

HOWARD MOSCOE



DATE: January 21, 2009

TO: Chair and Members of the Community Development and Recreation Committee

RE: HOSPITAL RIP OFF

Ambulance Service is provided free of charge to residents of Toronto out of municipal tax dollars. Yet, few people know or understand that.

Why?

The reason is that every person who is transported to a hospital emergency room by ambulance is presented with a bill for \$45 by the hospital for "ambulance service". Most people pay this bill. The city receives none of this money. It is a complete rip off.

HOSPITAL OFFLOAD SITUATION

Apart from the growing overtime costs to the city, offload delays at hospital emergency rooms have placed the city in a precarious position. In October of 2001, Barry Gutteridge, Commissioner of Works and Emergency Services wrote:

"Toronto EMS has experienced 1,876 delays over an hour out of 8,543 transports. This rate of 22% is the highest monthly rate of delays ever recorded and represents about 78 times per day where a crew is in a hospital over an hour."

The city pleaded with the Ministry of Health on a number of occasions to address the situation to no avail. The situation remains as bad as ever. In a 2007 budget briefing note, Chief Bruce Farr wrote:

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“Hospital offload delays have resulted in available ambulance resources being depleted and impacts EMS response to emergency calls in the City. This has been a principle factor in the degradation of EMS response time from nearly 84% within 9 minutes in 1996 to only 68.1% within 9 minutes currently.”

“Average in hospital times in 2000 was 35 minutes versus an average of 63 minutes in 2006.”

EMS considers it unacceptable to have fewer than 20 ambulances available to respond to calls. There are times within this city that there are no available units and the violation of this 20 ambulance standard has become the norm.

It wasn't until Hamilton Chief Jim Kay, tabled an April 7, 2008 report detailing prolonged delays at the 4 Hamilton area hospitals, (many in excess of 4 hours), that the Ministry of Health began to pay any attention.

The Ministry announced the “Dedicated Nurses Initiative” but made it clear in a letter to Mayor Fred Eisenberger that it was one time funding with a possible extension for up to one additional year. This program was launched in 14 municipalities. (See attached.)

I understand that the Toronto program is going well, but it seems quite clear that the cost of the program, if extended to all hospitals, will be borne by the local municipality. It is also clear from the Ministry of Health releases on this matter that the municipality will have to negotiate an agreement with each hospital if the Dedicated Nursing program is expanded beyond the pilot project stage after the Ministry withdraws. Perhaps the hospitals should be using the money that they collect for “ambulance service” to fund this program.

The hospital offload situation is finally being addressed but it is not an excuse to allow the perception to remain that citizens pay for ambulance service. This is obviously a matter that will be considered when negotiating the dedicated nursing program with the hospitals.

YOU DECIDE

This city has a fundamental decision to make. Are we going to continue to provide ambulance service free through municipal tax dollars or should we be charging a user fee? I, for one, believe that ambulance service is basic and ought to be provided to our citizens through our tax dollars, but, because of the fraudulent billing by hospitals, most of our citizens do not know that we provide this service, nor do they understand the true cost of providing it.

That being the case, we should either end the deception, or bill for ambulance service and take it off the tax base. Why not? We have already done it for garbage collection. What next? Fire service? Policing?

RECOMMENDATION

1. This matter be deferred until such time as the expansion of the dedicated nursing program is being negotiated with the hospitals.
2. That the Chief General Manager, Emergency Medical Services, inform every patient who is transported by a City of Toronto ambulance that this service is provided free of charge by the City of Toronto through municipal tax dollars and this be put into effect after the completion of the dedicated nursing program pilot project.
3. That the Toronto District Health Council be so advised.
4. That all 14 participating municipalities be also so advised.

HOWAD MOSCOE

Ward 15 Councillor/Eglinton-Lawrence

Ids/Community Services Com/Hospital Rip Off

Attach/1

DEDICATED NURSES TO RECEIVE AMBULANCE PATIENTS INITIATIVE (2008/09)

Approval has been provided by the government for one-time funding of up to \$4.5 million in 2008/09 to 14 municipalities experiencing the most serious and persistent off-load delays so they can negotiate agreements with some of their hospitals for dedicated nurses to receive ambulance patients.

Description:

This initiative provides one-time funding to the most affected municipal EMS agencies to assist them in dealing with persistent ambulance off-load delays by contracting with affected hospitals for dedicated nursing services in hospital ERs for ambulance patients. The dedicated nurse(s) will be employed by the hospital(s) to receive ambulance patients, thus freeing ambulances to better respond to 911 calls.

For this year the ministry will fund up to 14 municipalities under a Memorandum of Agreement and the municipalities will in turn enter into local agreements with hospitals to purchase services of dedicated nurses for receiving ambulance patients during the key off-load delay time periods.

This initiative is a component of the ministry's 'Reducing Alternate Level of Care and Emergency Room Pressures Through Enhanced Care for Seniors' strategy. Funding will be provided to municipalities on a 100%, one-time basis for 2008-2009. Participating municipalities and hospitals will have an opportunity prior to March 2009 to provide the Ministry with information in support of extending the initiative for up to a one-year.

Implementing dedicated nursing to receive ambulance patients provides relief to off-load delays while a longer-term solution under the ER Wait Time Strategy is developed and implemented.

Memorandum of Agreement:

A Memorandum of Agreement (MoA) will be established between the ministry and each funded municipality, with two performance measures:

1. ambulance off-load delay times
2. ambulance unit hours availability

Subsequently, separate agreements between each municipality and their targeted hospitals will be negotiated for dedicated nursing services to receive ambulance patients.

Participating Municipalities for 2008-2009

LHIN	Municipality (2008/09)
Toronto Central	City of Toronto
Champlain	City of Ottawa
Hamilton NHB	Hamilton
Central West	Region of Peel
Mississauga Halton	Region of Halton
Central East	Region of Durham
Central	Region of York
South West	County of Middlesex
Erie St. Clair	County of Essex
North East	Greater Sudbury
Central East	County of Peterborough
Hamilton NHB	Region of Niagara
Waterloo-Wellington	Region of Waterloo
South East	County of Frontenac