WORKING WITH PARAMEDICS
TO END THE AMBULANCE CRISIS

Interim report

March 2015

Ambulance Performance and Policy Consultative Committee

State Government Victoria

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Foreword

Over the last few years, too many lives were taken too soon, because the ambulance took too long.

Our hardworking paramedics knew the extent of the ambulance crisis because they lived it every day. They had the answers, but they weren't listened to.

That's why the Andrews Labor Government ended the war on our paramedics:

- We brought an end to the long-running and bitter paramedic pay dispute.
- We referred the issue of paramedic pay rates to the independent umpire.
- We paved the way for cultural change by replacing the previous Ambulance Victoria Board with an administrator and appointed a new acting CEO.
- We told Victorians the truth about response times, which have on average, worsened over the last four years.

Now, we're ending the ambulance crisis.

The most important step is working with paramedics, not against them.

That's why I established the Ambulance Performance and Policy Consultative Committee, bringing together paramedics, the Government and other stakeholders to find a real solution.

The Committee's interim report identifies problems at the heart of the ambulance system that, unless we take action, will only get worse.

From 2008-09, Triple Zero call taking and dispatch has slowed on average a minute for the highest priority emergencies in the metropolitan region. The worst response times are experienced in rural areas where the average Code 1 response is in excess of 16 minutes.

Paramedics are also facing personal challenges. Their professionalism and skills keep Victorians alive and they deserve our respect and support, but the trauma they manage comes at a cost.

The workforce suffers fatigue, injury, violence and mental anguish, all with alarming frequency. The culture of Ambulance Victoria needs to change. It's about support and respect.

Some problems can't be solved by paramedics alone. For example, many incidents are unnecessarily coded for a 'lights and sirens' response, wasting resources and frustrating paramedics.

A better public understanding of when to call Triple Zero – to give priority to those in life threatening circumstances – would speed up the response to real emergencies.

Pressure on hospitals is not helping. More needs to be done to ensure ambulances are not ramped at hospitals. The Travis Bed Census and the Beds Rescue Fund will help relieve the pressure on our hospitals and ambulance services

The Committee is seeking feedback on this interim report. In the coming months, the Committee will be holding community workshops and consulting with paramedics, first responders and others.

I thank the Committee members and Working Group members, and I extend my gratitude to those paramedics who have taken the time to share their experiences and shape this report.

The Hon. Jill Hennessy MP
Minister for Ambulance Services
Chair, Ambulance Performance and Policy Consultative Committee

Interim findings

Key challenges

The committee's interim report confirms a set of system-wide failures that the committee considers would, in all likelihood, worsen without a new start. In particular the committee has found:

- Ambulance response time performance in Victoria has declined over the past six years.
- Dispatching an ambulance to a Code 1 incident takes, on average, a minute longer in the metropolitan region than it did six years ago.
- The statewide target of 85 per cent of Code 1 incidents being responded to within 15 minutes has not been met since it was established in 2007. In the past six years it has fallen from 82 per cent (2008–09) to 74 per cent (2013–14). The Productivity Commission's *Report on Government Services* confirms that Ambulance Victoria's response times are among the worst in Australia.
- The time ambulances are spending at hospitals has increased from 2008-09, including ramping during periods of high demand.
- Public demand for emergency ambulance services in Victoria has risen strongly – 5 per cent per annum over the past six years. Demand for Code 1 services in metropolitan Melbourne has increased very significantly, with 6.4 per cent growth per annum in Code 1 incidents over the past six years.
- Feedback indicates that many incidents are being dispatched as requiring 'lights and sirens' when that is not the clinical requirement.
- Ambulance Victoria's workforce experiences unacceptable levels of dissatisfaction and disengagement, workplace fatigue, injury and violence, which impact on their health and wellbeing.

Opportunities for reform

The proposed reform opportunities include the following:

- Ambulance Victoria should reaffirm its core role as an emergency pre-hospital health response provider and to work collaboratively with other parts of the health system to support patients to receive 'the right care, at the right place, at the right time'.
- Victoria has a committed paramedic workforce that at times feels undervalued and disempowered. This needs to change so that Ambulance Victoria's culture better reflects community values and expectations.
- Ambulance call taking and dispatch is a critical part of emergency ambulance response. Greater focus is required on accurately identifying patient needs during call taking so that the right response can be provided.

Overview of ambulance services in Victoria

In Victoria, emergency ambulance services are provided solely by Ambulance Victoria. Non-emergency patient transport services are provided by Ambulance Victoria and licensed private non-emergency patient transport providers.

Ambulance Victoria is part of the health system and is also supported by a range of emergency service organisations including the Emergency Services Telecommunications Authority (ESTA), the Country Fire Authority, the Metropolitan Fire Brigade and the State Emergency Service.

The service has around 3,850 staff including more than 3,100 frontline paramedics. There are also more than 400 Community Emergency Response Team (CERT) volunteers and almost 675 ambulance community officers who provide an emergency response and support in rural areas.

Ambulance Victoria has road responses at more than 260 locations as well as five helicopters and four fixed-wing planes.

In 2013–14 Ambulance Victoria responded to 552,268 emergency road incidents, an average of over 1,500 each day. Key statistics are shown in Table 1.

Emergency ambulance call takers follow a strict question and answer process to determine the patient's chief complaint. This enables the call taker to classify the patient by applying an event code. Each event code consists of a descriptor that summarises the patient's chief complaint and a response priority.

The highest priority is Priority 0. Response priorities assist the emergency dispatcher to determine which cases to dispatch first and what level of resources to send. Ambulance Victoria has determined that ambulances will respond 'Code 1' (with lights and sirens) to both Priority 0 and Priority 1 events. Table 2 provides further detail on existing categories.

Table 1: Overview of emergency ambulance service activity in 2013–14

Call triage and dispatch	Journey to patient	Assessment and treatment	Transport to hospital
689,255 calls for an emergency ambulance[1] 552,268 emergency incidents resulted in dispatch of one or more ambulances [2] 37,983 calls are managed without an emergency ambulance through alternative service providers and non-emergency patient transport services	785,152 ambulances sent to incidents [3] 81,219 diversions made of ambulances while on route[4]	618,751 ambulances arrive and treat patients on scene[5] 92,428 patients are treated at the scene and not transported	404,564 emergency patients transported to hospital [2]

1. Not all calls result in the dispatch of an emergency ambulance and there may be multiple calls for the same case. Data supplied by ESTA
2. This figure excludes 8,001 non-emergency incidents performed by emergency crews
3. Often more ambulances arrive at scene than there are patients. For example, for high priority incidents (such as cardiac arrests) multiple ambulances are sent.
4. Data supplied by ESTA
5. Some ambulances may be cancelled on or after arrival to an incident

Table 2: Emergency ambulance response types

Priority	Code	Definition	Examples	Incidents in 2013–14
0	1	Priority 0 denotes the highest priority incidents. They require a 'lights and sirens' response and usually involve sending additional resources such as a Mobile Intensive Care Ambulance (MICA). Priority 0 incidents are a subset of Code 1 incidents.	Cardiac or respiratory arrest Major trauma/severe injuries	14,905
1	1	Priority 1 incidents are high-priority and time-critical, requiring a 'lights and sirens' response. Priority 1 incidents are a subset of Code 1 incidents.	Chest pain Shortness of breath Overdoses	306,934
2	2	Code 2 incidents are urgent but not time critical and do not require a 'lights and sirens' response.	Broken leg Minor haemorrhage	176,573
3	3	Code 3 incidents are the lowest priority emergency classification. These incidents are not urgent.	Non-traumatic back pain Headache	53,856

Key challenges

The committee considered information relating to ambulance response times, patient outcomes and workforce health. The evidence shows that performance has declined over the past six years across most measures and that there are system-wide challenges that must be addressed to avoid further decline.

Ambulance response times have deteriorated

Code 1 incidents are currently classified as those where there is an immediate or potential threat to life. They matter most. In 2013–14, Ambulance Victoria responded to 321,839 Code 1 ambulance incidents.

For these most critical incidents, ambulances are far too often failing to reach patients within an appropriate time. Metropolitan Code 1 average response times have increased from 12.2 minutes in 2008–09 to 14.5 minutes in 2013–14. Similarly, in the rural areas, the average Code 1 response time has increased from 15.7 minutes in 2008–09 to 16.5 minutes in 2013–14.

Consequently the portion of Code 1 incidents responded to within 15 minutes across the state has decreased from 82 per cent in 2008-09 to 74 per cent in 2013–14. The statewide target of 85 per cent for Code 1 incidents responded to in 15 minutes was introduced in 2007–08, and has never been achieved.

Table 3: Ambulance Victoria's Code 1 response time performance

Measure	Performance target	2008–09	2009–10	2010–11	2011–12	2012–13	2013–14
Code 1 responded to in less than 15 minutes (statewide)	85%	82.4%	80.7%	77.1%	74.8%	73.0%	73.7%
Code 1 in urban areas responded to in less than 15 minutes	90%	88.7%	86.9%	82.8%	79.8%	78.1%	78.5%

Note: Metropolitan response times are based on data sourced from the Computer Aided Dispatch (CAD) system. Rural response times are based on data sourced from patient care records completed by paramedics.

The Productivity Commission's *Report on Government Services* confirms these poor results.[1] In 2013–14, one in 10 ambulances took more than 22 minutes to arrive at Code 1 emergencies, well above the 15-minute target, making Victoria's ambulance response times the worst on the mainland. With Sydney, Melbourne's ambulance response times were the worst of all Australian capital cities.

[1] Productivity Commission 2015, *Report on government services*

Response times are variable across the state

There are significant differences across local government areas. Inner city areas such as Yarra and Melbourne are the best performing, achieving average Code 1 response times of less than 10.5 minutes (and are close to achieving the 90 per cent responses in less than 15 minutes target). However, in rural areas such as Golden Plains and Hepburn performance is poor, averaging around 25-minute response times with less than 15 per cent of responses occurring in under 15 minutes.

Table 4: Ten worst and best response time performances by LGA in 2013–14

Worst performing LGA	Code 1 responses ≤ 15 min	Average response time (mm:ss)
Golden Plains	9.0%	24:51
Hepburn	14.5%	26:01
Indigo	20.8%	23:52
Loddon	21.5%	25:10
Queenscliffe	22.2%	21:17
Murrindindi	29.1%	24:14
Towong	30.4%	25:28
Yarriambiack	31.8%	23:22
Pyrenees	32.3%	21:34
Strathbogie	33.9%	21:31

Best performing LGAs	Code 1 responses ≤ 15 min	Average response time (mm:ss)
Yarra	88.3%	10:27
Melbourne	87.9%	10:19
Maribyrnong	86.6%	10:52
Whitehorse	86.5%	11:03
Port Phillip	86.2%	11:01
Stonnington	84.8%	11:13
Greater Dandenong	83.5%	11:34
Darebin	83.3%	12:05
Glen Eira	83.2%	12:05
Maroondah	83.2%	11:37

Note: All response times are based on CAD.

Consistent with the government's commitment to introduce greater transparency of ambulance performance, the response time data by local government area, locality and branch are at Appendix 2.

