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80,009

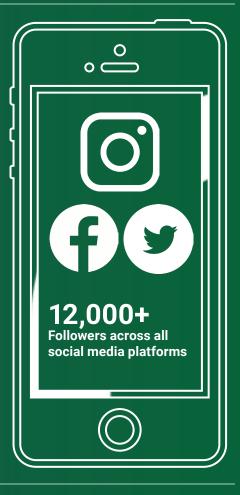
Middlesex-London Paramedic Service paramedics responded to **80,009** Code 1-4 calls

9 1 288
average calls per

20 patients recieved double sequential defibrillations

10 babies delivered

381 Paramedics

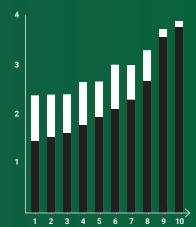


2.3 million km driven during the past year.



Responded to 105,089 Calls for Service

Middlesex-London Paramedics responded to a total of 105,089 calls for service in 2023.





MIDDLESEX-LONDON PARAMEDIC SERVICE

Mission Statement

To deliver an efficient and high quality emergency response and care service to the population of Middlesex – London, with required provincial targets and standards as a minimum service level, and to contribute to the health of the community through active collaboration with other health care, community and emergency services partners.

Welcome to the 2023 Middlesex London Paramedic Service Performance Report. Middlesex-London Paramedic Service is responsible for providing 24-hour emergency and non-emergency pre-hospital medical care and transportation to individuals experiencing injury or illness.

The 2023 Performance Report provides a comprehensive overview of the organization's operational achievements and advancements over the past year. The report highlights the dedication of all MLPS personnel in delivering high quality emergency medical services to the residents and visitors of the Middlesex and London area.



OUR TEAM

Staffing Breakdown

Middlesex-London Paramedic total of 442 staff including Paramedics, Supervisors (Operations Superintendents & Deputy Superintendents); Administration staff (Coordinators, Administrative Support, Logistics, and Training staff); and Senior Management.

Made up of full-time and part-time staff. Middlesex-London Paramedic Service has paramedic staff on duty 365 days a year.

Front line paramedics are responsible for providing patient care and make up 86% of the employees of Middlesex-London Paramedic Service.

Service employs a

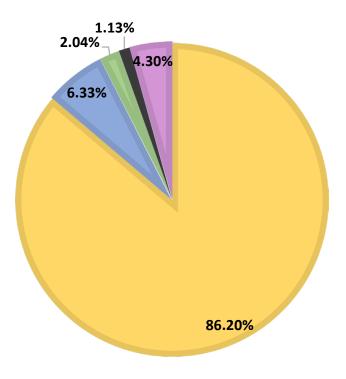
Paramedics

Supervisors

■ Administration/Support

■ Senior Management

Logistics





What is a paramedic?

Paramedics are graduates of a community college full-time program dedicated to the paramedic profession.

Upon graduation from a paramedic program, the paramedic student must complete the Ontario Ministry of Health and Long-Term Care provincial certification.

The certification, known as the Advanced Emergency Medical Care Assistant (A-EMCA) exam, must be successfully completed to practice as a primary care paramedic in Ontario.

In addition, the paramedic must be authorized by a medical director or regional Base Hospital to perform controlled medical acts. All Middlesex-London paramedics are certified under the southwest Ontario Regional Base Hospital program by Dr. Matt Davis.



ONTARIO PARAMEDIC SCOPE OF PRACTICE

PRIMARY CARE PARAMEDIC

2 Year Community College Diploma Program



Medications

Acetaminophen (PO)
Antibiotics (TOP)
ASA (PO)
Dextrose (IV)
Dimenhydrinate (IM, IV)
Diphenhydramine (IM, IV, PO)
Epinephrine (IM, NEB)
Glucagon (IM)
Glucose (PO)
Ibuprofen (PO)
Ketorolac (IM, IV)
NaCl 0.9% (IV)
Naloxone (IM, SC, IN)
Nitroglycerine (SL)
Oxygen (100%)
Salbutamol (MDI, NEB, BVM)

Procedures & Controlled Medical Acts

12 Lead ECG & STEMI Diagnosis
Advanced Airway (Supraglottic LMA / KingLT)
Airway Suctioning
Capnometry (ETCO₂)
CPAP Therapy (PEEP)
Defibrillation (Automated External)
Intravenous Access & Monitoring
SPO₂ / SpCO
Taser Probe Removal
*Evidence Based Research



ADVANCED CARE PARAMEDIC

3 Year Community College Diploma Program

Medications Acetaminophen (PO)

Adenosine (IV) ASA (PO) Amiodarone (IV, IO) Dextrose (IV) Antibiotics (TOP) ASA (PO) Atropine (IV. IO) Calcium Gluconate (IV, IO) Glucagon (IM) Dextrose (IV. IO) Glucose (PO) Dimenhydrinate (IV, IM) Diphenhydramine (IV, IM, PO) Dopamine (IV, IO) Epinephrine (IV, IM, NEB, IO, ETT) Glucagon (IM, SC) Glucose (PO) Ibuprofen (PO) Ketorolac (IV, IM) Lidocaine (IV, IO, ETT, TOP) Midazolam (IV. IM. IN. BC) Morphine (IV, IM, IO, SC) NaCl 0.9% (IV, IO) Naloxone (IV, IM, IN, SC, IO) Nitroglycerine (SL) Oxygen (100%) Salbutamol (MDI, NEB, BVM)

Procedures & Controlled Medical Acts

Sodium Bicarbonate (IV, IO)

Xylometazoline / Phenylephrine (IN)

12 Lead ECG, Posterior, Right & STEMI Diagnosis Advanced Airway (Endotracheal Intubation) Advanced Airway (Supraglottic LMA / KingLT) Advanced Airway (Tracheal Tube Introducer Device) Airway Foreign Body Removal (McGill Forceps) Airway Suctioning & Deep Suctioning Capnometry & Capnography (ETCO₂) CPAP Therapy (PEEP) **CVAD** Infusion Defibrillation (Manual External) Intraosseous Therapy Intravenous Therapy Needle Cricothyrotomy Needle Thoracostomy SpO₂ / SpCO Synchronized Cardioversion Taser Probe Removal Transcutaneous Pacing

*Evidence Based Research

FINANCIALS — 2023 Operating Costs

In 2023, Middlesex-London Paramedic Service responded to an average of 288 calls per day in 2023.

The Stats

Total Calls Received: 105,089

Calls Per Day: 288

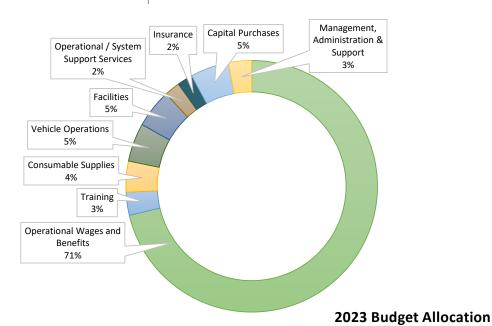
Unit Cost Per Hour: \$197.60

Wages and Benefits: 78%

Middlesex-London Paramedic Service received 109,061 calls in 2022, resulting in a unit cost per hour of \$197.60. The majority of the 2023 operating costs are fixed and based on emergency response capacity. A significant portion of the marginal operating costs for Middlesex-London Paramedic Service are variable in nature. These costs are primarily related to vehicle operations and consumable supplies.

For 2023, approximately 78% of all operational costs are directly attributed to employee salaries, wages, and benefits.

