

- ADDENDUM -

- Operations & Transit Committee -

Council Chambers @ 5:00 p.m.

- October 15, 2012 -

OTES-26 CRITICAL TRIAGE ACUITY SCALE – AMBULANCE RESPONSE STANDARDS – Revised Report

THAT report OT101240 "Critical Triage Acuity Scale - Ambulance Response Standards" be received;

AND THAT the Ambulance Response Standards as set out in report OT101240 be approved.

OTES-27 GUELPH STORM MUTUAL SERVICES AGREEMENT 2012/2013 – Revised Report

THAT the Operations, Transit & Emergency Services Committee Report OT101237 Guelph Storm Mutual Services Agreement 2012/2013 dated October 15, 2012 be received;

AND THAT the Mayor and City Clerk be authorized to sign the Mutual Services Agreement with the Guelph Storm satisfactory to the Executive Director of Operations, Transit & Emergency Services or his or her designate and the City Solicitor or his or her designate;

AND THAT all advertising copy on communication collateral associated with this agreement shall comply with existing City policy.

AND THAT the agreement comes into effect immediately upon execution.

OTES-29 ONTARIO ROAD NARROWING – UPDATE

Delegation:

- Antonio Leo

Correspondence:

- Danny Franceschi

OTES-31 GOODWIN DRIVE – YEAR ROUND OVERNIGHT PARKING

Delegation:

- Ian Raynor, Property Manager, WCC#157

Correspondence:

- Cheryl & Jake Kuiper

OTES-32 DOWNTOWN GUELPH – TRANSIT

Delegations:

- Marty Williams, Executive Director, Downtown Guelph Business Association
- Chris Ahlers
- Nicole Priorier
- Gerry O'Farrell

Correspondence:

- Howard Budd, President, Budd Store Co. Limited

THAT the report of Operations, Transit & Emergency Services dated October 15, 2012, entitled 'Downtown Guelph – Transit', be received.

COMMITTEE REPORT



TO **Operations, Transit & Emergency Services Committee**

SERVICE AREA Operations, Transit & Emergency Services
DEPARTMENT Emergency Services
DATE October 15, 2012

SUBJECT Critical Triage Acuity Scale - Ambulance Response Standards

REPORT NUMBER OT101240

SUMMARY

Purpose of Report:

To establish in accordance with the Ambulance Act, a Performance Plan for the next calendar year respecting response times.

Committee Action:

To recommend approval of the proposed Response Time Performance Plan for the coverage area to Council..

RECOMMENDATION

"THAT report OT101240 Critical Triage Acuity Scale - Ambulance Response Standards be received

AND THAT the Ambulance Response Standards as set out in report OT101240 be approved.

BACKGROUND

Recent changes to Provincial Legislation, Regulation 267/08 of the Ambulance Act, requires the delivery agent responsible for ensuring the proper provision of land ambulance services to establish in accordance with the Act, a response time performance plan for the next calendar year. Guelph – Wellington Emergency Medical Service has created the required plan which must be submitted to the Director of Emergency Health Services in October 2012 and annually by October 1st for each year after. Regulation 267/08 was introduced in 2009 but the implementation of the requirement was delayed by 2 years.

Under this new legislation, Council is given the authority to establish **response time targets** and **target performance levels** for the coverage area of the City of Guelph and Wellington County.

Previous Legislated Response Time Performance Target

The previous legislated performance standard for all land ambulance delivery in Ontario was based on the historical “90th percentile” response times for ambulance calls dispatched for possible life-threatening “Code 4” emergencies occurring in the coverage area in 1996.

Shortcomings with the “90th percentile” performance indicator include:

- The performance provided in 1996 was not studied or reviewed to ensure that it was an appropriate target or reflective of the needs of the community.
- There was no input from the local government in the setting of this standard.
- The 90th percentile concept is confusing and often is misunderstood as the average response time.
- The standard only considered calls dispatched as “Code 4” for life-threatening emergencies. The new requirement will provide for an opportunity to assess a variant of key performance indicators KPIs in order to better evaluate the overall performance of land ambulance services provided.

REPORT

The new response time performance plan includes six medically validated categories of responses, each of which can have a different response time target and performance level to that target. The response time target for two of the categories has been set by the Ministry Of Health and Long Term Care (MOHLTC), but the performance level to the target can be determined by Council. The targets and performance level for the other four categories can be set and maintained or modified annually by Council as recommended by staff. Having set the targets, staff will manage and ensure the land ambulance system is operating as planned.

Timelines

- October, 2012 and October 1 every year after – response time plan to be provided to the MOHLTC.
- March 31, 2014 and every year after – The ambulance provider must report actual response times achieved against forecasted response time percentages to the MOHLTC.

Call Categories

Regulation 267/08 requires that the Response Time Performance Plan set response time targets for patients that are categorized using the Canadian Triage Acuity Scale (CTAS). The scale was designed to define patients’ needs in the hospital Emergency Departments so as to allow for timely care and to allow Emergency Departments to evaluate their acuity level, resource needs and performance against certain operating “objectives”. CTAS was introduced into the EMS system in Ontario in 2003 and all paramedics in Ontario have been educated in the scoring system. In addition to the CTAS levels, the Regulation requires the reporting of the compliance to a preset response time of six minutes for a defibrillator to reach the victim of a Sudden Cardiac Arrest.

