

budget

—2019—



BUDGET NOTES

Toronto Paramedic Services

What We Do

Toronto Paramedic Services provides 24-hour paramedic care in response to life-threatening emergency medical calls. Toronto Paramedic Services (PS) delivers the following services:

- Community Paramedicine & Emergency Call Mitigation
- Emergency Medical Dispatch & Preliminary Care
- Emergency Medical Care

PS has stewardship over 45 ambulance stations (including a Multi-Function Station) and 220 ambulances and response vehicles to support service delivery.

Why We Do It

Toronto Paramedic Services protects and improves the quality of life in Toronto by providing superior and compassionate pre-hospital and out-of-hospital, paramedic-based health care.

Our Experience & Success

- Continue to work towards their long-term strategy which focuses on migrating towards a Multi-Function Facility System to improve operational efficiencies to accommodate growth in emergency call demand. 2018 marked the year that the first Multi-Function Station became fully operational.
- Continued improvement in 911 call mitigation seen from the Community Paramedicine Programming which provides primary medical care and referrals that support aging at home, health promotion, illness and injury prevention.
- Emergency call response times significantly improved from 2010 to 2017, with 2017 at an all-time low since 2003 of 11.5 minutes, 90% of the time

Key Challenges

- Increased emergency call demand and emergency patient transports due to an aging and growing population.
- Ensuring the health and safety of all Paramedic Services staff.
- Increased patient acuity equates to greater need for specialized care due to 17% increase in stroke, trauma, STEMI (heart attacks) transports.
- Polarized Socio-Economic Status within the City results in: Fragmented support systems; Reliance on paramedic and public services; Increase in vulnerable and marginalized populations.

Priority Actions

- The 2019 Staff Recommended 10-Year Capital Plan includes \$62.670 million for 3 multi-function stations and 2 ambulance posts as continued investment in infrastructure to support growth and improve service delivery.
- The 2019 Staff Recommended Capital Plan provides \$29.940 million for the lifecycle replacement of medical equipment (including defibrillators and power stretchers) and Communication equipment.
- Funding of \$0.353 million for 5 additional Community Paramedics is included in the 2019 Staff Recommended Operating Budget to continue call diversion strategies.

Budget At A Glance

STAFF RECOMMENDED OPERATING BUDGET			
\$Million	2019	2020	2021
Gross Expenditures	\$233.5	\$235.6	\$237.2
Revenues	\$147.8	\$147.9	\$148.1
Net Expenditures	\$85.7	\$87.7	\$89.1
Approved Positions	1,484.3	1,482.3	1,481.3

STAFF RECOMMENDED 10-YEAR CAPITAL PLAN			
\$Million	2019	2020-2028	Total
Gross Expenditures	\$3.4	\$92.5	\$95.9
Debt	\$2.2	\$39.4	\$41.6

Note: Excluding 2018 carry forward funding to 2019

Our Key Service Levels



Provide an estimated **244,136** emergency patient transports



Process an estimated **410,061** emergency calls at the Central Ambulance Communications Centre



Paramedic crew arrival response time **11.8** minutes 90% of the time



Deliver a minimum of **800** emergency medical training courses



5,702 referrals of vulnerable patients by Paramedics to community health agencies to allow supportive aging at home

Source of Image: www.icons8.com

Key Service Deliverables

24-hour, 365 days per year emergency medical response for the city of Toronto with 45 ambulances stations and a fleet of 220 ambulances

Response times to life-threatening emergency calls within **11.8** minutes, 90% of the time

Transport estimated **244,136** emergency patients to hospitals

Respond to an estimated **337,265** medical emergencies a 4% increase over the 2018 projection of **324,293**

Provide **800** First-Aid/CPR and Public Access Defibrillation training courses

The Community Paramedicine Program will mitigate over **4,000** emergency calls

Paramedics will refer **5,702** vulnerable patients to community health agencies to allow for aging at home

Achieve the provision of **37,800** hours of continuing medical education for PS staff

Maintain and provide oversight of a minimum **1,575** Automatic External Defibrillators for public access

Who We Serve

Community Paramedicine & Emergency Call Mitigation

- 911 Callers
- Health Care Providers
- Hospitals
- Incident Victims

Beneficiaries

- Residents & Visitors

Emergency Medical Dispatch & Preliminary Care

- 911 Callers
- Hospitals
- Incident Victims

Beneficiaries

- Residents & Visitors

Emergency Medical Care

- 911 Callers
- Hospitals
- Patient

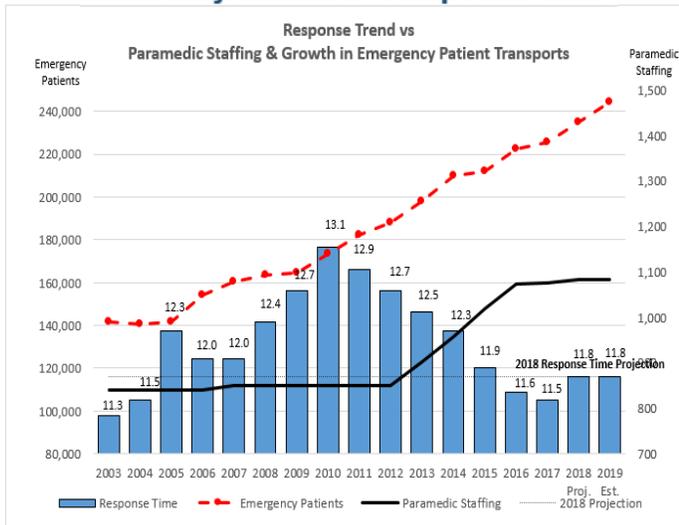
Beneficiaries

- Residents & Visitors

How Well We Are Doing

Performance Measures

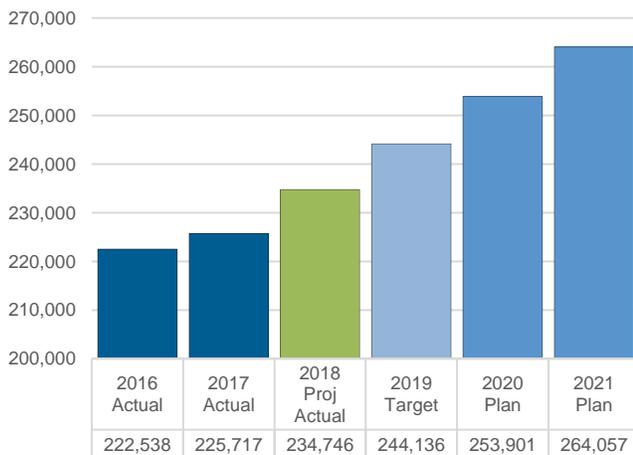
Efficiency Measure - Response Time



Behind the Numbers

- Response time refers to the entire time elapsed between answering the phone at PS' dispatch centre to the arrival of the paramedics at the scene of the emergency.
- With increased staffing levels and through implementation of service efficiency initiatives, response time improved to 11.5 minutes, 90% of the time, in 2017.
- For 2018, response time is projected to be 11.8 minutes, 90% of the time due to an aging and growing population.
- Response time for 2019 is anticipated to remain at 2018 levels.
- The 2019 Staff Recommended Budget includes funding of \$0.353 million for expansion of the Community Paramedicine at Home initiative which provides at-home care and health care referrals thereby mitigating 911 call demand pressure.

Output Measure - Number of Emergency Transports Provided



- PS has experienced an approximately 4% annual increase in emergency transports provided per year as a result of an aging and growing population.
- Emergency patient transports provided by PS are projected to increase by 9,029 transports from 2017 to 2018.
- PS anticipates the increasing transport demand trend to continue into 2019 and projects 9,390 additional transports over 2018.

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Toronto Paramedic Services:

Gord McEachen

Acting Chief and General Manager

Tel: (416) 392-2205

Email: Gord.Mceachen@toronto.ca

Corporate:

Ritu Sadana

Manager, Financial Planning

Tel: (416) 395-6449

Email: Ritu.Sadana@toronto.ca



RECOMMENDATIONS

RECOMMENDATIONS

The City Manager and Chief Financial Officer and Treasurer recommend that:

1. City Council approve the 2019 Staff Recommended Operating Budget for Toronto Paramedic Services of \$233.556 million gross, \$85.735 million net for the following services:

Service:	Gross (\$000s)	Net (\$000s)
Community Paramedicine & Emergency Call Mitigation	\$3,427.9	\$1,395.0
Emergency Medical Dispatch & Preliminary Care	\$28,396.1	\$215.9
Emergency Medical Care	\$201,732.3	\$84,124.6
Total Program Budget	\$233,556.3	\$85,735.5

2. City Council approve the 2019 service levels for Toronto Paramedic Services as outlined in Appendix 3 of this report, and associated staff complement of 1,484.3 positions, comprising of 2.0 capital positions and 1,482.3 operating positions.

3. City Council approve the 2019 new user fees and the discontinuation of user fees for Toronto Paramedic Services identified in Appendix 6, for inclusion in the Municipal Code Chapter 441 "Fees and Charges".

