

Staff Report to Council - for Information

Title: 2023 CTAS Performance Plan

From: Steve Schaus, Director/Chief, Paramedic Services

Date: March 7, 2024

Report Purpose:

The 2023 CTAS Performance Plan results are for information.

Background:

Bruce County Paramedic Services is required under current legislation to submit on an annual basis our CTAS Response Time Report to the Ministry of Health and Long-Term Care (MOHLTC) related to ambulance response time targets within the County.

There are 6 set criteria that are measured under our Response Time Target Plans. Five of the performance targets are measured by response times related to patient presentation as indicated by the Canadian Triage and Acuity Scale (CTAS) however, one of the six criteria is based on community response to patients in sudden cardiac arrest (SCA). The response time targets and criteria set by the MOHLTC are described below:

- 1. The percentage of times that a person equipped to provide any type of defibrillation has arrived on scene to provide defibrillation to sudden cardiac arrest patients within six (6) minutes of the time notice is received.
- 2. The percentage of times that an ambulance crew has arrived on scene to provide ambulance services to sudden cardiac arrest patients or other patients categorized as CTAS 1 within eight (8) minutes of the time notice is received respecting such services.
- 3. The percentage of times that an ambulance crew has arrived on-scene to provide ambulance services to patients categorized as CTAS 2, 3, 4 and 5 within the response time targets set by the upper-tier municipality or delivery agent under its plan established under subsection (2). O.Reg 267/08, s.1(2); O.Reg 368/10, s.1(2).

CTAS is described as:

CTAS SCA: required CPR and resuscitation techniques due to Sudden Cardiac Arrest.

CTAS 1: requires resuscitation and includes conditions that are threats to life or imminent risk of deterioration, requiring immediate aggressive interventions (for example, major trauma or shock states.)

CTAS 2: requires emergent care and includes conditions that are a potential threat to life or limb functions, requiring rapid medical intervention or delegated medical acts (for example head injury, chest pain, or internal bleeding).

CTAS 3: requires urgent care and includes conditions that could potentially progress to a serious problem requiring emergency intervention (for example mild to moderate asthma, moderate trauma or vomiting and diarrhea in patients younger than two years).

CTAS 4: requires less-urgent care and include conditions related to patient age, distress or potential for deterioration or complications that would benefit from intervention (for example urinary symptoms, mild abdominal pain or earache).

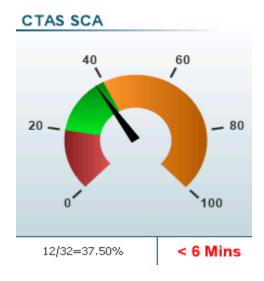
CTAS 5: requires non-urgent care and includes conditions in which investigations or interventions could be delayed or referred to other areas of the hospital or health care system (for example sore throat, conditions related to chronic problems or psychiatric complaints with no suicidal ideation or attempts).

Bruce County Paramedic Services is therefore reporting the following data:

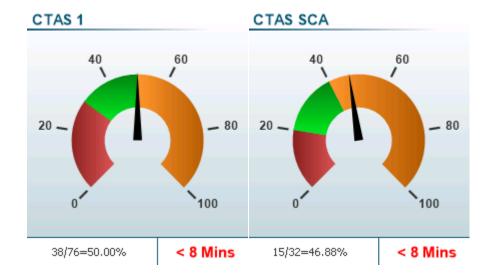
1. The percentage of times that a person equipped to provide any type of defibrillation has arrived on-scene to provide defibrillation to sudden cardiac arrest patients within six minutes of the time notice is received.

As per our current CTAS response time plan, regarding Regulation 257/00 Part VIII section 23. (7) (1)., Bruce County Paramedic Services does not have access to the response time information of other agencies or parties.

The percentage of times for an **ambulance response** to SCA patients within 6 minutes is 37.5%.

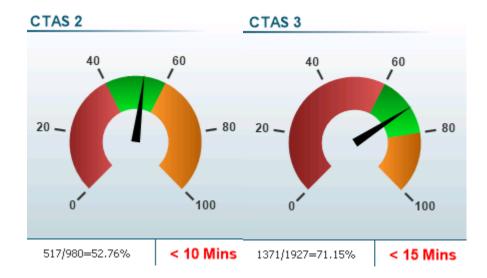


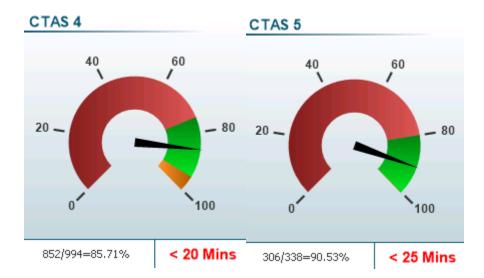
2. The percentage of times that an ambulance crew has arrived on-scene to provide ambulance services to sudden cardiac arrest patients or other patients categorized as CTAS 1 within eight minutes of the time notice is received respecting such services.



Combining these two values gives a value of 49.1% for responding in 8 minutes or less.

3. The percentage of times that an ambulance crew has arrived on-scene to provide ambulance services to patients categorized as CTAS 2, 3, 4 and 5 within the response time targets set by the upper-tier municipality or delivery agent under its plan established under subsection (2). O. Reg. 267/08, s. 1 (2); O. Reg. 368/10, s. 1(2).





The targets we have set for these response times as per our previously submitted performance plan for 2023 show that we have met all targeted benchmarks. The geographic nature of Bruce County, being mostly rural makes our targets difficult to achieve. This is the second year that the targets have all fully been met since setting the benchmarks at these levels in 2017. KPI's are partially set by the Ministry of Health however, we are given the opportunity to set part of the plan.

Our CTAS Response Time Plan report to the Paramedic Services Committee on October 6, 2022 defined our CTAS Response Time Plan for 2023. Each October we set and send the targets to the Ministry of Health for the following year. On October 5, 2023 we noted these targets will remain the same for 2024.

Performance Measure	Target	Actual
Ambulance Response to SCA in 6 minutes	30%	37.5%
Ambulance Response to SCA or CTAS 1 in 8 minutes	45%	49%
Ambulance Response to CTAS 2 in 10 minutes	50%	53%
Ambulance Response to CTAS 3 in 15 minutes	70%	71%
Ambulance Response to CTAS 4 in 20 minutes	85%	86%
Ambulance Response to CTAS 5 in 25 minutes	90%	90.5%

Financial/Staffing/Legal/IT Considerations:

The CTAS response time takes into consideration the existing budget and staffing resources. With regard to response time target criteria, the County has identified to the province that the County Paramedic Service is not able to account for other parties' response time. There are no IT considerations associated with this report.

None

Link to Strategic Goals and Objectives:

Strategic Goals

Link to Departmental Plan Goals and Objectives, if any

Values:

Service Excellence

Good Governance

Approved for Submission:

Christine MacDonald, Chief Administrative Officer