
HALDIMAND COUNTY

Report EMS-01-2024 Community Paramedic Enhancements For Consideration by Special Council on February 29, 2024



OBJECTIVE:

To obtain approval to reallocate a portion of the Community Paramedic funds provided by the Ministry of Health and Long-Term Care, (MOHLTC) for capital purchases, and to add 2 FTE for Permanent Community Paramedic Staff to the existing Community Paramedic program, to the 2024 Tax Supported Operating Budget.

RECOMMENDATIONS:

1. THAT Report EMS-01-2024 Community Paramedic Enhancements be received;
2. AND THAT the revisions to the MOHLTC Community Paramedic – Long-Term Care Funding allocation as outlined in Report EMS-01-2024 be approved;
3. AND THAT the budget as outlined in Report EMS-01-2024 for Community Paramedic – Long Term Care be approved;
4. AND THAT the 2024 Tax Supported Capital Budget be amended to include the one-time purchase of one (1) Community Paramedic Vehicle, diagnostic equipment, and office equipment, including two (2) laptops, (1) Cell Phone for new staff at a total cost of \$136,800 with 100% of the cost being covered by the MOHLTC Community Paramedic Funding;
5. AND THAT the 2024 Tax Supported Operating Budget include ongoing capital contributions to the Capital Replacement Reserve - Ambulance Fleet at a cost of \$11,250, with 100% of the cost being covered by the MOHLTC, pending continuation of the MOHTCL funding;
6. AND THAT the 2024 Tax Supported Operating Budget include a Council approved initiative to add 2.0 FTE Permanent Community Paramedics, at a cost of \$254,570, and related expenses for materials required for continual execution of the Community Paramedic Program at an annual estimated cost of \$15,500, with 100% of the cost being covered by MOHLTC.

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Approved: Cathy Case, Chief Administrative Officer

EXECUTIVE SUMMARY:

Staff are seeking approval for amendments to the Community Paramedic (CP) operating and current capital budgets for the addition of 2 FTE Community Paramedics. These positions would be 100% funded by the MOHLTC and follow the same process identified in Report EMS-02-2023, which was approved by Council (e.g., permanent full-time positions, dependant on MOHLTC funding - if funding were to cease, staff would bring a Report to Council to determine if the CP program continues, and at what staffing level. The enhancement would also include the purchase of 1 additional Community

Paramedic vehicle, and increase of medical equipment to outfit the unit, and additional office equipment, i.e., 1 laptop, 1 Toughbook laptop, and 1 cell phone. The MOHLTC has already approved the recommended budgetary items and has also received the approval to utilize existing Provincial funding for these expenses. This change is being made to accommodate a MOHLTC directive to increase the CP programs to 24/7. The existing funds available to the County are sufficient to cover all operating and capital expenses associated with the request.

BACKGROUND:

Haldimand County Paramedic Services (HCPS) is one of many Paramedic Services in the province of Ontario that currently has a temporary Community Paramedicine Program, offering specific supports for vulnerable residents. Community Paramedicine is recognized internationally as a best practise to help manage increased demands for paramedic services, as well as the demand on hospital visits and therefore, decreasing the need for “Hallway Medicine”. This is done through paramedic visits taking place at the source of the need, e.g., the patient’s home. This service approach has demonstrated benefits of reduced emergency calls; emergency department visits and hospitalizations; demand for long-term care beds; and, increase in overall patient well-being and satisfaction.

The program was introduced in Haldimand County in late 2020, in response to specific funding becoming available by the province. Provincial funding has continued annually thereafter, covering 100% of the program costs, which has grown from 2 temporary FTE to 7 permanent FTE today. Funding is in place until at least March 31, 2026. While the province has not yet confirmed funding will become permanent, it has signaled this may be coming in recent communications (written and at meetings) wherein it has advised services that funding currently in place should be considered as baseline funding (e.g., it is no longer being referred to as temporary funding). While this is encouraging and holds promise, as of yet, it does not formalize a commitment to permanent funding. Staff continue to plan for all scenarios.