4. City Council approve the 2019 Staff Recommended Capital Budget for Toronto Paramedic Services with a total project cost of \$9.450 million, and 2019 cash flow of \$4.431 million and future year commitments of \$24.705 million comprised of the following:

a. New Cash Flow Funds for:

1. Six new / change in scope sub-projects with a 2019 total project cost of \$9.450 million that require cash flow of \$2.450 million in 2019 and future year cash flow commitments of \$6.000 million for 2022; and \$1.000 million for 2023.

2. Three previously approved sub-projects with a 2019 cash flow of \$0.975 million; and future year cash flow commitments of \$5.396 million for 2020; \$5.854 million for 2021; \$2.974 million for 2022; and \$3.481 million for 2023.

b. 2018 approved cash flow for 5 previously approved sub-projects with carry forward funding from 2018 into 2019 totalling \$1.006 million.

5. City Council approve the 2020 - 2028 Staff Recommended Capital Plan for Toronto Paramedic Services of \$67.760 million in project estimates, comprised of \$4.950 million for 2020; \$2.600 million for 2021; \$5.215 million for 2022; \$6.070 million for 2023; \$8.405 million for 2024; \$9.154 million for 2025; \$10.446 million for 2026; \$8.685 million for 2027, and \$12.235 million for 2028.

6. City Council consider the operating costs of \$0.147 million net in 2019; \$0.154 million net in 2020; \$0.151 million net in 2021; and \$1.143 million net in 2022 resulting from the approval of the 2019 Capital Budget for inclusion in the 2019 and future year operating budgets.

7. City Council direct Toronto Paramedic Services to report back in advance of the 2020 Budget process on activities taken to date to keep pace with the increasing call demand in PS and provide future strategies that include financial, operational and staffing implications as well as targeted outcomes to help mitigate call volume and demand.

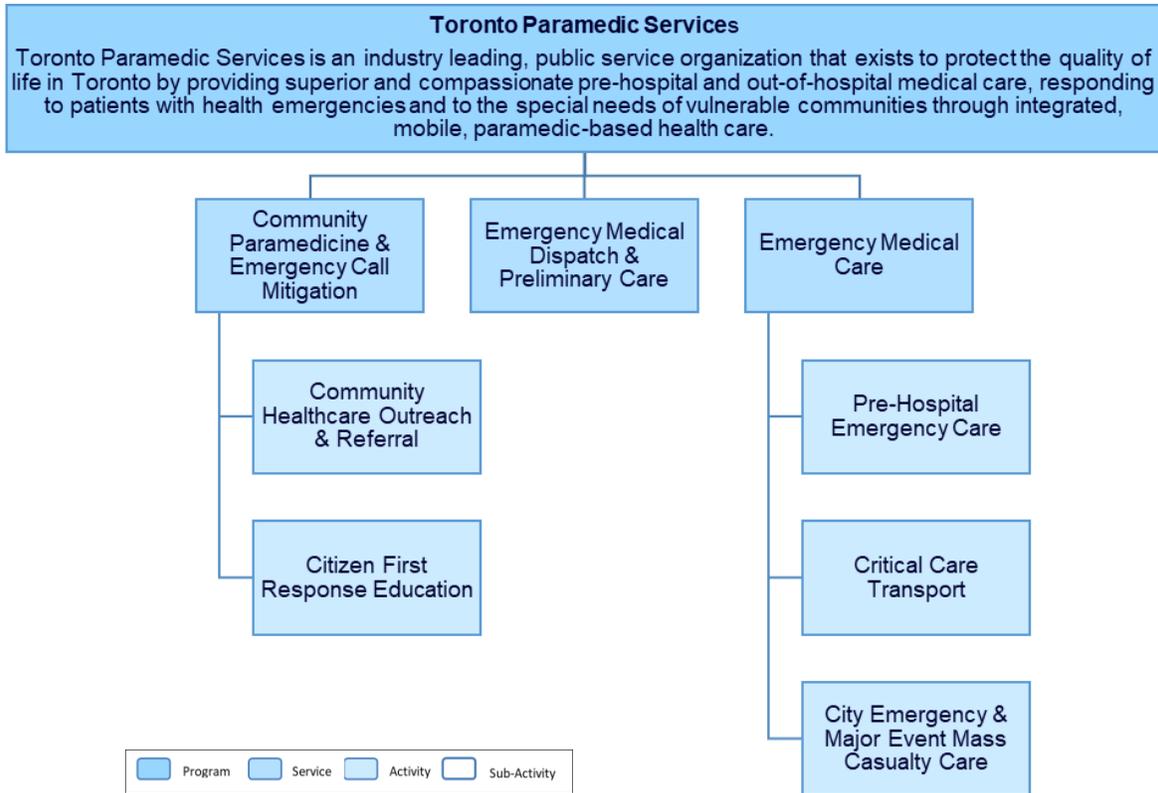
8. City Council direct PS and CreateTO as part of the City-wide Real Estate Portfolio Strategy to report back on options to optimize site locations for the 45 existing ambulance stations and service district centres to the Chief Financial Officer and Treasurer in time for the 2020 Budget process.

9. City Council approve the Community Paramedicine Vehicles capital project, subject to the approval of the new/enhanced priority, Community Paramedicine at Home Program Expansion initiative, which is recommended in the 2019 Staff Recommended Operating Budget.



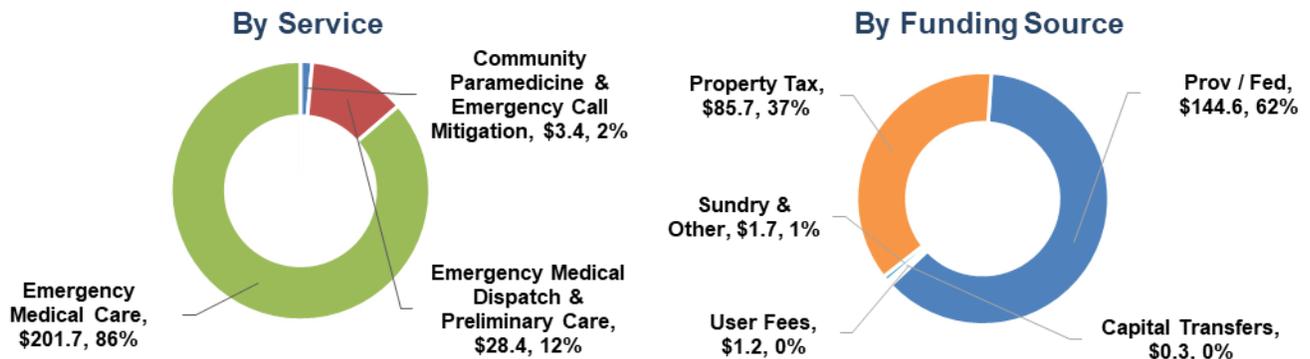
2019 STAFF RECOMMENDED OPERATING BUDGET

PROGRAM MAP



2019 OPERATING BUDGET HIGHLIGHTS

2019 Staff Recommended Operating Budget \$233.5M



- **5.6%** Budget increase over the 2018 Approved Net Operating Budget to maintain existing service levels and meet additional service demands, primarily attributable to inflationary increases in salaries and benefits, increased costs related to legislative changes, increased operational expenditures as a result of growth in call demand and patient transports.
- **\$0.353M** New/enhanced funding to continue 911 call mitigation efforts in Community Paramedicine and to deliver a primary care paramedic education program to low-income residents.
- **2020/2021** Increases primarily attributable to inflationary adjustments for salaries and benefits, partially offset by increases in provincial subsidies.

2019 OPERATING BUDGET OVERVIEW

Table 1: 2019 Staff Recommended Operating Budget and Plan by Service

(In \$000s)	2018		2019			Changes		Incremental Change	
	Budget	Projected Actual*	Base	New / Enhanced	Total Staff Recommended Budget			2020 Plan	2021 Plan
By Service	\$	\$	\$	\$	\$	\$	%	\$	\$
Community Paramedicine & Emergency Call Mitigation									
Gross Expenditures	3,069.4	3,054.4	3,074.7	353.2	3,427.9	358.5	11.7%	451.7	85.9
Revenue	2,374.2	2,374.2	2,032.9		2,032.9	(341.3)	(14.4%)	744.6	216.7
Net Expenditures	695.1	680.2	1,041.8	353.2	1,395.0	699.9	100.7%	(293.0)	(130.8)
Emergency Medical Dispatch & Preliminary Care									
Gross Expenditures	29,017.1	28,532.8	28,396.1		28,396.1	(621.0)	(2.1%)	174.4	172.1
Revenue	28,347.2	28,347.2	28,180.2		28,180.2	(167.0)	(0.6%)	(335.4)	11.8
Net Expenditures	669.9	185.6	215.9		215.9	(454.0)	(67.8%)	509.8	160.4
Emergency Medical Care									
Gross Expenditures	192,365.7	193,223.3	201,382.3	350.0	201,732.3	9,366.6	4.9%	1,445.6	1,359.8
Revenue	112,547.1	112,784.9	117,257.7	350.0	117,607.7	5,060.6	4.5%	(314.5)	(37.0)
Net Expenditures	79,818.7	80,438.4	84,124.6		84,124.6	4,305.9	5.4%	1,760.1	1,396.7
Total									
Gross Expenditures	224,452.2	224,810.5	232,853.1	703.2	233,556.3	9,104.1	4.1%	2,071.7	1,617.8
Revenue	143,268.5	143,506.2	147,470.8	350.0	147,820.8	4,552.3	3.2%	94.8	191.5
Total Net Expenditures	81,183.7	81,304.3	85,382.3	353.2	85,735.5	4,551.8	5.6%	1,976.9	1,426.3
Approved Positions	1,477.3	1,470.3	1,477.3	7.0	1,484.3	7.0	0.5%	(2.0)	(1.0)

* Year-End Projection Based on Q3 2018 Variance Report

Base Changes
(\$4.199M Net)

- Salary & benefit increases due to inflation, the effects of legislative changes and the 2018 arbitration award.
- Increases in medical supplies, materials and fleet maintenance costs due to the growth in emergency call volumes and patient transports.
- Above pressures partially offset by increases in Ministry of Health (MOH) grant funding.

