

## Request for Decision

### Paramedic Services 2016 Budget Enhancements

Presented To:	Community Services Committee
Presented:	Monday, Nov 16, 2015
Report Date	Wednesday, Oct 21, 2015
Type:	Managers' Reports

#### Recommendation

THAT the City of Greater Sudbury considers permanently increasing the Paramedic Services staffing by two (2) additional full time Paramedic positions and one (1) Emergency Vehicle Technician and directs staff to prepare a budget option for consideration during the 2016 budget deliberations.

#### Finance Implications

If approved, a budget option for funding of \$270,858 will be prepared for consideration of the Finance and Administration Committee during 2016 budget deliberations.

## Health Impact Assessment

Implementing this request will not have a negative impact; rather, this request for increased staffing utilizing the health impact assessment will better equalize call distribution for Paramedics and improve employee morale. Further, increasing staffing on weekends will increase the available Paramedic resources to respond to calls and possibly lower the associated effects of Occupational Stress Injury (PTSD).

## Executive Summary

The Chief of Fire and Paramedic Services is recommending this enhancement to improve Paramedic staffing by a total of 16 hours of dayshift vehicle deployment on Saturday, Sunday and statutory holidays to meet service demands through a standardized deployment across the entire week. Once approved, this request will convert a single ambulance currently staffed 5 days week 12 hours a day (Monday to Friday) to an ambulance that is staffed 7 days a week 12 hours a day. The additional 4 hours will move a second weekend vehicle from 8 hours to 12 hours.

In addition, Paramedic Services requires one (1) additional Equipment Vehicle Technician (EVT) to provide

#### Signed By

**Report Prepared By**

Aaron Archibald  
Deputy Chief of EMS Operations  
*Digitally Signed Oct 21, 15*

**Health Impact Review**

Trevor Bain  
Chief of Fire and Paramedic Services  
*Digitally Signed Oct 21, 15*

**Division Review**

Trevor Bain  
Chief of Fire and Paramedic Services  
*Digitally Signed Oct 21, 15*

**Recommended by the Department**

Tim P. Beadman  
General Manager of Health, Social and  
Emergency Services  
*Digitally Signed Oct 22, 15*

**Recommended by the C.A.O.**

Kevin Fowke  
Acting Chief Administrative Officer  
*Digitally Signed Nov 8, 15*

logistical support for Paramedic Operations while reducing the dependence on part time staff to cover a full time schedule rotation.

## **Background**

Sudbury Paramedic Services has not increased frontline staffing prior to 2007, even though the Service has experienced a sustained increase in service requests by 21% from 2008 into 2014.

Prior to 2010, the breakdown of workload for Sudbury Paramedics was a split of 70% emergency and 30% inter-facility calls. This call ratio no longer holds true, currently the ratio is broken down to 90% emergency and 10% inter-facility (non-emergency patient transfers) calls.

Historically, requests for service were lower on weekends due to less inter-facility transfers that were a reflection of the work that is traditionally elective in nature and carried out during the business week. The current deployment model of having fewer ambulances on weekends reflected a time when we had lower emergency call volumes and inter-facility calls on weekends.

Call volume data from 2014 in Appendix (a) demonstrates that the Service has a relative equal distribution of call volume 7 days a week supporting the need for additional staffing on weekends.

EVT's are vital to the logistical support of Paramedic Services ensuring all vehicles and medical equipment are cleaned, sanitized, inspected and restocked in accordance with provincial legislation, regulations, standards and Service policy. They shuttle paramedic vehicles to and from the Lorne Street Depot for preventative maintenance and repairs several times each shift. This has resulted in an increase of travel time for vehicle shuttling by 50%. EVT's manage a significant inventory of medical equipment including ambulance stretchers, immobilization equipment, cardiac defibrillators, CPAP units, and laptops in addition to a significant inventory of drugs and disposable medical supplies.

EVT's carryout regulatory requirements, determined by the Ministry of Health and Long Term Care, such as preventative maintenance, stocking, cleaning and repairs on stretchers and oxygen equipment; in addition, EVT's deliver emergency equipment replacements to the field as well as deploy the Emergency Support Unit, Argo and Mobile Command Unit to calls to support emergency operations.

The addition of one (1) full time EVT covering an existing 80 hours will reduce the dependence on part time staff and improve staffing performance consistency in the Logistics Section.

