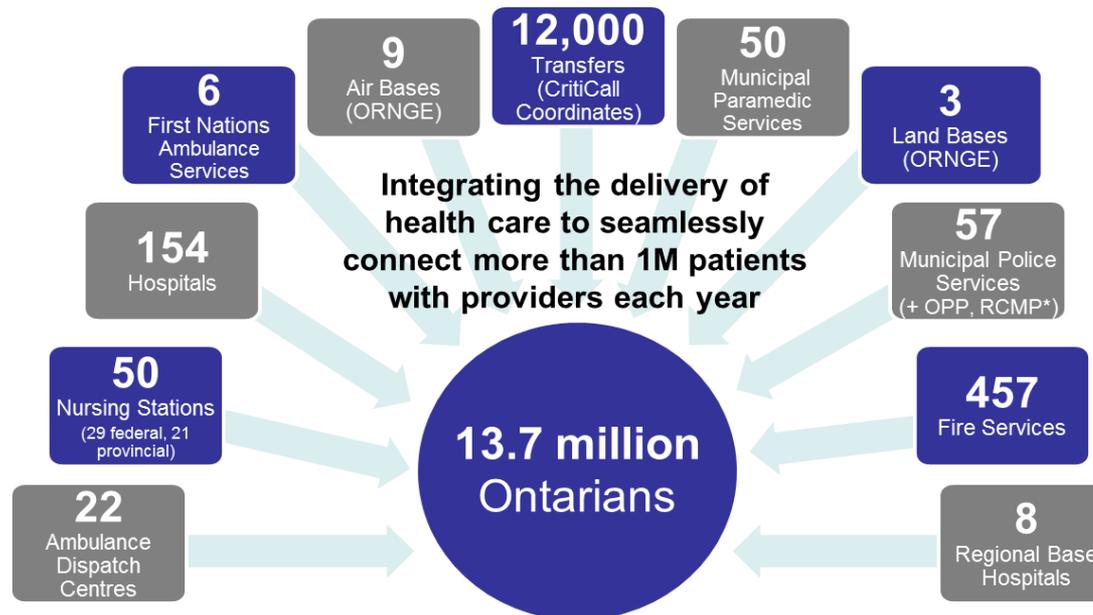


# Northern Ontario Service Deliverers Association

June 9, 2016

# Emergency Health Services System

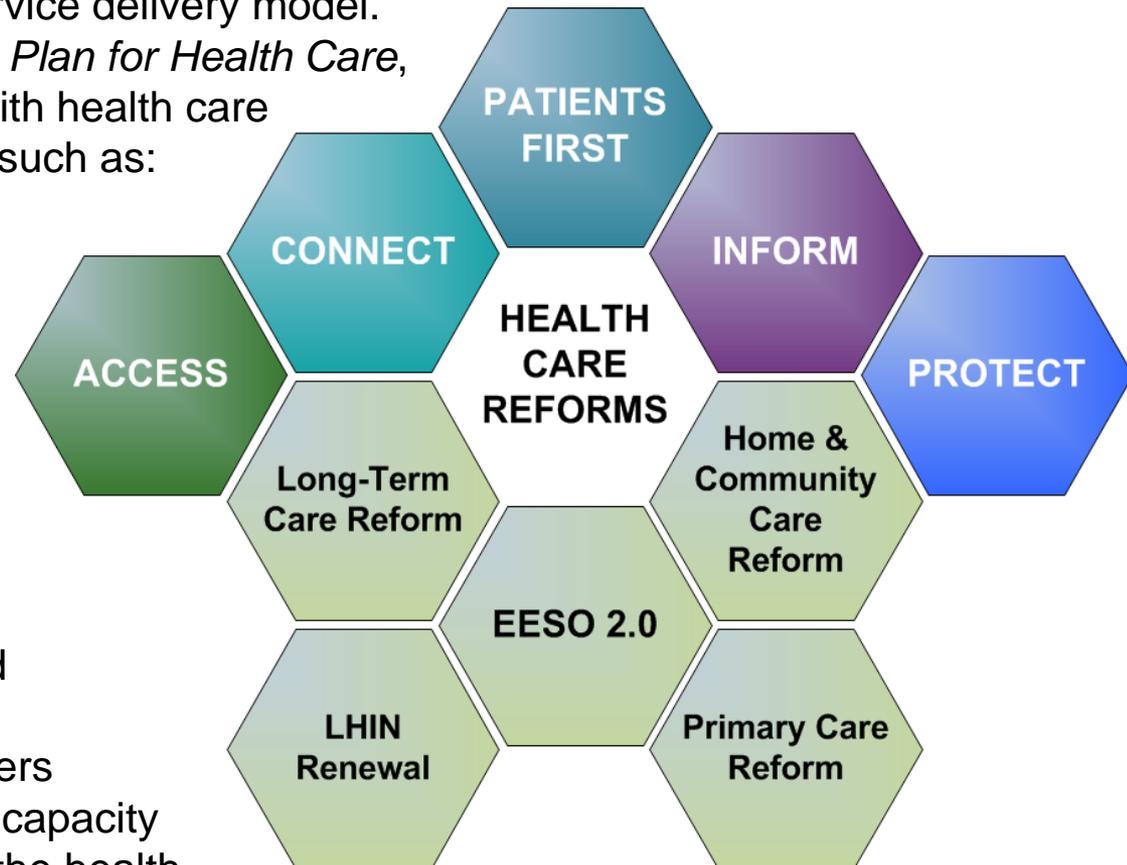
- Emergency Health Services are part of the government's plan to build a better Ontario through its [Patients First: Action Plan for Health Care](#), which is providing patients with faster access to the right care; better home and community care; the information they need to live healthy; and a health care system that is sustainable for generations to come.
- There is an ongoing need for further integration to better serve patients and improve the quality of patient care, while controlling costs and targeting funding, to ensure a sustainable health care system.