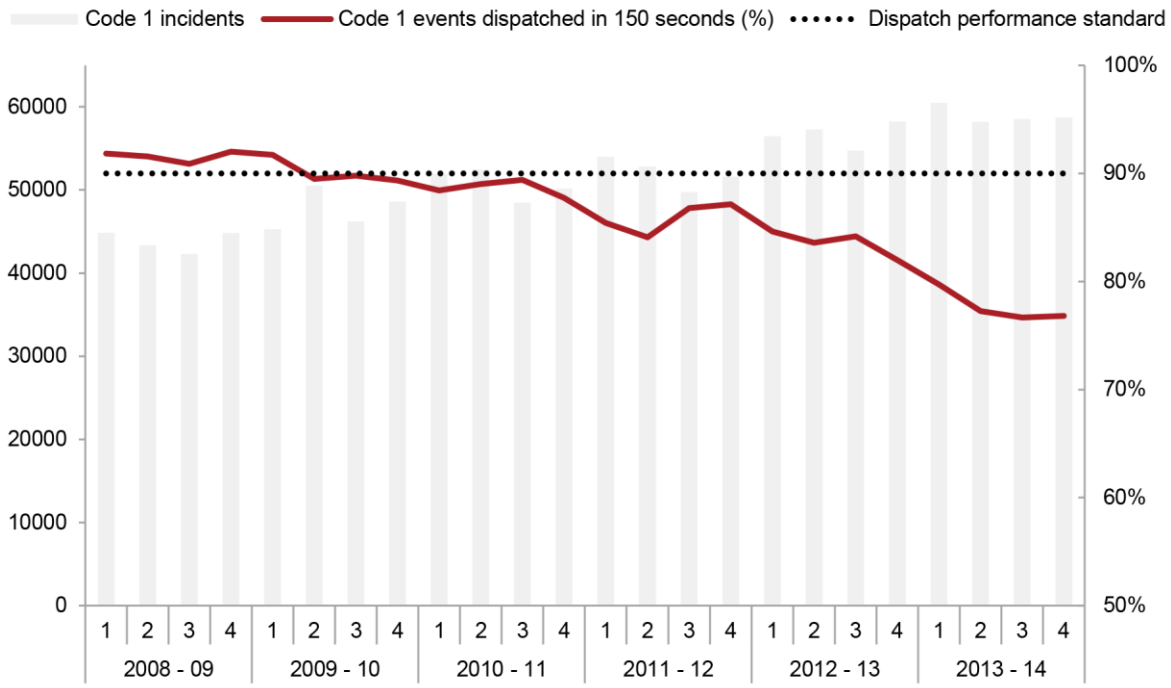
Emergency call taking and dispatch is taking longer

Dispatching an ambulance to a Code 1 incident now, on average, takes a minute longer in the metropolitan region than it did in 2008-09. In 2013–14 call takers and dispatchers took an average of 3.7 minutes to dispatch an ambulance to a metropolitan Code 1 incident, compared with 2.7 minutes in 2008–09.

Emergency ambulance dispatch performance targets for Code 1 metropolitan incidents have not been met for the past three years, with the proportion of metropolitan Code 1 dispatches made within 150 seconds falling from 92 per cent in 2008–09 to 77 per cent in 2013–14[2] (Figure 1). The timely dispatch of resources is linked to the availability of ambulances, which is impacted by a range of factors including demand, meal-break patterns, dispatch resourcing and the time required to complete each ambulance case. This includes the time to provide care on scene and the time spent at hospital.

[2] Emergency Services Telecommunications Authority

Figure 1: Dispatch performance – metropolitan Code 1 incidents[3]



Most elements of emergency ambulance response are taking longer

The average time to complete all segments of an emergency ambulance response has increased over the past six years (Tables 5 and 6). The time ambulances are spending at hospitals has increased from 2008-09, including ramping during periods of high demand. These increases have a cumulative impact on overall response time performance, either directly or indirectly, by reducing the availability of ambulances to respond.

Table 5: Metropolitan response time segments for emergency road Code 1 incidents

Time segment	Definition	Average time (mins) 2008–09	Average time (mins) 2013–14	Increase in average time (mins)
Activation time	Time from when a call is answered to the time an ambulance is dispatched	2.7	3.7	1.0
Reflex time:	Time from dispatch of the ambulance to arrival at the scene:	9.5	10.4	0.9
– turnout time	• time from dispatch to time the ambulance becomes mobile	*1.3*	*1.0*	*–0.3*
– travel time	• time from when the ambulance is mobile until it arrives at the scene	*8.3*	*9.5*	*1.2*
Total response time	Time from the call being answered to the arrival of paramedics at the scene	12.2	14.5	2.3

Note: CAD-based data

[3] Emergency Services Telecommunications Authority

Table 6: Metropolitan hospital transport time segments for emergency road Code 1 incidents

Time segment	Definition	Average time (mins) 2008–09	Average time (mins) 2013–14	Increase in average time (mins)
Transport time	Time from departing the scene to arrival to the hospital	19.6	22.1	2.5
Hospital time	Time from arriving at the hospital until the vehicle is again available for dispatch:	45.4	57.1	11.7
– transfer time	• time from arriving at the emergency department to transfer of the patient from the ambulance stretcher to hospital staff	*18.7*	*27.8*	*9.1*
– clearing time	• time from patient transfer to completion of all tasks (patient documentation, cleaning, etc.)	*22.8*	*27.3*	*4.5*

Increasing demand for emergency ambulances

Population growth, changing demographics, chronic illness and high community expectations are increasing the demand on health services including ambulance services. This demand is expected to continue to grow as these factors become more pronounced.

Emergency road incidents have increased, on average, by five per cent each year over the past six years. In the metropolitan region, the number of Code 1 emergencies has grown on average by 6.4 per cent per annum, compared with Code 2 and Code 3 emergencies, which have increased on average by 3.5 per cent each year. Further work is required to better understand the drivers of demand growth and the strong growth in Code 1 incidents relative to Code 2 and Code 3.

Reform opportunities

Better integrating ambulance services and the broader health system

Ambulance Victoria should reaffirm its core role as an emergency pre-hospital health response and to work collaboratively with other parts of the health system to support patients to receive 'the right care, at the right place, at the right time'.

What we heard:

Ambulance services are accessible throughout Victoria 24 hours a day, seven days a week, 365 days a year. As a result, ambulance services are now too often called to manage basic health care needs due to gaps or failings in the broader health system. They have at times become the front door to the broader health system and the service of first resort, rather than sole provider of emergency pre-hospital care and emergency transport.

Paramedics report that they increasingly respond to patients who do not require an emergency response and who do not need transport to an emergency department by a paramedic.

Paramedics report that there is an inherent bias towards shifting patients along the care continuum to the highest level of care, even if not clinically required. Patients who could be safely cared for at home are transferred unnecessarily to emergency departments. This is inefficient and sometimes provides less effective care.

The need for reform

Ambulance services are often used to fill gaps in the broader health system

The fragmentation and gaps across the Australian health system are well known. Its structure, governance and funding has become incredibly complex. Access to urgent primary care is a critical requirement and all healthcare providers are under strain, facing increasing demand. The rising cost of healthcare in the context of constrained government resources and workforce restrictions creates limitations on the system's capacity expand to meet rising demand.

The burden of gaps in the health system ultimately falls to emergency response and treatment services – ambulance and emergency departments. Over time Ambulance Victoria has increased its role in the primary care system. For example, Ambulance Victoria may facilitate the delivery of home-based nursing services and access to general practice services. This has been a move away from their core role and has often duplicated other services within the community, which is tying up scarce paramedic resources. There is potential to consider how new roles, such as paramedic practitioners, might be used in the system, especially in rural areas, and how better integration within the health system may reduce duplication and improve efficiency.

There is also capacity to consider how we can use technology to enhance information sharing between ambulance and health providers to support better patient outcomes and improve patient flow through the system. This may include improved information for health services on ambulance movements and expected transitions to the emergency department and electronic transfer of patient information prior to arrival at the scene and/or at the emergency department.

Ambulance Victoria needs to focus on providing pre-hospital emergency care and transport

In the past, ambulance services were considered primarily as part of the emergency management system alongside police and firefighters. Today, paramedics are highly trained health professionals providing vital pre-hospital care. Together with recent medical advancements, this means that paramedics are playing a greater role in providing pre-hospital treatment and intervention and making a considerable contribution towards improving patient outcomes.

For example, the recent introduction of pre-hospital thrombolysis administration for patients experiencing heart attacks was a complementary initiative to provide life-saving treatment for rural patients geographically isolated from this time-critical intervention. This was in recognition that rural populations were experiencing poorer outcomes from heart attacks than their metropolitan counterparts.

Currently, Ambulance Victoria has a range of responsibilities – from responding rapidly, initiating treatment and transporting patients experiencing a medical emergency, through to providing or facilitating community non-emergency transports. In recent times, Ambulance Victoria has broadened the scope of its work in response to the increasing demand for emergency response. Initiatives such as RefCom, a telephone referral service for non-urgent triple zero calls, aim to reduce demand and redirect non-emergency incidents to alternative providers, freeing up ambulance resources for genuine emergency cases. This broad focus may be compromising Ambulance Victoria's ability to fulfil its core responsibilities as the provider of pre-hospital emergency care and transport.

Next steps

The committee considers that Ambulance Victoria needs to reaffirm its core role as the primary pre-hospital emergency care and transport provider and its aim to provide this emergency response in a safe and timely manner.

The committee will look for opportunities to improve collaboration between Ambulance Victoria, other first-responder emergency services, patient transport providers and the broader health system to enable paramedics to focus on providing emergency care and transports, and support decision making to transfer patient care to more appropriate health providers. The committee will also consider alternative models that support patient access to the right community transport to match their clinical needs.

Importantly, Ambulance Victoria and health providers need to work together to ensure patients receive the care that they need. In the face of Commonwealth budget cuts to public hospitals and lack of clarity regarding funding for Medicare and primary health, there needs to be a joint understanding of the pressures all providers are facing. Change must occur in a way that patients are assured of getting the care they need. New and innovative approaches are needed to deliver better and more efficient services.

Principles guiding Ambulance Victoria's role in the health system

- The patient is at the centre of all our health services.
- Patients receive the right care, in the right place, at the right time, enabling people to achieve their best health outcomes.
- Patient care is provided in the least intrusive setting.
- Clinical risk is managed appropriately to support high-quality and safe care.
- Roles and responsibilities are clear and delineated, ensuring paramedics and other healthcare professionals respect and complement each other's skills and expertise.
- Facilitate better information sharing:
  - sharing system information to ensure all healthcare providers understand the capacity, demands and strains across the system
  - sharing appropriate patient information to improve timely diagnosis and treatment and achieve better patient outcomes.
- Services are delivered in an effective and efficient manner.

The committee will consider reforms that:

- manage demand for an emergency response – opportunities that reduce the number of calls made for ambulances
  - improving health literacy and system navigation through improved communication to the community and other healthcare providers of alternative care options available
  - early identification of patients who are frequent users of ambulance services and linking in with other healthcare providers to develop care plans
  - working with general practitioners and aged care services to develop protocols for when an ambulance response is appropriate
- enhance initial emergency response – improving pre-hospital care and reducing the flow of patients into emergency care
  - support the roll out of government election commitments to expand the number and reach of first responders in communities
  - review paramedic clinical guidelines/protocols to facilitate paramedic decision making for cases that can be resolved at the scene and cases that do not require a transport to an emergency department
  - develop shared care clinical governance frameworks to support shared responsibility and accountability for providing safe care to patients at the scene that minimises clinical risk, prevents the duplication of tasks and, where appropriate, supports resolution of care without the need for emergency transport
  - better utilise existing services to support resolution of care at the scene
  - identify alternative transport destinations to emergency departments, including opportunities to expand the number of conditions that can be directly admitted to hospital or other relevant services
  - identify potential technology initiatives that may improve patient outcomes and flow
- improve collaboration with health services for emergency patient care
  - full implementation of Ambulance Transfer Taskforce recommendations
    - in consultation with health services, develop an implementation plan to remove the Hospital Early Warning System and bypass, including an appropriate transition phase to support emergency department staff through the change

        - Ambulance Victoria to develop further strategies to optimise the arrival of ambulances to emergency departments to improve patient flow and congestion in emergency departments (this could include considering options for a more centralised decision-making process on ambulance destinations)
        - support the ongoing roll out of the Ambulance Arrivals Board
    - identify opportunities to reduce time spent at hospitals by ambulances
    - review the current 40-minute emergency transfer performance target to develop a more appropriate measure that allows smooth patient arrival into the emergency department and frees up paramedics to more quickly be available for emergency response in the community (this review should be undertaken in consultation with the Emergency Access Reference Committee)
- consider alternative models for delivering community non-emergency transport in light of Ambulance Victoria's renewed focus on fulfilling its core role of providing emergency care and emergency transport.