New/Enhanced Service Priorities
(\$0.353M Gross / \$0 Net)

- Addition of 5.0 permanent Community Paramedic positions and operating expenditures of 4 vehicles to support the 911 call mitigation efforts of the Community Paramedicine at Home Program.
- Addition of 2.0 Education Superintendents and operating supplies to support the Primary Care Paramedic Training Program delivered to low-income residents, fully funded through the Provincial Program Delivery funding.

Future Year Plan

- Inflationary increases in salaries and benefits, partially offset by increases in Provincial funding.
- Operating impact of capital projects on completion and inflationary/exchange rate increases for reserve fund contributions.

EQUITY IMPACTS

Increasing access to services for vulnerable seniors and persons with disabilities as well as employment opportunities for persons with low income: Toronto Paramedic Services' 2019 Staff Recommended Operating Budget includes an investment of \$0.353 million for expansion of the Community Paramedicine at Home Program to mitigate dependency of residents on 911 as a primary means of health care, which will have a positive impact on persons with low income, vulnerable seniors, and persons with disabilities, increasing their access to health services.

The budget also includes an investment of \$0.350 million to continue implementing the Primary Care Paramedic Training Program, which provides training, as well as financial and employment benefits to unemployed and underemployed residents of Toronto. These investments support the Toronto Seniors Strategy and Poverty Reduction Strategy.

2019 Staff Recommended Operating Budget Changes by Service

The 2019 Staff Recommended Operating Budget for Toronto Paramedic Services is \$4.552 million net or 5.6% higher than the 2018 Council Approved Operating Budget. Table 2 below summarizes the key cost drivers contributing to the budget pressures required to provide 2018 level of services as well as recommended new/enhanced service priorities to meet outcomes.

Table 2: 2019 Staff Recommended Operating Budget Changes by Service

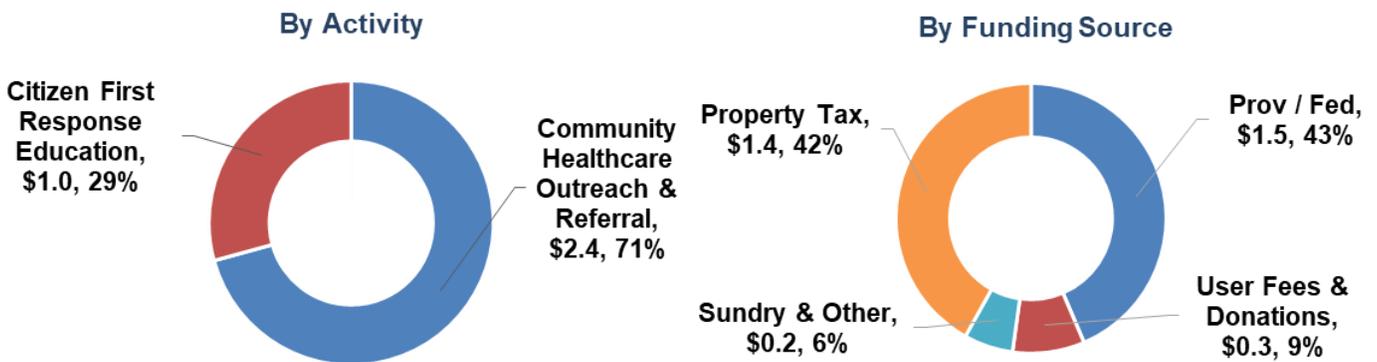
(In \$000s)	Services			Total	
	Community Paramedicine & Emergency Call Mitigation	Emergency Medical Dispatch & Preliminary Care	Emergency Medical Care	\$	Positions
	\$	\$	\$	\$	
2018 Council Approved Operating Budget (Net)	695.1	669.9	79,818.7	81,183.7	1,477.3
Base Expenditure Changes					
Prior Year Impacts					
Reversal of One-Time Grant Funding from the Ministry of Health for Costs Related to Post Traumatic Stress Disorder (PTSD) Claims (\$0.685M Gross)					
Annualization of 1 Superintendent Planning Added for the Metrolinx Project (\$0.093M Gross)					
Annualization of 14 Vehicle and Equipment Preparation Technicians, 1 Superintendent and 1 Commander Added for the NW Multi-Function Station	365.5		(242.8)	122.7	
Operating Impacts of Capital					
Increases in Vehicle and Equipment Reserve Fund Contributions for ongoing Maintenance and Replacement (Additional Ambulances, Power Stretchers)			147.8	147.8	
Salaries and Benefits					
COLA, Progression Pay, Step Increases and Realignment	(118.9)	291.3	5,113.0	5,285.5	
Increase in Parental/Maternity Leave Costs Due to Legislative Changes (Bill 148)	15.8	107.5	1,166.4	1,289.7	
Economic Factors					
Inflationary Increase in Utilities	1.2	4.9	58.9	65.0	
Inflationary Increases in Medical Equipment, Computer Hardware and Software Maintenance	8.9	49.2	265.7	323.7	
Other Base Expenditure Changes					
Furniture Replacement		5.5	7.5	13.0	
Adjustment of Budget to Actual Experience	335.6	(506.1)	170.5		
Increase in Interdivisional Charges for Fuel, Police Radio, Facilities and Fleet Support	(223.4)	(650.9)	1,340.5	466.2	
Increase in Contribution to Vehicle Reserve Due to Exchange Rate Fluctuations			200.0	200.0	
Increase in Supplies and Materials Due to 4% Annual Growth in Emergency Transport Delivery Experienced			122.7	122.7	
Drivers' License Upgrades for Emergency Support Unit (ESU) Program Staff from Class F to Class CZ			36.0	36.0	
Sub-Total Base Expenditure Changes	384.7	(698.6)	8,386.1	8,072.1	
Base Revenue Changes					
User Fee Rate Increase (2.18%)	24.0	(2.9)	2.9	24.0	
Heavy Urban Search and Rescue (HUSAR) Revenue Increase			60.0	60.0	
Provincial Funding Increase - Communications Centre (CACC Grant) and Ambulance Operations (LAND Ambulance Grant)	14.0	(241.7)	4,017.2	3,789.6	
Sub-Total Base Revenue Changes	38.0	(244.6)	4,080.1	3,873.5	
Total Base Changes	346.7	(454.0)	4,305.9	4,198.6	
New & Enhanced Services					
Enhanced Service Priorities					
Additional Paramedics for the Community Paramedicine at Home Program focused on 911 call mitigation	353.2			353.2	5.0
Additional Temporary Education Superintendents and Supplies for the Primary Care Paramedic (PCP) Training Program Delivered to Low-Income Residents (\$0.350M Gross)					2.0
Sub-Total New & Enhanced Services¹	353.2			353.2	7.0
Total 2019 Staff Recommended Operating Budget (Net)	1,395.0	215.9	84,124.6	85,735.5	1,484.3

Note:

- For additional information, refer to [Appendix 5](#) (page 43) for the 2019 Staff Recommended New and Enhanced Service Priorities.

Community Paramedicine & Emergency Call Mitigation Services provide community-based primary medical care and referrals that support aging at home, health promotion, illness and injury prevention and reduction of 911 calls through emergency call mitigation strategies; at-home medical care to support seniors and vulnerable citizens in order to remain independent in the community; and first-response education and awareness within the community to support medical first response for all health care emergencies.

2019 Staff Recommended Operating Budget \$3.4M



Refer to [Appendix 2](#) (page 40) for the 2019 Staff Recommended Operating Budget by Service.

Key Service Levels



Provision of **800** emergency medical training courses

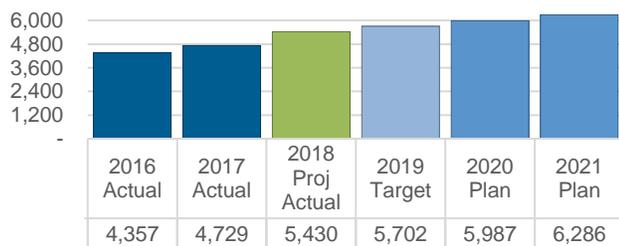


Provision of **5,702** Community Referrals by Paramedics to assist vulnerable patients

Refer to [Appendix 3](#) (page 42) for a complete list of the 2019 Staff Recommended Service Levels for this Service.