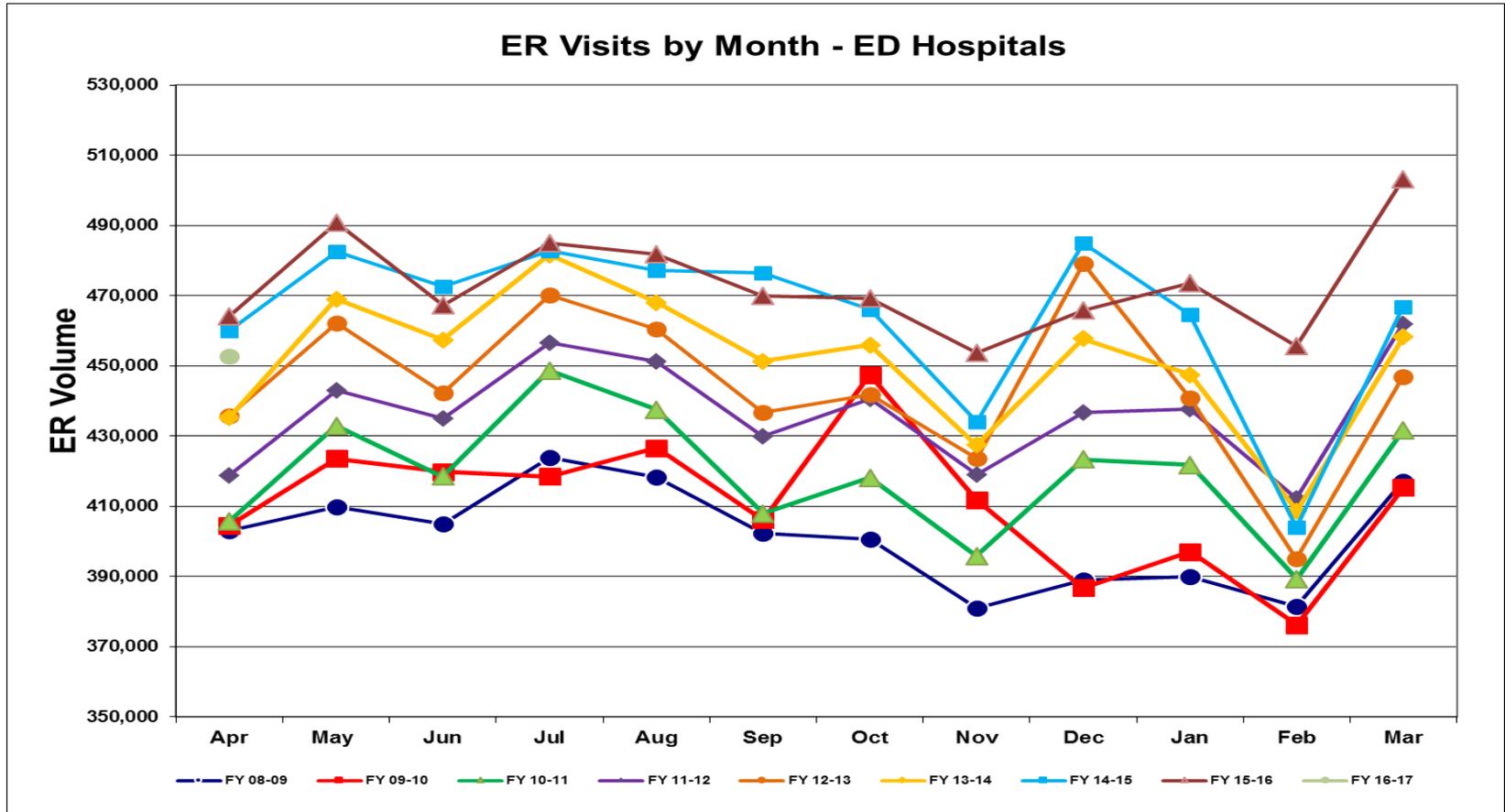
\* Integrated units working with federal, provincial and municipal partners.