Better support for paramedics and culture change at Ambulance Victoria

Victoria has a committed paramedic workforce that at times feels undervalued and disempowered. This needs to change so that Ambulance Victoria's culture better reflects community values and expectations.

What we heard:

Last year around 45 per cent of Ambulance Victoria's workforce said they would not recommend the service as a good place to work, and less than half were satisfied with their job.

Ambulance Victoria staff feel strongly that they are contributing to society and Ambulance Victoria's purpose. There are generally good relationships between immediate colleagues but there is a divide that needs to be bridged between the operational workforce and management. Paramedics want their workplace to live up to its potential.

Many paramedics believe that the needs of the Victorian community could still be met with rostering arrangements that better meet their needs. The centralised rostering system struggles to reflect local conditions and there is ongoing tension between providing responsive services and ensuring staff are not fatigued, receive meal breaks and complete their shifts on time.

There is widespread support for the national registration of paramedics as part of the National Registration and Accreditation Scheme for health practitioners.

The need for reform

Paramedics have poor occupational health

Historically, there has been a focus on patient safety first and paramedic safety second. The consequence is a workforce with generally poor levels of occupational health.

Paramedics face long shifts, fatigue, injury and violence. WorkCover claims occur at a rate of around eight standard claims per 100 FTE per annum, or approximately 650 lost time injuries per annum – with the highest proportion of claims related to manual handling (70.5 per cent of all claims). This is worse than average industry standards.

Occupational violence represents 2.6 per cent of all claims, with more than 1,350 reportable incidents over the past six years involving aggression and/or assault directed towards paramedics. Last year alone there were 314 reports of assault and aggression towards paramedics – almost one a day.

These issues are under active consideration by Ambulance Victoria's Statewide Occupational Health and Safety Committee.

Psychological health and wellbeing is an area of growing concern

Ambulance Victoria staff, management and their unions have highlighted psychological health and wellbeing as an area of significant concern, some of which manifests in high levels of personal leave, in WorkCover claims and some in self-harm, including suicide.

The 2014 People Matter Survey shows significant concerns about bullying. Half of respondents identify having witnessed bullying, 28 per cent had experienced it and 9 per cent reported currently experiencing bullying. Bullying is reported as an issue for Ambulance Victoria staff more than in other similar organisations. This is a matter of great concern. The survey evidences broadly based cultural and behavioural issues, which need to shift.

Paramedics expressed concerns about the lack of transparency and bureaucracy surrounding internal and external investigations. Some regard the approach as escalating issues rather than looking for solutions, resulting in increased stress for paramedics.

The committee noted that Ambulance Victoria's newly established Psychological Health and Wellbeing Consultative Group will focus on better understanding psychological wellbeing, suicide and post-traumatic stress disorder (PTSD).

Paramedics expressed significant concerns about internal and external conduct investigations. Some regard the approach as overly bureaucratic, not transparent and escalating issues unnecessarily. It is seen as procedurally unfair and highly stressful.

Community needs could still be met with rostering arrangements that better meet the needs of the workforce

The operational workforce has changed, with a higher proportion of women (39 per cent) and degree-qualified staff. They are seeking more flexible rosters and part-time arrangements. Currently around eight to nine per cent of the operational workforce has flexible or part-time working arrangements, which is low compared with other health workforces but slightly higher than other Victorian emergency services organisations. Demand for more 'family friendly' arrangements is expected to increase.

Current rostering arrangements are not reflective of a modern workplace and, while meeting operational needs, fail to meet paramedic needs. They are perceived to be rigid and outdated. For some, there are particular concerns about uncertain shift end times, the rigidity of shift configurations and long overnight shifts. There are overly complex and at times stressful processes for those returning to the paid workforce.

Older paramedics are seeking more flexibility that assists them in their transition to retirement. Current approaches to non-operational and part-time work and the current defined benefit superannuation arrangements result in some older paramedics feeling pressured to continue in full-time frontline operations roles.

Paramedics should be registered and regulated through the National Registration and Accreditation Scheme

A national system of registration would protect the title of paramedic, recognise the professionalism and level of skill and qualifications of paramedics, safeguard the public from impaired or poorly performing paramedics, allow more interstate movement and flexibility for paramedics and increase the commitment to continuing professional development. An independent and transparent approach to investigations into complaints about impairment, performance assessment and conduct through such a scheme is also regarded as a benefit.

The risk factors for paramedics are similar to a range of health professions that are registered and regulated through the National Registration and Accreditation Scheme. There is widespread support among paramedics for paramedics to be registered and regulated through the National Registration and Accreditation Scheme.

Public complaints should be more transparent

Ambulance users, their families and communities have expressed some concern about Ambulance Victoria's transparency and its responsiveness to patient complaints. This is an issue of concern that requires reform.

Next steps

The committee will consider reforms that aim to:

- better understand the drivers behind the low levels of staff satisfaction and poor culture of Ambulance Victoria
- improve relationships across Ambulance Victoria's workforce
- improve the health and wellbeing of paramedics through better understanding the issues that impact on them (including psychological wellbeing, suicide and PTSD) and explore opportunities for collaborative initiatives between management, staff and unions
- reduce the incidence of, perceptions and concerns surrounding, incivility, harassment and bullying in the workplace and occupational violence
- collaboratively develop and trial more flexible rostering arrangements to support both paramedic and operational needs
- improve transparency and public accountability for complaints by the public in relation to ambulance services
- support the transition to retirement for older paramedics
- improve paramedic education, training and development programs.

The committee strongly supports the Minister progressing (through the Council of Australian Governments' Council of Health Ministers) the national registration of paramedics as part of the National Registration and Accreditation Scheme for health practitioners.

Improving ambulance call taking and dispatch

Ambulance call taking and dispatch is a critical part of an emergency ambulance response. Greater focus is required during call taking to accurately identify patient needs so that the right response can be provided.

What we heard:

Many paramedics reported a lack of confidence in the current call taking and dispatch system, with a common view that many cases are being 'over-triaged' – meaning that non-urgent patients are incorrectly categorised as needing an urgent response.

Paramedics said the public often calls triple zero, even when an ambulance is not needed.

The need for reform

Difficulties in identifying patient needs

In recent years, Ambulance Victoria's prioritisation system has classified almost 60 per cent of all emergency incidents as Code 1, requiring an urgent lights and sirens response. But on arrival, paramedics find that a Code 1 response was often not required.

It is recognised that quickly assessing patient needs and identifying whether an emergency response is required can be a difficult task, given call takers and dispatchers solely rely on information provided over the phone and have only a short period of time for decision making. Both paramedics and patients would benefit from a system that better differentiates immediately life-threatening and time-critical patients from lower acuity patients.

A better understanding of the impact of over triaging is needed

The type and number of paramedics sent to an incident is based on urgency. As a result, the current system's tendency to take a risk-averse approach and over-triage has significant flow-on effects. It may be resulting in the dispatch of resources beyond what a patient needs and, in turn, reducing the availability of ambulances to respond to other emergencies.

For example, in an effort to both provide a fast response and improve patient outcomes, multiple ambulances are often dispatched to the highest priority cases. For every Code 1 incident, Ambulance Victoria sent 1.51 ambulance crews in 2013–14. In New South Wales, this ratio was 1.29. In Victoria, this ratio has increased by 9 per cent over the past six years, from 1.38 in 2008–09, with Ambulance Victoria last year sending more ambulances to high-priority cases compared with other services across Australia. While these results may reflect Ambulance Victoria's tiered response system and contribute to improved patient outcomes, further work is needed to understand how the current call taking triage system impacts on dispatching practices and how well this contributes to better patient outcomes.

Response time performance measures need review, especially for cases where time makes a difference to patient outcomes

The current ambulance response time performance measures were introduced eight years ago and it is unclear whether they remain relevant and reflect both the most recent clinical evidence as well as community expectations of responsiveness and transparency.

With almost 60 per cent of incidents classified as Code 1, the current coding approaches means that response time measures no longer focus exclusively on the most time critical life-threatened patients.

The health system could achieve better patient outcomes if response time measures encouraged Ambulance Victoria to provide a faster response to patients with time-critical conditions while allowing more time for clinical assessment of other less urgent cases to ensure the best care option is provided to patients based on their clinical needs.

As call taking and dispatch forms part of the ambulance response time measures, consideration needs to be given to reviewing dispatch time performance standards in conjunction with ambulance response time measures.

The language used to describe the types of emergency ambulance incidents (that is, Code 1, 2 and 3) also needs to be considered. The coding of ambulance incidents does not match emergency department patient categorisation. Further, the public does not have a good understanding of these terms as they fail to convey the urgency of an incident.

There could be better community awareness of when to call for an emergency ambulance

Last year, ESTA and Ambulance Victoria's secondary triage service (RefCom) managed more than 37,000 calls to triple zero for an ambulance without the dispatch of an emergency ambulance. This suggests that there is less than optimal public understanding of other healthcare services that are available and when it is appropriate to call triple zero. Ambulance Victoria provides these callers with alternative care services including care from a locum general practitioner, home nursing or self-care advice.

Insufficient access to incident location information is slowing dispatch times and ambulance response times

The triple zero system automatically provides ESTA call takers with the caller's telephone service address if a caller is ringing on a landline phone, but this is not the case if a mobile phone is used. ESTA has reported that, with the increasing use of mobile phones, they are taking longer to determine the exact location of an incident.

Call takers are having to ask more questions to determine the correct address when the caller is phoning from a mobile phone. This additional step is adding time to call taking and dispatch processes. Telecommunications providers are in the process of providing new technology to enhance the location information of mobile callers that may reduce but not eliminate the time difference.

Next steps

The committee will examine ways to:

- more accurately assess patient needs during the call taking and dispatch process
- better differentiate between life-threatened patients from non-urgent patients to ensure patients are provided with most appropriate care option and paramedics are used effectively
- better prioritise events – ensure the priority or urgency category assigned to a particular illness, injury or other emergency is evidence-based and optimises patient outcomes
- reform ambulance response time performance measures to ensure they support clinically appropriate responses to patients, effectively drive service improvements and provide the community with a meaningful indication of performance
- collaboratively work with others including the Inspector General for Emergency Management to consider the most appropriate dispatch time performance measures
- better understand community attitudes, experiences and expectations of ambulance services (this includes considering the need for community information on alternative health services and when to call triple zero)
- improve the provision of incident location information from mobile phone callers to triple zero call takers, with support from other emergency service organisations.

Working together – opportunities for feedback and consultation

The work of the Ambulance Performance and Policy Consultative Committee will continue during 2015, with final recommendations to government later in the year.

The Department of Health & Human Services website (www.health.vic.gov.au/ambulance) provides details of the committee's work and contact details for its secretariat.

Feedback via the website in response to this interim report is invited between now and the end of April 2015, particularly regarding the following questions:

- Has this interim report correctly identified the main challenges?
- Are the reform opportunities mentioned in this report on the right track?
- Are there any gaps that the committee should consider?
- What initiatives would make the greatest difference to patients and paramedics?
- Are there any other issues that you would like to raise with the committee?

The committee will also be undertaking further consultation throughout the year. Details will be available on the secretariat's website.

Appendix 1: Ambulance Performance and Policy Consultative Committee terms of reference

1. Purpose

The Victorian Government announced the establishment of the Ambulance Performance and Policy Consultative Committee as a 2014 election commitment.