Council has the authority to set the response times targets to all levels of CTAS categories except for CTAS level 1 and to Sudden Cardiac Arrest which has been set at 8 minutes and 6 minutes respectively by the MOHLTC.

CTAS includes 5 levels of acuity:

- Level 1 – requires resuscitation, i.e. cardiac arrest
- Level 2 – requires emergent care, i.e. major trauma
- Level 3 – requires urgent care, i.e. mild shortness of breath
- Level 4 – requires less urgent care, i.e. minor trauma
- Level 5 – requires non-urgent care, i.e. sore throat

The sixth target is the measurement of response times to a call for a patient suffering a sudden cardiac arrest and is different than CTAS level 1 as it includes non Paramedic responders (e.g. Fire Fighters, members of public) using defibrillators. The target of 6 minutes has been set by the MOHLTC but the compliance rates to that standard can be set by Council.

The categories are further defined in Appendix B, Patient Acuity Category Descriptions.

The Ambulance Response times are affected by several factors:

- Severity of the patient's condition, as determined by the MOHLTC dispatch Centre in speaking with the 911 caller. This will affect the priority on which the ambulance is dispatched and whether emergency warning systems are activated enroute to the call.
- The proactive deployment of ambulance resources at appropriate locations to minimize response times.
- Utilizing processes and policies to maximize the availability of ambulances within the system, and
- Reducing the interval times an ambulance is involved in a response from notification to conclusion of the emergency.

The targets were established by applying response time factors and new CTAS requirements to response data available from 2011. Note that the 2011 performance as recorded in the following chart is shown only to demonstrate the potential to achieve the stated goals.

Staff recommend the following response time standards be adopted for the 2013 calendar year:

****See appendix "B" for description of CTAS levels***

	Response Time Target	Target Performance Level (% of responses Guelph Wellington EMS expects to meet the response time to emergencies)	Guelph Wellington EMS rate of achieving target in 2011
CTAS Level 1	8 minutes (set by MOHLTC)	65%	62%
CTAS Level 2	10 minutes	75%	75%
CTAS Level 3	15 minutes	90%	92%
CTAS Level 4	15 minutes	90%	91%
CTAS Level 5	20 minutes	90%	96%

RATIONALE

CTAS Level 1 – Of the over 16,900 patients seen by Guelph Wellington EMS in 2011, approximately 340 (2%) were classified as CTAS 1. The 65% Performance Level was set based on response times to those calls. Staff will continue to maximize the current resources by adjusting deployment and otherwise managing the service to achieve as high as possible compliance with this Performance Level.

CTAS Level 2 - The proposed ten minute response time target is appropriate for these patients who have serious complaints that could cause them to deteriorate rapidly. Guelph Wellington EMS saw approximately 3,550 CTAS 2 patients in 2011 (21% of patients). These calls are typically dispatched as code 4 (emergency, lights and sirens utilized). Historical data suggests that we can achieve this Response Time Target in 75% of cases in 2013.

CTAS Level 3 - The proposed Response Time Target and Performance Level are consistent with current performance. These patients historically represent more than 50% of the patients, and included over 9,300 in 2013. The calls may be dispatched as code 4 (emergency, lights and sirens utilized) or code 3 (urgent, but not life threatening, no lights and sirens utilized) given the level of the severity of the complaints, staff propose the current Response Time Target and Performance Level is appropriate.

CTAS Level 4 - The proposed Response Time Target and Performance Level are consistent with current performance. There were approximately 3,500 patients categorized at this level in 2011 (approximately 20%). The calls are typically dispatched as code 3 (urgent, but not life threatening, no lights and sirens utilized). Given the lower acuity of the complaints, staff propose the current response level is appropriate.

CTAS Level 5 – The proposed Response Time Target and Target Performance Level are slightly lower than current performance. These patients historically represent less than 3% of total patients, including in 2011 when the number was approximately 330. The calls are typically dispatched as code 3 (urgent, but not life threatening, no lights and sirens utilized) or code 1 (routine). Given the low acuity of the complaints, ambulances enroute to these calls can be diverted to higher acuity patients where appropriate.

Responding to Sudden Cardiac Arrests (SCA)

Response Time Targets to this performance measurement are not specifically the response time for an **ambulance** to arrive. This function can be completed by Fire department responders, other emergency responders or members of the public utilizing a Public Access Defibrillator (PAD device).

Guelph Wellington Emergency Medical Service works in partnership with local fire services in Guelph and Wellington County. Through Tiered Response Agreements with each of those services, Fire resources that are available and that may be closer to a call involving a sudden cardiac arrest are dispatched to these calls.

Guelph Wellington EMS works in partnership with the Ontario Heart and Stroke Foundation to utilize grant funding to place Public Access Defibrillators in locations throughout the coverage area. This partnership improves the availability of Defibrillators and thereby enhances compliance to SCA.

It is difficult to estimate projected compliance to responses to SCA as data collection and historical information is not easily accessed. Determining projected compliance rates requires comparing multiple forms of data from numerous agencies.