Middlesex-London Paramedic Service has worked to reduce its variable costs through strategic partnerships, purchase agreements, and business intelligence processes.



MLPS Initiatives To reduce expenses

In 2023. Middlesex-London Paramedic Service's operating fleet consisted of 84 service vehicles, including ambulances, command vehicles, administration vehicles, and logistic vehicles. These vehicles traveled over 2.3 million kilometers in 2023. The average cost per kilometer for these vehicles, including fuel, maintenance, repairs, and insurance costs was \$1.72 per kilometer.

Middlesex-London Paramedic Service continues to partner with the City of London in a corporate fuel purchasing agreement.

Additionally, Middlesex-London Paramedic Service utilizes advanced Logistics and warehouse supply software to accurately account for consumables and assets.

PERFORMANCE

Calls for Service

In 2023, Middlesex-London Paramedic Service responded to 80,009 code 1, 2, 3 and 4 emergency calls. Sixty four (64 %) percent of these responses were for life threatening calls and sixty two (62 %) percent of these 80,009 patients were transported to an emergency department. Middlesex London Paramedic Service has also seen a reduction in Code 8 (stand by) calls.



The Stats

Total Code 1-4 Responses 80,009

Total Code 8 calls: 25,080

Number of Patients Transported: 49,890

OVERALL PRIORITY CODE								
Station Name	Code 1	Code 2	Code 3	Code 4	Total Codes 1-4	Code 8	Total	
Adelaide (HQ)	203	763	8,527	16,008	25,501	7,098	32,599	
Byron	3	1	1,413	2,540	3,957	1,420	5,377	
Dorchester	0	1	346	629	976	440	1,416	
Glencoe	29	7	405	607	1,048	661	1,709	
Horizon	11	1	3,794	6,905	10,711	1,691	12,402	
Hyde Park	7	1	1,912	3,098	5,018	2,515	7,533	
Komoka	1	0	667	1,216	1,884	2,113	3,997	
Lucan	2	0	374	681	1,057	1,675	2,732	
Parkhill	1	0	321	588	910	1,997	2,907	
Strathroy	7	5	1,041	1,701	2,754	1,467	4,221	
Trafalger	8	29	1,556	2,949	4,542	850	5,392	
Trossacks	6	7	2,353	4,137	6,503	2,154	8,657	
Waterloo	19	11	4,808	10,310	15,148	999	16,147	
Total	297	826	27,517	51,369	80,009	25,080	105,089	

Source: ADDS Data Extract

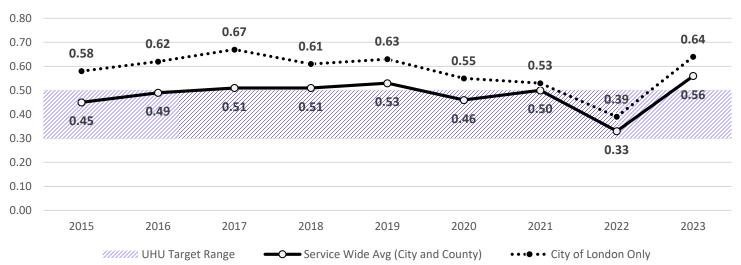
— Unit Hour Utilization

The Unit Hour Utilization (UHU) is a ratio which measures the time on task spent on calls for service in relation to the scheduled time. Generally, 9-1-1 systems target between .30 and .50 to ensure that there enough resources available in the 9-1-1 system to respond to large scale incidents and to accommodate surges in call volume. UHU ratios with values greater than 0.50 will result in narrowed resource events. This ratio is normally presented in 2 decimal places and in this form, it can be interpreted as a percentage of productivity.

It is important to note that while the UHU does not capture productivity outside of responding to 9-1-1 calls (such as cleaning and restocking the vehicle); the time on task portion does capture time spent driving to the call and time lost to offload delays.

The overall UHU for Middlesex-London Paramedic Service in 2023 was 0.56 whilst the UHU for the City of London was 0.64. The calls for service in the City of London play a significant role in determining scheduling of units and impact overall response times. Offload times at emergency departments within the City of London also impact the overall UHU.

Unit Hour Untilization (UHU)



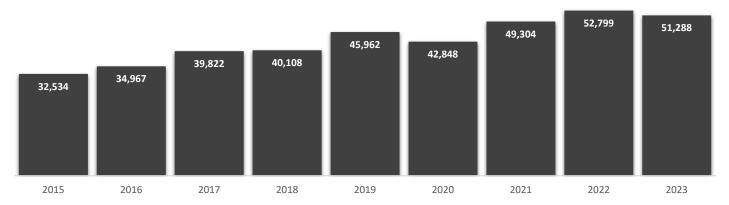
Source: ADDS Data Warehouse, MOH

Life Threatening Calls (Code 4)

Paramedic Services responded to 51,288 life threatening (code 4) calls within the Middlesex-London community in 2023.

Trends in call demand, unit utilization and activity continue to be reviewed and analyzed in order to adapt and make adjustments so that emergency response resources are optimized.

Middlesex County - City of London Review of Life Threatening Calls (code 4) Responses



Source: ADDS Data Extract



— Response Time

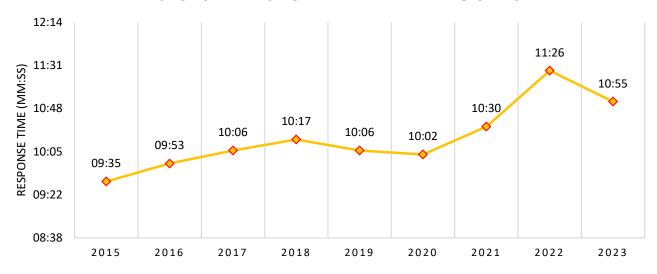
Notes

Length of time for Middlesex–London Paramedic Service to arrive at an emergency scene.

Middlesex-London Paramedic Service 90th percentile response time trend for life-threatening "Code 4" calls saw a decrease in of 31 seconds in 2023.

Response times in Middlesex County decreased by 17 seconds in 2023 and response times in the City of London decreased by 29 seconds.

MIDDLESEX-LONDON PARAMEDIC SERVICE RESPONSE TIMES FOR LIFE THREATENING CALLS

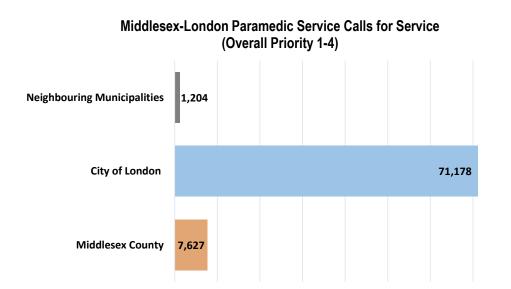


Source: ADDS Data Warehouse, MoH



Calls Completed Within Middlesex County Boundaries

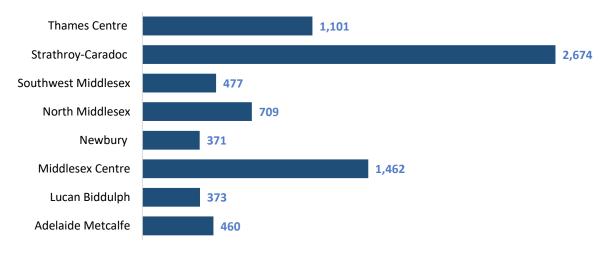
Approximately 89% of the calls attended by Middlesex-London Paramedic Service occur within the City of London. During 2023, other municipalities assisted within Middlesex-London 1,595 times. Conversely, Middlesex-London Paramedic Service assisted neighbouring municipalities 1,204 times.