The committee was established in January 2015 as a Group C organisation under the *Appointment and remuneration guidelines for Victorian government boards, statutory bodies and advisory committees* (July 2011). It provides a forum for paramedics, Ambulance Victoria, Ambulance Employees Australia of Victoria and government to work together to improve ambulance service performance and organisational culture.

2. Functions and responsibilities

The Ambulance Performance and Policy Consultative Committee will provide advice and make recommendations to the Minister for Ambulance Services. It will:

- contribute to policy development and make recommendations to improve Ambulance Victoria's service performance, workforce flexibility and culture, including
  - improving ambulance response times and patient outcomes
  - a review of ambulance call taking and dispatch
  - management of workload, fatigue, health and wellbeing of the workforce
  - resource allocation and responding to caseload growth
  - alternatives to ambulance transport
  - reducing off-stretcher times at emergency departments ('ambulance ramping')
- provide advice on the potential introduction of paramedic practitioners in Victoria and options to progress the issue of national registration of paramedics through the Australian Health Practitioner Registration Agency
- as required, undertake targeted consultation with relevant stakeholders
- consider, investigate and report on any other matters regarding ambulance services referred to the committee by the Minister for Ambulance Services or the Secretary to the Department of Health & Human Services.

The committee will be supported by a secretariat within the Department of Health & Human Services.

3. Deliverables

The committee is to prepare an interim report to be made available by 15 March 2015 that includes:

- outlining the key challenges that have affected Ambulance Victoria's performance and culture
- areas for consideration including opportunities for service improvement, innovation, workforce and culture reforms, including the anticipated outcomes from such initiatives.

The committee will provide a final report on its work and proposed future reform directions for ambulance services in Victoria by the end of 2015. This may include opportunities to reform the *Ambulance Services Act 1986* and other relevant legislation.

4. Membership

The Minister for Ambulance Services, the **Hon. Jill Hennessy MP**, chairs the committee in an ex-officio capacity.

The following persons have been appointed as members of the committee:

- **Ms Mary-Anne Thomas MP**, Parliamentary Secretary for Health
- **Mr Colin Jones**, Mobile Intensive Ambulance Care Paramedic and Clinical Support Officer, Ambulance Victoria
- **Ms Morgyn McCarthy Harding**, Advanced Life Support Paramedic, Ambulance Victoria
- **Ms Jan Einsiedel**, Mobile Intensive Ambulance Care Paramedic, Ambulance Victoria
- **Mr Luke Baird**, Advanced Life Support Paramedic, Ambulance Victoria
- **Associate Professor Tony Walker**, Acting Chief Executive Officer, Ambulance Victoria
- **Mr Howard Ronaldson**, Administrator, Ambulance Victoria
- **Associate Professor Alex Cockram**, Chief Executive Officer, Western Health
- **Mr Steve McGhie**, General Secretary, Ambulance Employees Australia of Victoria
- **Mr Danny Hill**, Assistant Secretary, Ambulance Employees Australia of Victoria
- **Mr Peter Fitzgerald**, Deputy Secretary, Department of Health & Human Services.

Appendix 2: 2013–14 response time data by LGA, UCL and branch

Table 7: Ambulance response times by LGA 2013–14

Local government area	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Alpine	1	18:10	41:17	22:52	19:21	38.42%	51.84%	622
	2	28:00	76:29	40:28	26:06			444
Ararat	1	13:09	33:53	17:22	17:29	55.75%	64.43%	644
	2	24:01	73:16	35:40	23:03			435
Ballarat	1	11:01	20:30	12:58	11:08	77.62%	88.76%	5,317
	2	19:28	55:56	28:26	18:55			2,531
Banyule	1	10:45	18:53	12:27	10:05	79.80%	90.96%	5,970
	2	24:25	68:05	33:46	20:55			3,015
Bass Coast	1	13:38	29:15	16:16	14:08	56.97%	68.55%	2,547
	2	20:46	61:10	30:16	22:44			1,416
Baw Baw	1	16:51	38:15	21:18	15:59	41.99%	63.72%	2,391
	2	26:44	80:42	39:10	24:16			1,148
Bayside	1	11:16	18:43	13:02	10:46	79.03%	87.98%	4,068
	2	26:40	70:25	35:56	25:20			2,284
Benalla*	1	12:14	32:15	16:55		57.75%		781
	2	25:00	59:33	31:17				567
Boroondara	1	10:32	17:35	12:10	9:36	83.00%	94.50%	5,912
	2	22:46	59:39	30:52	20:20			3,397

Local government area	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Brimbank	1	11:49	20:20	13:28	9:50	72.98%	91.91%	10,428
	2	24:13	61:25	32:09	19:58			4,663
Buloke	1	19:17	44:26	23:08	22:17	37.14%	46.13%	350
	2	32:51	81:36	40:44	23:40			231
Campaspe	1	13:11	30:54	16:54	16:05	56.53%	63.02%	2,137
	2	21:44	67:51	31:59	20:26			1,248
Cardinia	1	13:13	26:07	15:31	14:26	58.87%	61.26%	4,121
	2	21:44	51:13	27:23	22:05			1,835
Casey	1	11:01	19:16	12:32	11:01	77.82%	86.09%	12,358
	2	21:16	48:23	26:53	21:40			6,169
Central Goldfields	1	12:44	30:31	16:52	14:44	56.10%	68.76%	836
	2	18:30	64:49	29:53	20:31			448
Colac-Otway	1	12:46	36:24	18:26	16:47	56.88%	66.67%	828
	2	20:10	75:50	32:43	23:55			528
Corangamite	1	17:02	35:06	20:05	17:16	42.15%	55.56%	669
	2	24:33	63:04	32:35	21:54			488
Darebin	1	10:23	17:41	12:05	9:25	83.30%	93.92%	8,505
	2	22:59	67:24	32:58	19:30			3,870
East Gippsland	1	14:06	34:53	18:17	14:54	52.74%	68.20%	3,197
	2	24:50	83:10	37:29	20:10			1,878
Frankston	1	10:22	17:40	11:45	10:04	82.33%	90.17%	8,848
	2	20:30	50:26	26:29	19:49			4,912
Gannawarra	1	14:17	31:14	17:19	17:49	52.90%	60.20%	448
	2	23:23	69:01	35:02	18:19			312
Glen Eira	1	10:17	17:44	12:05	10:03	83.20%	92.24%	6,642
	2	25:52	71:45	35:16	23:03			3,087

Local government area	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Glenelg	1	11:01	28:46	14:51	14:03	68.22%	74.63%	878
	2	18:14	62:28	28:35	19:14			593
Golden Plains	1	23:22	37:14	24:51	23:19	8.99%	17.34%	623
	2	36:06	70:30	41:41	35:23			272
Greater Bendigo	1	12:38	26:00	15:14	13:23	64.55%	77.35%	6,383
	2	22:08	63:37	31:52	20:12			3,125
Greater Dandenong	1	10:12	17:18	11:34	9:47	83.52%	92.22%	9,615
	2	20:48	52:14	27:14	20:49			4,696
Greater Geelong	1	12:17	23:49	14:31	13:22	67.07%	73.55%	13,251
	2	22:57	59:33	31:14	25:19			6,397
Greater Shepparton	1	11:08	23:59	13:50	13:31	71.43%	75.25%	4,057
	2	19:09	57:31	28:40	18:26			2,162
Hepburn	1	23:39	40:16	26:01	22:09	14.50%	21.64%	655
	2	32:51	68:29	39:59	28:51			453
Hindmarsh	1	14:55	34:00	19:49	14:25	50.71%	71.79%	351
	2	27:07	74:24	37:47	20:07			305
Hobsons Bay	1	10:56	18:26	12:22	10:47	79.26%	87.42%	4,551
	2	21:24	54:10	28:31	21:07			2,320
Horsham	1	09:06	25:16	12:37	10:58	77.42%	86.41%	1,355
	2	15:12	70:43	30:45	14:40			814
Hume	1	13:07	24:06	15:16	12:14	62.68%	79.94%	11,880
	2	25:55	67:27	34:22	22:36			4,949
Indigo	1	22:17	38:23	23:52	20:53	20.81%	34.95%	567
	2	32:54	67:40	39:33	26:15			338
Kingston	1	10:31	17:39	11:59	10:34	82.25%	89.02%	8,365
	2	24:19	60:29	31:44	22:59			4,060

Local government area	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Knox	1	10:49	17:50	12:13	10:10	81.56%	91.50%	7,180
	2	20:17	48:46	26:07	19:58			3,891
Latrobe	1	13:47	29:29	16:49	12:40	55.51%	75.13%	6,428
	2	25:22	81:32	37:17	21:30			3,087
Loddon	1	23:16	40:43	25:10	23:08	21.51%	33.33%	502
	2	35:16	85:57	44:46	28:13			224
Macedon Ranges	1	15:19	28:13	17:17	16:41	48.62%	54.77%	2,102
	2	22:20	52:59	28:46	22:48			1,339
Manningham	1	11:56	19:12	13:19	11:23	74.27%	85.54%	4,921
	2	23:49	60:47	31:40	22:05			2,299
Mansfield*	1	19:57	48:03	25:07		36.81%		364
	2	30:36	88:49	40:13				280
Maribyrnong	1	9:30	16:24	10:52	9:27	86.62%	93.27%	4,394
	2	22:38	57:41	30:11	20:19			2,291
Maroondah	1	10:08	17:38	11:37	9:20	83.19%	93.86%	5,867
	2	21:26	54:38	28:34	19:41			3,121
Melbourne	1	8:30	16:11	10:19	8:26	87.88%	94.23%	9,349
	2	21:08	57:40	28:22	20:31			5,544
Melton	1	13:30	25:07	15:40	12:32	58.16%	74.47%	6,382
	2	24:05	58:34	30:53	21:26			2,835
Mildura	1	09:58	20:49	12:22	11:36	79.28%	83.57%	3,614
	2	16:03	57:31	26:38	16:53			2,017
Mitchell	1	16:52	33:05	18:56	17:44	40.73%	47.72%	2,092
	2	21:49	50:07	27:52	23:26			1,224
Moira	1	14:48	33:19	18:08	17:07	50.86%	57.84%	1,970
	2	23:18	67:03	33:15	25:07			1,231

Local government area	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Monash	1	10:41	17:54	12:14	9:57	82.36%	92.78%	8,224
	2	23:27	60:08	31:16	21:58			4,190
Moonee Valley	1	10:53	18:04	12:26	9:55	80.39%	92.76%	6,340
	2	31:27	156:28	58:29	44:26			4,235
Moorabool	1	15:34	30:58	17:56	19:20	47.55%	43.16%	1,386
	2	21:55	63:17	31:13	27:53			804
Moreland	1	10:36	18:06	12:20	10:09	80.99%	91.48%	9,679
	2	25:01	70:52	35:02	22:02			4,408
Mornington Peninsula	1	12:21	23:15	14:21	12:13	65.92%	75.96%	9,437
	2	24:41	57:35	30:20	24:22			5,264
Mount Alexander	1	17:19	35:58	20:02	16:57	44.32%	60.68%	898
	2	23:13	62:34	31:53	21:01			543
Moyne	1	17:10	30:58	19:17	16:49	36.48%	51.87%	636
	2	23:55	56:25	30:11	22:10			308
Murrindindi	1	22:22	42:22	24:14	21:28	29.14%	39.59%	858
	2	29:40	65:40	35:02	26:56			484
Nillumbik	1	15:24	27:55	17:29	14:18	47.20%	62.8%	2,104
	2	28:10	64:30	35:20	23:31			948
Northern Grampians	1	11:38	30:47	15:49	16:34	61.23%	63.36%	668
	2	21:28	67:42	32:47	20:08			491
Port Phillip	1	09:24	16:35	11:01	9:56	86.20%	90.97%	5,644
	2	22:18	62:27	30:33	22:39			2,615
Pyrenees	1	19:51	35:38	21:34	20:38	32.32%	39.20%	393
	2	27:54	61:13	33:40	24:07			185
Queenscliffe	1	18:17	32:11	21:17	17:23	22.17%	45.24%	212
	2	28:05	54:33	33:58	26:20			183

