To: Mayor and Members Committee of the Whole

Outstanding Business Item and Issue: (Audit and Administration Committee Agenda) Use of DARTS Transportation to Attend Medical Appointments

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Re: Use of DARTS Transportation to Attend Medical Appointments (City Wide) - (PW08081)

Council Direction:

At the Wednesday, February 20, 2008, meeting of the Audit and Administration Committee, staff were directed to review and report back on the heavy reliance and use of DARTS to transport patients to medical appointments and whether or not the Ministry of Health should be funding this from their Transportation Budget.

Information:

The City’s Accessible Transportation Services (ATS) program provides transportation to registered persons with disabilities by means of a family of services including specialized transit (DARTS); subsidized meter rate taxis (Taxi Scrip); and accessible low floor (ALF) HSR buses. More than two thirds of trips provided are via DARTS, which provides delivery of the specialized transit component under contract to the City.

The City's current eligibility criteria that qualify passengers to use the DARTS service generally require that a person have a mobility disability that prevents their use of HSR. Additionally, the criteria also include two explicitly medical criteria: requirement of dialysis treatment, and a diagnosis of Alzheimer disease. It is therefore not surprising that medical trips account for a considerable portion of DARTS trips, because many passengers have qualified for service on the basis of one or more severe and irreversible medical conditions.

While ATS and DARTS do not record trip purpose when booking a trip request, purpose can be derived from an examination of trip origins and destinations.

Of the 415,000 trips delivered by DARTS and its subcontractor VETS in 2007, some 250,000 could be considered as having a medical component.
Of these, about 100,000 trips were to and from locations including dialysis, therapy, medical labs, doctor’s offices, etc.

A further 150,000 trips were to and from locations whose primary focus is Adult Day Programs, which are not solely medical in nature but are funded by the Ministry of Health & Long-term Care. These Programs support Provincial policies aimed at maintaining individuals in their home environment through community supports that provide elements of social engagement, therapy, respite care, etc.

The net expenditures to support the specialized transit service delivered through DARTS are about $11.5M, which is supported through City funding contributions from dedicated reserves, Gas Tax, and general tax levy.

The 100,000 annual trips that are strictly medical in nature require City funding contributions in the order of $2.5M; the 150,000 annual trips to Day Programs require further City funding contributions in the order of $4M; thus, transportation of passengers via DARTS to and from medical related appointments and programs requires annual City funding contributions in the order of $2.5M to $6.5M, dependent on the interpretation of what constitutes a medical trip. This funding requirement is expected to grow over the next several years as greater accommodation of persons with cognitive disabilities results from implementation of ATS Program eligibility changes, and through the general aging of the population, with associated increases in levels of disability.

The Accessibility for Ontarians with Disabilities Act is now law in Ontario. Standards concerning the transportation of people with disabilities are expected to become Ontario regulations within the next two years. It is expected that these standards will require municipalities that provide fixed-route conventional transit to provide parallel specialized transit service on an equitable basis to people with disabilities. Since regular transit can be used for any purpose, the new regulation is expected to prohibit any restriction for parallel specialized transit service which is based on trip purpose. Consequently, the City will have no basis on which to decline provision of any trip on DARTS based on a particular purpose. Even at the present time, ATS does not enquire as to the purpose of a trip, as this is thought to be a potential infringement of a passenger’s Human Rights.

The use of DARTS by qualifying persons with disabilities to travel to and from medical-related activities is as legitimate as the use of HSR buses for the same purposes. Transportation to and from medical appointments supports the many medical resources within the community, and effective and readily available transportation makes Hamilton a desirable place to reside for people who need dependable access to quality health care.

Previous contact with the Ministry of Health & Long-term Care (MOHLTC) on this issue by the Executive Director of DARTS (November 2005), and subsequent participation by City staff with local Day Program providers and the Local Health Integration Network, have yielded no response other than an expression of intent by MOHLTC to investigate further to determine whether there is an inequity in the funding of Day Program costs in Hamilton relative to other areas of the Province.

There are several strategies to mitigate the cost and service demand impacts of medically-related trips which are already being undertaken or investigated through the program. These include:
o Working with health care providers to institute 'block-booking' of appointments based on the geographic region of the City. This makes trips to and from these appointments easier to accommodate, and promote the most intensive use of service resources. This is currently done in the case of dialysis and Day Programs;

o Out-sourcing certain classes of medical trips, such as dialysis trips. This strategy has been effective in the Region of Peel in both reducing the average cost of dialysis trips, and in drawing the Ministry of Health into the process through provision of infrastructure cost funding to support a Ministry funded agency delivering the service, i.e. the Red Cross in Peel. The initial stage in this process had City staff meet with the Red Cross in Hamilton to discuss feasibility, and would further consist of proposing to partner with the Local Health Integration Network in a pilot project of this nature; and

o Continuing to support ongoing efforts by the Ontario Public Transit Association to lobby the Provincial government for assistance to municipalities to provide transportation to and from dialysis treatment.

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