Source: ADDS Data Warehouse, MoH

Middlesex-London Paramedic Service Calls for Service in Middlesex County Overall Priority 1-4 Responses



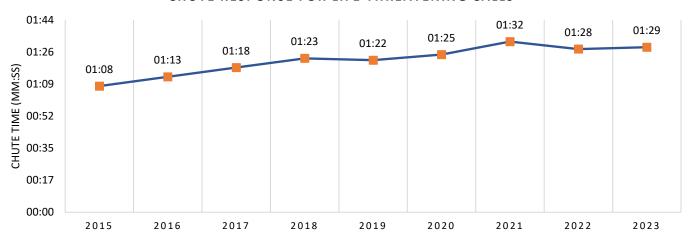
Source: ADDS Data Warehouse, MoH

— Chute Time for Life Threatening Calls (Code 4)

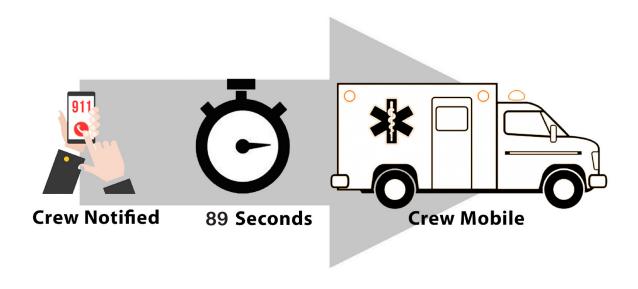
The 90th percentile elapsed time from the time the crew is notified of life threatening calls to the crew being mobile on the call is called the Chute Time.

In 2023, the 90th percentile Code 4 Chute Time for Middlesex-London Paramedic Service was 1 minute and 29 seconds. This time can vary as the Paramedics could be at a station, in a hospital (further away from their vehicle) or already in the vehicle.

MIDDLESEX-LONDON EMS CHUTE RESPONSE FOR LIFE THREATENING CALLS



Source: ADDS Data Warehouse, MoH



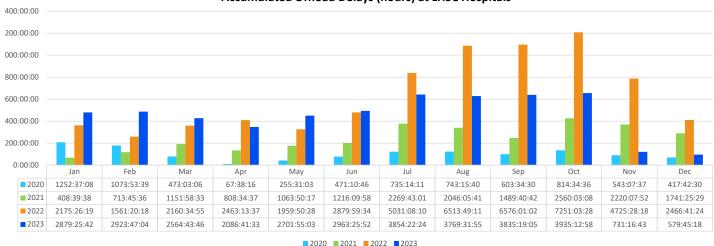
Offload Delay

The definition of offload delay is the amount of time spent in the Emergency Department transferring care to the hospital staff. It is calculated as the difference in time from when the ambulance arrives at the Emergency Department until Transfer of Care is documented and acknowledged on the Ambulance Call Report – less the standard thirty (30) minutes which is normal for ambulance turnaround. Any time greater than thirty minutes is considered offload delay.

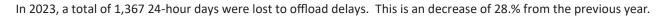
Over the course of 2023, Ambulance Offload Delay hours fluctuated slughtly throughout the year peaking in October. Offload Delay hours declined greatly in November and December. Accumulated Offload Delay hours decreased in 2023 by 28 % from the previous year. The accumulated offload delays at LHSC hospitals in 2023 was the equivalent of 2 staffed transport units working 24 x 7 x 365.

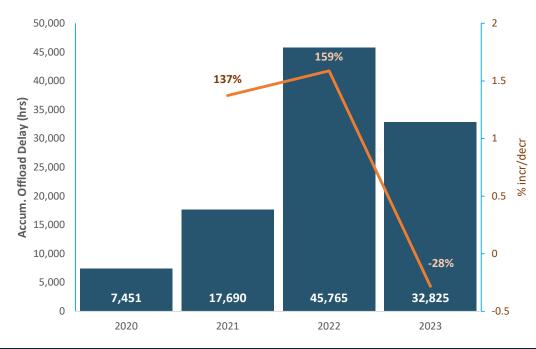


Middlesex-London EMS **Accumulated Offload Delays (hours) at LHSC Hospitals**



Source: iMedic Analytics QlikView (Offload Delay)





Rolling Monthly Totals (Lost 24-Hour Days)											
Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
119.96	121.79	106.83	86.92	112.54	123.46	160.58	157.04	159.79	163.96	30.46	24.13

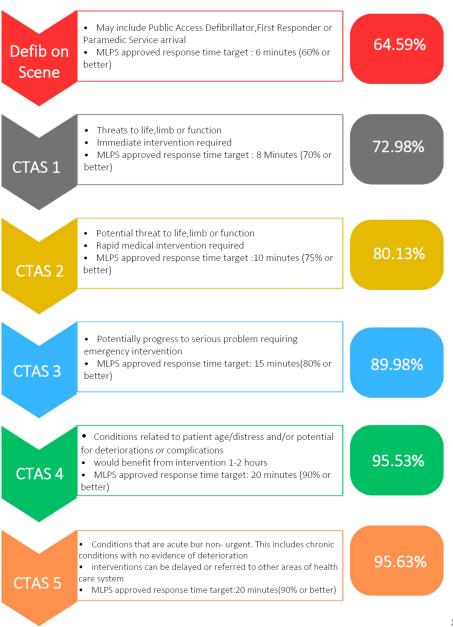


— 2023 Middlesex-London Paramedic Service Response Time Plan

Ontario Regulation 368/10 as consolidated into Ontario Regulation 257/00 requires ambulance service delivery agents to adopt municipally-developed response time plans for cardiac arrest patients and CTAS (Canadian Triage Acuity Scale) 1, 2, 3, 4 and 5 patients receiving emergency responses.

As the designated delivery agent for ambulance service for Middlesex County and the City of London, Middlesex County Council adopted a performance plan respecting response times for 2023.

Middlesex-London Paramedic Service continues to monitor the targeted response time standards, working towards bringing all categories into compliance with the standards.

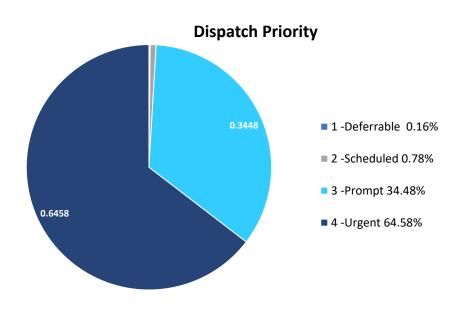


)ata Source: Interdev

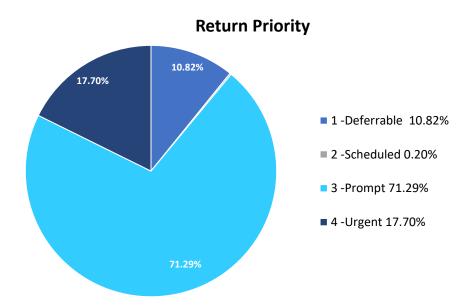
DEMOGRAPHICS

— Dispatch Priority and Return Priority

In 2023, Middlesex-London Paramedic Service paramedics were dispatched Code 4 (Lights and Sirens) to calls 64.58% of the time, only returning Code 4, 17.70% of the time.