Service Performance Measures

Number of Community Referrals (CREMS)



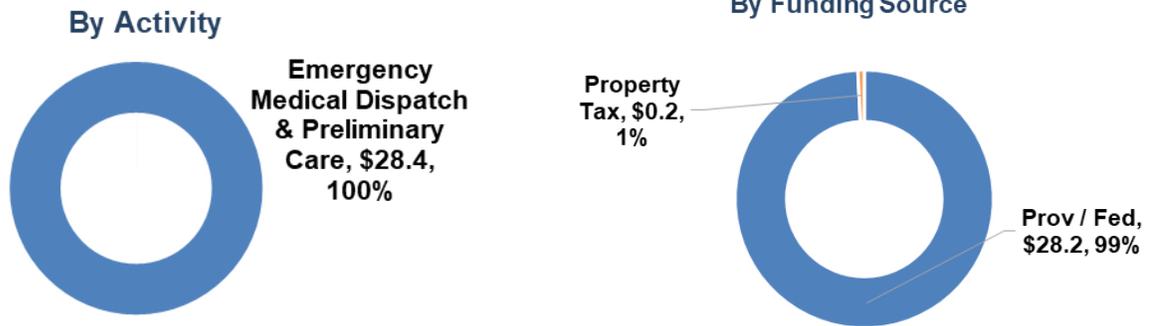
Number of Registered AEDs



- Community Paramedics refer patients to community health agencies which allow independent and supportive aging at home; resulting in emergency call mitigation and a reduction in emergency department visits.
- Community referrals are projected to increase in 2019 and future years due an aging and growing population and as a result of additional Community Paramedics positions added in 2018 and 2019.
- Medical studies confirm that survival rates for cardiac arrest patients increase significantly when early CPR is performed and there is quick access to a defibrillator.
- Based on Heart & Stroke Foundation of Ontario best practices and in collaboration with the City of Toronto replacement commitment, the number of registered Automated External Defibrillators (AEDs) accessible to the public will continue to meet the service level of 1,575 for 2019.

Emergency Medical Dispatch & Preliminary Care Services provide immediate access to dispatch life support instructions through Toronto's Central Ambulance Communications Centre prior to paramedic arrival.

2019 Staff Recommended Operating Budget \$28.4M



Refer to [Appendix 2](#) (page 40) for the 2019 Staff Recommended Operating Budget by Service.

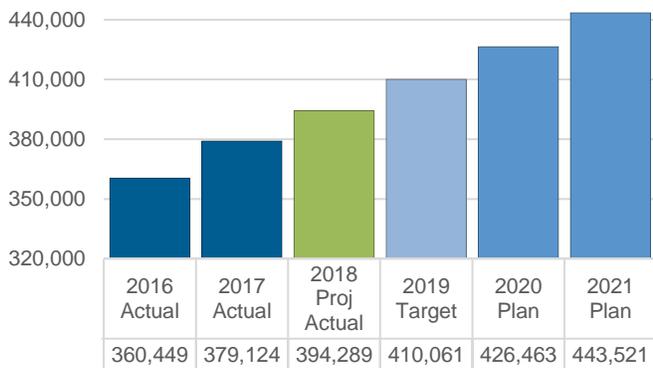
Key Service Levels



Refer to [Appendix 3](#) (page 42) for a complete list of the 2019 Staff Recommended Service Levels for this Service.

Service Performance Measures

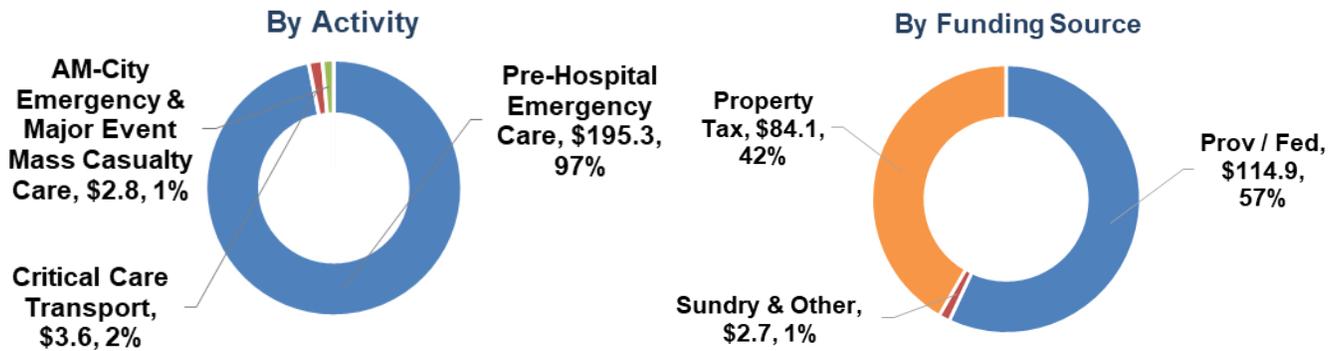
Number of Emergency Calls Processed



- The number of emergency calls to be processed in 2019 is projected to increase by 4%, or 15,772 calls, based on prior year experience.
- An aging and growing population is the primary factor for increased emergency call volumes.

Emergency Medical Care Services provide outstanding paramedic-based, mobile health services and emergency medical response, and provide medically appropriate transport for all patients in the community; and provide on-site, dedicated medical coverage for a variety of large-scale events and respond to emergencies involving mass casualty victims.

2019 Staff Recommended Operating Budget \$201.7M



Refer to [Appendix 2](#) (page 40) for the 2019 Staff Recommended Operating Budget by Service.

Key Service Levels

Respond to an estimated **337,265** emergency calls for unique incidents

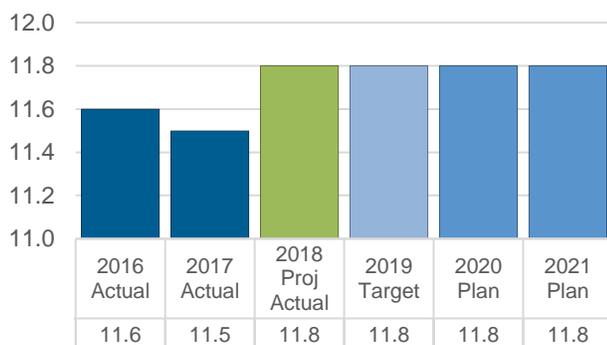
Provide an estimated **244,136** emergency patient transports

Paramedic crew arrival response time within **11.8** minutes 90% of the time

Refer to [Appendix 3](#) (page 42) for a complete list of the 2019 Staff Recommended Service Levels for this Service.

Service Performance Measures

Response Time



Number of Emergency Transports Provided



- Response time is the total elapsed time between PS' dispatch centre answering a call to the arrival of the paramedics at the scene.
- Despite increased call volumes, PS saw a trend in improved response time in prior years due to staffing increases and employing dispatch technology solutions to generate efficiencies.
- The graph reflects the impact of the growth trend in emergency transport provided at a rate of 4% per year due to an aging and growing population.
- The number of emergency patient transports provided is projected to increase at a rate of 4% for 2019 and future years.

2018 OPERATING PERFORMANCE

2018 Service Performance

Key Service Accomplishments:

- Completed the construction and implementation of the first multi-function paramedic station with a full-year of operations.
- Responded effectively to two significant mass casualty events and provided timely and definitive life-saving care for a significant number of patients in both instances. The responses were supported by 2018 industry best-practice training in mass casualty incidents.
- Improved the Central Ambulance Communications Centre's dispatch response time in the processing of emergency calls and the availability of ambulances throughout the city by updating decision-support software which allows dispatchers to more accurately anticipate, monitor and assign the right paramedic resources.
- Re-accreditation as a Centre of Excellence (ACE) attained by the Central Ambulance Communications Centre which makes the centre one of approximately 190 communications centres worldwide to achieve this standing. This accreditation ensures that system resources are dispatched equitably based on patient needs.
- Increased referrals made by Community Paramedics to preventative support services for patients who have used 911 two or more times within a six-month period by approximately 5% as a result of expanding the Community Paramedicine Program.
- Implemented peer-led suicide intervention training through staff continuing education sessions to support the Psychological Health & Wellness Program and the wellbeing and resiliency of front line staff.
- Successfully trained, graduated and hired 10 Primary Care Paramedics through a joint program funded by Toronto Employment & Social Services which allows low-income individuals become life-saving professionals.

Status Update on 2018 Council Approved New & Enhanced Services

During the 2018 Budget process, City Council approved \$0.575 million gross and net for the new and enhanced services in the 2018 Operating Budget for Toronto Paramedic Services. A status on their implementation and results to-date are highlighted below:

Custodial & Maintenance – NW Station at 1300 Wilson Ave

- PS' first Multi-Function Station at 1300 Wilson opened in late 2017. A number of the efficiencies projected from this new station have been realized:
 - Face-to-face interaction between Superintendents and Paramedics has increased with the centralized book-on process, supporting employee engagement and making supervision more efficient.
 - Improved utilization of medical supplies have been realized reducing waste on expired items and just in time delivery of supplies.
 - Fleet maintenance and cleaning facilities have improved the clean and prep time for an ambulance from 4 hours down to an average of 59.4 minutes.
 - In conjunction with the Union a new schedule for paramedics was piloted to improve ambulance availability while improving the work life balance for the paramedics.
 - The 2018 Approved Operating Budget included reductions in Overtime & Meal Breaks, Medical Supplies, Medications and Vehicle Maintenance which resulted in savings of \$0.530 million. The balance of the savings of \$0.706 million has been incorporated into the 2019 Staff Recommended Operating Budget. The savings in 2018 were redirected to hire 14 new permanent Logistics Technicians. These new positions have been annualized in the 2019 Staff Recommended Operating Budget.