Staff manually collected and reviewed several sources of data from Sudden Cardiac Arrest calls from March to September, 2012. This analysis established that a defibrillator arrived at the scene within 6 minutes approximately 63 percent of the time.

	Response Time Target	2013 Target Performance Level	Estimated performance to this standard based on 6 month review of multiple data points
Sudden Cardiac Arrest	6 minutes (set by MOHLTC)	>/= 65%	Approximately 63%

In addition to reviewing our own historical data, Guelph - Wellington Emergency Medical Service has benchmarked proposed standards against response time standards from neighbouring services. The following chart represents those response times proposed or reported to the responsible councils as of the preparation of this report.

	Grey	Hamilton	Peel	Niagara	Halton	Essex
CTAS 1	8 minutes 50%	8 minutes 75%	8 minutes 65%	8 minutes 80%	8 minutes 75%	8 minutes 75%
CTAS 2	15 minutes 90%	10 minutes 75%	11 minutes 90%	11 minutes 90%	10 minutes 75%	10 minutes 90%
CTAS 3	30 minutes 90%	15 minutes 75%	15 minutes 90%	15 minutes 90%	15 minutes 75%	12 minutes 90%
CTAS 4	30 minutes 90%	20 minutes 75%	15 minutes 90%	20 minutes 90%	20 minutes 75%	14 minutes 90%
CTAS 5	30 minutes 90%	25 minutes 75%	15 minutes 90%	30 minutes 90%	25 minutes 75%	14 minutes 90%
SCA	6 minutes 40%	6 Minutes 75%	6 minutes 65%	6 minutes 55%	6 minutes 55%	6 minutes 55%

In conclusion, staff will continue to monitor EMS systems and performance in other communities and make recommendations on appropriate Response Time Targets and Target Performance Levels for this Land Ambulance Service Area on an annual basis as required by the Act.

ALTERNATIVES FOR CONSIDERATION

Council may choose to set longer Response Time Targets or lower Performance Levels than proposed. A lower Time Target would be achieved at a greater Target Performance Level, but would not positively position EMS resources when compared to best practices for medical care, community needs and circumstance. Further, one must carefully weigh the potential risks to public safety should the Time Targets be lengthened or Performance Levels be reduced.

On the other hand, Council may choose to set shorter Response Time Targets or higher Performance Levels than proposed. Significant decreases in Response Time Targets (and increases in Target Performance Levels) would require additional EMS resources.

CORPORATE STRATEGIC PLAN

2.2 Deliver public services better.

2.3 Ensure accountability, transparency and engagement.

FINANCIAL IMPLICATIONS

There are no direct financial implications of this report.

DEPARTMENTAL CONSULTATION

Consultation conducted internally with Emergency Services.

COMMUNICATIONS

A media release and Question and Answer sheet will be coordinated through Corporate Communications. The County of Wellington is aware this matter is before Committee on this date.

ATTACHMENTS

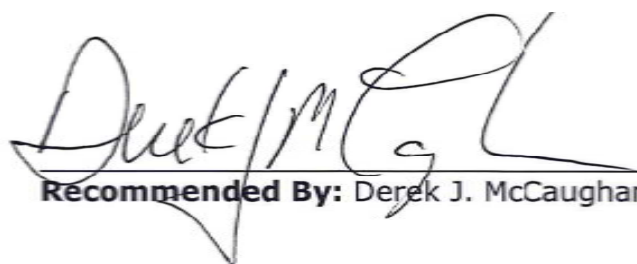
- Appendix A - Ontario Regulation 267/08
- Appendix B - Patient Acuity Category Descriptions

Prepared By: Stephen Dewar, Chief, EMS Division



Reviewed By:

Shawn Armstrong
General Manager
Emergency Services
519-822-1260 x 2125
shawn.armstrong@guelph.ca



Recommended By: Derek J. McCaughan, Executive Director

Ambulance Response Time Performance Plan (RTPP)

Appendix A

ONTARIO REGULATION 267/08

made under the

AMBULANCE ACT

Made: May 27, 2008

Approved: July 23, 2008

Filed: July 30, 2008

Published on e-Laws: July 31, 2008

Printed in *The Ontario Gazette*: August 16, 2008

Amending O. Reg. 257/00

(GENERAL)

Note: Ontario Regulation 257/00 has previously been amended. Those amendments are listed in the Table of Current Consolidated Regulations – Legislative History Overview which can be found at www.e-Laws.gov.on.ca.

1. (1) Ontario Regulation 257/00 is amended by adding the following heading immediately before section 22:

PART VIII RESPONSE TIME PERFORMANCE PLANS

(2) Section 22 of the Regulation is revoked and the following substituted:

22. In this Part,

“notice” means notice given to a land ambulance crew by a land ambulance communication service of a request;

“request” means a request made to a land ambulance communication service for ambulance services that are determined to be emergency services by the communication service at the time of the request.

23. (1) In this section,

“response time” means the time measured from the time a notice is received to the earlier of the following:

1. The arrival on-scene of a person equipped to provide any type of defibrillation to sudden cardiac arrest patients.
2. The arrival on-scene of the ambulance crew.

