INFORMATION REPORT

TO: Chair and Members
   Emergency and Community Services Committee

COMMITTEE DATE: December 5, 2019

SUBJECT/REPORT NO: Community Paramedic Seasonal Flu Surge Project LHIN Funding (HSC19072) (City Wide)

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: [Signature]

COUNCIL DIRECTION

Not Applicable

INFORMATION

In late 2018, the Hamilton Niagara Haldimand Brant Local Health Integration Network Emergency Services Steering Committee (HNHB LHIN ESSC) provided 100% funding to Hamilton Paramedic Service (HPS) for provision of Influenza immunization clinics in targeted apartment buildings or residences with high numbers of seniors and potential mobility issues. The involved buildings were the nine that our Community Paramedic Program was already providing prevention and assessment clinics in. This flu immunization program built on successful community paramedic activity initiated by paramedic services within the Champlain LHIN.

HPS has continued with the influenza immunization clinics at these same locations in 2019, starting the first week of November utilizing existing staff resources. The earlier start, clearer signage, and increased times has resulted in an increased immunization uptake this year at the involved sites. The continuation of this initiative has been supported by Public Health Services and CityHousing Hamilton. Medical oversight of the immunizations, which are a delegated medical act, is being provided by the Centre for Prehospital Education and Research (CPER) which is operated by Hamilton Health Sciences (HHS) under contract to the Ministry of Health (MOH).
Approaches to the upcoming 2019 flu season were discussed at the regularly scheduled October 17 meeting of the HNHB LHIN ESSC. Direction was given to the LHIN Community Paramedicine Strategic Lead to coordinate submissions or proposals from paramedic services for alternative approaches and strategies to support health system flu responses for the 2019-2020 flu season, again building upon successful initiatives and reports from the Champlain LHIN.

Hamilton Paramedic Service responded to this request with a proposal to provide two paramedics for 16 weeks of dedicated flu response capacity. Funding in the amount of $80,909 was requested to cover 100% of the staff wage and benefit costs required to deliver the program. On November 12, 2019, HPS was notified that the LHIN ESSC approved the requested funding (attached as Appendix "A" to Report HSC19072). HPS will be moving forward with program deliver commencing the first week of December.

The intent of the funding support is to provide a single paramedic mobile assessment and support capacity twelve hours a day, 7 days a week, to support the following goals:

- Identify and treat patients with influenza like illness (ILI) in Long Term Care Homes;
- Avoid 911 calls LTCH for ILI patients;
- Reduce the number of patients arriving at hospital emergency departments with ILI;
- Improve the surge capacity of regional hospitals;
- Improve patient access to the right care, at the right time, and in the right place;
- Improved delivery and coordination of services in the community for older adults and other patients with unmet health care needs; and,
- Enhance system partnerships, collaborations, and resource sharing among service providers, including LTCH staff, physicians, nurse practitioners, and established nurse led outreach teams (NLOT).

The Flu Response paramedics will be equipped with the necessary tools to diagnose influenza, create a health care plan collaboratively with staff or identified care providers, and initiate a specific treatment path for the patient with the goal of keeping them out of emergency departments. Clinical practice guidelines, under the medical supervision and protocols established by CPER, are expected to include:

- Nasal swab point of care testing;
- Intravenous initiation and fluid therapy for dehydration;
- Anti-Viral medications (oral, inhalation therapy, or injected); and,
- Administration of various supportive medications
OUR Vision: To be the best place to raise a child and age successfully.
OUR Mission: To provide high quality cost conscious public services that contribute to a healthy, safe and prosperous community, in a sustainable manner.
OUR Culture: Collective Ownership, Steadfast Integrity, Courageous Change, Sensational Service, Engaged Empowered Employees.
November 11, 2019

Michael Sanderson
Chief, Hamilton Paramedic Services
1227 Stone Church Road East
Hamilton, ON L8W 2C6

Re: Community Paramedicine Seasonal Surge Initiative

Dear Mr. Sanderson:

The Hamilton Niagara Haldimand Brant (HNHB) Emergency Services Steering Committee (ESSC) is pleased to advise that your project proposal referenced above has been approved for one time funding of $80,909 in 2019-2020.