Community Paramedicine at Home Program Expansion

- 5 Additional Paramedics were added to the Program in July 2018. The addition of these staff enabled PS to expand the program, not only increasing the number of individual visits to frequent 911 callers but also expanding clinics 1 day per week in various TCHC buildings where it has been determined that PS receives frequent calls.
- In 2018, PS realized a reduction of approximately 4,000 calls from frequent callers through the 911 system.
- While the investments made in 2018 created efficiencies in staff deployment and mitigating call volumes, the increase in overall call volumes due to growth continues to outpace these efficiencies.

2018 Financial Performance

Table 3: Budget vs. Actual by Category of Expenditures and Revenues

Category (In \$000s)	2017	2018	2018	2019	2019 Change from	
	Actual	Budget	Projected	Total Staff	2018 Approved	
	\$	\$	Actual *	Recommended	Budget	Budget
Salaries and Benefits	178,041.2	188,100.6	189,086.8	195,399.9	7,299.3	3.9%
Materials & Supplies	6,359.3	7,076.0	6,475.5	7,306.7	230.8	3.3%
Equipment	938.4	1,035.8	967.6	1,059.1	23.3	2.2%
Service and Rent	9,480.0	9,582.2	9,670.3	9,979.8	397.6	4.1%
Contribution To Capital	515.7	831.3	831.3	831.3		
Contribution To Reserves/Reserve Funds	7,646.9	7,655.6	7,605.6	8,344.6	689.1	9.0%
Other Expenditures	21.2	10.3	10.3	24.3	14.1	136.6%
Inter-Divisional Charges	9,679.2	10,160.4	10,163.1	10,610.6	450.1	4.4%
Total Gross Expenditures	212,682.0	224,452.2	224,810.6	233,556.3	9,104.1	4.1%
Inter-Divisional Recoveries	921.3	594.0	644.0	892.0	298.0	50.2%
Provincial Subsidies	132,387.4	140,482.1	140,669.9	144,559.5	4,077.4	2.9%
Federal Subsidies						
Other Subsidies						
User Fees & Donations	1,154.6	1,180.2	1,180.2	1,204.2	24.0	2.0%
Licences & Permits Revenue						
Transfers From Capital	75.0	314.0	314.0	314.0		
Contribution From Reserves/Reserve Funds						
Sundry and Other Revenues	624.7	698.1	698.1	851.1	152.9	21.9%
Total Revenues	135,163.0	143,268.5	143,506.3	147,820.8	4,552.3	3.2%
Total Net Expenditures	77,519.0	81,183.7	81,304.3	85,735.5	4,551.8	5.6%
Approved Positions	1,453.3	1,477.3	1,477.3	1,484.3	7.0	0.5%

* Year-End Projection Based on Q3 2018 Variance Report

Toronto Paramedic Services is projecting to be over spent by \$0.121 million net at year-end, primarily due to costs associated with call volume increases and the ongoing cost of Worker's Safety Insurance Board (WSIB) claims associated with legislative change which amended the *Workplace Safety and Insurance Act, 1997* (WSIA) to create a statutory presumption that PTSD diagnosed in first responders is work-related, unless the contrary is proven.

For additional information regarding the 2018 Q3 operating variances and year-end projections, please refer to the attached link for the report entitled "*Operating Variance Report for the Nine-Month Period Ended September 30, 2018*", approved by City Council at its meeting on December 13, 2018.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2019.CC1.7>

Impact of 2018 Operating Variance on the 2019 Staff Recommended Operating Budget

- The unfavourable 2018 year-end variance is anticipated to continue into 2019, with call volumes continuing to rise and the increase in WSIB claim payments continuing into 2019. Given the unpredictable nature of WSIB claims, the 2019 Staff Recommended Operating Budget for WSIB costs remains flat to 2018 budget levels. PS will continue to monitor and report WSIB expenditures throughout the year.