## **Aging Demographic**

One of the key business drivers for call growth in Paramedic Services is the aging population. In June 2013, Paramedic Services presented information to Council which included service request volumes, deployed Paramedic hours, system bottlenecks and their associated costs, as well as the impact of an aging population and future challenges. To recap, the majority of patients treated and/or transported by the Paramedic Service are over the age of 60 and according to the Public Health Agency of Canada, the aging demographic will continue to influence public health in the future. Furthermore, people 85 years old and over represent Canada's fastest growing age group (Public Health Agency of Canada, 2014).

Given the aging demographic, the Paramedic Service is projecting a further service increase of 14% in overall service request volume over the next eight years with patients over the age 65. It should be noted that people aged 85 years and over make up the fastest growing age group in Canada (Appendix, b). This age group increases Paramedic workload (longer time with patients as well as longer patient record documentation times).

## Health Sciences North

Since 2008, Sudbury Paramedic Services has experienced more than 100% growth in patients requiring transportation either from or to the Sudbury Airport due to regional consolidation of care at Health Sciences North (HSN). With the addition of increased staffing on weekends, the Paramedic Service will be able to better distribute workload amongst staff and available ambulances to meet the need of emergency calls and the patients requiring transportation into HSN for treatment. There is still significant airport volume on weekends to justify the request for increasing Paramedic staffing.

In addition, call volume is also due to HSN being a regional referral hospital that sees patients being transferred from approximately 24 community hospitals within North Eastern Ontario. Further exasperating our challenges in late 2013, changes by Ornge Air Ambulance Service has resulted in an increase of 32% in the call volume of patients requiring transportation by Paramedic Services from the Sudbury Airport to HSN.

It is important to note that Paramedic Services has continued to transition our business model away from a focus on non-urgent work to emergency work in the past five (5) years through the following actions to better align services to meet the evolving needs of our community and to be fiscally responsible.

Listed below are actions taken by Paramedic Services in the past couple of years to be more efficient as a cost avoidance strategy.

- In December 2008, an Ambulance Offload Delay (AOD) nurse program was implemented in partnership with HSN in order to offset the lost ambulance response capacity. The AOD nursing staff at HSN are to take over responsibility for incoming ambulance patients to free up resources. This has resulted in a reduction in off-load times at HSN.
- In 2013, the operational deployment plan (System Status Plan) was adjusted to redeploy existing resources to further optimize call response. This change saw better distribution of workload, and a 26% reduction in shift overrun (overtime).
- Partnership with North East Local Health Integration Network (NE-LHIN) and HSN on a fully funded inter-facility non-urgent transfer vehicle with a mandate of expediting the discharging of patients waiting to go home.
- Another deployment plan review was undertaken in 2015 which restructured our deployment model by converted Paramedic Response Units (single Paramedic non-transport unit) into ambulances to better align call demand through transport capability within the community.

In closing, Paramedic Services is recommending that the City of Greater Sudbury consider permanently increasing Paramedic Services staffing by two (2) additional full time Paramedic positions and one (1) Emergency Vehicle Technician and direct staff to prepare a budget option for consideration during the 2016 budget deliberations. This request will standardize the paramedic deployment 7 days week and improve the logistics support for Paramedic Services.

## References

Public Health Agency of Canada. (2014) The Chief Public Health Officer's Report on the State of Public Health in Canada, 2014: Public Health in the Future. Retrieved from:

<http://www.phac-aspc.gc.ca/cphorsphc-respcacsp/2014/chang-eng.php>

Statistics Canada. (2011) The Canadian Population in 2011: Age and Sex, 2011 Census. Retrieved from:

