
Subject: Increasing Capacity to Provide Mobile Integrated Health Services using External Funding

Report to: Regional Council

Report date: Thursday, March 25, 2021

Recommendations

1. That Regional Council **APPROVE** entering into a funding arrangement with the Ministry of Long-Term Care (MOLTC) for the expansion of Mobile Integrated Health with the implementation of the Community Paramedicine for Long Term Care (CP LTC) program;
2. That Regional Council **APPROVE** a gross budget adjustment to the 2021 EMS Operating Budget in the amount of \$1,738,275 to be funded in full by MOLTC funding; and
3. That Regional Council **DIRECT** staff to continue to advocate for additional funding to support the expansion of Mobile Integrated Health in Niagara.

Key Facts

- Mobile Integrated Health (MIH) is a new model of community-based health care adopted by Niagara EMS that combines paramedics working directly with other health care professionals, to provide needs-based, on-site, urgent and non-urgent care.
- MIH addresses specific health care needs of patients in their homes or within mobile environments and provides innovative approaches to health care that have traditionally required costly EMS, emergency department (ED) care, or hospital admission.
- The Ministry of Long-Term Care is funding a program to provide services to individuals who are waiting for placement in a long-term care home or who are soon to be eligible for long-term care.
- This initiative is part of the province's modernization plan to address systemic barriers in long-term care bed development, and the growing demand for long-term care.

- On December 11, 2020, Niagara EMS was invited by the Ministry of Long-Term Care to submit a program implementation plan and budget to confirm Niagara's interest in taking part in the new CP LTC Program. A notional funding allocation of \$3 million per year over 3 years was provided. This was based on the 2019 long-term care waitlist for the Niagara census division of 1,087 individuals.
- Information about this funding opportunity was previously shared with PHSSC in the Memorandum (PHD-C 02-2021) "Niagara EMS Temporary Funded Opportunities".

Financial Considerations

Niagara EMS submitted a budget proposal to the Ministry of Long-term Care to support participating in the MOLTC's CP LTC program. The MOLTC has fully approved this budget and will provide up to a total of \$8,203,800 in funding between now and March 31, 2024. The Ministry's approval includes funding initially for 8.0 temporary FTE paramedics, 2.0 temporary FTE Emergency Communications Nurses, 1.0 temporary FTE Scheduler/Admin Support, and 1.0 temporary FTE Supervisor/Superintendent. Additional funding is provided in years two and three of the agreement to increase the paramedic count to 12.0 temporary FTE's. There is also funding provided to include other external contracted professional health services as we learn more about the needs of this patient cohort. All EMS program areas were consulted prior to budget submission, to ensure accurate cost estimates were included related to training, staff development, uniforms, PPE, medical equipment and supplies, vehicles, IT and physical space requirements.

The Ministry is providing 100% funding for this program, and therefore there will be no impact on the Regional Levy, and will be a zero net impact on the EMS's 2021 operating budget. A gross budget adjustment of \$1,738,275 will be processed to adjust the 2021 Operating budget for the new funding and expenses in the Region's PeopleSoft system as follows:

Period	Expenditures	Funding
March, 2021	\$26,700	(\$26,700)
April to December 2021	\$1,711,575	(\$1,711,575)
Total	\$1,738,275	\$1,738,275

Future funding and expenses will be included in future operating budgets, again with a net impact of zero on the Regional Levy.

Program Overview

Niagara EMS remains focused on delivering high quality pre-hospital services, and introducing integrated models of care to provide better options for patients. Our goal is to ensure they are getting the right services, at the right time and place, from the right provider.

The CP LTC program is meant to provide services to seniors who are waiting for placement in a long-term care home, or who are soon to be eligible for long-term care. The goal is to keep these individuals stabilized in their illness trajectory and in their own homes for as long as possible.

The program will do this through both preventive and responsive care, and will be designed with a focus on collaboration. Within Niagara EMS, it will build on and expand our unique approach to MIH service delivery. As the program develops, there will be collaboration between all of the various MIH teams NEMS provides (CARE, FIT, MHART, ECNS etc.) as necessary to support the complex needs of this patient population. Externally, it will be coordinated with existing health services from across the Niagara region to reduce overlap and duplication. Partnerships will include the HNHB LHIN (home and community care), residential long-term care, emergency care, primary care and other community/social services.

The CPLTC program is based on four guiding principles:

- **Accessible:** Staff will be accessible 24 hours a day, 7 days a week, offering both home visits and virtual supports.
- **Responsive:** Prompt, flexible and patient-centred response to patient's changing circumstances or medical conditions.
- **Proactive:** Remote Patient Monitoring (RPM) to prevent emergency incidents or escalation in medical conditions. Regular wellness checks with patients over the phone to assess their current wellbeing. This is a proactive way of staying connected with complex patients who are referred to us and preventing problems, rather than waiting for them to call 911 during a crisis.
- **Safe:** Diagnostic procedures and assessments can be provided at home under appropriate medical oversight.

Operational and communication strategies are being developed to ensure local health system partners and community members are aware this new program is available across the Niagara Region.

Number of Patients to be Served

For Year 1, the program would set a target of serving 50-70 new patients per month (fluctuating caseload based on ongoing referrals, additions and discharges). This is in addition to our current caseload of rostered patients in existing MIH programs.

Implementation Timeline

It is anticipated that Niagara EMS will be ready to service patients in this new program by April 1, 2021 and will build capacity over time. The largest barrier to implementation is securing the necessary human resources to support this proposal, since our primary obligation is to respond to 911 calls for service and the pandemic has created significant operational challenges in this regard. Securing the required vehicles, administrative space and IT equipment may also pose challenges.

Alternatives Reviewed

If the new staff positions are not created, the new funding must be returned to the Ministry of Long-Term Care since the Region cannot retain unused Ministry funding, nor use it for other purposes. Doing this would result in seniors spending more time in Niagara hospitals before being discharged home, and increased pressure on our long-term care system to find beds for seniors who could remain at home with the right supports. It may also result in increased 911 calls, ED visits and hospital admissions by this cohort. Given COVID-19 outbreaks that have occurred in hospitals, there could also be greater risk for seniors in hospital to become infected with COVID-19.

Relationship to Council Strategic Priorities

This recommendation supports objective 2.1 of Council's Strategic Plan for Enhanced Community Wellbeing. This report's recommendations increase the capacity of long-term care across the region to meet the needs of the aging population, with no net budget impact on the Region.

Other Pertinent Reports

- Memorandum (PHD-C 02-2021) "Niagara EMS Temporary Funded Opportunities"
- PHD 10-2020 Niagara Emergency Medical Services System Transformation Update 3

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Appendices

Appendix 1 – funding letter from Ministry of LTC