# Patients First

- Opportunities to engage internal and external partners to improve patients outcomes within a sustainable service delivery model.
- Through the *Patients First: Action Plan for Health Care*, the government is collaborating with health care partners to develop opportunities such as:
  - ED diversion strategies
  - diversion at dispatch
  - community paramedicine
  - Health Links
  - improving dispatch triage
  - provincial bypass protocols
  - virtual waiting room
  - treat & refer
  - Alternative destinations
  - Improving ambulance offload
  - Patient destination software
  - Improving inter-facility transfers
- These opportunities seek to build capacity and improve patient outcomes in the health care system that is sustainable for generations to come.



# Patient Volume



Note: February 2012 and 2016 were 29 days long (leap year). In order to ensure comparability with previous February data, the volume was adjusted to reflect 28 days of data (i.e., the daily average volume was subtracted from the reported February 2012 volume of 29 days.)

# Patient Focus

## Development of Enhanced Performance Metrics

- Patient Outcome Focussed
- Aligned with OAGO recommendation
- Jointly developed
- Transparent (public reporting 2017-18)

## Standardization

- Deployment Plans
- Tools (e.g. mapping)
- Bypass (e.g. STEMI, Stroke)
- Triaging

## Regulatory Refresh

- Alignment with other legislation
- Recognize medical evidence and best practices

# Patient Support

## Community Paramedicine

- For pilots that provided data regarding patients enrolled in their programs:
  - 36% of the 2,126 referrals made through Assessment and referral pilots resulted in new or increased services to support patients in their homes.
  - 4 (of 5 that provided data) demonstrated a reduction in hospital admissions
  - 8 (of 13 that provided data) saw a reduction on 9-1-1 calls
  - 4 (of 13 that provided data) saw a reduction of repeat 9-1-1 callers
  - 5 (of 7 that provided data) saw a reduction in the number of ED transports
  - 2 (of 7 that provided data) saw a reduction in repeat ED transports

# Patient Journey - Opportunities

## Opportunities Before A Response

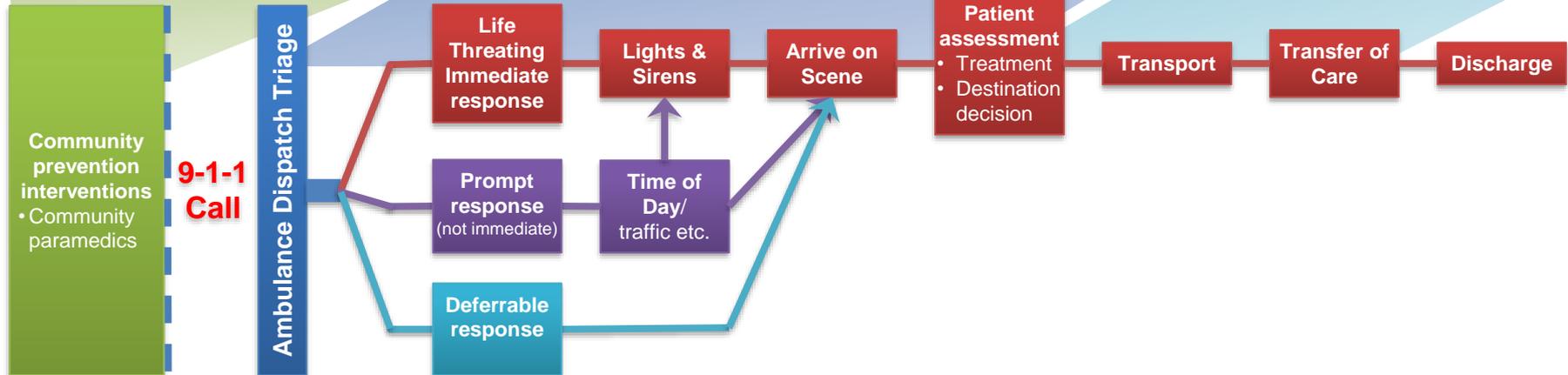
- Improve triage accuracy
- Divert at Dispatch (e.g. TeleHealth, Low Code)
- Community Paramedicine
- Health Links