Data Source: Interdev

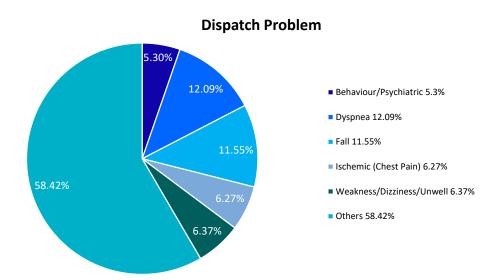


Data Source: Interdev

— Top Dispatch Problems and Top Primary Problems

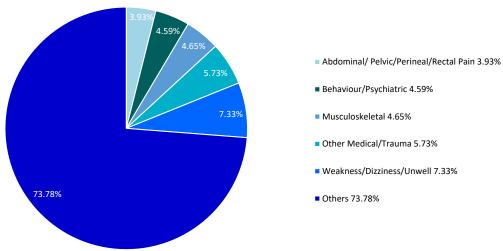
In 2023, the top Dispatch Problems (what the paramedics are told when they are assigned to the call by London CACC) were for Behaviour/Psychiactric, Dyspnea (shortness of breath), Falls, Ischemic (chest pain), and Weakness/Dizziness/Unwell.

The top Primary Problems (what the actual problem is with the patient when the paramedics arrive on scene) included Abdominal/Pelvic/perineal/Rectal Pain, Behaviour/ Psychiatric/ Musculoskeletal, Other Medical/Trauma and Weakness/Dizzieness/Unwell.



Data Source: Interdev

Primary Problem

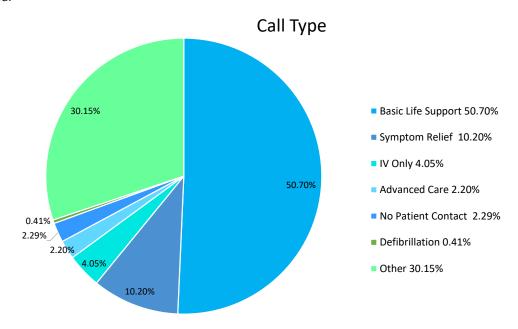


Data Source: Interdev

Call Type and Age Demographics

In 2023, the majority of the calls that the Middlesex-London Paramedic Service responded to were considered Basic Life Support Calls (50.70%).

Of all the calls in 2023, 16.45% were considered the most critical Advanced Care. Primary Care Paramedics with enhanced skills of Symptom Relief and Intravenous Therapy Certification are able to provide the majority of care needed.



Data Source: Interdev

Age Demographics 21.60% 24.70% ■ 0-17 ■ 18-39 ■ 40-64 ■ 65-79 ≥ 80

Data Source: Interdev

OPERATIONS

Notes

Middlesex-London Paramedic Service participated in many operations and events over 2023.

Middlesex-London Paramedic Service participated in many planned operations and events throughout 2023. Middlesex-London Paramedic Service worked with the City of London and allied agenices to create a coordinated response to Western University's Homecoming.

Middlesex-London Paramedic Service also provided emergency medical coverage for events such as Airshow London, Rock the Park, Strathroy Hometown Fesitval, Lucan Summerfest, Glencoe Fair, Parkhill Fair and more. The Middlesex-London Paramedic Service Bike Unit deployed for many events such as the Our London Family vigil and march.







Events London and Middlesex

MLPS in the Community

Community



Supporting Charities Making cookies to support Tim Horton's Smile Cookie Day.

Community



Remembrance Day MLPS participating in the ceremonies in London and Middlesex County.

Community



Bike UnitThe MLPS Bike Unit deployed to many events.









On May 24, 2023 The Honourable Elizabeth Dowdeswell, Lieutenant Governor of Onatio, and Sylvia Jones, Deputy Premier and Minister of Health presented medals to 10 paramedics in a ceremony at Queen's Park. This is the first year paramedics in Ontario were honoured by the province with a medal for thier actions.

Five of the medal recipeints were Middlesex-London Paramedic Service paramedics. Paramedic Phil Adams, Paramedic Dave Jeffries, Paramedic Josh Hill, Superintendent Michael Hurst and Deputy Chief Adam Bennett were recognized for their individual acts of outstanding bravery, including saving other first responders during a gas line explosion and rescuing workers from a collapsed building.

Middlesex-London Paramedic Service paramedics were operationalized in several events over 2023.

In late August of 2023, Middlesex County experienced significant flooding which washed out many roads. Middlesex-London Paramedic Service worked closely with allied agancies and Middlesex County to provide emergency response in the affected areas.

In September of 2023, Middlesex-London Paramedic Service, in coordination with municipal police forces from London and surrounding areas were operational for Western's Homecoming event. This event spanned an operational period of nearly 24 hours and consisted of policing and paramedic resources from multiple agencies.

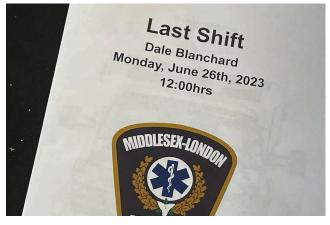
In November of 2023, the newest Middlesex-London Paramedic Service station opened in Parkhill. This amazing facility will ensure that paramedics are able to serve North Middlesex for many years to come.

— Retirements

Middlesex-London Paramedic Service was honoured to be able to acknolwedge the retirement of several paramedics in 2023. After long and illustrious careers having devoted more than 150 years of service to the citizens of Middlesex County and the City of London, we are proud to say congratulations enjoy your retirement.

Mark Weiss, 31 years of service Dean Reffell, 24 years of service Dan Tyo, 39 years of service Dale Blanchard, 35 years of service Ron Hawkins, 28 years of service







PROFESSIONAL PRACTICE, CLINICAL EXCELLENCE AND SYSTEM OVERSIGHT DEPARTMENT

Middlesex-London Paramedic Service (MLPS) is a public service, certified to operate land ambulance services under the authority of the Ambulance Act and the Ministry of Health. As a public service, we are also accountable to the public, to Middlesex County Council, and to the Middlesex-London Paramedic Service Authority Board for the quality of the service we provide.

To achieve and enforce the highest standards possible, the Professional Practice, Clinical Excellence, and System Oversight Department provides operational and system support to the organization. This includes conducting clinical audits, investigations, professional credentialing, quality assurance, quality improvement, data analysis, and system reporting. Additionally, the Department is responsible for liaising with the Ministry of Health, the Base Hospital Program, and other regulatory bodies.

Regulatory Compliance and Investigations

The Professional Practice, Clinical Excellence, and System Oversight Department is responsible for responding to and investigating internal, public, and institutional complaints,



and for recommending changes to procedures that will eliminate future problems and result in improved standards of care and service. As such, the Department works closely with the Ministry of Health and Long-Term Care, specifically the Investigations, Certification and Regulatory Compliance Group (ICRCG), Provincial Coroner's Office, local and municipal Police Services, Special Investigations Unit (SIU), the Ministry of Labour and other external investigative bodies.

The MOH monitors the investigations conducted by ambulance operators indirectly through the Incident Reporting Standards contained in Part III of the Ambulance Service Documentation Standards. In addition, the MOHLTC may also choose to refer the complaint to the service operator for investigation as it may not have the resources to investigate all complaints received.

Quality Assurance, Metrics & System Auditing

Quality Assurance is a component of the Department and is tasked with confirming clinical excellence and system analysis to maintain comprehensive quality management concerning various Acts, legislative requirements, and best practices. Paramedics are required to complete accurate and comprehensive documentation for each call for service. Quality assurance personnel review these documents to ensure compliance with policies, protocols, treatment, and adherence to provincial documentation standards.

In addition to clinical auditing, quality assurance activities include comprehensive system analysis providing data through standardized metric reports and risk-specific analysis. These activities also include identifying trends, performing field audits, ongoing policy auditing, and completing recommendations for system improvement.

