



LAND AMBULANCE IMPLEMENTATION STEERING COMMITTEE
December 17, 2001 at 1:30 pm - Meeting 15
Conference Call
Summary Notes

In Attendance

Roger Anderson	Region of Durham
Bart Maves, M.P.P.	Parliamentary Assistant to the Minister of Health and Long Term Care
John Cunnane	Region of Niagara
Anthony DiMonte	City of Ottawa
Ron Kelusky	City of Toronto
Rick Armstrong	Region of Durham
Brian MacRae	City of Thunder Bay
Denis Merrall	County of Middlesex
Carol Mitchell	Municipality of Central Huron
Joe Moore	Region of Peel
Lynn Murray	County of Huron
Elizabeth Tanner	County of Peterborough
Jim Wilson	County of Perth
Tim Beadman	City of Greater Sudbury
Mark McDonald	County of Elgin
Jim Green	District of Muskoka
Liz Fulton	Frontenac Management Board
Marvin Caplan	City of Hamilton
Pat Vanini	Association of Municipalities of Ontario
Jeff Fisher	Association of Municipalities of Ontario
Gail Ure	Ministry of Health and Long Term Care
Ralph Walton	Ministry of Municipal Affairs and Housing
Malcolm Bates	Ministry of Health and Long Term Care
John Gross	Ministry of Health and Long Term Care
Leeanne Colvin	Ministry of Health and Long Term Care
Dennis Brown	Ministry of Health and Long Term Care
Lisa Darrach	Ministry of Health and Long Term Care
Alula Yimam	Ministry of Finance

Item 1: Introductions

The Committee members introduced themselves on the Conference Call.

Item 2: Approval of Notes from the November 19, 2001 meeting

Action: The minutes were approved, and will be added to the AMO-EHS website.

Item 3: Status of the Implementation of Approved Costs Funding Template

The \$18 million of additional funding for the twelve remaining municipalities has been approved and cash began to flow on Friday, December 14th. Confirmation letters are currently being signed now, and should be received (with the cheques) by municipalities over the next two days. Ministry staff apologized for the delays.

Some municipal members were concerned about provincial funding for CTAS training. CTAS is part of the new provincial patient priority system, which will ensure that critical patients are not redirected from the closest hospital.

Ministry officials noted that they will contact their field staff to inform them that the Ministry will pay the CTAS training bills as soon as possible. A letter from EHSB to UTMs/DDAs will also be sent to ensure that municipalities understand that there will be no year-end reconciliation, and that CTAS bills need to be submitted as soon as possible. Rick Armstrong the Chair of the Ontario EMS Directors and Managers will inform his membership of the change as well.

A municipal official raised an ALS training issue. Municipalities under the OPALS program receive provincial funding for a certain number of ALS paramedics. If some are lost through turnover, and additional training is needed, these costs are to be covered by the Province. Provincial officials said that there would be a reconciliation regarding these costs, but their current priority will be the CTAS training.

Action: Ministry staff will write municipalities to inform them that CTAS Training costs will not be reconciled as part of the base funding template, and will be dealt with as soon as possible. Municipalities will be requested to report on their CTAS training costs as soon as possible. EHSB will also be informing their Field offices of the change.

The Chair of the EMS Directors and Managers will be reporting to his membership on the above change.

Item 4: Funding of Legal Expenses

It is understood that the base-funding template through insurance premiums deals with large patient care lawsuits, and day-to-day legal issues are dealt with through administrative costs. But, there are some issues (like labour law cases) that fall into neither of these categories. Municipalities will have to appear before the Courts or the OLRB, and most times it will be one municipality that will be taking on a case that will impact the entire sector, and provincial laws/standards (e.g. the flu shot). Provincial officials feel that these types of cases should be dealt with through the special circumstance provisions in the base-funding template. The province does not indemnify its broader public sector partners, as they fear that legal fees will increase if they do.

It was asked how other legal fees for other services are funded by the Province. An AMO representative noted that there might be a precedent in the funding under Ontario Works.

Action: Gail Ure and Pat Vanini will review how legal charges are dealt with in other service areas.

