

**Subject**: Occupational Therapists Request for Niagara EMS

**Report to:** Public Health & Social Services Committee

Report date: Tuesday, October 13, 2020

### Recommendations

That Regional Council **APPROVE** the addition of two new full time permanent Occupational Therapist positions, using already-approved funding in the EMS operating budget.

# **Key Facts**

- These positions are central to the Falls Intervention Team (FIT) as part of our Mobile Integrated Health model
- Occupational therapists were previously contracted through Hotel Diêu Shaver in temporary assignments
- Challenges exist in attracting occupational therapists to a temporary contracted role. This past year, EMS was able to fill only one of two positions
- With the onset of COVID-19 mid-March this year, Niagara EMS lost the one occupational therapist due to work refusal and returned to the Hotel Dieu Shaver
- The position of Occupational Therapist is already used in Public Health and is associated with CUPE 1757
- A recommendation is made to bring these positions internal as funded FTE's to improve recruitment and management of occupational therapists dedicated to FIT, with a small reduction in cost.

### **Financial Considerations**

The approved 2020 EMS Operating budget contained \$166,013 in purchased services to accommodate contracting two Occupational Therapists. The 2020 budget was estimated based on internal regional wages as a benchmark; therefore, the approved budget is sufficient to cover the costs of the two FTE's with no incremental budget increase required.

# Analysis

As most recently discussed in PHD 20-2019, the implementation of the Mobile Integrated Health teams has led to a reduction in patients being conveyed to hospitals, and instead patients are receiving more appropriate care that better meets their health needs, and places less pressure on the emergent care system. This in turn has resulted in a "bending of the curve" of actual call volumes to the end of 2019 as seen in Figure 1.



One of the teams that has contributed to this bend of the curve is the FIT consisting of an occupational therapist and a paramedic, who respond in real time to 911 calls for persons who report a fall and require assessment and/or assistance with the fall. Previous to the introduction of the FIT, these callers either refused transport to the hospital if they were uninjured or were transported to the hospital. As per Niagara EMS patient care reports, more than half of unique 911 callers between 2016–2018 reported that factors other than medical conditions contributed to the fall. Such factors could include but are not limited to arranging for gait aids, educating patients in proper use, recommendations about changing a living environment or arranging for enhanced care offered by community service providers. It is not within the scope of the paramedic to make these recommendations however, it is within the scope of the occupational therapist to recommend strategies to decrease the incidence of repeat falls and risk of serious injury.

Since the inception of the FIT in 2018, increases in unique calls for falls have dramatically decreased as illustrated in Figure 2, evidence that this team is more effectively resolving underlying causes for falls, preventing future 911 calls.



Figure 2 Call Volume Growth for Falls 2015-2019

The FIT not only responds to real time 911 calls for falls, but in between active calls also proactively visit fallers after receiving a referral from paramedics who encounter patients who have fallen at other times. Prior to the occurrence of a repeat fall, a visit will be arranged between the patient and the FIT in order to assess the patient's environment. The visit could result in meaningful changes and strategies to avoid additional falls or a referral to community health and social providers, thereby increasing safety and preventing serious injury from future falls.

# **Recruitment of Occupational Therapists through Contracted Services**

Previous attempts at recruitment of occupational therapists collaboratively with the Hotel Diêu Shaver have not yielded many candidates despite concerted efforts to promote this unique opportunity. In five months of active recruitment, only one position was filled. The Government of Canada Job Bank (<u>https://www.jobbank.gc.ca/marketreport/outlook-occupation/4168/ca)</u> may offer some explanation as to the paucity of applicants as over the next ten years across Canada as it appears this is a highly competitive field for recruitment: the expected new job openings for occupational therapists will total 11,800 but there will only be 9,600 job seekers.

Additionally, data provided by the Region of Niagara, Growth Management Strategy indicate that over the next 20 years, Niagara's population is expected to increase by roughly 79,000 people or 17.8% and seniors 65 years old or greater will account for 60% of the population growth (approximately 47,000 people). The increase in the senior

population is the result of an aging baby boomer population and the migration of individuals 55 years and older from surrounding regions as they make the decision to retire in Niagara. This forecast indicates that planning to address falls more proactively in the face of an increasing number of seniors migrating to and currently living in Niagara could assist to ease the burden to Niagara EMS and the hospital system of increasing numbers of falls and ensuing transports to the emergency department for low acuity falls. From January 1, 2020 up to June 30, 2020, Niagara EMS responded to 3,718 seniors over the age of 65 who called 911 with a fall. With the addition of a possible 47,000 more seniors within the next 20 years, call volumes for falls will continue to increase, absent upstream innovative interventions such as the Falls Intervention Team.

Prior to the COVID-19 pandemic, work was underway to hire an additional occupational therapist and bring both positions internal as it was realized that continuation of contracted services afforded Niagara EMS minimal control over human resource issues and actually increased the cost of staffing.

Shortly after the COVID-19 pandemic was declared in March of this year, the occupational therapist seconded by Niagara EMS from the Hotel Diêu Shaver elected to withdraw services and return to the hospital environment leaving the position empty.

Posting the two positions as full time to a wider audience will improve recruitment of occupational therapists currently in secure full time positions elsewhere who may, however, want to be part of this innovative and high profile initiative. Indeed, the FIT was featured on a segment by the *CBC National* during an hour of programming highlighting innovative and novel approaches to addressing the impact of falls in Canada.

# **Alternatives Reviewed**

Staff continues to participate in the development of the Niagara-Ontario Health Team (N-OHT). The future design of coordinated and integrated delivery of health services through the N-OHT may include resources such as the FIT occupational therapist in collaboration with other agencies. In the interim, the following alternatives were reviewed:

 Continue to contract as temporary positions through Hotel Diêu Shaver, which will not eliminate the challenges experienced with recruitment, control of human resource issues and increased costs. Likely this option will not allow filling the two occupational therapists positions for FIT, and so will result in more preventable falls in our community, leading to resident injury and suffering; including possible death, (falls in the elderly that lead to bone fractures have a high mortality rate). This option may also lead to increased EMS overtime costs if 911 calls due to falls lead to hospital overcrowding and lengthy ambulance offload delays.  Post these two positions as temporary with the Region (not full time) to a wider audience. As evidenced, occupational therapists are in high demand making it unlikely a qualified occupational therapist will leave a permanent position and apply to a temporary position. Frequent turnover of temporary positions could also lead to avoidable training costs for new hires.

### **Relationship to Council Strategic Priorities**

The approval of two full time occupational therapists supports Council Strategic Priorities of fostering *Healthy and Vibrant Communities* through the delivery of quality, affordable and accessible Mobile Integrated Health services, specifically the FIT. In addition, this model contributes to a *Sustainable and Engaging Government* with a high quality, efficient, fiscally sustainable and coordinated core delivery of prehospital services that reduce the requirement for ambulance responses to falls while aiming to prevent future system delivery costs for responses to falls.

The outcomes of an integrated health system promotes improved opportunities for *Healthy and Vibrant Communities* and contributes to less institutionalized care and more aging at home supports that can be provided safely.

### **Other Pertinent Reports**

PHD 20-2019

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