Local government area	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
South Gippsland	1	17:17	35:37	19:50	16:59	42.81%	55.48%	1,628
	2	26:57	72:20	35:38	24:40			862
Southern Grampians	1	10:02	28:39	14:26	13:49	67.95%	74.06%	752
	2	18:18	60:34	30:28	19:11			433
Stonnington	1	09:44	17:14	11:13	9:14	84.76%	93.98%	4,417
	2	24:37	64:27	33:12	22:18			2,238
Strathbogie	1	20:00	35:35	21:31	17:40	33.89%	53.03%	658
	2	31:03	67:05	36:38	21:08			418
Surf Coast	1	16:55	32:25	18:37	16:40	43.87%	55.70%	1,338
	2	23:14	54:16	29:11	24:27			680
Swan Hill	1	10:18	27:20	14:07	12:17	69.85%	79.13%	1,204
	2	18:06	62:27	28:28	15:06			701
Towong	1	21:44	46:34	25:28	21:07	30.35%	48.95%	313
	2	31:49	73:31	40:01	25:14			243
Wangaratta	1	11:37	31:23	16:13	13:50	64.58%	74.73%	1,598
	2	20:02	70:02	32:46	18:39			903
Warrnambool	1	9:35	19:35	11:46	9:53	83.10%	92.39%	1,746
	2	16:36	62:29	29:05	15:40			1,082
Wellington	1	14:11	34:43	18:01	15:58	52.54%	59.72%	2,558
	2	22:36	70:53	33:17	22:16			1,289
West Wimmera	1	18:41	35:46	21:09	20:47	41.62%	47.69%	173
	2	28:37	95:39	41:26	22:58			121
Whitehorse	1	9:38	16:17	11:03	9:29	86.47%	94.05%	7,344
	2	21:33	54:51	28:46	20:27			4,062
Whittlesea	1	12:36	23:22	14:37	11:07	64.97%	85.02%	8,516
	2	26:05	67:35	34:32	21:59			3,541

Local government area	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Wodonga	1	11:29	24:39	14:18	11:56	72.30%	86.06%	2,007
	2	18:37	70:16	31:31	16:46			1,057
Wyndham	1	12:15	21:31	13:56	11:28	69.37%	81.20%	7,374
	2	21:34	53:32	28:41	21:59			3,280
Yarra	1	09:01	15:50	10:27	8:31	88.32%	95.37%	5,059
	2	21:47	63:05	30:26	19:22			2,282
Yarra Ranges	1	13:51	26:34	16:00	13:16	56.76%	71.03%	7,655
	2	25:18	58:45	31:35	22:15			3,599
Yarriambiack	1	20:39	40:23	23:22	19:27	31.76%	39.35%	425
	2	31:44	75:27	39:24	26:43			277

Note:

Measures not calculated where sample size is less than 30 as results are not statistically significant.

2008-09 data for rural LGAs is based on Patient Care Report data.

**Separate 2008-09 data for the LGAs of Mansfield and Benalla are not available. Across both LGAs (former Delatite LGA) in 2008-09 the average Code 1 response time was 15:38 minutes and the average Code 2 response time was 22:32 minutes, with 67.75% of Code 1 cases responded to within 15 minutes*

Table 8: Ambulance response times by UCL 2013–14

Urban centres localities	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Albury – Wodonga (Wodonga Part)	1	11:10	24:00	13:57	11:34	75.29%	89.03%	1,866
	2	17:40	68:22	30:50	16:29			975
Bacchus Marsh	1	12:07	28:30	15:19	11:10	62.50%	81.48%	760
	2	20:11	64:50	30:44	20:21			573

Urban centres localities	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Bairnsdale	1	9:48	25:17	13:40	10:50	72.71%	90.33%	1,114
	2	23:08	91:43	38:11	18:05			773
Ballarat	1	10:50	19:51	12:44	10:50	79.24%	90.53%	5,110
	2	19:07	54:56	27:51	18:44			2,452
Benalla	1	10:18	29:34	14:48	11:55	68.75%	83.45%	592
	2	23:01	60:20	30:54	17:43			503
Bendigo	1	12:00	23:47	14:19	12:10	69.94%	84.49%	5,492
	2	21:20	63:21	31:28	18:55			2,767
Castlemaine	1	11:43	34:04	17:04	15:06	65.08%	76.41%	504
	2	20:25	62:34	31:09	17:31			419
Colac	1	10:05	31:35	14:38	13:52	75.88%	85.31%	481
	2	19:08	79:56	33:47	22:24			383
Drouin	1	16:08	37:58	21:16		40.14%		578
	2	25:19	64:56	35:56				254
Drysdale – Clifton Springs	1	14:04	25:10	16:17	14:05	55.05%	72.76%	594
	2	22:15	54:21	30:06	24:22			285
Echuca – Moama (Echuca Part)	1	10:12	23:08	12:55	12:12	74.42%	85.63%	817
	2	18:17	85:45	34:38	15:43			580
Geelong	1	11:32	21:28	13:26	12:43	73.60%	78.43%	9,752
	2	22:02	55:01	29:14	25:04			4,720
Gisborne	1	11:29	25:44	14:56		61.72%		384
	2	20:28	46:18	25:14				247
Hamilton	1	8:13	15:11	10:08	10:30	89.56%	91.65%	498
	2	13:00	67:09	28:46	15:44			305

Urban centres localities	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Healesville	1	14:15	29:32	17:19		53.20%		688
	2	29:09	60:46	33:44				402
Horsham	1	8:33	21:50	11:11	9:32	85.13%	92.97%	1,190
	2	13:55	64:47	28:17	13:49			743
Lara	1	11:39	22:45	13:59	13:57	70.83%	62.50%	432
	2	19:21	80:05	30:46	24:32			201
Leopold	1	14:23	21:47	15:49	14:39	56.90%	65.02%	471
	2	24:51	51:19	31:58	27:04			195
Melbourne	1	10:47	19:11	12:29	10:13	78.61%	89.75%	205,977
	2	23:13	62:11	31:51	22:30			102,892
Melton	1	13:02	26:09	15:40	11:32	58.98%	78.49%	3,547
	2	22:54	58:11	29:55	19:34			1,802
Mildura – Buronga (Mildura Part)	1	8:36	15:48	10:26	9:40	88.74%	92.81%	2,504
	2	13:56	49:56	24:07	15:03			1,483
Moe – Newborough	1	13:40	28:34	16:46	11:38	54.24%	79.13%	1,770
	2	25:10	75:34	36:08	18:21			804
Morwell	1	11:11	26:49	14:55	10:41	68.03%	88.49%	1,708
	2	22:52	84:54	36:08	19:25			837
Ocean Grove – Barwon Heads	1	13:23	27:32	16:05	13:44	58.60%	69.20%	715
	2	21:37	53:31	29:41	22:31		92.81%	353
Pakenham	1	10:50	21:14	12:57	10:17	74.42%	86.44%	2,201
	2	18:18	48:35	24:39	18:13			1,025
Portland (Vic.)	1	9:10	21:14	11:53	12:50	81.27%	82.47%	502
	2	16:00	65:26	28:44	18:37			398

Urban centres localities	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Sale	1	8:58	24:46	12:53	9:26	74.27%	93.19%	960
	2	16:08	68:34	29:52	15:32			577
Shepparton – Mooroopna	1	10:06	20:10	12:21	11:34	81.17%	88.83%	3,170
	2	17:40	58:35	27:55	16:40			1,776
Sunbury	1	11:47	26:01	14:54	11:37	64.20%	79.69%	1,866
	2	21:53	60:31	30:29	19:11			1,056
Swan Hill	1	8:06	17:43	10:30	9:25	87.78%	94.34%	679
	2	13:05	68:43	27:13	11:56			393
Torquay – Jan Juc	1	13:17	25:23	15:46	14:09	55.26%	66.45%	646
	2	22:05	47:44	26:46	25:41			307
Traralgon	1	12:39	28:14	16:00	12:05	60.95%	77.74%	1,777
	2	26:00	87:29	38:41	21:37			1,017
Wallan	1	18:16	29:13	19:46		19.29%		368
	2	23:02	51:28	29:20				184
Wangaratta	1	10:04	23:23	12:59	11:02	80.14%	89.75%	1,173
	2	16:57	68:02	31:11	15:53			738
Warragul	1	10:58	31:31	16:18	11:32	65.31%	87.02%	862
	2	22:28	82:28	38:29	20:19			519
Warrnambool	1	9:23	18:57	11:26	9:42	84.76%	93.61%	1,640
	2	16:11	64:44	29:10	15:29		89.75%	1,034

Note:

2008-09 data for rural UCLs is based on Patient Care Report data.

Table 9: Ambulance response times by branch, 2013–14

Branch address										
Street name	Street type	Suburb	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Nihil	St	Alexandra	1	20:58	44:12	23:34	19:02	33.75%	46.78%	317
			2	27:55	68:34	33:35	27:18			207
Austin	St	Alphington	1	10:43	20:02	12:47	9:43	78.31%	91.51%	3,462
			2	25:18	68:12	34:21	22:22			2,421
Blackshaws	Rd	Altona North	1	10:56	19:31	12:31	10:44	77.25%	86.45%	4,619
			2	23:43	59:45	32:04	21:37			2,461
McMillan	St	Anglesea	1	17:58	32:16	18:46	12:51	39.31%	74.26%	318
			2	21:15	52:39	27:54	17:10			170
Pengilley	Av	Apollo Bay	1	14:10	37:56	18:16	15:05	56.25%	67.92%	128
			2	15:52	45:08	20:06	17:00			81
Basham	St	Ararat	1	11:44	29:31	15:26	15:12	62.27%	70.42%	546
			2	18:17	60:16	31:08	19:21			339
Liebig	St	Avoca	1	20:37	38:42	22:13	20:12	32.75%	50.00%	229
			2	31:26	64:42	35:31	24:11			110
Main	St	Bacchus Marsh	1	14:29	24:18	15:43	12:11	52.99%	71.82%	1,723
			2	22:21	55:57	29:07	19:14			1,049
Main	St	Bairnsdale	1	12:14	31:52	16:38	13:54	59.39%	70.13%	1,470
			2	24:20	89:22	38:32	21:07			850
Humffray	St	Bakery Hill	1	12:01	24:33	14:31	13:25	69.98%	80.54%	3,474
			2	20:57	63:21	31:43	20:57			1,372
Edols	St	Ballan	1	19:31	37:43	21:39	18:38	30.77%	49.60%	364
			2	31:28	77:58	41:15	27:34			209

Branch address											
Street name	Street type	Suburb	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Bell	St	Balmoral	1							12
			2							2
Currawong	Rd	Baw Baw Village	1							4
			2							3
Woods	St	Beaconsfield	1	11:50	21:43	13:40	12:16	70.91%	71.82%	1,502
			2	21:46	49:48	27:44	22:19			937
Havelock	St	Beaufort	1	17:00	36:12	20:34	18:06	40.96%		188
			2	32:39	85:22	41:44	20:27			122
Finch	St	Beechworth	1	22:07	38:25	23:56	17:31	23.24%		284
			2	30:37	67:31	39:31	20:31			209
Bayview	Rd	Belgrave	1	13:14	23:57	14:58	11:38	61.21%	79.23%	1,284
			2	24:58	54:28	30:16	22:29			872
Colac	Rd	Belmont	1	12:28	26:35	15:16	13:37	63.94%	73.42%	4,240
			2	22:53	63:07	31:46	25:02			1,987
Bridge	St	Benalla	1	11:13	30:26	15:38	13:12	64.10%	75.40%	688
			2	20:13	62:04	30:15	20:36			482
Uley	St	Bendigo	1	12:23	27:04	15:25	14:18	66.55%	75.91%	2,066
			2	22:09	68:32	32:49	20:22			1,378
Kalman	Dr	Boronia	1	11:41	20:57	13:09	11:25	73.53%	86.84%	1,685
			2	21:03	54:12	28:50				471
Elgar	Rd	Box Hill	1	10:38	17:44	12:08	9:43	82.03%	93.49%	3,834
			2	23:02	60:46	31:04	19:59			1,873
Ashley	St	Braybrook	1	10:43	19:32	12:32	10:19	78.33%	89.63%	4,260
			2	25:17	61:39	33:22	22:22			1,554