Caring and Compassion Citizen Compliments

"I would like to express our sincere thanks to the paramedics who came to our home in the early morning hours of this past Tuesday November 7. My mother discovered her 94 year old husband of 57 years had passed away in his sleep. The EMS staff who came to the house treated my mother with kindness, compassion, and patiently talked her through the actions they needed take and the next steps (notification of corner, funeral home) On behalf of our mother and the rest of our family please let your staff know how grateful we are for kindness and professionalism they showed to her at what was the most difficult time in her life. Thank you!"

"I had an asthma attack last night and called 911. Paramedics arrived swiftly and immediately started administering puffers and getting me ready for iv steroids. They both kept me calm, kept trying to get to me talk, as I was gasping for breath unable to speak when they first arrived. They made me feel safe, they stayed by my side until I was admitted to a room. They were both incredible & did an amazing job helping me calm down. They deserve recognition for a job well done! I am so grateful they answered my call. Hire more people like these two!"

"Two of your 911 paramedics responded when my frail brother in law fell. My sister was quite distraught amd called me. I'm a Community Paramedic with York Region Paramedics. I wanted to express my appreciation for the wonderful care and compassion my sister and her husband received. My sister wanted me to send her thank you to the paramedics as well. She said the two were very patient, respectful and supportive...something she really needed. I know we often don't get to hear the appreciation so please extend my family's appreciation to the medics. My brother was admitted and undergoing further testing. Thank you again."

"The paramedics were absolutely wonderful. Very friendly, attentive and understanding. Could not have asked for better service. Thank you both for making my up and down experience with my medical issues so much easier to deal with than I ever could have expected. You are great at your job and I honestly can't thank you enough for your

professionalism, genuine support and understanding."

Health, Safety and Environment

The Department also oversees the occupational health and safety program, and the internal responsibility system. This includes ensuring that MLPS complies with relevant clinical and occupational health and safety regulations. This includes conducting risk assessments and implementing measures to mitigate risks. Additionally, all accidents or incidents are investigated to determine its causes and prevent future occurrences.

Ministry of Health Certification and Standards

The Department gathers, and stores ambulance call reports, as mandated by the Ontario Ministry of Health and Long-Term Care, overseeing credentialing of paramedic and support staff in line with the Ambulance Act and MLPS policies. Additionally, the Department completes MOH performance reporting, liaises with the Southwest Ontario Regional Base Hospital Program (SWORBHP) to maintain

paramedic certification and report incidents to the Ministry of Health – Emergency Health Service Field Office, as required under the Ambulance Act.

Ambulance Service Review

The Ambulance Act states that no person shall operate an Ambulance Service unless the person holds a certificate issued by the certifying authority, the MOHLTC, Emergency Health Services Branch. The Act further stipulates that a person shall be issued a certificate by the certifying authority only if the person has successfully completed the certification process prescribed by the Regulations.



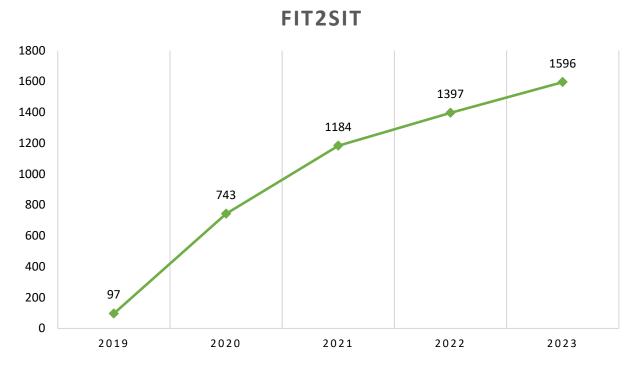
The purpose of the Service Review is to ensure Ambulance Services are operated in a manner consistent with the Land Ambulance Certification Standards and in compliance with the legislation. Services are required to complete the prescribed Ambulance Service Review certification process once every three years to maintain their certification to operate the Service.





In 2019, Middlesex-London Paramedic Service (MLPS), in collaboration with London Health Sciences Centre, implemented a program called Fit2Sit in order to attempt to decrease the amount of off-load delay for MLPS. This program continues to provide relief to offload delays with a 98% success rate.

The program has strict criteria, that would see non-urgent patients being taken directly to the Emergency Department waiting room area, freeing up the paramedic crew for another call. The study, contains a quality assurance program that ensures patient safety is maintained.



Source: Professional Pratice, Fit2Sit Database

LOGISTICS & SUPPORT

Fleet Services

The Logistics Department is responsible for a wide variety of services that supports Middlesex-London Paramedic Service. In 2023, Logistics staff processed 3,397 servicedesk requests for service.

The Stats

Servicedesk Requests: 3 397

Number of Fleet Vehicles:

Vehicles Readied: Over 10.000

Deep Cleans Completed: 933

Kilometers Driven: 2,341,988

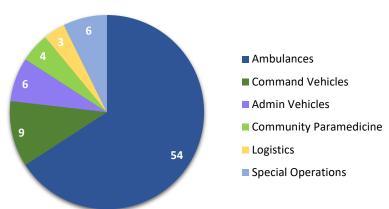
Reportable Collisions: 47



In 2023 Middlesex-London Paramedic Service's operating fleet consisted of 84 vehicles and 4 bicycles. In 2023 Middlesex-London Paramedic Service also deployed a Gator Utility Vehicle along with Emergency Support Units to be used at special events. These units allow paramedics more expeditious access to patients and help strengthen the positive presence and engagement of Middlesex-London Paramedic Service in the community.

These units were deployed for events such as Western homecoming, St. Patricks Day, Global Medic Food Drive, Christmas Parades and the London Airshow. Logistics is responsible for coordinating the maintenance of vehicles through external vendors and commissioning new emergency vehicles service as well as decommissioning retired vehicles.

MLPS Fleet Breakdown



LOGISTICS& SUPPORT

Logistics Technicians

(LT's) prepare vehicles twenty-four hours per day including washing, restocking vehicles and response bags, checking equipment and vehicle deep cleans.

- Vehicle preparedness916 vehicles/month (average)
- Deep Cleans = 77 vehicles/month (average)

Supply Chain Management

- Purchasing of supplies and services including RFP and RFI's
- Warehousing / Distributing of supplies
- Liaising with external suppliers for fuel and linen supplies
- Asset management
- General facility maintenance

Equipment

- Coordinating maintenance of equipment through external vendors
- Equipment testing

Project Management

- New station construction
- Support the introduction of new products and equipment



Ambulance Travel

The total number of kilometers drvien over the course of the year slightly decreased from 2022 by 2190km.



In 2023 we drove

2,341,988 kilometers.

That's 58 trips around the Earth!



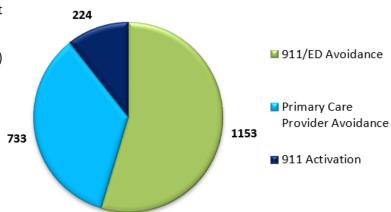


COMMUNITY PARAMEDICINE

Community Paramedicine (CP) is an evolving model of community-based health care in which paramedics operate in an expanded role, outside traditional emergency response and transport. Community Paramedicine provides an innovative model of care that helps to improve access to additional support services for seniors and patients with chronic health and social issues. The development and expansion of these programs allows paramedics to apply their education and skills beyond the traditional role of emergency medical responders. These programs help to support high users of paramedic services to avoid costly emergency room visits and hospitalizations. The aim of these programs is to improve patient outcomes and decrease costs in a way that supplements, but does not replace, services delivered by other health care providers. These programs can help to provide a more sustainable, integrated, patient-centred system. Established in 2014, the CP program continues to expand as a specialized and integral division within Middlesex-London Paramedic Service to support in reducing non-essential 911 calls, Emergency Department presentations, and hospital admissions.