(2) No later than October 1 in each year after 2009, every upper-tier municipality and every delivery agent responsible under the Act for ensuring the proper provision of land ambulance services shall establish, for land ambulance service operators selected by the upper-tier municipality or delivery agent in accordance with the Act, a performance plan for the next calendar year respecting response times.

(3) An upper-tier municipality or delivery agent to which subsection (2) applies shall ensure that the plan established under that subsection sets response time targets for responses to notices respecting patients categorized as Canadian Triage Acuity Scale (“CTAS”) 1, 2, 3, 4 and 5, and that such targets are set for each land ambulance service operator selected by the upper-tier municipality or delivery agent in accordance with the Act.

(4) An upper-tier municipality or delivery agent to which subsection (2) applies shall ensure that throughout the year the plan established under that subsection is continuously maintained, enforced and evaluated and, where necessary, updated, whether in whole or in part.

(5) An upper-tier municipality or delivery agent to which subsection (2) applies shall provide the Director with a copy of the plan established under that subsection no later than October 31 in each year, and a copy of any plan updated, whether in whole or in part, under subsection (4) no later than one month after the plan has been updated.

(6) An upper-tier municipality or delivery agent to which subsection (2) applies shall report to the Director, as required from time to time by the Director and on forms or in a manner provided or determined by the Director, on any matter relating to,

(a) the nature and scope of the plan established under that subsection or updated under subsection (4), and

Ambulance Response Time Performance Plan (RTPP)

Appendix A

(b) the establishment, maintenance, enforcement, evaluation and updating of the plan.

(7) Without limiting the generality of subsection (6), no later than March 31 in each year after 2011, an upper-tier municipality or delivery agent to which subsection (2) applies shall report to the Director on the following matters for the preceding calendar year:

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

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

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

(8) Without limiting the generality of subsection (6), an upper-tier municipality or delivery agent to which subsection (2) applies shall report to the Director on the performance of each land ambulance service operator selected by the upper-tier municipality or delivery agent in accordance with the Act in respect of the targets set for that operator under subsection (3).

24. (1) In this section,

“response time” means the time measured from the time a request is received to the time a notice is given respecting that request.

(2) No later than October 1 in each year after 2009, every land ambulance communication service shall establish a response time performance plan for the next calendar year that sets out the percentage of times that the communication service will give notice within two minutes of the time a request is received respecting sudden cardiac arrest patients or other patients categorized as CTAS 1.

(3) A land ambulance communication service to which subsection (2) applies shall ensure that throughout the year the plan established under that subsection is continuously maintained, enforced and evaluated and, where necessary, updated, whether in whole or in part.

(4) A land ambulance communication service to which subsection (2) applies shall provide the Director with a copy of the plan established under that subsection no later than October 31 in each year, and a copy of any plan updated, whether in whole or in part, under subsection (3) no later than one month after the plan has been updated.

(5) A land ambulance communication service to which subsection (2) applies shall report to the Director, as required from time to time by the Director and on forms or in a manner provided or determined by the Director, on any matter relating to,

(a) the nature and scope of every plan established under that subsection or updated under subsection (3); and

(b) the establishment, maintenance, enforcement, evaluation and updating of the plan.

(6) Without limiting the generality of subsection (5), no later than March 31 in each year after 2011, a land ambulance communication service to which subsection (2) applies shall report to the Director the percentage of times in the preceding calendar year that the communication service gave notice within two minutes of the time a request was received respecting sudden cardiac arrest patients or other patients categorized as CTAS 1.

2. This Regulation comes into force on the day it is filed.

Made by:

GEORGE SMITHERMAN

Minister of Health and Long-Term Care

Date made: May 27, 2008.

Ambulance Response Time Performance Plan (RTPP)

Appendix B – Reporting Categories

Regulation 267/08 requires that the Response Time performance plan sets response time targets for patients that are categorized using the Canadian Triage Acuity Scale (CTAS). The scale was designed to define patients' needs in the hospital Emergency Departments so as to allow for timely care and to allow Emergency Departments to evaluate their acuity level, resource needs and performance against certain operating "objectives". CTAS was introduced into the EMS system in Ontario and all paramedics in Ontario have been educated in the scoring system. CTAS includes 5 levels of acuity:

Level 1 - Resuscitation

Conditions that are threats to life or limb (or imminent risk of deterioration) requiring immediate aggressive interventions. Examples include cardiac or respiratory arrest, major trauma, shock states, unconscious patients, and severe respiratory distress. Hospital guidelines suggest that these patients when in the Emergency Department should be seen by a physician immediately. The ambulance response time target for CTAS Level 1 patients has been set by the MOHLTC at 8 minutes. The compliance percentage is determined by Council.

Level 2 - Emergent

Conditions that are a potential threat to life limb or function, requiring rapid medical intervention. Examples include head injury, cardiac-type chest pain or stroke. These patients should be seen by a physician within 15 minutes of arrival at the Emergency Department. The ambulance response time target and compliance with that target are both set by Council.

Level 3 - Urgent

Conditions that could potentially progress to a serious problem requiring emergency intervention. Examples include moderate asthma, abdominal pain, or vomiting and diarrhea in a patient less than 2 years old. These patients should be seen by a physician within 30 minutes of arrival in the Emergency Department. The ambulance response time target and compliance with that target are both set by Council.