Branch address										
Street name	Street type	Suburb	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Mountbatten	Av	Bright	1	21:03	46:02	24:50	19:05	33.50%	51.55%	203
			2	27:42	76:31	39:13	25:17			156
Nepean	Hwy	Brighton East	1	10:01	16:58	11:44	9:40	84.75%	93.52%	2,459
			2	21:48	65:18	31:49	21:23			1,420
The Gateway	–	Broadmeadows	1	11:53	22:01	13:56	12:16	71.30%	81.48%	4,171
			2	26:04	87:15	39:50	26:53			2,036
Plenty	Rd	Bundoora	1	12:20	21:45	14:05	10:53	68.68%	86.67%	3,276
			2	24:25	55:34	29:35	18:58			510
Burwood	Hwy	Burwood East	1	9:59	16:45	11:22	9:13	86.02%	94.50%	4,271
			2	21:29	58:53	29:34	20:50			1,199
Camberwell	Rd	Camberwell	1	10:20	18:11	11:49	10:13	81.76%	94.50%	2,418
			2	24:39	60:01	31:23	22:49			1,508
Somerton Park	Dr	Campbellfield	1	13:34	22:11	15:05	12:25	62.74%	81.36%	2,088
			2	15:04	33:59	18:08	20:54			34
Scott	St	Camperdown	1	16:18	35:58	20:51	15:55	43.99%	59.72%	341
			2	26:10	67:40	34:39	20:08			206
Monaro	Hwy	Cann River	1							16
			2							16
Canterbury	Rd	Canterbury	1	10:53	20:14	12:55	9:53	77.64%	92.38%	2,464
			2	25:21	65:52	34:07	23:14			1,781
Bouverie	St	Carlton	1	9:49	18:00	11:38	9:17	82.50%	91.89%	2,960
			2	24:55	75:21	36:00	23:46			2,130
Rosstown	Rd	Carnegie	1	10:01	17:14	11:41	9:22	83.71%	93.47%	804
			2	21:12	46:55	26:35	21:38			483

Branch address										
Street name	Street type	Suburb	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Cussen	St	Casterton	1	15:00	34:32	19:54	13:34	50.86%	73.78%	175
			2	22:40	41:04	25:56	19:16			97
Halford	St	Castlemaine	1	13:19	29:30	16:34	15:11	55.87%	66.93%	707
			2	20:25	56:57	28:50	18:34			469
Glen Huntly	Rd	Caulfield South	1	10:12	17:48	11:52	9:55	82.61%	91.87%	2,830
			2	24:30	71:02	34:08	22:00			1,761
Learmonth	St	Charlton	1	21:07	38:43	22:42	21:59	34.52%	42.42%	197
			2	34:55	66:52	40:16	24:34			119
Nepean	Hwy	Chelsea	1	9:58	17:31	11:31	10:07	83.68%	88.81%	3,083
			2	22:14	57:42	29:04	21:58			1,077
Nepean	Hwy	Cheltenham	1	10:25	17:28	11:54	9:43	82.80%	93.13%	3,326
			2	22:02	59:56	29:52	21:41			2,023
Colgan	St	Cobram	1	13:45	30:20	16:36	14:48	56.95%	68.34%	741
			2	19:10	49:59	26:49	18:08			434
Moreland	Rd	Coburg	1	9:41	16:08	11:14	10:37	86.36%	88.42%	1,980
			2				20:21			21
King Edward	St	Cohuna	1	17:42	34:04	19:41	20:15	41.98%	45.40%	162
			2	26:55	63:25	33:31	19:19			127
Rae	St	Colac	1	11:17	31:44	16:19	14:59	63.11%	71.59%	618
			2	19:20	62:31	28:58	18:13			392
Henty	St	Coleraine	1	21:26	32:56	21:59	15:13	12.90%	62.50%	31
			2				19:21			19
Jardine	St	Corryong	1	21:10	58:08	27:31	22:13	33.98%	50.00%	103
			2	33:40	73:31	39:40	26:55			121

Branch address										
Street name	Street type	Suburb	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Industrial	Way	Cowes	1	12:57	24:17	14:50	12:56	61.94%	73.87%	867
			2	18:52	50:44	26:22	18:03			545
Dorchester	St	Craigieburn	1	11:15	22:20	13:31		72.97%		1,750
			2	24:18	69:30	33:46				848
Grant	St	Cranbourne	1	11:10	19:34	12:43	10:49	76.05%	84.96%	3,107
			2	22:50	52:53	28:22	22:19			1,852
Huon Park	Rd	Cranbourne North	1	10:23	18:22	11:50	11:07	80.71%	84.45%	1,882
			2	21:39	54:49	28:20	24:28			1,042
Stud	Rd	Dandenong	1	10:12	17:45	11:47	10:02	82.83%	91.05%	5,533
			2	21:50	54:37	28:20	21:38			2,351
Midland	Hwy	Daylesford	1	23:52	41:08	25:19	20:35	25.64%	35.31%	351
			2	29:46	67:16	37:46	24:39			274
Kings	Rd	Delahey	1	11:44	22:33	13:48	10:28	72.17%	89.11%	2,012
			2	24:03	75:57	35:31	23:19			907
Main Hurstbridge	Rd	Diamond Creek	1	12:23	23:44	14:26	12:20	66.48%	78.49%	704
			2	22:48	52:34	28:28	20:44			489
Lloyd	St	Dimboola	1	19:01	38:09	22:04	18:47	42.98%	60.00%	235
			2	43:06	94:52	47:42	24:32			167
McCracken	Av	Donald	1	23:06	39:35	24:37	18:40	19.18%	48.39%	73
			2	19:46	52:35	26:43	21:45			35
Manningham	Rd	Doncaster	1	9:59	17:21	11:14	10:47	83.91%	85.99%	1,504
			2	17:26	61:35	26:01	20:08			574
Grubb	Rd	Drysdale	1	14:58	25:19	16:30	15:11	50.44%	61.29%	1,376
			2	24:03	57:01	31:04	27:11			719

Branch address										
Street name	Street type	Suburb	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Market	St	Eaglehawk	1	12:45	28:37	16:15		61.56%		913
			2	22:24	71:08	33:35				705
Ogilvie	Av	Echuca	1	12:32	28:00	15:38	14:23	62.46%	72.10%	1,409
			2	18:47	63:32	30:14	17:52			768
Anne	St	Edenhope	1	18:07	40:36	21:32	21:49	44.21%	50.00%	95
			2	24:10	74:55	35:05	24:52			62
High	St	Eildon	1				20:55		29.63%	29
			2							21
Brisbane	St	Eltham	1	12:22	21:11	13:53		68.97%		883
			2							23
Memorial	Av	Emerald	1	15:22	30:36	17:32	16:41	48.51%	48.21%	905
			2	28:32	55:38	32:52	23:05			575
Monkhouse	Dr	Endeavour Hills	1	11:09	19:06	12:44		77.13%		1,539
			2	22:10	54:54	29:07				1,155
Great Alpine	Rd	Ensay	1							11
			2							9
McDonalds	Rd	Epping	1	11:24	21:25	13:37	11:13	72.34%	83.24%	2,925
			2	24:36	66:47	32:54	22:38			1,528
Willow	St	Essendon	1	10:52	19:09	12:31	9:40	78.28%	92.41%	2,555
			2	26:01	89:07	40:51	26:24			1,440
Larkin	Ct	Essendon Fields	1	11:44	19:13	13:17	10:42	75.86%	92.59%	87
Templeton	St	Euroa	1	15:41	34:10	19:17	15:35	48.67%	60.75%	339
			2	22:02	54:01	27:50	16:44			219
Bogong High Plains	Rd	Falls Creek	1							21
			2	32:20	86:45	39:03	16:52			56

Branch address										
Street name	Street type	Suburb	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Dobson	St	Ferntree Gully	1	10:27	19:16	12:21	10:11	80.25%	90.53%	3,448
			2	21:22	51:34	28:01	21:05			2,227
Victoria	Pde	Fitzroy	1	9:18	16:15	10:55	8:37	87.72%	94.69%	4,423
			2	23:17	66:51	32:47	21:29			1,340
Droop	St	Footscray	1	9:47	18:27	11:54	10:08	81.92%	89.95%	1,836
			2	23:13	73:38	34:07	22:02			1,188
Station	Rd	Foster	1	24:38	44:06	26:51	17:35	21.36%	47.11%	337
			2	29:36	77:59	38:12	26:39			165
Hastings	Rd	Frankston	1	11:18	19:38	12:46	10:59	74.97%	84.63%	3,660
			2	19:53	49:37	26:39	21:43			1,232
Yarra	St	Geelong	1	12:59	24:05	14:57	13:04	64.42%	75.60%	1,689
			2	22:55	53:41	30:41	24:00			853
Robertson	St	Gisborne	1	14:07	27:19	16:06	16:09	55.81%	57.69%	645
			2	18:43	43:58	23:38	22:51			278
McLennan	St	Glenthompson	1				25:10		22.22%	21
			2							11
Natimuk-Frances	Rd	Goroke	1	10:13	29:43	14:47		70.97%		31
			2							12
Grantville-Glen Alvie	Rd	Grantville	1	17:51	37:28	21:15		37.64%		441
			2	31:34	81:56	41:11				245
Clarendon	St	Hamilton	1	9:10	26:56	13:16	13:14	73.29%	77.72%	659
			2	17:12	67:09	30:26	19:25			384
Somerville	Rd	Hampton Park	1	11:09	19:59	12:39	10:39	77.19%	87.70%	969
			2	21:56	48:43	26:27	21:29			620

Branch address										
Street name	Street type	Suburb	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Glendale	Av	Hastings	1	11:54	23:32	14:04	11:52	68.20%	78.35%	2,321
			2	26:18	59:03	31:05	22:02			1,555
Westmount	Rd	Healesville	1	14:43	34:50	18:19	15:01	51.06%	64.84%	707
			2	20:16	50:07	27:59	22:41			194
Marshall	Cr	Heathcote	1	17:07	32:22	19:48	17:56	40.86%	51.19%	350
			2	20:59	52:00	28:52	23:11			165
Gordon	St	Heyfield	1	15:13	32:09	18:35	17:35	47.31%	50.91%	186
			2	25:47	71:01	37:37	20:49			123
Barclay	St	Heywood	1	18:48	42:36	22:37	18:03	38.12%	56.85%	202
			2	28:46	63:10	33:10	23:28			90
Beattys	Rd	Hillside (Melton)	1	13:16	23:22	15:03	11:21	61.10%	85.05%	2,571
			2	25:22	72:26	35:21	25:10			775
Mitchell	Pl	Hopetoun	1							22
			2							16
Desire	Pl	Hoppers Crossing	1	12:36	20:33	14:04	9:48	69.23%	91.02%	4,105
			2	21:21	56:30	29:40	17:25			1,449
Urquhart	St	Horsham	1	9:09	26:13	13:03	11:33	76.09%	81.91%	1,351
			2	15:17	67:54	30:15	15:39			829
Great Alpine	Rd	Hotham Heights	1							24
			2							105
Hospital	St	Inglewood	1	24:06	44:48	25:44	22:37	25.34%	35.53%	221
			2	37:19	93:14	50:34	29:38			86
Fifteenth	St	Irymple	1	12:01	25:35	14:38	12:52	71.27%	80.49%	898
			2	19:17	73:34	31:05	18:15			529