## Opportunities To Improve Ambulance Response

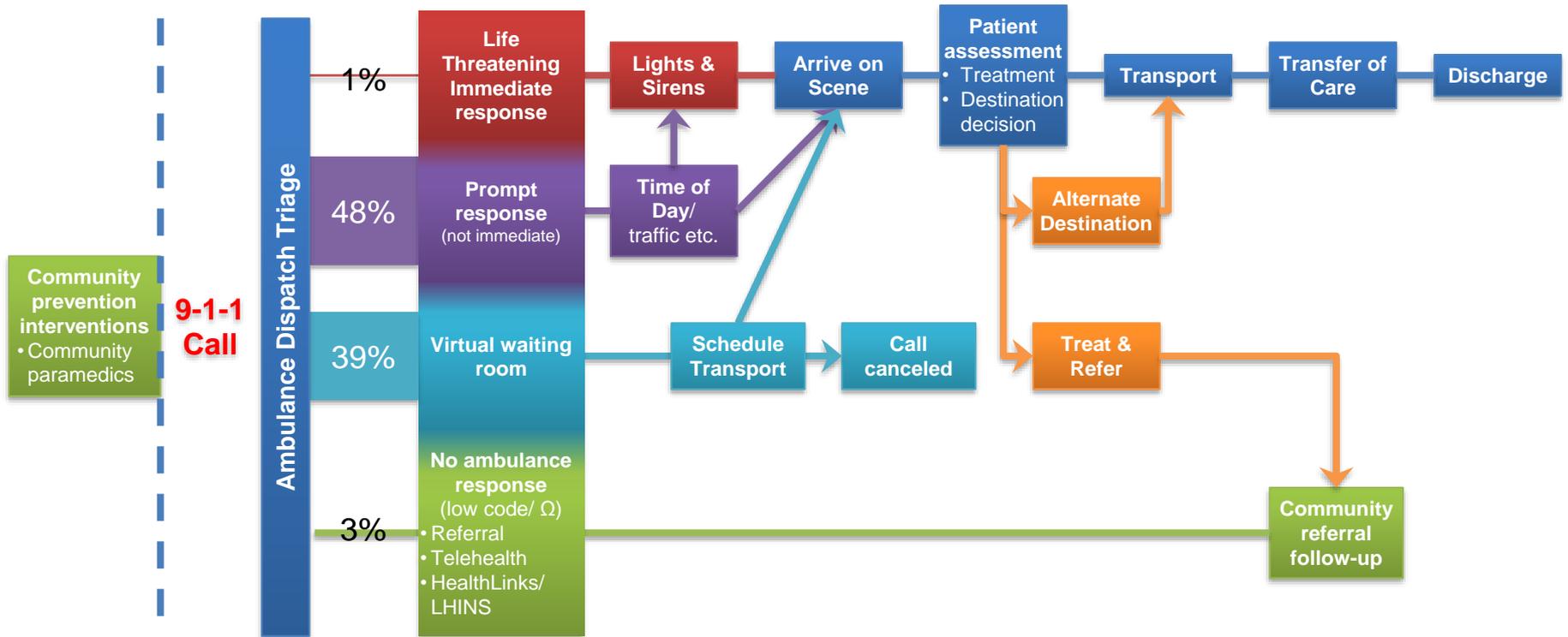
- Improve ambulance availability
- Treat & Defer
- Treat & Release
- Virtual Waiting Room
- Improve communication (Dispatch – Paramedic – Hospital)
- Provincial Bypass Protocols (e.g. ST-Segment Elevation Myocardial Infarction - STEMI)

## Opportunities To Improve Patient Journey

- Emergency Services Spectrum
- Alternative Destinations
- Patient Destination software
- Improving Ambulance Offload
- Improving Inter-facility Transfers



# Patient Journey - Future



Administrative / Legislative dependencies

Measurable Outcomes – Key Performance Indicators

Technology dependencies