As per new direction from the MOHLTC, each Community Paramedic Program must offer a 24/7 service as of March 31, 2024. Moving to this model is a requirement for the continuation of funding. This will allow clients to receive services on a 24/7 basis where currently only day visits are available, which is proving to be a challenge due to an increased client base. In the current model, any client requiring assistance after hours must call 911 to have an ambulance attend and thus defeats the purpose of the intention of the program, which is to reduce 911 responses. Moving to 24/7 will address this issue and will also allow CPs to offer better supports to LTC facilities in the area by providing visits and treatments at night (e.g., when client visits are not scheduled – the primary objective of extended hours) that would otherwise require an ambulance transfer to the hospital, (e.g., IV Therapy, blood draws).

As a result of this direction, and given the availability of funds, staff is proposing a series of capital and operating expenditures from the allocated Provincial funding. These expenditures—which are described in the Analysis section—have received the support of the primary funder (Province) in writing.

ANALYSIS:

Staffing:

Currently, the CP program has 7 permanent Paramedics, 6 being unionized and 1 being non-union (supervisor role). The 6 paramedics work a rotational basis providing client visits, wellness clinics, and wellness dog activities 7 days a week 12 hours per day. As per recent MOHLTC direction, each provincial CP program must provide a 24/7 service by March 31, 2024. As stated earlier in this report, currently only day visits are available, which is proving to be a challenge due to an increased client base. The program is accommodating approximately 300 clients. In the current service model, any

client requiring assistance after day time hours must call 911 to have an ambulance attend and thus defeats the purpose of the intention of the program, which is to reduce 911 responses. A 24/7 service would allow for client visits to be scheduled later into the evening to accommodate clients needs and increasing numbers. This staffing initiative will also allow CPs to offer better supports to LTC and congregate care facilities in the area by providing visits and treatments at night (when client visits are not scheduled) that would otherwise require an ambulance transfer to the hospital, e.g., IV Therapy, blood draws. Lift Assist calls are becoming more regular response for our fire department, which if this initiative is approved will allow the CPs to assist on these calls thus decreasing the amount the fire department is required, saving costs associated with this type of response (e.g., firefighter wages) as well as limiting strain on the volunteers. Finally, as part of our current 911 response we offer palliative care services, where an ambulance attends a residence where a palliative patient lives to provide treatment. These calls drain resources as paramedics are on scene for extended periods of time as these patients require specific care and monitoring. If this initiative is approved then the CP can respond and relieve the ambulance crew which repatriates our resources back into the system quicker, thus decreasing response times.

Equipment/Vehicles

Currently, the Community Paramedic Program has six (6) dedicated vehicles for the Community Paramedics: two (2) to visit clients, one (1) Supervisor unit, one (1) to attend Wellness Clinics, vaccination clinics, and two (2) units to transport the wellness dogs. Four (4) of these vehicles were purchased through funding provided by the MOHLTC and two (2) are rented with an annual cost of approximately \$60,000. As part of the subject budget amendment proposal pre-approved by the MOHLTC, staff requested the purchase of one (1) more vehicle to replace the current rentals. This will decrease the total fleet to five (5), as the supervisor unit can also be used for Wellness Clinics, as the supervisor attends all wellness clinics to support paramedics. This would result in all CP related vehicles being owned by the County (no more rentals) and retrofitted to meet the needs of the Community Paramedic Program, as currently the rentals cannot. As part of this approval an SUV unit would be purchased with CP funding provincially, however the new unit would be utilized as the Manager of Emergency Services' vehicle. This would allow the current vehicle utilized by the Manager – a full size pick-up with extended cab - to be used by the CP program as it would benefit the operational needs of the program. Currently, the CP program requires a logistics vehicle to move the CP trailer to wellness clinics, and other public events, as well as moving stock within the community to serve operationally. The current CP units are satisfactory for day-to-day operations, but they are not large enough nor do they have the capabilities of carrying extra equipment like the Manager's current pick up truck. This would also provide a safer unit for pulling the CP trailer. The MOHLTC has been contacted and approved of this strategy as it increases the life cycle of the pick-up truck as it is not being used for emergency response, and is a newer unit and does not require any retrofitting. The Manager would in turn receive the new SUV paid for 100% by the MOHLTC and it would be retrofitted for the needs of the position which would not be an added cost to the tax payer. Therefore, an equal exchange. Fleet was also contacted with no concerns. It is important to note that the 2024 Tax Payer Supported Capital Budget added these vehicles as part of a regular replacement schedule, but are still funded 100% by the province. The County is not obligated to replace them as these Capital expenditures were a result of a grant. This includes all Capital costs within the report. Replacement of the vehicles and equipment will be determined at the time of need and if the Community Paramedic Program continues to be funded.