Branch address										
Street name	Street type	Suburb	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Oriel	Rd	Ivanhoe	1	10:24	17:21	11:58	10:29	83.03%	89.47%	1,785
			2				12:39			23
View	St	Kangaroo Flat	1	12:33	26:55	15:01	14:20	65.04%	72.30%	1,167
			2	23:45	67:14	33:24	21:53			748
Phillips	St	Kaniva	1	20:41	32:48	22:30		19.44%		36
			2				16:34			20
Malcolm	Ct	Kealba	1	11:40	20:40	13:30	10:41	73.48%	87.46%	2,930
			2	24:48	75:59	36:44	26:25			1,701
Edwards	Rd	Kennington	1	12:36	24:39	14:51		65.39%		1,832
			2	16:50	75:03	31:17				134
Burgoyne	St	Kerang	1	13:20	30:55	17:03	15:56	55.84%	65.49%	308
			2	22:09	75:26	34:32	17:42			199
Cotham	Rd	Kew	1	9:56	17:28	11:26	9:26	84.64%	93.70%	690
			2	21:03	49:45	27:04	21:13			494
Powlett	St	Kilmore	1	18:28	34:43	20:42	19:59	29.99%	34.42%	1,454
			2	23:36	54:37	30:05	25:56			874
Canterbury	Rd	Kilsyth	1	11:41	20:29	13:23	11:11	73.70%	85.18%	3,380
			2	21:32	58:47	29:25	20:01			2,056
Whittlesea-Kinglake	Rd	Kinglake	1	16:07	33:58	19:13		45.30%		298
			2	30:07	58:44	33:06				140
Plenty	Rd	Kingsbury	1	10:58	20:29	13:02	10:13	76.45%	88.93%	3,533
			2	24:39	64:50	33:28	21:29			2,211
Princes	St	Korumburra	1	16:42	33:38	18:38	16:37	45.37%	59.11%	443
			2	24:29	65:43	35:28	24:39			177

Branch address										
Street name	Street type	Suburb	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Mellis	St	Kyabram	1	13:41	31:18	16:49	15:10	54.19%	61.86%	668
			2	23:36	65:16	31:17	20:07			404
Caroline Chisholm	Dr	Kyneton	1	16:12	35:40	19:44	15:35	43.95%	59.94%	587
			2	22:31	65:05	31:38	20:44			403
Mechanics	St	Lakes Entrance	1	13:22	32:28	17:38	14:35	55.31%	69.43%	848
			2	20:55	63:58	30:32	17:17			486
Warrandyte	Rd	Langwarrin	1	11:34	20:40	13:10	10:46	73.63%	85.63%	3,147
			2	22:05	51:44	28:25	20:47			2,104
Mill	Rd	Lara	1	13:04	25:56	15:19	14:10	60.91%	72.33%	1,013
			2	28:00	76:28	39:16	27:26			649
Jeffrey	St	Leongatha	1	14:27	33:18	17:49	15:54	51.72%	59.78%	609
			2	27:40	76:06	37:10	24:59			431
Bellarine	Hwy	Leopold	1	12:08	23:31	14:08		69.88%		777
			2	23:08	63:49	31:59				448
Pine	St	Lilydale	1	11:18	21:54	13:21	10:53	72.95%	85.67%	2,037
			2	22:25	58:06	29:17	21:03			1,069
West	St	Lismore	1							16
			2							11
National Park	Rd	Loch Sport	1	17:39	28:13	19:10	19:04	34.94%	44.00%	83
			2				20:32			29
Smith	St	Lorne	1	17:35	35:33	20:04	17:02	41.25%	63.48%	160
			2	17:49	38:07	21:39	22:22			83
Johnson	St	Maffra	1	15:06	33:57	17:56	17:07	49.33%	50.75%	596
			2	25:36	74:08	36:11	23:25			312

Branch address										
Street name	Street type	Suburb	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Betka	Rd	Mallacoota	1	17:56	36:13	21:43	19:01	29.41%	43.04%	119
			2	21:59	44:52	27:05	22:17			90
Larundel	St	Manangatang	1							7
			2							2
Curia	St	Mansfield	1	19:27	44:08	23:47	19:39	37.64%	53.50%	348
			2	28:47	68:12	36:34	28:36			255
Nightingale	St	Maryborough	1	13:01	30:47	16:49	13:46	55.05%	70.43%	861
			2	18:16	60:06	27:53	18:59			459
Barton	Av	Marysville	1	23:13	41:58	24:53	22:17	18.64%	30.43%	59
			2				30:40			28
Commercial	Rd	Melbourne	1	8:58	14:19	9:49	9:53	91.65%	91.40%	1,976
			2	6:51	15:18	8:22	15:43			45
McKenzie	St	Melton	1	11:28	23:03	13:41	10:41	71.61%	84.75%	3,424
			2	21:54	56:39	29:56	18:56			1,647
Deakin	Av	Mildura	1	9:36	20:35	12:11	11:35	79.30%	83.71%	2,840
			2	15:23	55:19	26:11	17:07			1,516
Grand Ridge East	Rd	Mirboo North	1	19:36	34:14	21:51	16:19	31.87%	51.25%	182
			2	37:46	96:28	47:41	19:07			97
Omeo	Hwy	Mitta Mitta	1	33:08	50:43	34:10		2.78%		36
			2				23:55			21
Fowler	St	Moe	1	13:09	31:32	17:26	12:59	57.19%	74.81%	1,864
			2	27:39	81:57	38:40	21:54			1,106
Grand	Blvd	Montmorency	1	11:25	21:11	13:32	11:16	72.86%	63.13%	2,391
			2	24:31	61:27	32:43	20:55			1,511

Branch address										
Street name	Street type	Suburb	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Sullivan	St	Moorabbin	1	10:28	15:31	11:22	10:45	88.45%	88.88%	4,087
			2	11:28	30:13	18:13	18:06			64
Echuca	Rd	Mooroopna	1	11:06	22:50	13:23	15:04	69.01%		655
			2	21:52	63:39	31:06	22:40			425
Sibthorpe	St	Mordialloc	1	10:41	18:20	12:17	10:19	81.71%	91.45%	2,859
			2	24:04	63:49	32:16	23:07			1,794
Main	St	Mornington	1	10:35	21:19	12:33	10:33	75.36%	82.86%	2,236
			2	23:16	51:42	27:59	22:41			1,503
Park	St	Mortlake	1	17:46	39:41	21:28	17:21	40.56%	59.56%	143
			2	26:50	54:08	31:29	21:57			79
McDonald	St	Morwell	1	15:39	32:23	18:32	14:09	46.69%	68.65%	3,549
			2	24:21	81:45	36:30	24:08			1,098
Lakeside	Av	Mount Beauty	1	18:10	51:29	25:20	19:03	35.46%	54.62%	141
			2	28:13	86:47	43:43	25:23			100
Summit	Rd	Mount Buller	1	10:54	35:01	14:52	10:33	67.74%	88.64%	31
			2	13:50	47:28	24:24	13:15			55
Waverley	Rd	Mount Waverley	1	10:02	17:15	12:00	9:44	83.98%	91.84%	3,602
			2	23:35	65:25	32:17	21:42			2,264
Watson	St	Murchison	1	22:38	35:58	23:53	22:02	21.20%	27.59%	382
			2	32:30	61:57	36:59	28:40			157
Reed	St	Murrayville	1							15
			2							7
Banyena-Pimpinio	Rd	Murtoa	1	18:52	22:46	17:56		25.00%		92
			2							29

Branch address										
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Robertson	St	Myrtleford	1	18:10	36:00	21:16	16:20	38.00%	56.47%	300
			2	24:17	64:31	35:31	22:31			152
Princes	Hwy	Narre Warren	1	11:04	19:21	12:42	11:22	77.71%	83.53%	2,992
			2	20:52	49:28	27:16	21:24			2,013
Victor	Cr	Narre Warren	1	11:04	18:54	12:29	11:22	77.41%	85.67%	1,802
			2				13:53			27
Main Neerim	Rd	Neerim South	1	17:40	32:09	20:44	21:24	41.30%	30.95%	46
			2	20:07	70:12	37:14	32:19			34
Campbell	St	Nhill	1	14:36	34:30	19:53	14:52	52.82%	70.80%	142
			2	26:19	70:47	35:43	18:31			176
Keilor	Rd	Niddrie	1	11:00	19:59	12:54	10:29	77.68%	89.58%	1,837
			2	26:00	115:04	44:25	34:16			1,085
Princes	Hwy	Noble Park	1	10:35	18:37	12:07	10:37	81.43%	89.23%	1,987
			2	21:42	54:29	28:59	21:34			1,115
Princes	Hwy	Norlane	1	11:16	22:32	13:27	13:11	74.11%	75.41%	3,361
			2	21:03	60:11	29:49	25:24			1,264
Tocumwal	Rd	Numurkah	1	18:31	36:34	20:52	16:55	36.65%	51.54%	483
			2	26:51	61:20	34:19	22:41			191
Springvale	Rd	Nunawading	1	10:43	19:32	12:33	10:13	78.77%	91.25%	2,741
			2	23:04	62:48	31:37	21:19			1,834
Monash	Av	Nyah West	1	18:00	34:54	20:19	19:17	37.95%	39.16%	166
			2	28:06	58:32	32:58	22:34			97
Strachan	St	Oak Park	1	11:28	20:15	13:17	10:40	75.04%	89.42%	6,351
			2	25:47	94:52	40:58	30:50			3,656

Branch address										
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Adco	Gv	Ocean Grove	1	14:25	26:24	16:29	14:58	53.79%	62.44%	1,253
			2	23:38	58:48	30:53	27:21			634
Bilton	St	Omeo	1	36:01	64:04	38:24	26:29	13.33%	24.32%	45
			2							28
Boundary	Rd	Orbost	1	21:00	43:12	25:10	17:20	24.50%	66.32%	200
			2	30:44	97:54	46:20	18:13			123
Clay	Av	Ouyen	1	13:44	36:14	19:36	17:31	54.62%	58.77%	130
			2	17:49	51:56	24:53	16:50			100
Main	St	Pakenham	1	11:26	25:04	14:21	12:52	66.82%	68.86%	2,779
			2	20:23	47:41	25:53	20:53			1,336
Gaffney	St	Pascoe Vale	1	9:57	17:40	11:35	9:35	83.49%	92.78%	842
			2	22:48	58:02	31:04	26:09			470
Algerian	St	Patchewollock	1							5
			2							3
Langford	Pde	Paynesville	1	13:46	34:34	18:19	11:19	52.88%	81.94%	452
			2	26:26	71:14	35:25	16:01			226
Martin	St	Penshurst	1	13:17	28:36	19:10		56.25%		32
			2							22
Dunnings	Rd	Point Cook	1	11:10	20:56	13:16	11:35	74.62%	82.13%	3,073
			2	22:38	57:28	30:34	22:17			1,846
Princes	Hwy	Port Fairy	1	13:47	27:27	15:56	15:05	56.73%	70.73%	208
			2	22:35	59:23	31:10	20:21			137
New	St	Portland	1	9:25	19:34	11:25	12:29	82.25%	80.84%	524
			2	15:28	61:20	26:59	16:10			400