Level 4 - Less Urgent (Semi urgent)

Examples include urinary symptoms, mild abdominal pain, chronic back pain or earache. These patients should be seen by a physician within 60 minutes of arrival in the Emergency Department. The ambulance response time target and compliance with that target are both set by Council.

Level 5 - Non Urgent

Conditions that may be acute but non-urgent or chronic and which could potentially be referred to other areas of the hospital or health care system. Examples include sore throat, psychiatric concerns with no suicidal ideation. These patients should be seen by a physician within 120 minutes of arrival in the Emergency Department. The ambulance response time target and compliance with that target are both set by Council.

Source:

http://www.calgaryhealthregion.ca/policy/docs/1451/Admission_over-capacity_AppendixA.pdf

Ambulance Response Time Performance Plan (RTPP)

Appendix B – Reporting Categories

In addition, Regulation 267/08 requires that the Response Time actual performance report include “The percentage of time that a person equipped to provide any type of defibrillation has arrived on-scene to provide defibrillation to sudden cardiac arrest patients within six minutes of the time notice is received.” This response time can be met by a member of the public using a Public Access Defibrillator, an Emergency Responder or a paramedic.

COMMITTEE REPORT



TO **Operations, Transit & Emergency Services Committee**

SERVICE AREA Operations, Transit & Emergency Services

DEPARTMENT Transit Services

DATE October 15, 2012

SUBJECT Guelph Storm Mutual Services Agreement 2012/2013

REPORT NUMBER OT101237

SUMMARY

Purpose of Report:

To summarize the 2012/2013 agreement between Guelph Transit and the Guelph Storm for the exchange of services.

Committee Action:

Make a recommendation to Council to approve the Mutual Services Agreement between Guelph Transit and the Guelph Storm for the 2012/2013 hockey season.

RECOMMENDATION

THAT the Operations, Transit & Emergency Services Committee Report OT101237 Guelph Storm Mutual Services Agreement 2012/2013 dated October 15, 2012 be received;

AND THAT the Mayor and City Clerk be authorized to sign the Mutual Services Agreement with the Guelph Storm satisfactory to the Executive Director of Operations, Transit & Emergency Services or his or her designate and the City Solicitor or his or her designate;

AND THAT all advertising copy on communication collateral associated with this agreement shall comply with existing City policy.

AND THAT the agreement comes into effect immediately upon execution.

BACKGROUND

From 2006 to 2011 Guelph Transit and Guelph Storm exchanged services on an informal basis whereby Guelph Transit provided free transit service to passengers

who were travelling to downtown Guelph for the Storm Game on Friday nights in return for a variety of print and electronic media placements in Guelph Storm advertisements at no cost to Guelph Transit.

There was no exchange of funds associated with past arrangements. The arrangement was formalized for the 2011/2012 hockey season through the signing of a mutual services agreement. The agreement was signed for a one year period only. At that time, staff indicated it would develop a policy in 2012 that would provide a solid defensible framework for the City to assess future cross promotional and/or commercial opportunities. Unfortunately, given work priorities, this initiative remains outstanding. Policy development, including possible delegation of authority consideration, is anticipated to occur as part of the 2013 work plan.

REPORT

From 2006 to 2011 Guelph Transit and Guelph Storm have exchanged services informally to the mutual benefit of each party. The key services that have been exchanged are summarized in Appendix 1.

The exchange of services was formalized through a one-year agreement in 2011/2012. Services were exchanged during this period in accordance with the agreement. Guelph Transit and the Guelph Storm have held discussions regarding the exchange of service for the 2012/2013 season and both parties wish to continue to exchange services as in the past as the arrangement is mutually beneficial to both parties.

The proposed agreement is provided in Appendix 2.

CORPORATE STRATEGIC PLAN

1.2 Develop collaborative work teams and apply whole systems thinking to deliver creative solutions.

2.1 Build an adaptive environment for government innovation to ensure fiscal and service sustainability.

3.2 Be economically viable, resilient, diverse and attractive for business.

FINANCIAL IMPLICATIONS

Based on the activities undertaken and services provided/received by each party, Guelph Transit and the Guelph Storm receive approximately the same financial value from this agreement.

DEPARTMENTAL CONSULTATION

Legal Services

COMMUNICATIONS

N/A

ATTACHMENTS

Appendix 1 - Summary of Services Provided/Received
Appendix 2 - Guelph Storm Mutual Services Agreement

Michael Anders

Prepared and Reviewed By:

Michael Anders
General Manager, Community Connectivity and Transit
Transit Services
519 822 1260 x2795
michael.anders@guelph.ca

Derek McCaughan

Recommended By: Derek McCaughan, Executive Director

From: DANNY FRANCESCHI

Sent: October 13, 2012 10:16 PM

To: Clerks

Cc: Ian Findlay; Mayors Office; Bob Bell; Jim Furfaro; Andy VanHellemond

Subject: Ontario St .