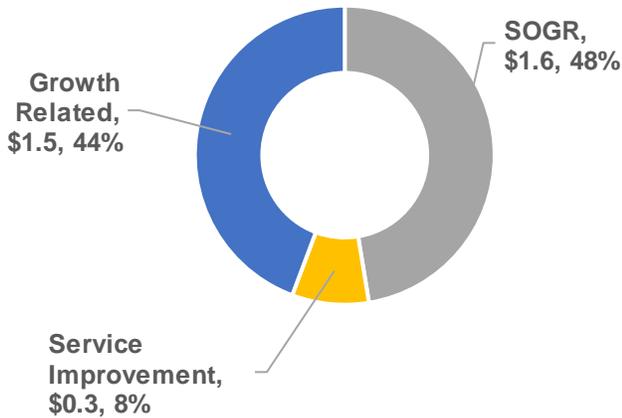


2019 – 2028 STAFF RECOMMENDED CAPITAL BUDGET AND PLAN

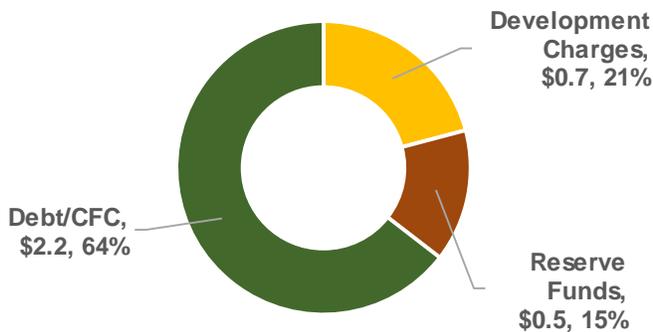
10-YEAR CAPITAL PLAN HIGHLIGHTS

2019 Staff Recommended Capital Budget \$3.425M

By Project Category

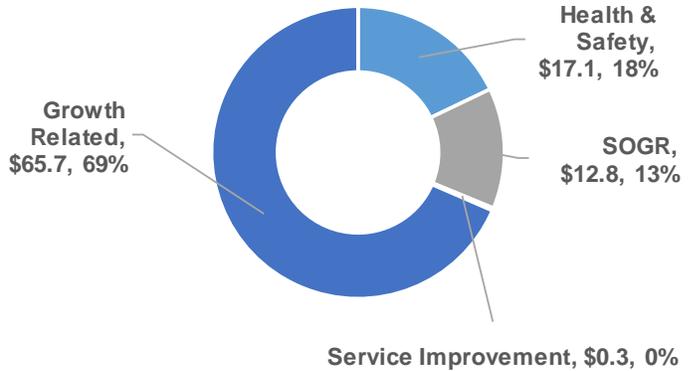


By Funding Source

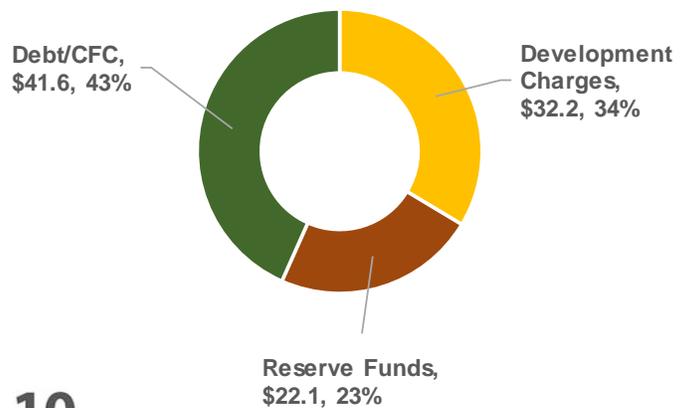


2019-2028 Staff Recommended Capital Budget and Plan \$95.890M

By Project Category



By Funding Source



1 YEAR

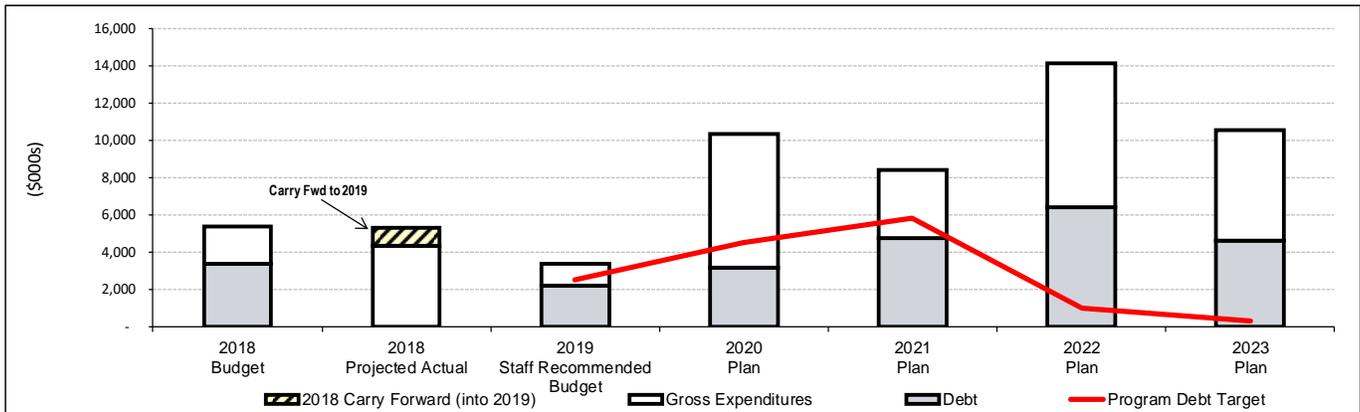
- **\$1.650M** Continue funding lifecycle replacement projects for *Mobile Data Communications, Radio Infrastructure for Portable Coverage and Medical Equipment*.
- **\$1.000M** Continue funding the purchase/remounting of 5 *Additional Ambulances*.
- **\$0.295M** Continue the preliminary design and preparation phase of *Multi-Function Station #2*.
- **\$0.280M** Expand the fleet of the Community Paramedicine at Home Program by adding 4 *Community Paramedicine Vehicles*.
- **\$0.200M** Begin the plan and design of stand-alone *Ambulance Post* to augment services to be provided by multi-function stations.

10 YEARS

- **\$17.140M** Health & Safety and Legislated projects to purchase and replace cardiac defibrillators and mechanical power stretchers.
- **\$65.670M** Growth projects which include 3 multi-function stations, 2 ambulance posts and an additional 15 ambulances to address increasing service demands.
- **\$0.280M** Service Improvement projects to expand the Community Paramedicine emergency response vehicle fleet.
- **\$12.800M** State of Good Repair projects for mobile data equipment, ambulance radio, portable radio and medical equipment replacement.

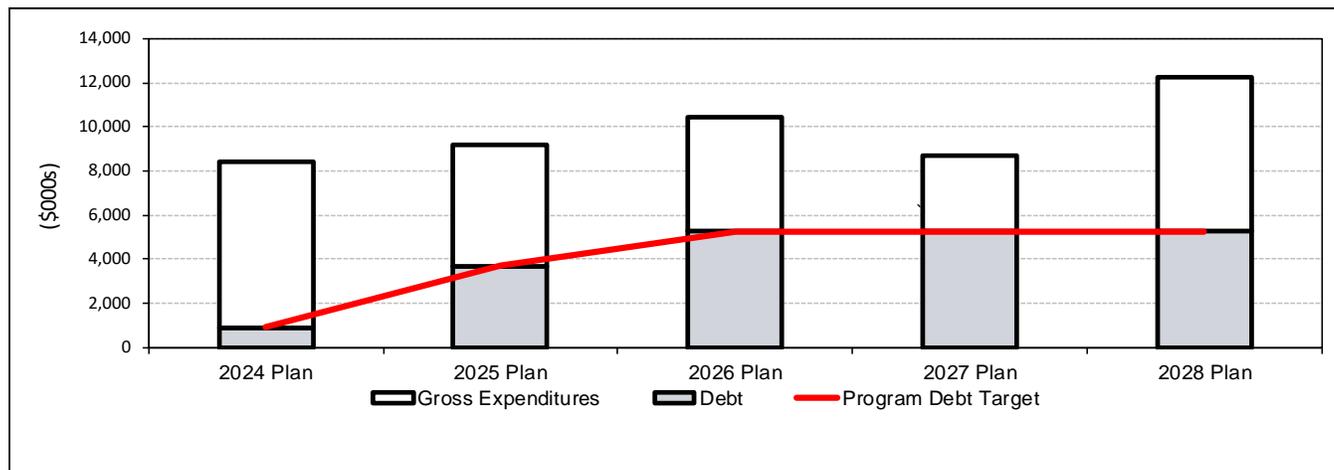
2019 – 2028 CAPITAL BUDGET & PLAN OVERVIEW

Chart 1: 10-Year Capital Plan Overview



		2019 Staff Recommended Capital Budget and 2020 - 2023 Capital Plan								
		2018		2019	2020	2021	2022	2023	2019 - 2023	5-Year Total Percent
		Budget	Projected Actual							
Gross Expenditures by Project Category:										
Health & Safety Legislated		541					4,240	4,240	8,480	18.1%
SOGR		1,776		1,650	2,550	1,200	825	825	7,050	15.0%
Service Improvement		901		280					280	0.6%
Growth Related		2,172		1,495	7,796	7,254	9,124	5,486	31,155	66.3%
Total by Project Category		5,390		3,425	10,346	8,454	14,189	10,551	46,965	100.0%
Program Debt Target				2,510	4,530	5,813	1,032	300	14,185	
Financing:										
Debt		3,424		2,210	3,156	4,749	6,450	4,620	21,185	45.1%
Reserves/Reserve Funds		730		500	500	500	4,765	4,765	11,030	23.5%
Development Charges		57		715	6,690	3,205	2,974	1,166	14,750	31.4%
Provincial/Federal		228								
Debt Recoverable										
Other Revenue		951								
Total Financing		5,390		3,425	10,346	8,454	14,189	10,551	46,965	100.0%
By Status:										
2018 Capital Budget & Approved Future Year (FY) Commitments		5,390	4,352	1,080	6,450	6,968	732		15,230	32.4%
Changes to Approved FY Commitments				(105)	(1,054)	(1,114)	2,242	3,481	3,450	7.3%
2019 New/Change in Scope & FY Commitments				2,450			6,000	1,000	9,450	20.1%
2020 - 2023 Capital Plan Estimates					4,950	2,600	5,215	6,070	18,835	40.1%
2-Year Carry Forward for Reapproval										
1-Year Carry Forward to 2019			1,006							
Total Gross Annual Expenditures & Plan		5,390	5,358	3,425	10,346	8,454	14,189	10,551	46,965	100.0%
Asset Value (\$) at year-end										
Yearly SOGR Backlog Estimate (not addressed by current plan)										
Accumulated Backlog Estimate (end of year)										
Backlog: Percentage of Asset Value (%)										
Debt Service Costs				87	332	519	696	759	2,393	
Operating Impact on Program Costs				147	154	151	1,143		1,595	
New Positions										

Chart 2: 10-Year Capital Plan Overview (Continued)



	2024 - 2028 Staff Recommended Capital Plan						
	2024	2025	2026	2027	2028	2019 - 2028	10-Year Total Percent
Gross Expenditures by Project Category:							
Health & Safety Legislated SOGR	2,260	1,600	1,600	1,600	1,600	17,140	17.9%
Service Improvement	800	1,100	850	1,485	1,515	12,800	13.3%
Growth Related	5,345	6,454	7,996	5,600	9,120	280	0.3%
						65,670	68.5%
Total by Project Category	8,405	9,154	10,446	8,685	12,235	95,890	100.0%
Program Debt Target	904	3,700	5,258	5,260	5,260	34,567	
Financing:							
Debt	904	3,700	5,258	5,260	5,260	41,567	43.3%
Reserves/Reserve Funds	2,414	2,150	2,150	2,175	2,175	22,094	23.0%
Development Charges	5,087	3,304	3,038	1,250	4,800	32,229	33.6%
Provincial/Federal Debt Recoverable							
Other Revenue							
Total Financing	8,405	9,154	10,446	8,685	12,235	95,890	100.0%
By Status:							
2018 Capital Budget & Approved Future Year (FY) Commitments						15,230	15.9%
Changes to Approved FY Commitments						3,450	3.6%
2019 New/Change in Scope & FY Commitments						9,450	9.9%
2024 - 2028 Capital Plan Estimates	8,405	9,154	10,446	8,685	12,235	67,760	70.7%
2-Year Carry Forward for Reapproval							
Total Gross Annual Expenditures & Plan	8,405	9,154	10,446	8,685	12,235	95,890	100.0%
Asset Value(\$) at year-end							
Yearly SOGR Backlog Estimate (not addressed by current plan)							
Accumulated Backlog Estimate (end of year)							
Backlog: Percentage of Asset Value (%)							
Debt Service Costs	435	244	553	686	686	4,997	
Operating Impact on Program Costs	(228)	(47)	450	1,127	(676)	2,221	
New Positions							