Branch address										
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Gilbert	Rd	Preston	1	10:55	20:13	12:49	9:56	76.86%	91.23%	2,787
			2	26:55	75:25	37:16	24:11			1,527
Ovando	St	Preston	1	10:29	18:59	12:33	9:47	79.32%	91.36%	2,597
			2	22:29	64:36	31:56	21:24			1,629
Swinbourne	Av	Rainbow	1							13
			2							11
Eucumbene	Dr	Ravenhall	1	13:00	22:22	14:35	11:05	63.47%	83.25%	2,707
			2	26:35	67:40	35:14	15:37			568
Crown	St	Richmond	1	10:21	19:01	12:15	9:39	79.25%	91.37%	3,162
			2	26:36	62:27	33:32	23:15			2,263
Erin	St	Richmond	1	8:28	14:04	9:19	8:44	92.61%	95.46%	514
			2							3
Maroondah	Hwy	Ringwood	1	10:43	18:54	12:24	10:25	77.56%	88.00%	2,700
			2	21:48	55:51	28:57	20:08			1,881
Mt Dandenong	Rd	Ringwood East	1	11:22	19:01	12:49	10:16	76.49%	88.50%	2,110
			2	12:51	40:22	16:39				33
Latje	Rd	Robinvale	1	13:59	33:51	18:01	14:34	56.14%	68.82%	228
			2	18:58	43:59	24:19	18:23			172
Queen	St	Rochester	1	19:21	36:09	21:17	18:53	34.29%	47.84%	350
			2	25:54	52:56	31:10	23:59			187
Main	St	Romsey	1	16:51	30:40	18:51	19:25	42.04%	42.50%	421
			2	25:08	58:00	32:16	24:10			188
Murray-Anderson	Rd	Rosebud	1	11:37	21:54	13:28	12:14	72.20%	77.33%	2,622
			2	19:03	50:41	25:57	19:53			1,008

Branch address										
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Wellington	Rd	Rowville	1	11:02	18:51	12:38	10:41	79.20%	88.72%	1,774
			2	21:48	58:42	29:30	22:34			1,174
Cunninghame	St	Sale	1	11:06	31:27	16:03	13:55	61.99%	72.03%	1,368
			2	19:18	81:27	33:55	21:04			716
Best	St	Sea Lake	1	18:36	41:02	21:31	21:13	40.74%	47.56%	108
			2	24:29	68:41	32:32	22:32			63
Sir Laurence	Dr	Seaford	1	10:55	18:37	12:23	10:57	80.10%	87.20%	3,096
			2	20:48	54:42	27:47	21:10			2,076
Bridge	St	Sebastopol	1	10:32	21:35	12:53	12:43	76.62%	78.76%	1,206
			2	20:11	55:19	27:58	20:01			734
Callen	St	Seymour	1	12:53	29:53	16:28	15:04	56.89%	64.66%	740
			2	19:51	45:42	25:21	22:02			433
Wyndham	St	Shepparton	1	11:06	25:20	14:16	14:10	71.24%	75.38%	3,254
			2	20:25	66:03	32:04	19:32			1,845
Montgomery	St	Skipton	1	20:34	26:43	19:31	22:26	27.85%	38.78%	79
			2				22:59			28
Guelph	St	Somerville	1	12:03	33:45	14:58		69.23%		39
			2							23
Hotham	Rd	Sorrento	1	14:16	24:29	15:59	13:08	54.99%	70.47%	851
			2	26:01	56:57	30:48	24:13			420
Brady	St	South Melbourne	1	9:20	17:58	10:59	10:07	84.15%	88.25%	896
			2	23:59	59:36	30:52	23:20			764
Coventry	St	South Melbourne	1	9:45	18:12	11:25	9:34	82.49%	92.43%	2,622
			2	22:44	58:46	30:36	21:37			1,867

Branch address										
Street name	Street type	Suburb	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Westall	Rd	Springvale	1	11:15	18:59	12:30	10:25	77.51%	91.43%	1,196
			2				19:34			18
Springvale	Rd	Springvale South	1	10:15	18:32	11:53	9:50	82.20%	92.56%	1,904
			2	23:23	61:49	31:50	22:09			1,044
Dundas	St	St Arnaud	1	19:25	43:37	23:17	20:40	36.52%	52.00%	178
			2	33:28	85:02	44:17	24:15			141
Pakington	St	St Kilda	1	9:07	16:47	10:56	9:17	86.18%	92.74%	4,283
			2	22:36	64:40	31:35	22:05			2,158
Victoria	St	Stawell	1	10:18	29:29	14:59	15:19	64.07%	66.15%	540
			2	20:51	62:52	32:19	18:51			408
Shields	St	Sunbury	1	11:39	26:30	14:38	11:11	68.42%	84.08%	2,739
			2	23:39	64:37	32:12	18:23			1,469
Boundary	Rd	Sunshine West	1	12:45	22:36	14:50	10:40	65.96%	86.84%	1,519
			2	25:18	65:30	34:08	23:55			1,058
Nyah	Rd	Swan Hill	1	9:10	24:49	12:50	11:42	75.11%	82.60%	908
			2	15:48	73:10	30:50	14:40			479
Wondah	St	Tallangatta	1	20:14	45:02	24:55	20:51	31.25%	50.28%	192
			2	31:09	82:39	43:13	22:24			105
Hampden	St	Terang	1	16:18	30:53	17:53	15:16	47.37%	62.18%	228
			2	21:43	58:41	30:28	20:22			177
Mahoneys	Rd	Thomastown	1	11:30	20:45	13:20	10:47	72.07%	88.77%	1,901
			2	24:42	78:36	37:36	22:55			963
Ring	Rd	Tidal River	1							8
			2							8

Branch address										
Street name	Street type	Suburb	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Wark	St	Timboon	1	26:14	43:11	26:10	19:53	18.40%	42.11%	125
			2	27:01	54:23	31:37	22:00			92
Grossmans	Rd	Torquay	1	12:41	31:40	16:38	16:23	59.77%	55.45%	875
			2	27:47	60:52	33:41	28:11			636
Campbell	St	Traralgon	1	11:46	28:41	15:55	13:12	62.42%	75.08%	1,493
			2	24:08	81:30	37:28	24:13			967
Tone	Rd	Wangaratta	1	12:02	34:24	17:16	15:48	60.83%	67.80%	1,805
			2	27:16	81:29	39:25	24:49			1,170
Mountain	Hwy	Wantirna	1	11:12	20:05	13:15	10:28	76.03%	90.09%	3,092
			2	22:39	57:57	30:23	22:19			2,255
Lyle	St	Warracknabeal	1	16:34	42:22	21:35	17:58	46.02%	54.67%	226
			2	31:00	84:37	41:19	25:56			172
Queen	St	Warragul	1	15:05	33:10	18:29	14:51	49.38%	69.64%	1,766
			2	25:26	77:35	36:36	22:33			945
Raglan	Pde	Warrnambool	1	10:04	21:48	12:36	11:01	76.51%	85.04%	1,941
			2	17:28	64:44	29:08	17:09			1,131
Learmonth	Rd	Wendouree	1	11:48	26:11	15:07	13:12	64.76%	74.56%	1,186
			2	20:50	57:32	29:59	22:02			691
Bridge	St	Werribee	1	11:13	18:57	12:52	9:52	79.00%	92.17%	1,757
			2	19:12	49:19	26:46	17:48			920
Roden	St	West Melbourne	1	9:08	16:01	10:25	8:47	88.02%	94.31%	818
			2	22:51	57:24	30:30	22:49			613
McGaffins	Rd	West Wodonga	1	12:21	26:42	15:28		65.88%		507
			2	20:36	76:51	35:30				363

Branch address										
Street name	Street type	Suburb	Final dispatch code	50th percentile response time (mm:ss)	90th percentile response time (mm:ss)	2013-14 Average response time (mm:ss)	2008-09 Average response time (mm:ss)	2013-14 Code 1 response within 15 minutes	2008-09 Code 1 response within 15 minutes	Total valid and available samples used to calculate response time in 2013-14
Western	Av	Westmeadows	1	10:41	19:45	12:14	9:18	77.86%	92.02%	786
			2	22:11	63:51	33:11	25:34			478
Millennium Park	Dr	Whittlesea	1	13:28	25:27	15:17	12:39	60.80%	77.02%	1,199
			2	26:44	73:03	35:50	22:02			630
South	St	Wodonga	1	11:49	27:18	15:06	13:21	68.02%	79.67%	1,651
			2	19:27	71:26	31:50	18:24			771
McKenzie	St	Wonthaggi	1	13:25	30:41	16:33	13:59	57.24%	69.62%	1,326
			2	20:15	59:18	29:19	24:12			660
Nicholson	St	Woodend	1	16:52	29:49	18:20	16:24	41.91%	52.62%	606
			2	24:10	51:27	30:01	22:20			503
Coster	St	Woods Point	1							12
			2							2
Yarra	St	Yarra Junction	1	13:58	27:06	16:16	14:12	55.34%	65.44%	1,518
			2	24:16	51:35	28:35	21:03			749
Commercial	Rd	Yarram	1	18:50	40:12	22:35	17:32	35.13%	48.64%	279
			2	31:08	77:22	41:44	20:22			155
Burley	Rd	Yarrawonga	1	12:10	29:18	15:24	13:14	65.07%	71.40%	753
			2	18:00	52:14	25:55	17:49			442
Snodgrass	St	Yea	1	21:22	40:50	23:53	24:25	31.73%	35.22%	271
			2	31:04	65:52	35:52	26:52			147

Notes:

Measures not calculated where sample size is less than 30 as results are not statistically significant.

2008-09 data for rural branches is based on Patient Care Report data.

Multiple responding units can operate from the same branch. Teams can move between branches. The above reflects responding units' branch location during 2013–14.

Data glossary

Response time

Response time measures the time from a triple zero (000) call being answered and registered by the Emergency Services Telecommunications Authority (ESTA) to the time the first Ambulance Victoria resource arrives at the incident scene. Response times are based on data sourced from the Computer Aided Dispatch (CAD) system.

Final dispatch code

A code is assigned to an incident, indicating the urgency of an ambulance response. The code originally assigned by the dispatcher may change during the life of the incident. Reporting is based on the final dispatch code allocated to each incident.

Code 1 incident

Patients deemed to require an urgent 'lights and sirens' response are classified as 'Code 1'.

Code 2 incident

Code 2 incidents are acute but not time critical (do not receive a 'lights and sirens' response).

Response ≤ 15 min

This is the percentage of Code 1 first responses arriving within 15 minutes or less. This is calculated by dividing the number of Code 1 first responses arriving in 15 minutes or less by the total number of Code 1 first arrivals. When Ambulance Victoria responds to an incident, it sometimes dispatches multiple Ambulance Victoria resources to that incident. 'First response' refers to the first Ambulance Victoria resource to arrive at the incident scene.

Average response time

This is the average response time for the area being reported, which is calculated by dividing the sum of the response times by the number of response times within the area being reported. The average response time is provided in minutes and seconds.

LGA

In 2013–14 local government in Victoria comprises 79 municipal districts. They are often referred to as local government areas (LGAs). The number of LGAs and their boundaries can change over time. LGAs are as defined by Local Government Victoria, which is part of the Department of Transport, Planning and Local Infrastructure.

Urban Centres Localities (UCLs)

These are geographical areas based on the Australian Bureau of Statistics Urban Centres and Localities boundaries and residential population. Ambulance Victoria reports performance for larger UCLs where population exceeds 7,500 persons.

Response time percentile

A response time percentile is a measure that tells us what percentage of patients experienced a response time at or below a certain time.

For example, a 50th percentile (also known as the median) of 10 minutes means that 50 per cent of patients experience a response time of 10 minutes or less. Similarly a 90th percentile of 20 minutes means that 90 per cent of patients experience a response time of 20 minutes or less.

Community Emergency Response Team (CERT)

This is a unit without transport capability crewed by trained volunteers and providing an on-call response to higher priority incidents. CERTs are always backed up by a transport-capable unit. CERTs do not operate from branches.