The Community Paramedicine (CP) Seasonal Surge Initiative will focus on the provision of influenza immunization to vulnerable populations (a service in-kind contribution to the Seasonal Surge Project) as well as the implementation of the Community Paramedicine Flu Medic model. The Flu Medic model will provide education on influenza care, assessment, and prevention, and deliver care to patients presenting with influenza-like illnesses in area Long Term Care Homes (LTCH). The terms, conditions and reporting requirements associated with this funding are set out in this letter in Appendix A (Terms and Conditions).

To confirm your agreement with the Terms and Conditions in this letter and accompanying appendices, please have an officer of your organization that is authorized to bind the organization sign and return a copy of this letter by November 18, 2019. Please return a copy electronically to Kathy Wall, HNHB LHIN Emergency Services Administrative Assistant at Kathy.wall@lhins.on.ca. If you have any questions please contact Kathy Wall at 905-704-3754 extension 2.

Sincerely,

Cheryl Williams, ESSC Co-Chair on behalf of the ESSC

cc: Dr. B. Krizmanich, HNHB LHIN ED Lead
Rosalind Tarrant, Vice President, Health System Strategy & Integration
Kelly Cimek, Director, Health System Planning and Integration, HNHB LHIN
Brent McLeod, HNHB Community Paramedic Strategic Lead

Emergency Services Steering Committee (ESSC)
149 Hartzel Road, St. Catharines, Ontario L2P 1N6  905-704-3754
AGREED TO AND ACCEPTED BY:

Hamilton Paramedic Services
Michael Sanderson, Chief, Hamilton Paramedic Services

Signature: ___________________________________________________________

Date: ______________________________________________________________

Payments will be done by electronic transfer from our account at St. Joseph’s Healthcare Hamilton. In order to expedite payment please complete the following:

Account Holder at your organization: _______________________________________

Account Number or reference number (if applicable): __________________________

Please include any additional details from your accounting department that may be helpful.
Appendix A: Terms and Conditions of Funding

1. **Funding Details**: one-time funding of $80,909 to implement the Flu Medic model for sixteen (16) weeks where specially trained paramedics will assess and treat patients with the influenza virus in long term care homes in the City of Hamilton.

2. **Timeline**: funds must be spent on the initiative by March 31, 2020.

3. **Service Delivery**: launch the Flu Medic model as described in the HNHB ESSC Seasonal Surge Project Proposal. The Flu Medic model will have area LTCH staff connect directly with the Community Paramedicine (CP) Flu Medic and request patient assessments and treatments as needed on their patients presenting with influenza-like illnesses in their homes. The CP Flu Medics will work with the patient care providers to ensure follow up care is complete. Agreements between care providers (paramedic services and LTC homes) will make collaborative agreements to provide appropriate and effective use of the Influenza Clinical Practice Guidelines (Appendix B - attached) and primary care services to the patients within the respective service areas.

4. **Outcome Measurement**: the following outcome measurements are to be collected and presented with the assistance of the CP Strategic Lead back to the ESSC at the June 18, 2020 meeting:
   - Number of vaccinations delivered
   - Number of adverse reactions
   - Number of paramedics trained
   - How much vaccine was wasted
   - Describe with descriptive statistics the total number of patients included in the project, demographics, the types assessments, avoided 911 calls and ED visits, and tests performed, and the treatments and vaccinations delivered to the patients
   - Measure the number of patients who are transported to ED within 30 days of CP Flu Medic treatment
   - Correlate 911 call data comparing CP Flu Medic participating LTCH against similar LTCH not participating in the program over the same time period
   - Report and evaluate any adverse outcomes with patients receiving CP Flu Medic treatments
   - Determine immediate impact on emergency operations (# 911 Calls responded to and response time savings)
   - Report and describe the transfer of care process including the care providers (i.e. LTCH staff, physician, NP, and/or NLOT)
   - Calculate the time on task spent by the paramedics and described by mean, median and standard deviation and compared against each program
   - Describe relationships with local stakeholders and care providers involved in the CP Flu Medic initiative
   - Present the findings of the patient and caregiver experience survey
   - Report on ED presentations and admissions of patients treated in the CP Flu Medic initiative
   - Perform an economic evaluation and present an estimated Return on Investment