I just read the report on the narrowing of our street. There was no mention of the results of the survey that we filled out in the report. Do you really care about our opinions, or was it a waste of my time? I would like to know how my neighbours feel about the narrowing. I don't like it. If I'm in the minority, then I want to know. I won't complain about it anymore.

Danny Franceschi

From: jake kuiper
Sent: October 15, 2012 9:48 AM
To: Clerks
Cc: Todd Dennis; Karl Wettstein
Subject: GOODWIN DRIVE - Year Round Overnight On-Street Parking

This email letter is in support of 24 hour year round parking on Goodwin Drive.

Due to the shortage of parking spaces in the complex at 37 - 45 Goodwin Drive, I would like to see overnight parking on Goodwin Drive allowed on a permanent basis. We desperately need this on-street parking. There are many 2-car families in this complex who have only one designated parking spot, therefore, they require on-street parking. The city allows on street parking in the older areas of Guelph where there is a shortage of parking on private property. The same privilege should be extended to 37 - 45 Goodwin Drive residents in the new south-end also.

Here are some suggestions to make the area safer and less congested:

To improve the sight lines at 37-45 Goodwin Driveway, take away one additional parking spot on each side of the driveway.

To improve the congestion at the same point, eliminate the bus stop at the corner of Darling and Goodwin. There is a bus stop one block to the east of Darling and Goodwin, and another one 2 blocks to the west.

CHERYL & JAKE KUIPER

INFORMATION REPORT



TO **Operations, Transit & Emergency Services Committee**

SERVICE AREA Operations, Transit & Emergency Services
DEPARTMENT
DATE October 15, 2012

SUBJECT Downtown Guelph - Transit
REPORT NUMBER OT101245

SUMMARY

Purpose of Report:

To advise Committee of recent dialogue between Guelph Transit and the Downtown Guelph Business Association.

Committee Action:

No action required.

BACKGROUND

With the introduction of the Guelph Transit Growth Strategy's new routes and the Guelph Central Station (GCS), the transit service provided to the downtown community has significantly changed. The new routes were developed after significant public consultation and implemented in January 2012. GCS opened in May 2012 and at that time, Guelph Transit relocated from St. George's Square after decades of use.

Shortly after the relocation of Transit from St. George's Square, staff began to hear from merchants, particularly in the Upper Wyndham Street area, that they were seeing significantly less customer traffic. Their customers allegedly cited the walking distance from GCS as the reason. As part of the new transit route structure, Guelph Transit does not have any routes using Wyndham Street from St. George's Square to Trafalgar Square.

REPORT

Staff, in conjunction with Councillors Findlay, Furfaro and Bell have been collaborating with a number of merchants and the Downtown Guelph Board of management to clearly understand the challenges the merchants are facing and to explore possible changes to the transit system that may provide some relief. Background information is contained in Appendix A.

While we have been able to take some steps, the impact will be minimal. It is clear from our assessment additional resources will be necessary if Council agrees the transit routes should be changed to place a number of them on upper Wyndham Street.

It is important to acknowledge there is no funding available in the 2012 approved operating or capital budget to undertake any of these initiatives. In staff's opinion, even if the funding was made available, the suggested route realignments will not significantly increase customer service nor result in incremental increase in ridership. If any action is to be considered, staff believe establishing a stop for Routes 12 & 13 on Woolwich Street, just south of Trafalgar Square would have the greatest impact from a cost/benefit perspective. As indicated in the appendix, this will cost approximately \$25,000 and the loss of approximately 3 parking spaces. Establishing this stop would bring riders to the top of Wyndham Street, eliminating the need for riders to walk across the Eramosa Road bridge and up the grade to Wyndham Street. This, in conjunction with the stop relocation for routes 2a and 2b would at least position all customers at the top of Wyndham Street significantly reducing walking distances. Staff will submit an expansion package for Council's consideration during the 2013 Budget deliberations.

FINANCIAL IMPLICATIONS

See Appendix A

DEPARTMENTAL CONSULTATION

Downtown Renewal Officer was involved in discussions with the Downtown Guelph Business Association.

COMMUNICATIONS

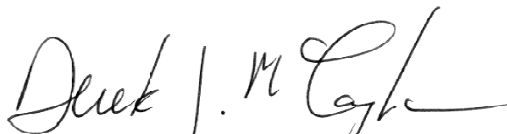
N/A

ATTACHMENTS

Appendix A – Key Transit Principles and Operational Requirements at Guelph Central Station (GCS)

Prepared By:

Michael Anders, General Manager, Community Connectivity and Transit
Derek McCaughan, Executive Director, Operations, Transit & Emergency Services



Recommended By: Derek McCaughan, Executive Director

Appendix A

Key Transit Principles and Operational Requirements at Guelph Central Station (GCS)

The following information provides some context to the assessment of additional bus service through St. George's Square.

