><td>82%</td><td>83%</td><td>80%</td><td>79%</td><td>77%</td><td>70%</td><td>78%</td></tr><tr><td>RW North</td><td>64%</td><td>58%</td><td>62%</td><td>72%</td><td>72%</td><td>65%</td><td>72%</td></tr></tbody></table><div><div>Overall</div><div>FW</div><div>RW South</div><div>RW North</div><div>Overall Target</div><div>FW Target</div><div>RW South Target</div><div>RW North Target</div><div>Overall Baseline</div><div>FW Baseline</div><div>RW S Baseline</div><div>RW N Baseline</div></div></div></div>	Category	FY22-23 Q1	FY22-23 Q2	FY22-23 Q3	FY22-23 Q4	FY23-24 Q1	FY23-24 Q2	FY23-24 Q3	Overall	66%	62%	62%	69%	69%	59%	61%	FW	52%	45%	48%	58%	58%	50%	61%	RW South	82%	83%	80%	79%	77%	70%	78%	RW North	64%	58%	62%	72%	72%	65%	72%	<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 25% 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><p>CCP LOC is a key component to our ability to mount a timely response to E1 transport requests. We have observed an increase in FW and RW CCP LOC in northern Ontario over FY24 but an overall decrease in CCP LOC and are below targets. This metric will remain for us to focus on improving recruitment and training initiatives related to clinical staff.</p><div><div>Action Plan</div><ul style="list-style-type: none">Continue recruitment and retention efforts.Continue to support plans for implementation of an enhanced CCP program delivery model with the aim of reducing overall time to graduation/certification in FY25Monitor the expected positive impacts of enhancements to the model for field preceptorship/residency in Q4 using PDSA to adjust number and distribution of PPM staff as required to drive further improvementsOnboarding of international recruit paramedics in Q1 FY25.Continue to refine data collection & analysis to ensure all CCP LOC accurately capturedWork with HR/LR & Base Management to enhance attendance support mechanisms through FY25.</div></div>
Category	FY22-23 Q1	FY22-23 Q2	FY22-23 Q3	FY22-23 Q4	FY23-24 Q1	FY23-24 Q2	FY23-24 Q3																																							
Overall	66%	62%	62%	69%	69%	59%	61%																																							
FW	52%	45%	48%	58%	58%	50%	61%																																							
RW South	82%	83%	80%	79%	77%	70%	78%																																							
RW North	64%	58%	62%	72%	72%	65%	72%																																							