
DATE: August 13, 2010

REPORT TITLE: **MEMORANDUM OF UNDERSTANDING WITH WILLIAM OSLER HEALTH SYSTEM TO REDUCE PARAMEDIC OFFLOAD DELAY**

FROM: Janette Smith, Commissioner of Health Services

RECOMMENDATION

That the Commissioner of Health Services be authorized to enter into a ten year agreement (2010-2020) with William Osler Health Services to reduce paramedic offload delay in the Emergency Room;

And further, that subject to William Osler achieving the reductions in offload delay that a capital investment be made by the Region to William Osler to assist in the redevelopment of the Peel Memorial Hospital site. The capital investment will not exceed the estimated net costs avoided by Peel Region over a ten year period.

REPORT HIGHLIGHTS

- Paramedic offload delays at area hospitals continues to be a major Program pressure and budget impact.
- A proposed ten year agreement between William Osler Health System and the Region of Peel would establish targets for reduction of Paramedic offload delay.
- If targets are met, the Region of Peel would invest capital dollars to the redevelopment of the Peel Memorial site.
- The Agreement will provide provisions to revisit the funding arrangements should there be changes in the current environment.

DISCUSSION

1. Background

Paramedic offload delay in area hospitals have created significant system pressures over the years to Peel Regional Paramedic Services (PRPS). As a result the system experiences an increase in its emergency response time, increase in overtime costs and overall unit hour pressures which diminishes the ability to respond in a timely fashion in the community.

Although there have been a number of initiatives put into place over the past few years with the Local Health Integration Networks, hospitals, community care access centres and the Program itself, PRPS continues to see offload delay as one of its major system pressures. In combination with these initiatives and the introduction of the Dedicated Offload Nursing Program funded 100 per cent by the Province, we have started to see a reduction in the

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growth of offload delay. In 2009 offload delay grew only by two per cent whereas previous years offload delay was increasing over 10 per cent annually.

Although growth of offload delay is being managed, the goal now needs to be the reduction of offload delay which is approximately 41,000 hours annually.

2. Proposed Agreement with William Osler Health System

At the General Committee meeting of Regional Council on April 15, 2010 a report titled, Partnership Opportunities at the Peel Memorial Centre for Integrated Health and Wellness, introduced partnership opportunities with William Osler Health System. One of these opportunities, as identified in the report, was to reduce paramedic offload delay at the Brampton Civic site of William Osler and to possibly invest these savings into the redevelopment of the Peel Memorial Hospital site. Council directed staff to continue working with William Osler staff to establish paramedic offload delay reduction targets and implications for capital funding, and report back to Council.

Approximately 16,400 hours of paramedic offload delay time was lost at the Brampton Civic site of William Osler in 2009. This represents \$3.4 million of service cost (cost shared 50 per cent with the province) which remained in the emergency department and was not able to respond to community emergencies.

In discussion with William Osler, it was agreed that William Osler will target to reduce paramedic offload delay by 10 per cent each year for the next five years (starting in 2010) and maintain those targets for the following five years. This would allow Peel Regional Paramedic Services to return the Paramedics to active response, and reduce pressures in future budgets to address call volume increases due to population growth and an aging population. As an incentive to William Osler to meet these targets, the Region will provide a capital investment equivalent to Peel Region's net costs avoided, to be used for the redevelopment of the Peel Memorial Hospital site.

The Agreement with the Hospital will provide provisions to revisit the funding arrangements should there be changes to the current environment such as provincial funding of the Dedicated Nursing Offload Program or eligibility of hospitals for DC funding. The Agreement will also be subject to each term of Council's approval and annual updates will be communicated to the Emergency and Protective Services Committee.

As noted in the April 2010 Council report, the proposed service delivery model for the Peel Memorial site will meet many of the public health and health care needs identified in past Council reports and the Comprehensive Health Status Report. The service delivery model focuses on three areas:

- Rehabilitation and Seniors Wellness including complex continuing care beds, inpatient rehabilitation and geriatric assessment;
- Community Mental Health including clinics, outreach services, addiction counseling and youth counseling;
- Acute Care Services including an urgent care centre to divert non-emergency Emergency Room visits, day surgeries.

Some of the services and programs will serve the entire Region including the children's treatment facility and mental health programs. Currently William Osler has a 60 per cent

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"capture rate", meaning that 40 per cent of residents in their catchment area travel to Mississauga or elsewhere to receive services. With the redeveloped Peel Memorial site, the capture rate should increase to 80 per cent; thus increasing health care capacity in Mississauga.

FINANCIAL IMPLICATIONS

The annual cost of the offload delay, in terms of resources utilized, is estimated at \$3.4 million annually. The MOHLTC provides a 50 per cent subsidy for paramedic operating costs so the real offload delay cost to Peel Region is \$1.7 million per year. With a phased in reduction of offload delay costs, the Region of Peel will avoid additional costs of \$6.8 million over the ten year term of the Agreement. This \$6.8 million would be invested in the redevelopment of Peel Memorial Hospital over the next ten years. If the offload target was not met, then the payment to the hospital would be reduced in the like amount. Since the offload savings would continue past the ten year term, the Region would avoid millions in future costs beyond the scope of this agreement.

CONCLUSION

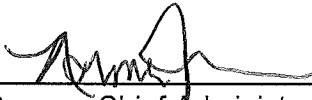
Given the cost of Paramedic offload delay at Brampton Civic Hospital and the important health and wellness services that will be provided by the redeveloped Peel Memorial site, it is recommended that the Region of Peel enter into a ten year memorandum of understanding with William Osler Health System to establish annual targets to reduce Paramedic offload delay which, if achieved, will result in a capital investment in the Peel Memorial site.



ACTING

Janette Smith
Commissioner of Health Services


Approved for Submission:



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