Staff Recommended 10-Year Capital Plan by Project Category

Table 4: Summary of Capital Projects by Project Category

(In \$000s)	Total App'd Cash Flows to Date*	2019 Budget	2020 Plan	2021 Plan	2022 Plan	2023 Plan	2024 Plan	2025 Plan	2026 Plan	2027 Plan	2028 Plan	2019 - 2028 Total	Total Project Cost
Total Expenditures by Category													
Health & Safety													
<i>Defibrillator Replacement Purchases</i>					2,640	2,640	660					5,940	5,940
<i>Power Stretchers</i>	400				1,600	1,600	1,600	1,600	1,600	1,600	1,600	11,200	11,600
Sub-Total	400				4,240	4,240	2,260	1,600	1,600	1,600	1,600	17,140	17,540
State of Good Repair													
<i>Medical Equipment Replacement Program</i>	330	500	500	500	525	525	550	550	550	575	575	5,350	5,680
<i>Mobile Data Communications</i>	500	300	300	300	300	300	250	550	300	300	330	3,230	3,730
<i>Radio Infrastructure for Portable Coverage</i>	550	850	1,750	400						610	610	4,220	4,770
Sub-Total	1,380	1,650	2,550	1,200	825	825	800	1,100	850	1,485	1,515	12,800	14,180
Service Improvement													
<i>Community Paramedicine Vehicles</i>	339	280										280	619
Sub-Total	339	280										280	619
Growth Related													
<i>Additional Ambulances</i>	3,801	1,000	1,000	1,000								3,000	6,801
<i>Ambulance Post Program</i>		200	1,400	400	150	505	1,345					4,000	4,000
<i>Multi-Function Station #2</i>	800	295	5,396	5,854	8,974	4,481						25,000	25,800
<i>Multi-Function Station #3</i>						500	4,000	6,454	7,596	950		19,500	19,500
<i>Multi-Function Station #4</i>									400	4,650	9,120	14,170	14,170
Sub-Total	4,601	1,495	7,796	7,254	9,124	5,486	5,345	6,454	7,996	5,600	9,120	65,670	70,271
Total Expenditures by Category (excluding carry forward from 2018)	6,720	3,425	10,346	8,454	14,189	10,551	8,405	9,154	10,446	8,685	12,235	95,890	102,610

*Life to Date approved cash flows are provided for multi-year capital projects with cash flow approvals prior to 2018, excluding ongoing capital projects (i.e. Civic Improvement projects)

2019 - 2028 Key Capital Projects

Capital projects funded in the 10-Year Staff Recommended Capital Plan support Toronto Paramedic Services long-term strategy of improving service delivery by building multi-function stations for more efficient staff deployment and asset management while also investing in health and safety, state of good repair (SOGR) and service improvement to ensure ongoing replacement and purchases of medical and mobile data equipment, and emergency response vehicles.

Health and Safety

- Health and Safety projects account for \$17.140 million or 17.9% of the total 10-Year Staff Recommended Capital Plan's expenditures for the purchase and lifecycle replacement of medical equipment.
 - The *Defibrillator Replacement Purchases* project (\$5.940 million) provides funding for the replacement of 240 Cardiac Monitor Defibrillators with an estimated life of 5 to 7 years. These highly technical medical devices are able to assess the presence of electrical activity within cardiac muscles.
 - The *Power Stretchers* project (\$11.200 million) provides funding for the replacement power stretchers which reduce health and safety risks related to heavy lifting by paramedics. With a lifespan of 5 years, total funding of \$11.200 million is planned beginning in 2022 for the regular replacement program that will replace 40 stretchers each year.

State of Good Repair (SOGR)

- SOGR projects account for \$12.800 million or 13.3% of the total 10-Year Staff Recommended Capital Plan's expenditures for the following projects.
 - The *Medical Equipment Replacement Program* project (\$5.350 million) provides funding for the annual replacement of stair chairs, scoop stretchers, spine boards, etc. to maintain the equipment in a state of good repair.
 - The *Mobile Data Communications* project (\$3.230 million) provides funding for the replacement of mobile data equipment to be installed in approximately 27 ambulances annually.

- The *Radio Infrastructure for Portable Coverage* project (\$4.220 million) provides funding to replace 200 radios for use in ambulance vehicles and 200 portable radios for Paramedics with a lifecycle replacement of 10 years. This includes the Dispatch Console Replacement sub-project for \$2.000 million which provides funding for the next Generation 911 (NG911) system. NG911 is a new technology aiming to upgrade the current 911 service infrastructure.

Service Improvement

- Service Improvement projects amount to \$0.280 million or 0.3% of the total 10-Year Staff Recommended Capital Plan's spending plan.
 - The *Community Paramedicine Vehicles* project (\$0.280 million) provides funding to expand the Program's Fleet by 4 emergency response vehicles for an enhanced service priority in the 2019 Operating Budget, *Community Paramedicine at Home Program Expansion*, which will add 5 Community Paramedics in 2019.
 - This investment concludes a 2-year plan that added 8 emergency response vehicles and 10 paramedics, as part of the City's Seniors Strategy, to provide coverage throughout the City from 6:00am to midnight with the potential for 24-hour coverage, 7 days a week and which helps mitigate 911 emergency medical call demand.
 - Approval of the 2019 funding for this project is subject to the approval of the new/enhanced service priority funding included in the 2019 Staff Recommended Operating Budget for the expansion of PS's *Community Paramedicine at Home Program*.

Growth Related

- Growth Related projects account for \$65.670 million or 68.5% of the total 10-Year Staff Recommended Capital Plan's expenditures.
 - The *Additional Ambulances* project (\$3.000 million) provides funding for the remounting/purchase of 5 ambulances per year in 2019, 2020 and 2021 which are required to address ongoing growth in emergency call demand and patient transports.
 - The *Ambulance Post Program* project (\$4.000 million) provides funding for the construction of 2 smaller storefront posts to augment services to be provided in Multi-Function Station catchment areas. Paramedics will begin and end their shifts at Multi-Function Stations but will be deployed during to strategic posts while waiting to respond to their next emergency response call and for rest and meal breaks.
 - *Ambulance Post 1* – required in the Rexdale/Woodbine area. The construction will align with Fire Service's Woodbine Development project.
 - *Ambulance Post 2* – required in the City for the Multi-Function Station at 1300 Wilson Avenue. Specific site to be determined.
 - 3 Multi-Function station projects with 20 or more ambulance bays to facilitate greater efficiencies in staff deployment and asset management for an increasing number of ambulance vehicles.
 - The *Multi-Function Station #2* project with funding of \$25.000 million for the construction of the new facility on City-owned property in the Progress Avenue & Kennedy Road area starting towards the end of 2019.
 - The *Multi-Function Station #3* with funding of \$19.500 million for project design and site preparation planned in 2023/2024 and expected completion by 2027.
 - The *Multi-Function Station #4* with funding of \$14.170 million for project design and site preparation planned in 2026 and expected completion by 2029.

Operating Impact of Completed Capital Projects

Table 5: Net Operating Impact Summary

Projects	2019 Budget		2020 Plan		2021 Plan		2022 Plan		2023 Plan		2019 - 2023		2019 - 2028	
	\$000s	Positions	\$000s	Positions	\$000s	Positions	\$000s	Positions	\$000s	Positions	\$000s	Positions	\$000s	Positions
Previously Approved														
<i>Additional Ambulances</i>	189		(108)								81		81	
<i>Multi-Function Station #2</i>							1,023		132		1,155		833	
Sub-Total: Previously Approved	189		(108)				1,023		132		1,236		914	
New Projects - 2019														65
<i>Additional Ambulances</i>	23		2		(7)		224		(112)		130		130	
<i>Power Stretchers</i>	(65)										(65)		(65)	
Sub-Total: New Projects - 2019	(42)		2		(7)		224		(112)		65		65	
New Projects - Future Years														1,242
<i>Additional Ambulances</i>			260		148		(99)		(20)		289		289	
<i>Ambulance Post Program</i>					10		(5)				5		10	
<i>Defibrillator Replacement Purchases</i>													42	
<i>Multi-Function Station #3</i>													901	
Sub-Total: New Projects - Future Years			260		158		(104)		(20)		294		1,242	
Total (Net)	147		154		151		1,143				1,595		2,221	

The Staff Recommended 10-Year Capital Plan will increase future year Operating Budgets by \$2.221 million net over the 2019 - 2028 period, primarily due to operational costs of Multi-Function Station #2 beginning in 2022, Multi-Function Station #3 beginning in 2026 and inflationary and exchange rate increases for Vehicle and Equipment Reserve contributions.

For 2019, the operating impact of \$0.147 million net comprises of:

- An increase of \$0.212 million net for the *Additional Ambulances* project for inflationary and exchange rate increases in the Vehicle and Equipment Reserves which will ensure adequate funding to cover maintenance and replacement costs.
- An increase in Provincial funding revenue of \$0.065 million net for costs of the *Power Stretchers* project now eligible for 50% subsidy.

The 2019 operating costs for the projects mentioned above have been included in the 2019 Staff Recommended Operating Budget for PS and any future operating impacts will be reviewed each year as part of the annual Operating Budget process.

2018 CAPITAL PERFORMANCE

2018 Project Delivery

During 2018, Toronto Paramedic Services accomplished the following capital projects and activities.

- Completion of the following projects:
 - Purchase and installation of Power Stretchers to the ambulance fleet.
 - Completed the full operation of NW District Multi-Function Station at 1300 Wilson Avenue.
 - Purchase of 4 new response vehicles for the Community Paramedicine Program.
- Several State of Good Repair Projects continued:
 - Ongoing Replacement programs for Mobile Data Communications equipment and medical equipment.
 - Ambulance Radios and Dispatch Console replacements.
- Continued work on 2 Growth related projects:
 - Purchase of 4 new ambulances and 5 remounted units to increase the fleet.
 - Preparation work continued on Multi-Function Station #2 at 130 Progress Avenue.

