SUBJECT: Dedicated Nurses to Receive Ambulance Patients in Hospital Emergency Departments (HES08011) (City Wide)

RECOMMENDATION:

(a) That staff be authorized to enter into an agreement with the Ministry of Health and Long-Term Care (MOHLTC) to receive a grant of up to $375,000 from the provincial government to be used to fund a project during the period of April 1, 2008 to March 31, 2009 to staff dedicated nurses hired by the local hospitals to specifically receive ambulance patients in the hospital emergency departments to reduce the ambulance wait times.

(b) That staff be authorized to negotiate the necessary agreement(s) with Hamilton Health Sciences and St. Joseph’s Hospital to pay those organizations for staffing dedicated nurses hired by the local hospitals to specifically receive ambulance patients in the hospital emergency departments to reduce the ambulance wait times.

(c) That Emergency Medical Services (EMS) be directed to utilize the Ministry of Health and Long-Term Care (MOHLTC) grant of up to $375,000 that is received by the City Of Hamilton (City) to pay for all direct and supporting costs for the dedicated emergency department nursing program in accordance with the terms set out by the Ministry of Health and Long-Term Care (MOHLTC).
EXECUTIVE SUMMARY:

Hamilton Emergency Services - Emergency Medical Services (HES-EMS) has observed elongating “ambulance wait times” i.e. the time interval to transfer the care of ambulance patients from the paramedic to the emergency department nursing staff. As these times increase there is reduction in the capacity of EMS to provide a timely response to medical emergencies in the community. For the past six (6) months HES and other municipalities have been discussing interim solutions with the MOHLTC to reduce the ambulance wait times. One of the wait time reduction strategies that gathered a lot of attention was to have dedicated nurses in the emergency departments to accept incoming ambulance patients during peak demand periods.

On May 30, 2008 the MOHLTC announced that it would apply $4.5 million to assist various municipalities across Ontario with the ambulance wait time. On June 2, 2008 the MOHLTC confirmed that the City would receive a provincial grant of $375,000 (attached as Appendix A to Report HES08011) to “negotiate agreements with the hospitals to have dedicated nurses to receive ambulance patients at hospital (ERs), for the MOHLTC fiscal period 2008-2009”. This municipality is not required to contribute to any funds to finance the nursing hours for this project.

Staff is recommending that Hamilton EMS participate in this project and take all necessary and reasonable steps to enter into agreements with Hamilton Health Sciences and St. Joseph’s Hospital to place the dedicated nurses in the emergency departments as promptly as possible.

BACKGROUND:

Lengthening ambulance wait time intervals was first noted in Hamilton in 2003 and it is now one of the greatest challenges facing HES-EMS in an effort to maintaining an appropriate emergency response time in the community, contain the cost of the service, and address the work place hygiene of the paramedics.

Staff has been meeting with the MOHLTC and hospital officials on a regular basis for well over a year analyzing the multitude of contributing factors and where there are local collaborative solutions, staff and the hospital have been working to implement them. All stakeholders agree that this is an international phenomenon and hence it requires multi-faceted short-term and long-term solutions. Despite the positive work done to-date with existing resources, the ambulance wait times continue to increase and the municipalities have collectively asked the MOHLTC for some immediate relief.

From December 2007 to May 2008 Hamilton and many other municipalities in Ontario have been engaged in discussions with senior MOHLTC officials to develop an interim solution to provide immediate relief to municipalities facing substantial challenges in ambulance wait times. Arising from those discussions the provincial government is offering one-time grants to fourteen (14) municipalities to fund dedicated nurses which will be deployed in hospital emergency departments at peak demand periods specifically to accept ambulance patients as their primary duty. This concept is
predicated on hospital nurses having the most appropriate level of training that is focused on caring for patients in the hospital setting and for prolonged periods of time and that is regular practice for the patient to nurse ratio to be five to one (5:1) subject to the patient condition. On May 30, 2008 the MOHLTC announced this as one of a series of initiatives intended to assist with hospital emergency department and ambulance wait times.

On June 2, 2008 the MOHLTC confirmed a provincial grant for the City of up to $375,000 to negotiate agreements with the hospitals to have dedicated nurses to receive ambulance patients at hospital emergency departments for the fiscal period 2008-2009 (April 1, 2008 to March 31, 2009). The funding is considered one-time, and to be used as a 100% provincial government grant for the intended purpose. Staff will be required to report on a regular basis to the MOHLTC on the impacts of this initiative and it would be expected, depending on the level of success, that the City would request that the funding and project support continue until the root circumstance is resolved.

If the staff recommendations are approved, staff will undertake the following steps:

1. Meet with the MOHLTC and finalize the funding agreement.
2. Meet with the local hospitals to establish the performance agreement, operational guidelines and hours of service coverage.
3. Ensure that the hospitals secure the appropriate nursing staff.
4. Provide the appropriate training and orientation for all applicable front-line staff.
5. Initiate the program, measure and adjust as required.

HES-EMS staff will undertake to reach an agreement with the local hospitals, with the support of Corporate Services Department, Finance Division and Legal Services Division, to have nurses dedicated to look after the incoming ambulance patients during periods where the challenges are the greatest. The MOHLTC recognizes that by the time the municipalities reach agreements with the hospitals there may well be only months remaining to use the funds, however, we still have access to the full envelope. The goal of Hamilton EMS is subject to Council’s approval to begin this project no later than the fall of 2008.