- GCS opened in May 2012 with the associated movement of Guelph transit hub operations from St. Georges Square to the new facility. GCS is physically located approximately 250 metres from Quebec Street.
- GCS bus operations are comprised of a central island platform with a one-way circulation road on the north and south side leading into and out of the facility. Depending on whether a vehicle (route) uses the north or south side of the island, the efficient and safe flow of vehicles into/out of the facility is dictated to either the east or west.
- Guelph Transit utilizes a strategy of interlining which affords passengers travelling through GCS to other destinations within the community the opportunity not to have to transfer between routes at the hub. The interlining strategy adds a layer of complexity to the entrance/exit of vehicles at GCS as buses need to be stationed in the correct position to promote efficient flow. This is critical in terms of maintaining schedule adherence and minimizing run cycle dwell.
- The location of specific routes at specific platforms at GCS are designed to minimize walking distances for passengers transferring from one vehicle to continue their journey. Safety issues such as sight lines and pedestrian protection are critical in terms of the routing used by buses to enter/exit GCS.
- Moving to a 30 minute service frequency as we implemented the Transit Growth Strategy required Guelph Transit operate on traffic corridors that support the minimization of road and traffic dwell time. There are 6 traffic signals (2 pedestrian crossings) using Wyndam St. N to access GCS while there are only 4 traffic signals (2 pedestrian crossings) using Woolwich St. to access GCS. There is the potential to add 2 minutes to vehicle travel time during peak traffic and pedestrian periods by using Wyndam St. N. rather than Woolwich St. for routing.
- All curb space not required for the current Guelph Transit operations in St. George's Square has been converted into parking spaces to support commercial enterprises in the vicinity of the Square. Any additional transit traffic and bus stops in St. George's Square would have an impact on these new spaces.

Current Guelph Transit Service to St. George's Square (September 2012)

As of September 2012, the following routes stop in St George's Square. The selection of routes using St. George's Square reflect the transit principles and operating requirements listed above:

- Route 10 – outbound (Quebec Street)
- Community Bus North – outbound (Quebec Street)

- Route 10 – inbound (Wyndham Street)
- Route 11 – inbound (Wyndham Street)
- Route 20 – inbound Wyndham Street)

In addition to the routes going through St. George's Square, there are a number of bus stops close to the Square that provide further travel options on additional routes:

- Sleeman Centre stop (inbound) – served by Routes 2A, 3B 12 and 13 (230m to Wyndam N)
- River Run stop (outbound) – served by Routes 2B, 3A, 12, 13 and 20 (300m to Wyndam N)
- Cenotaph stop (outbound) – served by Routes 2B and 3A (105m to Wyndam N)

It should also be noted that the old Perimeter Route was split into bi-directional East and West Loops with the implementation of the Transit Growth Strategy providing 4 routes that service downtown that did not previously exist prior to January 2012.

Alternatives to Increase Service Levels for St. George's Square

Guelph Transit staff have assessed a number of options and alternatives to provide additional service and/or increase service levels to St. George's Square and Wyndam St. N. The assessment is summarized below.

i) Bus Stop Relocation

Staff assessed the feasibility of relocating existing bus stops in the vicinity of the Woolwich/Wyndam/Eramosa intersection to reduce walking distances to the north end of Wyndam St. - the feasibility of two specific locations was undertaken.

There was a stop in service at 228 Woolwich St. (Speedy Muffler) which only serviced Route 2A. Staff determined that it was possible to move the stop closer to downtown and relocated it to 160 Woolwich St. during the first week of October 2012. The new location also has the advantage of being able to service Route 3B on the inbound leg and allows a redundant stop to be closed at the corner of Suffolk and Norfolk. This change has significantly reduced walking distances to the north end of Wyndam St. for both these routes and Guelph Transit has already received positive feedback on this change from riders.

Staff also assessed the feasibility of locating a bus stop on Woolwich St. just south of the intersection of Woolwich/Wyndam/Eramosa to service Routes 2A, 3B, 12 and 13. Presently, the closest stop for inbound routes 12 and 13 is north of the bridge crossing Eramosa River. There is a significant change in grade between the roadway and sidewalk along this section of Woolwich. In order to make this stop location accessible, there would have to be major infrastructure installed to allow those using mobility aids to get from the street to the sidewalk. The cost of the required infrastructure is estimated at

\$25,000. A stop in this location would also require the removal of at least 3 parking spots because the turning radius required for a bus to turn left from Eramosa and get to the curb on Woolwich.

ii) Route Realignment

Staff reviewed the feasibility of rerouting routes 2A, 3B, 12 and 13 so they would use Wyndham St. instead of Woolwich St. This would allow these routes to stop in St. George's Square on the inbound leg to GCS. The assessment identified 3 main obstacles with this alternative:

- a) Unless Transit was provided travel priority through all signals and crossings on Wyndham, run time would be negatively affected as detailed above and the ability of these routes to get to GCS on time for transfers would be jeopardized.
- b) An additional stop would have to be established at the Post Office which will result in a significant loss of the new parking spots that were established when Guelph Transit moved to GCS. An additional stop is required as it is not operationally feasible to have seven routes use one stop in front of the IF Shoe store.
- c) Rerouting Wyndham St. will require the vehicles on these routes to enter GCS by making a "button hook" turn off MacDonnell to get the vehicles on the required platforms for the outbound trip. There is an increased risk of an incident between pedestrians and a Guelph Transit vehicle as this would be a blind turn for the operator. The pedestrian crossing is currently not signalized at the east end of the terminal.

