

The County of Peterborough  
Joint Services Steering Committee

To: Chair and Members of Committee

From: Bob English, Chief, Emergency Medical Services

Date: October 8<sup>th</sup>, 2009

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**Subject:** New Response Time Standards  
Proposed FTE – EMS Superintendent

**Recommendation:** To be received as background information in relation to the 2010 Preliminary EMS Budget.

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**Background and Analysis:**

This update provides information regarding changes to the Ambulance Act, Ontario Regulation 267/08, amending O. Reg. 257/00 with the heading Section 22: Part VIII, *Response Time Performance Plans*, representing a new provision, filed July 31, 2008, and to be phased in over the next 3 years.

In 1996 the Ministry of Health and Long Term Care, Emergency Services Branch set individual service standards presented as the 90<sup>th</sup> Percentile of the elapsed time between the FIRST Unit Notified and the FIRST Unit Arrived at Scene per ambulance call shown in minutes and seconds. The 90<sup>th</sup> Percentile is easiest described by exclusion; “only 10% of Emergency-type calls take LONGER than the elapsed time represented by the 90<sup>th</sup> Percentile”.

The 1996 90<sup>th</sup> percentile response time set for Peterborough County was 19 minutes.

The service has been able to meet the 90<sup>th</sup> percentile response time standard repeatedly in recent years. The Association of Municipal Emergency Medical Services Association of Ontario (AMEMSO), the Association of Municipalities of Ontario (AMO) and the Ministry of Health and Long Term Care (MOHLTC) EHS Branch have been working for a number of years developing a new response time criteria mechanism that better recognizes the efforts of ambulance and other first response agencies.

Based on the new regulation, by October 1<sup>st</sup> each year the upper tier municipalities will submit a plan for the following year that outlines the percentage of times they will have a defibrillator on scene in 6 minutes for a sudden cardiac arrest patient; and, a paramedic on scene in 8 minutes for other critically ill patients. Each municipality will establish their own target percentage and determine how they configure their system to meet the objectives. For the first time, the Peterborough EMS will be able count the time that any defibrillator is used to assist a victim of sudden cardiac arrest including a public access

defibrillator or FIRE service defibrillator. Emergency Response Vehicles (ERV's) can continue to be calculated for response time performance

Peterborough EMS will establish by October 1, 2009, for 2010, a Performance Plan that will establish:

- Response time targets categorized according to the Canadian Triage Acuity Scale (CTAS) 1, 2, 3, 4, and 5.
- The percentage of times that a person equipped to provide any kind of defibrillation has arrived on scene to sudden cardiac arrest patients within 6 minutes of the time notice is received.
- The percentage of times that an ambulance crew has arrived on scene to sudden cardiac arrest patients or other patients categorized as CTAS 1 within eight minutes of the time notified.
- 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 UTM.

The response time performance plan developed by Peterborough EMS:

- Will include response time commitments for CTAS 1,2,3,4, and 5 patients.
- Will recognize that the attendance of any person equipped to provide defibrillation (including a paramedic, fire fighter, police officer or other first responder) to a sudden cardiac arrest patient will “stop” the response-time clock;
- Will include municipal public safety & prevention education and promotion campaigns that could contribute to meeting municipal response time performance plans, such as:
  - First Responder Defibrillation (FIRE, Police, College/University);
  - Schools – 1st Aid, CPR and PAD Program training;
  - Community-Based 1<sup>st</sup> Aid, CPR and PAD Program training;
  - Public Health & Safety Programs – appropriate use of 9-1-1.

Note: CTAS is an international medical triage standard utilized by hospitals, ambulance communication services and paramedics to identify how urgently a patient requires medical care.

Peterborough EMS will be required beginning in 2011 to:

- Establish a mechanism to ensure The Response Time Performance Plan is monitored, maintained, enforced, evaluated, and if necessary updated throughout the year.
- Report annually to the Director of Emergency Health Services Branch and provide a copy of the Response Plan.

In addition to the above noted responsibilities, the proposed EMS Superintendent will also be assigned tasks related to PAD Program Quality Assurance, EMS Material Management, Electronic Data Collection and tasks assigned to Shift Superintendent positions.

Respectfully submitted;

*Original submitted by*

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EMS Chief