In 2023 the MLPS program included, but was not limited to, the following:

- Community Paramedicine for Long-Term Care (CPLTC)
- Health Outreach Mobile Engagement (HOME)
- Community Outreach and Support Team (COAST)
- Frontline Paramedic Referral
- Treat & Refer Patient Care Model



Patient Engagement Outcomes

HOME:

The HOME program was developed to improve the health outcomes and health equity of highly marginalized individuals who are experiencing homelessness, insecure housing, or are rostered with the London InterCommunity Health Centre by utilizing community paramedics to deliver mobile primary care services to people where they are at. HOME is a program that provides health services to people in shelters, encampments and other community settings throughout London and the County of Middlesex. Additionally, HOME engages people once a week in Strathroy at two locations to provide care. Going forward in 2024, HOME in the County of Middlesex will become a new model called Mobile Patient Outreach Program (MPOP), providing services to under-serviced patients within Middlesex County.

COAST:

St. Joseph's Health Care London (SJHC), Canadian Mental Health Association Thames Valley (CMHATV), London Police Service (LPS), and MLPS have partnered to develop a proactive Crisis Outreach and Support Team (COAST). The team provides a health care lead, police supported, and community crisis response strategy for individuals experiencing mental health crisis.



Frontline Paramedic Referral:

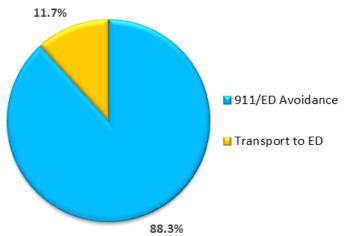
Provides all frontline paramedics with the additional knowledge, training, and tools to proactively identify at-risk patients in the 9-1-1 system and submit an electronic referral to both internal and community-based health care services for a consultation to obtain new or increased supports.

Frontline Paramedic Referral 44 22 Home Care Services CMHA Crisis Centre Squalor/Hoarding Support Diabetic Management

Treat & Refer Patent Care Model:

The Ministry of Health (ministry) is proceeding with implementation of new patient care models for select 9-1-1 medical emergency patients as supported by the updated regulatory and legislative changes proclaimed on November 1, 2019. These new models of care enable the diversion of select patient cohorts to appropriate community-based

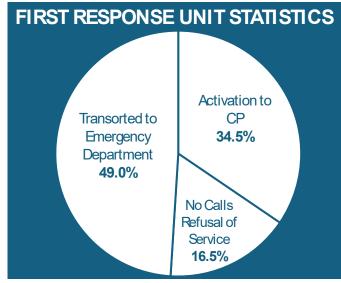
CP Response Outcome



"We can't praise your program and its staff enough. We truly hope that Community Paramedicine can continue its great work in the area and bridge the gap between a life-threatening situation and this type of call. It really made a difference. Also, we can't say enough about your staff. Thank you to all involved and we will keep our fingers crossed for your program. If our experience is any indication of the difference it can make, it is highly needed! We look forward to having my mom on your client list and her continued support of your program."

care to reduce hallway health care and improve patient access to definitive care.

The Treat & Refer Patient Care Model (T&R PCM) allows a First Response Unit (FRU) to proactively respond to low priority calls and assess patient eligibility for treatment on-scene and referral to a healthcare provider/facility to relieve system pressures and prevent unnecessary utilization of the Emergency Department where appropriate. On arrival the FRU will assess the patient status in advance of a transporting unit, and determine eligibility for referral to the on-duty community paramedic team for treatment on-scene.



STAFF FDUCATION & TRAINING — New Employees

Notes

In 2023 Middlesex-London Paramedic Service hired 63 additional part-time paramedics.

Our Education & Training department looks after all of the training and education needs of our service and community. This includes service training days, continuing education sessions, online learning programs, patient feedback programs, the intake of new employees, orientation programs, as well as liaising with college programs and physicians for their placements. We also look after our research programs, new equipment rollouts, and our own mentorship program which our staff mentor final semester students to help with their transition from student to an independently working paramedic for our service. Last year we welcomed 30 students into our mentorship program.





HOW WE DO IT

Notes

The Middlesex-London Paramedic Service **Education and Training Division stays** current with best practices and trends in paramedicine.

Employees

Continuous Education

Research Studies

Training Stats:

Number of New Paramedics: 63

Paramedics Trained on IV starts: 20

Research Trials: 2

Mentorship Program Students: 30

Number of FTO's: 12

Incident Commander Training Sessions: 14

FTO Hours: 703

Return to Work Training Hours: 1972

Number of Return to Work Sessions: 37

Stroke Feedback Form for Paramedics: 121

CPR Feedback Reports for Paramedics: 758











EMPLOYEE RECOGNITION

For the past three years Middlesex London Paramedic Service employees have been participating in a friendly in house challenge that gives our service an opportunity to give back to the community and dive into the holiday spirit. Each platoon generously donates items and the platoon with the most donations is recognized as the winner for that year. With an impressive total of **275** items donated, we are thrilled to announce the MLPS Logistics Department as the Platoon Challenge Winners for 2023. Your generosity and compassion have left a lasting impact on those in need, and your willingness to come together as a team and contribute to such worthy causes is a testament to the values of unity and kindness that define our organization.

In addition to the remarkable donation efforts of our Logistics department we are delighted to share that the Middlesex-London Paramedic Service had collectively donated over **900** items to our community this year. Donations for 2023 were distributed to "Toys for Tots" and the "Caring Cupboard" for seniors, ensuring that individuals of all ages in our community receive the support and assistance they need during challenging times. This incredible accomplishment reflects the collective spirit of giving and compassion that runs deep within our organization. A sincere thank you goes out to all MLPS employees who donated. Your dedication, generosity, and teamwork continue to inspire us all.



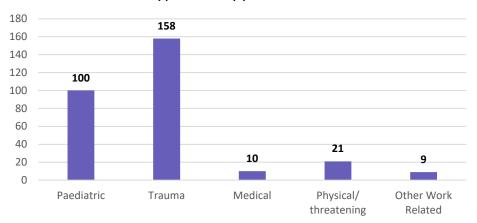
EMPLOYEE MENTAL HEALTH INITIATIVES

— Peer Support Team

The Middlesex London Peer Support Team was assembled in 2017 with the mission of coworkers supporting coworkers mental health and well being through difficult calls and situations that paramendics and other employees may encounter on shift. The Peer Support Team is a group of volunteer employees who have been trained by the International Critical Stress Foundation (ICISF) in both group and individual support as well as suicide prevention. Clinical oversight is provided by Dr. Charles Nelson. The team members are required to complete annual recertification and attend a mental wellness conference every year in conjunction with Dr. Nelson as part of their annual training. The team currently has 17 members consisting of 2 departmental leads, 2 team leads and 11 front line peer support members.

In 2023, the team was activated 350 times to support employees after various critical situations:

Types of Support in 2023





Activation Protocol of the Peer Support Team

Critical Incident occurs where a staff member may need support

Superintendent meets crew at hospital and acknowledges the event that took place.