The cost of the infrastructure to eliminate the issues identified above is in the range of \$150,000 to \$200,000. In addition, collateral communication material (routes brochures, info post inserts, system map etc.) would have to be updated at an estimated cost of \$20,000.

Another alternative to providing additional run time to use Wyndham St inbound is to reduce the length of these routes and eliminate service to the outlying portions of the route. This is not likely an acceptable solution to any areas of the community that lose direct service, and there would be significant pushback to establish feeder routes to provide at least some level of service. Each feeder route would require an additional 3 operators, 1 vehicle and associated operating and maintenance costs.

iii) Communications

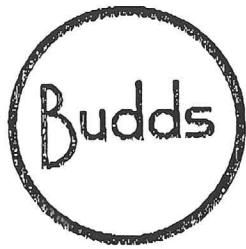
Guelph Transit staff have heard feedback that seniors are saying they cannot get downtown as a result of the implementation of the new routes in January. Staff understand that the extensive route revisions have likely been hard for seniors to assimilate and part of the current concern may be a communications issue. Guelph Transit is willing to work with the DGBA, downtown merchants and senior residences to prepare a program to ensure that these individuals have the appropriate information to be able to feel comfortable to travel on the new routes. Staff are willing to visit various sites around the City to deliver the program. Staff have begun the initial tasks associated with the preparation of the plan.

In addition, staff are examining what improvements to signage at both GCS and St. George's Square can be made to assist the travelling public in understanding and accessing travel options between the two locations. Preliminary work indicates that the physical signage can be revised at minimal cost.

iv) Other Options

As an alternative to rerouting service, staff examined the concept of implementing "spider routes" that would interconnect between base routes and have St. George's Square as the destination. Due to structure of the base system, a "spider route" would be required on both the east and west sides of the Woolwich/Norfolk spine. The implementation of "spider routes" cannot be accommodated within the existing Guelph Transit resource base and would require an additional vehicle and 3 operators for each route along with the associated operating and maintenance costs. The effectiveness of this option is limited as the additional vehicle could not intersect with many inbound routes.

Staff have also assessed the possibility of operating a shuttle using a mobility/conventional bus that would transfer riders between GCS and various points around St. George's Square and Wyndam St. N. The shuttle could be made available to anyone wanting a ride within a specified area in the downtown core. The shuttle would provide continuous service on a fixed route and hours of service would be aligned with the operating hours for businesses in the area. Although details on the specific routing need to be defined, it is envisioned that the shuttle would stop at a specific number of locations in throughout the downtown. Additional resources required to implement this type of service are estimated at 2 operators and associated operating, maintenance and possible capital costs for the vehicle.

**BUDD STORES CO. LIMITED**

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Guelph, Ontario
October 12, 2012

RECEIVED
OCT 15 2012
CITY CLERK'S OFFICE

Councilor Ian Findlay
Chair
Operations, Transit and Emergency Services Committee

Dear Councilor Findlay and Committee Members:

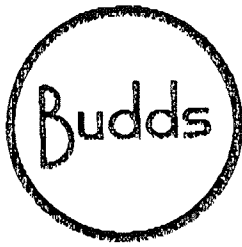
Regarding accessibility concerns of the
new Guelph Transit Schedule

I write this letter on behalf of my family, who have operated a respected business on Wyndham Street for eighty years; and our loyal staff who count on our ability to remain a viable business. Also for an important segment of people, who need to use transit to visit downtown as a destination for various reasons, and who feel at home in the downtown because of the special unique treatment they receive from downtown services and business people. Many of these people have lived in Guelph all or most of their lives. They raised their families, payed taxes and volunteered their time to make Guelph a very special city for everyone.

We all appreciate the beautiful new transit terminal and the general improvement the system has made. When most new systems are evaluated there are some adjustments that can be made to make things even better.

One of the unintended results of the new schedule has been a serious accessibility issue for many transit users. They are now unable to conveniently reach their needed destination downtown since most of the previous stops in St. Georges Square have moved farther away from the centre of the downtown.

The result of this change has unintentionally handicapped many businesses in the downtown and has underserved half of the downtown for transit users. Businesses in the downtown want to do business on a level playing field. Through no fault of our own we are unable to do so as a result of some of the new scheduling.

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Cities that have a transit system, have their buses making regular stops along the main business street in their downtowns as this is a major destination for many transit users. Guelph transit doesn't follow this procedure.

The city has some exceptional plans for the Square, Baker Street and other locations in the core hoping to encourage people to live, work and invest in the downtown. Private investors will be more encouraged to look at these proposals if they are satisfied that the complete downtown area has a well serviced transit system. People who live and work in downtowns tend to use public transit if it is convenient.

We have a beautiful downtown. "The Heart And Soul" of our city. It has been a gathering spot for many families. Those of us who work and live in the downtown are like "family." We need each other to succeed in order to continue to make our downtown a source of pride for the entire community.

All of us in the downtown are happy to work with Guelph Transit to make a good system serve the community even better. We hope you will consider the well thought out positive suggestions from the Downtown Guelph Business Association to further improve transit in our downtown so that it will continue to grow and prosper.

Thank you for your consideration.

Sincerely,

Howard Budd
President
Budd Stores Co. Limited