Item 5: Flu Shots

In municipalities where there is little compliance, suspensions may make it impossible to deliver ambulance services – which would also violate the *Ambulance Act*.

The status of the legal case was discussed. There is a *Charter of Rights* challenge before the Superior Court. Currently there is no injunction preventing municipalities from requiring their paramedics to follow the law, but some paramedics think that because there is a Charter challenge before the Courts, the regulation is in abeyance. This is incorrect.

Provincial officials noted that under long-term care guidelines, depending on the policy of the individual facility, personnel who are not immunized may be required to take antiviral medication if they are going to continue to work with patients during an influenza epidemic. This is to ensure that the most vulnerable, like seniors, are protected. Psych. hospitals may have similar restrictions on their employees as well. Medical Officers of Health and Ministry of Health Regional Managers are aware of this issue. It was suggested that they could be utilized to support the efforts of municipalities.

Item 6: 2001 Year-End Confirmations of Expenditures

The Ministry is preparing a letter that will outline municipal requirements vis-à-vis year-end reconciliation. It will likely only involve a confirmation that provincial funds were

expended on ambulance services. Money will be considered expended if it is placed in ambulance service reserve accounts.

Action: The Ministry will provide AMO a draft of the above letter as soon as it is approved, and before it is sent out to UTMs/DDAs.

Item 7: 2002 Requirements

The due date to get municipal requests in for the 2002 base template is still January 18th, but the letter that the Ministry will use to request this information is still in the approval process. It will likely be a simple process, similar to the business case one that has been adopted by the Ministry for other sectors. The letter will include information on how municipalities can account for cost changes (i.e. fuel and staffing resources) that are due to call volume increases. A Provincial official also noted that they have already requested an increase in funding for 2002 base funding template over the \$48 million spent this year.

Action: The Ministry will provide AMO a draft of the above letter as soon as it is approved, and before it is sent out to UTMs/DDAs.

Item 8: Update on Response Time Framework

At this time the Ministry does not have permission to expend the \$10 million of capital funding previously announced this year. They are still trying to determine how it would be divided, and what additional operational costs would result if it were spent. As the Non-emergency Transfer Study RFP has been released, there is also some concern at the Ministry that capital funding for meeting response time standards may not be needed if it is decided that the municipalities are not responsible for non-emergency transfers in the future.

According to the estimates received from the municipalities in the Framework Forms there is \$10 million needed for capital improvements and \$90 million needed for operational costs. Therefore it is estimated that \$100 million needs to be expended in Ontario to meet standards.

Municipal representatives had several concerns. They noted that because of call volume growth since 1996, that even if the government assumes non-emergency transfer, investments will still be needed in most communities to meet provincial standards. The Provincial policy might also be inequitable, as some communities do not have high numbers of non-emergency transfers (i.e. only 3% to 4% of Peel Region's calls are codes 1 or 2). They do have increasing numbers of emergency calls however (In Durham it is 16%). The representative from Peel noted that another growing concern is delays in ERs. This issue is costing the Region \$1 million per year. Municipal representatives also stated that there are only so many emergency resources that can

be down-staffed even if non-emergency calls are being handled by the government. Small towns will still need the one vehicle they currently have stationed in the community whether UTMs/DDAs are responsible for transfers or not. Another municipal representative noted that non-emergency transfers are a health cost – not an ambulance cost, so the onus is on the government to fix the problem. He also stated that the issues of non-emergency transfers and response times are unrelated.

The Response Time Framework will not be dealt with by the government until early in the New Year. There will likely be no retroactive funding because of how the legislation is structured. It was noted by a municipal official that this would again punish those that assumed responsibility for the service before 2001. The Committee will follow up on this issue at the January meeting.

Item 9: Other Business - Dispatch

The government will allow a limited release of the Hamilton CACC review. Municipal officials from the five municipalities served by the CACC and AMO staff will be allowed to see the report.

Action: Provincial officials will make arrangements for the limited release of the Hamilton CACC report.

Action: The Dispatch issue will be placed on the agenda of the January LAISC meeting.

Item 10: Next Meeting

The next meeting of LAISC will be on January 21st between 10:00 am and 3:00 pm at the AMO offices.