Arrange for peer support meeting with the crew back at MLPS HQ and place crew out of service

Peer Support will privately debrief with each employee in the peer support room

After debriefing,
employees are given time to
complete paperwork and decompress
in the peer support room before
being placed back in service



EMPLOYEE MENTAL HEALTH INITIATIVES

—Early Intervention and Clinical Support Program

In 2023 the Peer Support Team launched the Early Intervention and Clinical Support program in partnership with clinical psychologist Dr. Charles Nelson. The program is aimed at enhancing early mental health intervention by providing timely clinical follow-up on objectively traumatic and other high acuity calls. When a traumatic or critical call occurs, a peer support department lead will provide notification to Dr. Nelson. The clinical team will review the incident and follow-up with staff involved 24-48 hours after the call to debrief. Since the start of the program in 2023, Dr. Nelson and his team have been able to offer support to 53 employees.

What staff are saying about the program...

I recently responded to a cardiac arrest involving a younger adult. Dr. Nelson's team reached out to me in a very timely manner. They were very attentive and compassionate even in the initial reaching out stage. I am also very impressed at how they work in tandem with our current peer support team. Peer support being most beneficial in the immediate aftermath of distressing calls, and Dr. Nelson's team reaching out within 2-3 days after a medic has had a chance to process some thoughts/feelings brought in by the call.

MLPS ACP Paramedic

Dr. Nelson and his team were made available to myself and others who were subpoenaed to testify in court. In discussing the trial with Dr. Nelson we discovered that I had some unresolved emotions in relation to the events. I was referred to a member of the team for multiple sessions of talk therapy. In doing so I was able to improve/resolve my issues all while not missing any time from work. Professional/confidential help being made available seems to be an effective way of avoiding long-term significant mental health issues and loss of work.

MLPS PCP Paramedic



Dr. Charles Nelson, Ph.D., C. Psych

Dr. Nelson is a clinical psychologist and former clinical coordinator for the Operational Stress Injury Clinic at The Parkwood Institute in London.

Ontario. He assesses andreats civilians, Veterans, Canadian Forces Members, and police, fire, and paramedics with posttraumatic stress disorder, associated anxiety and mood disorders, and chronic pain. He is a certified trainer of R2MR for paramedics and the police and continues to supervise doctoral students in clinical psychology.

This clinical early intervention tool will further assist in supporting the mental wellbeing of all staff involved in traumatic calls.



Ms. Carol Feddema Spivak (MSW, RSW)

Ms. Feddema Spivak is a clinical associate of Nelson Psychology Professional Corporation and has cross-appointments as an instructor with the

Fanshawe College School of Community Studies, and other community-oriented mental health resources. Carol has extensive experience working with first responders and Canadian Forces Members/Veterans affected by operational trauma and organizational stress. She has also provided individual and family counseling & psychotherapy services in community mental health and worked in various capacities in the child welfare and health care systems.

Activation Protocol of The Early Intervention Program

Critical incident occurs and it has been determined peer support is neccessary

Depending on the severity of the incident/call, Peer Support Team Leads or MLPS Sr. Management will provide notification to Dr. Nelson for follow

After debrief,
peer support member
determines early intervention
is required and directly
notifies peer support
team leads

Peer support
departmental leads will
review and notify Dr. Nelson's
team for an early
intervention follow-up

Dr. Nelson's clinical team will then reach out to the affected member involved within 24-48 hours after the incident has been identified



NEXT PAGE

Performance Report [2023]

COMMUNITY **ENGAGEMENT**

Notes

During 2023 the Middlesex-London Paramedic Service Public Access Defibrillator program focused on community CPR/ AED awareness and preparedness.

On May 19, 2023 Middlesex London Paramedic Service held the Cardiac Survivor Day event at the Fanshawe College auditorium. 13 survivors joined to meet the dedicated first responders who played a significant role in their survival.

"In 2022, there were a total of 783 responses to cardiac arrest calls within the Middlesex-London response area. Of those 783, Middlesex-London Paramedic Service treated 449"... "The value of community CPR programs is certainly evident, as in 88 cases, bystander CPR was commenced, which is a 58% bystander CPR rate".

-Chief Neal Roberts

Public Awareness

Increasing cardiac arrest survival outcomes.

Middlesex-London Paramedic Service is dedicated to helping improve survivability of out of hospital cardiac arrests.

Through public education and awareness and programs such as the **Public Access Defibrillator** (PAD) program and CPR training, Middlesex-London Paramedic Service is making London-Middlesex a better place to live and work.

We trained 310 citizens in CPR and first aid in 2023 alone and placed an additional 31 AEDs in to the community.



Public AEDs

AEDs placed in the community by MLPS in 2023.



AED Registry

716

AEDs in the registry to improve patient outcomes.

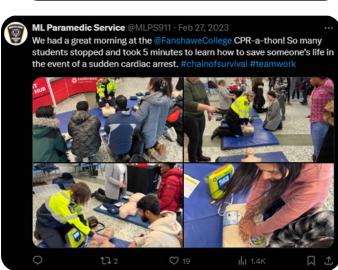


CPR/AED Awareness 670

Citizens participated in training and awareness.







It was great being out in the community bringing information and awareness about the paramedic profession. We were able to re-introduce our Paramedic

Training Camp where 20 high school students joined us for a week this summer practicing skills and learning about paramedicine and our allied professions. At the Western Fair this year we were able to engage with the community along side our allied agencies, bringing CPR skills to all visitors.

Awareness sessions were run throughout the year to support the community. Our CPR and AED Awareness programs focus on teaching the skills and knowledge around how to help someone in cardiac arrest by practicing hands-on skills. Our Emergency Preparedness sessions help the community promote Paramedic Access, Cool-Aid Program and accident prevention. We also provided virtual infant choking and CPR sessions for parents in the community in the comfort of their own home.





Middlesex-London Paramedic Service

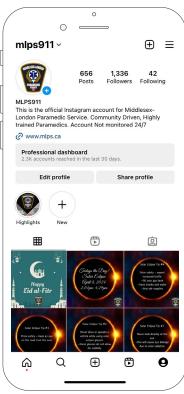
4K likes • 4.6K followers

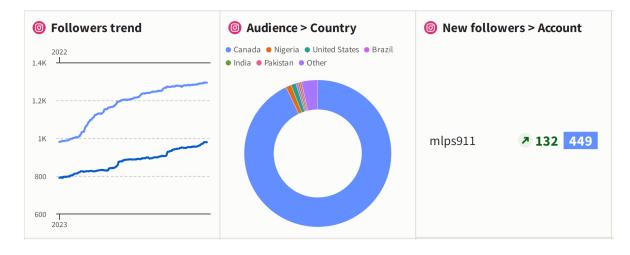
Social Media

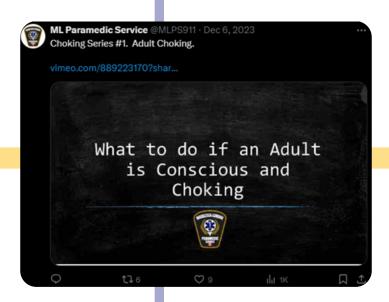
Presence

MLPS engaged with the public more than 700 thousand times through social media in 2023 and gained 199 new followers on Facebook and 449 new followers on Instagram.

Middlesex-London Paramedic Service is active on social media and engages with the public to communicate our message, build trust and confidence with the public and share the amazing stories of our paramedics and interact with the citizens of London and Middlesex.