The total cost for the Community Paramedic vehicle would be \$90,000, which includes the purchase of the vehicle and the retrofitting of the specific options within the unit to make them safe for transporting equipment, supplies. Annually an additional Capital Cost for Fleet would be \$11,250 due to costs associated with maintaining the unit. All costs covered 100% by Ministry funding.

In addition to the vehicle purchase, the proposed Capital budget amendment includes \$40,000 for the purchase of one (1) additional cardiac monitor used by Community Paramedics to monitor heart rhythms, take vitals, and if required, to respond to medical calls if the Community Paramedics are required due to lack of ambulances, or the client requires on scene emergency care.

In total, the amount for equipment and vehicles—all funded from existing Provincial allocations—would be \$130,000, the County would retain ownership of all the above capital purchases for continued use in the CP program (should it continue with Council’s support and funding) or to be absorbed into the regular paramedic service program (should the CP program not continue).

Office Equipment

With the approval of the CP positions, to assist with the administrative duties generated by the Community Paramedic Program, the new staff will require 1 laptop, 1 Toughbook laptop, and 1 cell phone, all 100% covered by the provincial funding.

As a result of these capital expenditures, annual operating costs for paramedic training, uniforms, other admin, Fleet and IT costs would total approximately \$15,500.

Future of Program

As noted in the Background section of this report, guaranteed funding remains in place until at least March 31, 2026. Signals are being given by the Province that funding will at least be extended beyond that date, and more likely, will become permanent. Ministry staff also continue to encourage and support the County to grow the program, and have acknowledged the importance of it and benefits being achieved. However, until permanency is confirmed in writing and through a funding agreement with the Province, staff cannot assume it to be the case. As such, there remains some level of uncertainty with respect to the future of the program. This was identified in staff Report EMS-01-2023, including the necessity for contingency planning. In that regard, if funding were to cease, the County would have to decide on whether to terminate the program, fund the current program ‘as is’ or fund a modified (scaled down) version of the program. That decision is not necessary for Council at this time but staff will be developing the details around each of these options for Council to consider in the future should it be required.

FINANCIAL/LEGAL IMPLICATIONS:

The current funding for the Community Paramedic Program is provided through two streams. The first is the Ontario Health (West) allocated funding of \$793,100 for 2023/2024 with \$585,000 towards wages. The second is through the MOHLTC, which has funded \$1,805,000 for 2023/2024 with \$1,290,000 towards wages. Other budgetary items include, but are not limited to, vehicle costs, medications, equipment, technology, training and administrative costs. In total, the annual cost of the program as currently structured is approximately \$1.76 million.

To accommodate the capital purchases in the analysis section above, an amendment to the 2024 Tax-Supported Capital Budget of \$136,800 with funding from the MOHLTC is required as per the table below:

	2024 Approved Budget	Proposed Amendment	2024 Revised Budget
Capital Expenditures:			
Community Paramedic Unit – Fleet Project	\$0	\$90,000	\$90,000
Cardiac Monitor – EMS Project	\$0	\$40,000	\$40,000

	2024 Approved Budget	Proposed Amendment	2024 Revised Budget
Office Equipment (cell phone, laptop, Toughbook laptop)	\$0	\$6,800	\$6,800
Total Capital Expenditures:	\$0	\$136,800	\$136,800
Financing:			
MOHLTC Grant Funding	\$0	\$136,800	\$136,800
Total Financing:	\$0	\$136,800	\$136,800

The operating impacts for the addition of 2.0 FTE Permanent Community Paramedics (\$254,570 in Salaries, Wages & Benefits), administrative operating costs for division staff (\$15,500), and ongoing capital contributions to the CRR-Ambulance Fleet Reserve (\$11,250), are presented within the draft 2024 Tax-Supported Operating Budget and do not require any additional amendments. All of the above-noted operating costs are also funded 100% from the MOHLTC.

It is important to note that any expenditures related to this program are currently 100% funded, and if this program is to continue in future years, operating costs and capital-related expenditures may result in tax levy impacts should funding no longer be available.

STAKEHOLDER IMPACTS:

Not applicable.

REPORT IMPACTS:

Agreement: No

By-law: No

Budget Amendment: Yes

Policy: No

REFERENCES:

None.

ATTACHMENTS:

None.