**ANALYSIS/RATIONALE:**

As recent as the month of May 2008 the ambulance wait times for Hamilton EMS continue to lengthen consuming capacity of HES-EMS to provide a timely paramedic response to medical emergencies in the community. The MOHLTC has offered an interim solution that they are prepared to fully fund and it is expected to have a positive impact in reducing ambulance wait times. Staff has identified the times of day, and days of the week where the greatest benefit is likely.
ALTERNATIVES FOR CONSIDERATION:

Staff could ask the MOHLTC for the funds to augment the paramedics staffing hours. This option was discussed but not pursued as focus of the paramedics training is related to delivering care outside of the hospital setting, with different equipment and with the medical support structure that exists in a hospital. Besides that the MOHLTC has not offered any options other than using nurses for this project. The EMS Directors/Chiefs that participated in the formulation of this plan noted that the real benefit of using nurses is that it created the real potential to have a patient to nurse ratio of five to one (5:1) in many circumstances versus the more common one to one (1:1) ratio that is seen with paramedic services.

Similarly, another option is to request the MOHLTC to allow the municipality to use the same dollars to purchase more paramedic staffing hours on the street to reduce the impact of ambulance wait times. This model would be most costly to achieve the same outcome as it would have to fund the ambulance vehicle and equipment infrastructure and as already noted the patient to paramedic ratio is more limiting.

Neither of these alternatives is recommended and if they were pursued, staff anticipates substantial delays as staff would first have to lobby the provincial government to modify their position on the use of the funds.

FINANCIAL/STAFFING/LEGAL IMPLICATIONS:

Financial Implications:
It is expected that all costs associated with this project will be funded 100% from the provincial grant funds.

Staffing Implications:
Hamilton’s EMS Managers would manage and oversee the Memorandum of Understanding with the hospitals related to the dedicated nurses to ensure that the hospitals meet their contractual obligations. The EMS Platoon Managers will have to interface with key hospital staff in greater detail every 12 hours, 365 days a year on the utilization of the ‘dedicated’ nurses at each hospital site.

Legal Implications:
The City is required to enter into a Memorandum of Understanding with the MOHLTC to participate in the project and then enter into a performance agreement with the hospital for the intended service. Legal Services will apply best practice to ensure the City’s interests are addressed and protected in both agreements.
POLICIES AFFECTING PROPOSAL:

Any applicable Purchasing Policies will be applied in purchasing the service from the hospitals.

RELEVANT CONSULTATION:

Corporate Services Department, Financial Services Division
Corporate Services Department, Risk Management Division
Corporate Services Department, Legal Services Division
Human Resources Department

CITY STRATEGIC COMMITMENT:

By evaluating the “Triple Bottom Line”, (community, environment, economic implications) we can make choices that create value across all three bottom lines, moving us closer to our vision for a sustainable community, and Provincial interests.

Community Well-Being is enhanced. ☑ Yes ☐ No
This program will increase the potential for ambulances to be freed up at local emergency departments sooner than otherwise possible, and by extension improve the emergency paramedic response capacity for all city-wide communities.

Environmental Well-Being is enhanced. ☑ Yes ☐ No
Human health and safety are protected. Early recognition and aggressive prevention will greatly enhance the safety for the community and City staff.

Economic Well-Being is enhanced. ☑ Yes ☐ No
Investment in Hamilton is enhanced and supported.
This program will leverage grants from outside of municipal sector and contribution from the provincial government.

Does the option you are recommending create value across all three bottom lines? ☑ Yes ☐ No

Do the options you are recommending make Hamilton a City of choice for high performance public servants? ☑ Yes ☐ No
The creation of a respectful, desirable and supportive workplace.
This program enhances the health and safety for the public as well as staff.
MAY 7 9 2008

Mayor Fred Eisenberger
The City of Hamilton
City Hall, 71 Main Street West
Hamilton ON L8P 4Y5

Dear Mayor Eisenberger:

The McGuinty government has unveiled an ambitious health reform plan. I would like to thank you for your continuing effort and co-operation in working with my ministry to improve Ontario’s health care system.

The success of our reform plan is dependent largely on ongoing collaboration with our health care partners, and key contributory factors such as our enhancement of resources to strengthen care in the community. To this end, the Ministry of Health and Long-Term Care will be providing funding for your municipality to negotiate agreements for dedicated nurses to receive ambulance patients at hospital ER(s) for the fiscal year 2008-09.

As a result, the following funding adjustment will be made:

- One-time funding increase of up to $375,000

Further details will be provided shortly by Dawn Ogram, Assistant Deputy Minister, Corporate and Direct Services Division, who is responsible for implementing this initiative on behalf of my ministry.
Mayor Eisenberger

I would like to take this opportunity to again convey my sincere appreciation for the considerable contributions all members of your organization make in the provision of health services in your communities.

Yours truly,

George Smitherman
Deputy Premier, Minister

c: Hon. Ted McMeekin, MPP, Ancaster-Dundas-Flamborough-Westdale
Sophia Aggelonitis, MPP, Hamilton Mountain
Andrea Horwath, MPP, Hamilton Centre
Paul Miller, MPP, Hamilton East- Stoney Creek
Juanita Gledhill, Chair, Hamilton Niagara Haldimand Brant LHIN
Glen Peace, City Manager