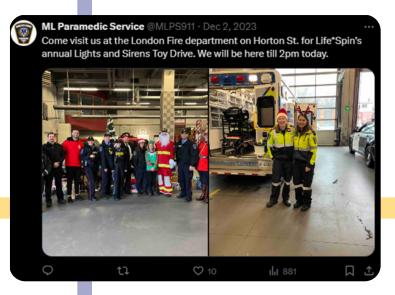






















Instagram

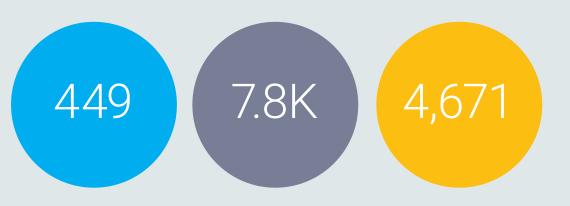
Middlesex-London Paramedic Service engages with the public through Instagram to show the amazing job our paramedics do on a daily basis and to share with them important information. The Middlesex London Paramedic Service Instagram page has seen a 54% increase in profile views from the public in 2023. according to 2023 Instagram statistical analysis

Facebook

Facebook allows us to engage in real time with our clients and the public and build a positive relationship with the citizens of London and Middlesex while sharing the stories of our amazing paramedics. The Middlesex London Paramedic Service Facebook page has seen an increase of 31.4% in user engagment. according to 2023 Facebook statistical analysis



Social Media Statistics



New Instagram Followers in 2023

Follow us @MLPS911

X (Twitter) Post Impression Quotes in 2023

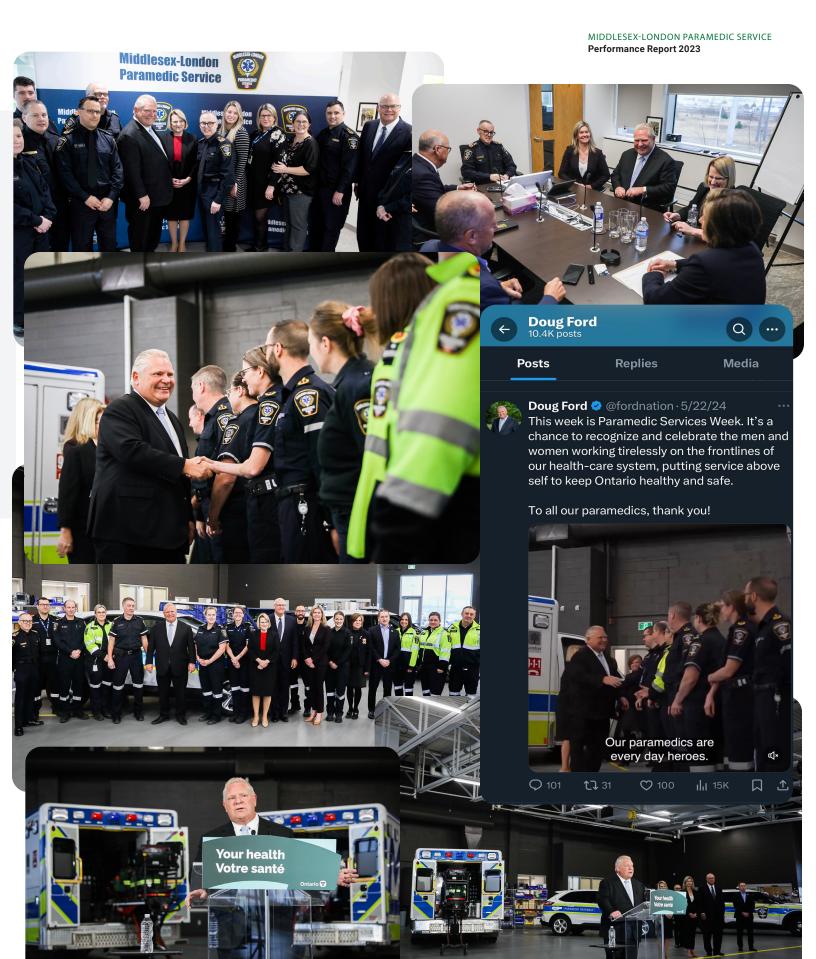
Follow us on X @MLPS911

Total Facebook Followers

Join our Facebook Page



Total Followers Across All Social Pages





GLOSSARY

ACC: Ambulance Communications Centre

ADDS: Ambulance Dispatch Decision Support

AED: Automatic External Defibrillator – An electronic device that applies an electric shock to restore the rhythm of a fibrillating heart.

Chute Time: The time it takes an ambulance to depart once notified of a call.

Code 1 (Deferrable): A routine call that may be delayed without detriment to the patient (e.g. a non-scheduled transfer; a minor injury).

Code 2 (Scheduled): A call which must be done at a specific time, for example because of special treatment or diagnostic facility requirement (e.g. inter-hospital transfers or a scheduled meet with an air ambulance).

Code 3 (Prompt): A call that should be performed without delay (e.g. serious injury or illness).

Code 4 (Urgent): A call that must be performed immediately where the patient's 'life or limb' may be at risk (e.g. Vital Signs Absent patient or unconscious head injury).

Code 8: This is a call for emergency coverage. This occurs when an ambulance is required to reposition to maintain response times and coverage of the region in the event that the next 911 call occurs within that area.

CTAS Level: The 'Canadian Triage & Acuity Scale' is used to assign a level of acuity to a patient. Acuity refers to the gravity of the situation – the potential for death and/or irreversible illness. CTAS is a tool that more accurately defines the patient's need for care. Assignment of the CTAS level is to be based upon not only the presenting complaint identified on the initial assessment made by the paramedic, but also on their examination findings, and response to treatment.

Dispatch Priority Code: The priority code number that is assigned to the call by the dispatcher. It identifies the priority under which the ambulance responds to the call location (e.g. an urgent response would be entered as Code 4).

Dispatch Problem: The problem given to the crew by the Ambulance Dispatcher indicating the nature of the problem of the call they are responding to.

iMedic ePCR: The electronic documentation software used to chart the Ambulance Call Report.

IMS: Incident Management System is a consistent and systematic way for multiple agencies to coordinate and respond to public emergencies and disasters.

LHIN: Local Health Integration Networks are the health authorities responsible for regional administration of public healthcare services in the Province of Ontario, Canada.

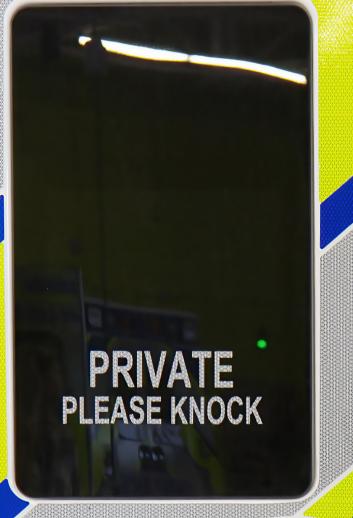
Offload Delay: Offload delay is the amount of time spent in the Emergency Department transferring care to the hospital. It is calculated as the difference in time from when the ambulance arrives at the Emergency Department until Transfer of Care is documented – less the standard thirty (30) minutes which is normal for ambulance turnaround. Any time greater than thirty minutes is considered offload delay.

Primary Problem: The primary complaint of the patient upon assessment by the paramedic crew.

Response Time: Response time is measured in two different ways; in cardiac arrest, it is the time the 911 call is received until a defibrillator arrives to the scene (by paramedic or otherwise). In non-cardiac arrest calls, it is the time the 911 calls is received until the paramedic crew arrives to the scene.

Return Priority Code: The priority code number that is assigned to the call by the ambulance crew. It identifies the priority under which the patient is transported (e.g. a prompt return to a medical facility would be entered as a Code 3).







AMBU