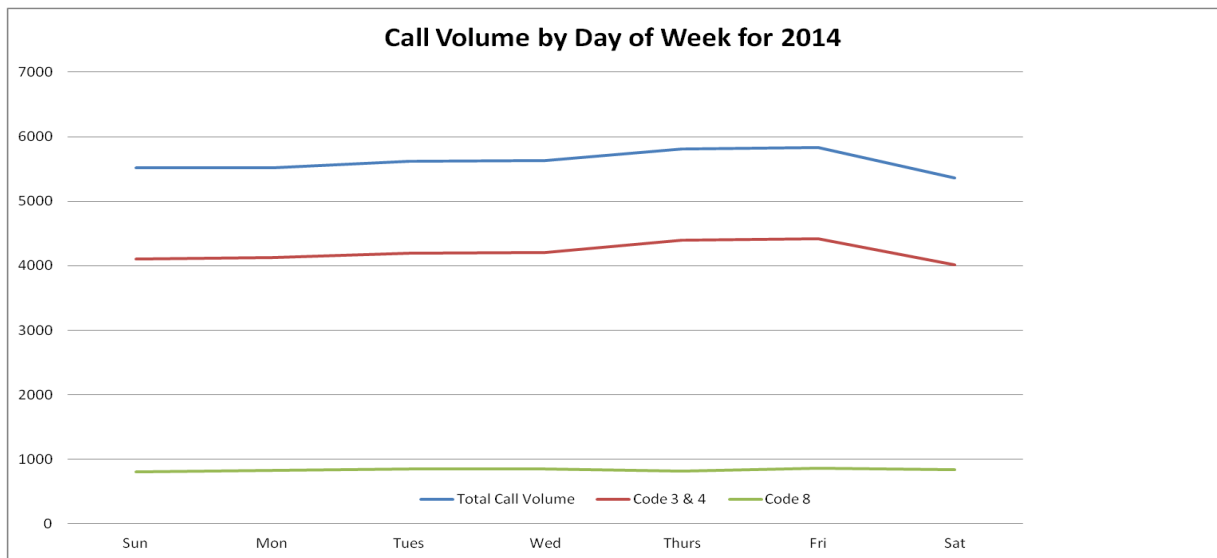
[http://www5.statcan.gc.ca/access\\_acces/alternative\\_alternatif.action?t=98-311-XWE2011001&k=425&l=eng&loc=http://www12.statcan.gc.ca/census-recensement/](http://www5.statcan.gc.ca/access_acces/alternative_alternatif.action?t=98-311-XWE2011001&k=425&l=eng&loc=http://www12.statcan.gc.ca/census-recensement/)

[2011/as-sa/98-311-x/98-311-x2011001-eng.pdf](#)

City of Greater Sudbury Emergency Services Council Presentation, Paramedic Services updates 2013.

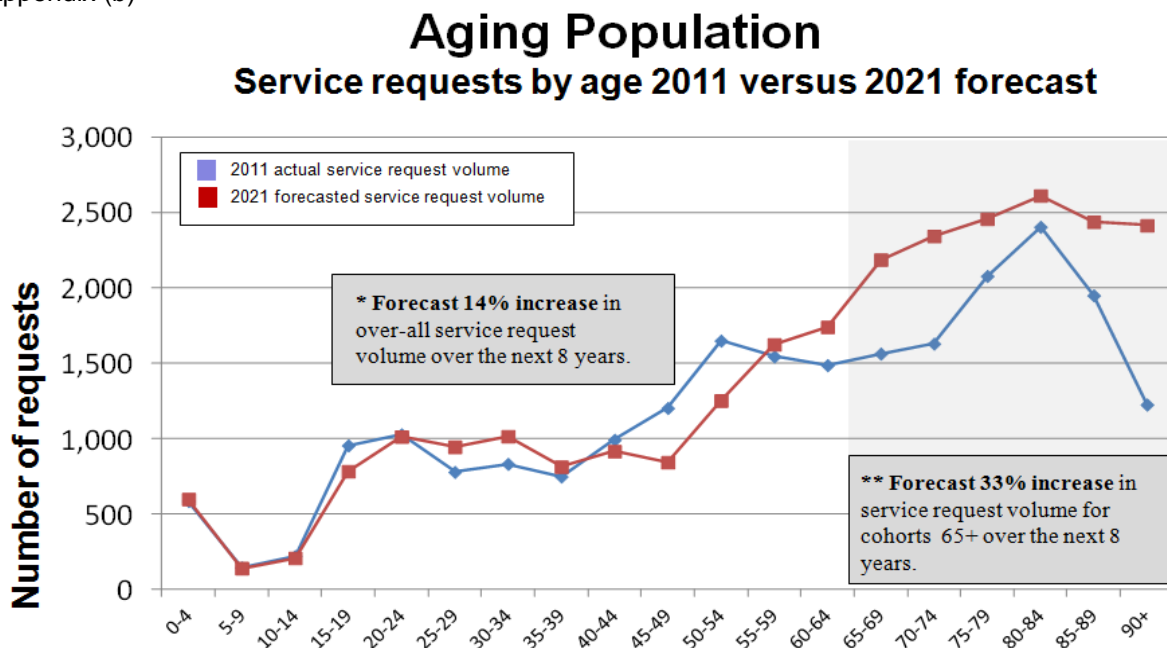
## Appendix

### Appendix (a)



Note: Appendix (a) Shows that calls emergency calls on weekends are consistent during weekdays. Data source: iMedic

### Appendix (b)



\* Sudbury Paramedic age cohort compared with the last Canadian Census taken in 2011.