

INFORMATION REPORT

то:	Chair and Members Healthy and Safe Communities Committee
COMMITTEE DATE:	January 17, 2019
SUBJECT/REPORT NO:	Ambulance Act Implications of Bill 160 (The Strengthening Quality and Accountability for Patients Act) (HSC19003) (City Wide) (Outstanding Business List Item)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Michael Sanderson (905) 546-2424 Ext. 7741
SUBMITTED BY:	Paul Johnson General Manager Healthy and Safe Communities Department
SIGNATURE:	

Council Direction:

At the meeting of February 14, 2018, Council approved the following motion regarding Potential Implications of the *Strengthening Quality and Accountability for Patients Act*:

WHEREAS, the Ministry of Health and Long Term Care (MOHLTC) is introducing the *Strengthening Quality and Accountability for Patients Act 2017*, and;

WHEREAS, this omnibus Bill covers 10 pieces of Legislation including *the Ambulance Act*,

THEREFORE BE IT RESOLVED:

- (a) That the appropriate staff be directed to report back on the municipal implications of these proposed changes in legislation with special emphasis given to the prospect of the *Ambulance Act* and the call for improvements to triaging and dispatch systems, as well as addressing the non-urgent transfer requirements on Emergency Services as outlined by the Association of Municipalities of Ontario; and,
- (b) That the staff report include a chronological list of all the actions taken by the City of Hamilton to date with respect to the issue, demonstrating that the City of

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SUBJECT: Ambulance Act Implications of Bill 160 (The Strengthening Quality and Accountability for Patients Act) (HSC 19003) (City Wide) - Page 2 of 4

Hamilton has done their due diligence, and this issue requires a Provincial solution.

Information:

Information regarding the improvements to the triaging and dispatch systems utilized by the Ministry of Health and Long-Term Care (MOHLTC) in it's Hamilton Central Ambulance Communications Centre (CACC) operation was provided to Council in the September 10, 2018 Report Dispatch Governance and Information Data Update (Report CES17022(a)).

Information regarding changes in legislation related to the *Ambulance Act* is provided in this Report. On December 12, 2017, Bill 160, *Strengthening Quality and Accountability for Patients Act, 2017*, received Royal Assent. Bill 160 is omnibus legislation which addresses various aspects of the delivery of healthcare services in Ontario.

In addition to other health care systems issues, Bill 160 contains revisions to the Ambulance Act which are outlined in Schedule 1 of the Bill (https://www.ontario.ca/laws/statute/S17025#BK3). Schedule 1, Item 2 outlines potential changes to service delivery including the ability of the Minister to issue operational or policy directives where the Minister considers it in the public interest to do so. Such policies or directives may include, but are not limited to:

- Ambulance transportation of patients to alternative destinations other than hospitals;
- Alternative treatment models by paramedics, in accordance with prescribed standards of care, such as treatment on scene without subsequent transportation by ambulance to hospital (treat and release, or treat and refer); and,
- The adoption of other treatment models for persons with lower acuity conditions (hear and refer).

Implementation of these transformative delivery aspects of Bill 160 can be expected to provide for the diversion of some low acuity patients from hospitals to more appropriate settings. This may include destinations such as Urgent Care Centres, Mental Health Centres, Detoxification clinics or shelters. It may also include referral by the paramedic to an appropriate primary health care service provider.

Preliminary estimates based on analysis of two years of comprehensive electronic patient care report data suggests around 5% - 10% of patient transports may be appropriate for alternative disposition. This could constitute 8 to 15 patients per day safely diverted from hospitals to an appropriate alternative destination. Such a reduction could be assumed to save paramedic time at hospital for these low acuity transports and to improve patient flow and disposition within the Emergency Department.

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SUBJECT: Ambulance Act Implications of Bill 160 (The Strengthening Quality and Accountability for Patients Act) (HSC 19003) (City Wide) - Page 3 of 4

While Royal Assent was given to Bill 160 on December 12, 2017, the commencement date for elements of Schedule 1, including the transformative aspects outlined above, is to be on a day to be named by proclamation of the Lieutenant Governor. At the date of writing this report a proclamation date has not yet been established and these elements of the legislation are not yet in force. In discussions with MOHLTC officials, and through the Ontario Association of Paramedic Chiefs (OAPC), we are not aware of any pending proclamation date.

Hamilton's Paramedic Chief is a member of the executive committee of the OAPC and continues to be actively engaged in meetings with the MOHLTC and the OAPC regarding potential implementation opportunities for both the dispatch call taking triage system and regulatory change.

Meetings have been held by staff with various external bodies, including the HNHB LHIN, Hamilton Health Sciences, and St. Joseph's Health Care Hamilton with respect to alternative destination processes and improvements to the various Community Paramedic Program activities already underway as described in Figure 1 (below).

Figure 1- Community Paramedicine Activities

SUBJECT: Ambulance Act Implications of Bill 160 (The Strengthening Quality and Accountability for Patients Act) (HSC 19003) (City Wide) - Page 4 of 4

Expansion of these Community Paramedic activities along with additional training for front line paramedics will be required to actualize transformative change and we are preparing for this in anticipation of further developments.

Appendices and Schedules Attached

None