Status Update on Council Approved New Capital Projects in the 2018 Capital Budget

During the 2018 Budget process, City Council approved a new capital project totalling \$0.560 million in cash flow funding to expand PS' fleet of emergency response vehicles for the Community Paramedicine at Home Program. The implementation status is detailed below:

- In 2018, the first year of this project was completed with the purchase and conversion of 4 emergency response vehicles for the Community Paramedicine at Home Program. During the year Provincial Funding was received from the Central East LHIN for an additional unit which was also purchased. The remaining four 4 emergency response vehicles will be purchased in 2019 completing the intended scope of this project.

2018 Financial Performance

Table 6: Budget vs. Actual by Project Category

	2017			2018			2019	
	Budget	Actual	Spending Rate %	Budget	Projected Actual *	Spending Rate %	Staff Recommended Capital Budget (excl. 1 Yr Carry Forward)	Staff Recommended Capital Budget (incl. 1 Yr Carry Forward)
Health & Safety	7.028	6.487	92.3%	0.541	0.541	100.0%		
SOGR	1.041	0.304	29.2%	1.776	1.214	68.4%	1.650	2.159
Service Improvement	3.783	3.283	86.8%	0.901	0.900	99.9%	0.280	0.306
Growth Related	2.765	2.414	87.3%	2.172	1.697	78.1%	1.495	1.966
Total	14.617	12.488	85.4%	5.390	4.352	80.7%	3.425	4.431

Note - 2018 projection based on the Q3 capital variance submission

As illustrated in the table above, the year-end projected spending rate for 2018 is 80.7%. Growth Related spending of 78.1% reflects delays in the *Multi-Function Stations #2* project due to a lack of project management resources. State of Good Repair spending rate of 68.4% reflects contract award issues in the *Mobile Data Communications* project. The underspent funding will be carried forward into 2019 from 2018. Paramedic Services continues to strive to achieve more timely spending patterns with better project planning and projects controls.

For additional information regarding the 2018 Q3 capital variances and year-end projections for PS, please refer to the attached link for the report entitled "*Capital Variance Report for the Nine-Month Period Ended September 30, 2018*" approved by City Council at its meeting on December 13, 2018.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2019.CC1.8>

Impact of the 2018 Capital Variance on the 2019 Staff Recommended Capital Budget

- As a result of the delays in the capital projects described in the 2018 Q3 Capital Variance Report, funding of \$1.006 million is being carried forward from 2018 for inclusion in the 2019 Staff Recommended Capital Budget to continue the capital work.
- The 2019 - 2028 Staff Recommended Capital Budget and Plan includes a revised cash flow funding estimate for the Multi-Function Station #2 construction project. The Program has realigned cash flow estimates in 2019 based on the revised project timeline and activities.



ISSUES FOR DISCUSSION

ISSUES IMPACTING THE 2019 BUDGET

2019 Budget Overview

2019 Operating Budget:

- Toronto Paramedic Services protects and improves the quality of life in Toronto by providing superior and compassionate pre-hospital and out-of-hospital, paramedic-based health care. PS strives to provide:
 - Outstanding paramedic-based, mobile health services and emergency medical response, and to provide medically appropriate and functionally sound transport for all patients in the community.
 - Community-based primary medical care and referrals that support aging at home, health promotion, illness and injury prevention and reduction of 911 call mitigation strategies.
 - At-home medical care to support seniors and vulnerable citizens in order to remain independent in the community.
 - Citizen first response education and awareness within the community to support medical first response for all healthcare emergencies.
 - Immediate access to dispatch life support instructions through Toronto's Central Ambulance Communication Centre prior to paramedic arrival.
 - Outstanding paramedic-based, mobile health services and emergency medical response, and to provide medically appropriate and functionally sound transport for all patients in the community.
- Since 2011, the call demand for emergency medical response has increased by 24%, driven by a growing and aging Toronto population. The City has responded to this overwhelming demand for paramedic services through strategic investments, both in operating, discussed below as well as in capital infrastructure as noted in the following sections to continue to maintain the level of service provided by PS.
- Between 2013 and 2016, 220 additional paramedics and 8 Superintendents were added that helped improve the response time, reducing it from 12.5 minutes in 2013 to 11.5 minutes, 90% of the time, in 2017.
- Since 2018, PS has implemented a number of initiatives, summarized below, to keep pace with the increasing call demands while ensuring clinical excellence in patient-focused medical care. These initiatives will continue to be implemented throughout 2019 for which funding is included in PS' 2019 Staff Recommended Operating Budget. Examples include:
 - Expanding the Community Paramedicine at Home initiative by adding 8 emergency response vehicles and 10 paramedics between 2018 and 2019 designed to ensure that seniors and other vulnerable patients who are at higher risk of health care issues have appropriate supports in place to manage their medical and social conditions, ultimately reducing their reliance on 911 and the hospital system.
 - Updating decision-support software, enabling dispatchers to more accurately anticipate, monitor and assign the right paramedic resources throughout the city.
 - Expanding the STEMI (a type of heart attack), stroke, trauma, and post-cardiac arrest patient care programs to reduce pre-hospital mortality and improve the quality of life for patients and families. These programs continue to demonstrate dramatically improved outcomes.
 - The Primary Care Paramedic (PCP) Training Program which invests in educating low-income residents to become life-saving professionals. The PCP Program is fully funded by Toronto Employment & Social Services with funding received from the Province under the Program Delivery funding envelope.
 - Attaining efficiencies through a full year of operations at the first Multi-Function Station at 1300 Wilson Avenue in support of the long-term strategy to modernize PS' service delivery model in order to improve performance and better utilize paramedic resources.

- The 2019 Staff Recommended Operating Budget for PS of \$233.556 million gross and \$85.735 million net is \$4.552 million net or 5.6% above the 2018 Council Approved Operating Budget. It recommends \$0.703 million gross and \$0.353 million net for two enhanced service priorities.
 - Funding for 5 additional Community Paramedics (\$0.353 million gross and net) for the *Community Paramedicine at Home Program* that will provide additional support for emergency call mitigation strategies; and
 - Funding for additional staff resources and program supplies for the Primary Care Paramedic (PCP) Training Program, which educates low-income residents to become life-saving professionals. The PCP Program is fully supported by Toronto Employment & Social Services with funding received from the Provincial government.
- The 2019 Staff Recommended Operating Budget does not recommend any service reductions as they would negatively impact the Program's service levels and its ability to meet its service objectives.

10-Year Capital Plan:

- The 2018 Council Approved Capital Budget for PS was \$5.390 million primarily dedicated to the planning and construction of the second multi-function station and an ambulance post, additional ambulances and state of good repair projects for lifecycle replacement of medical and communications equipment. During 2018, PS experienced minor delays primarily due to the lack of adequate project management resources for the Multi-Function Station #2 project and the delay in issuance of the Mobile Dispatch Software contract. As a result, the spend rate was projected to be 80.7% of the 2018 Capital Budget. Unspent cash flow funding of \$1.006 million has been carried forward into 2019 to continue the capital work.
- The Staff Recommended 2019 - 2028 Capital Plan provides investments of \$95.890 million primarily for Growth related projects including 3 multi-function stations, 5 additional ambulances per year (2019-2021) and 2 ambulance posts. All projects address the issue of increased call demand. PS Upgrades to infrastructure and vehicles which will modernize the current deployment model and maintain service levels.
- The Staff Recommended 10-Year Capital Plan reflects an increase of \$32.793 million or 52.0% in capital funding when compared to the 2018 - 2027 Approved Capital Plan. Key changes are summarized as follows:
 - Due to a lack of project management resources resulting in a delay in the preparation and design of the *Multi-Function Station #2* project, cash flow funding estimates were reviewed and adjusted with capital project activities and timing. \$3.481 million has been realigned to the revised completion date of Dec 2023. Cash flow funding has also increased for the project by \$3.450 million, funded from development charges, to accommodate construction cost escalations due to the delays in the project.
 - New cash flow funding for 2 projects that invest in growth in support of the Multi-Function Facility System model:
 - The *Ambulance Post – Rexdale* for a cost of \$2.000 million added in 2019-2021 which will align to Toronto Fire Services Woodbine/Rexdale development project.
 - The *Multi-Function Station #4* for a cost of \$14.170 million added to address patient transport growth and efficiency. This consists of \$5.040 million in 2026 to 2027 plus \$9.120 million in 2028.
 - Cash flow funding was added to 5 previously approved projects to ensure the health and safety of paramedics and adequate maintenance of medical and Communications equipment:
 - The *Mobile Data Communications* project (\$0.330 million added in 2028) represents the ongoing replacement of mobile data equipment.
 - The *Defibrillator Replacement Purchases* project (\$0.660 million added in 2024) to replace additional defibrillators purchased between 2017-2018.
 - The *Additional Ambulances* project (\$3.000 million added from 2019 to 2021) to increase the fleet inventory by 5 ambulances each year from 2019-2021.

- The *Power Stretchers* project (\$1.600 million added in 2028), and the *Radio Infrastructure for Portable Coverage* project (\$1.600 million in 2020-2021 and \$0.610 million in 2028) due to lifecycle replacement requirements.
- The *Medical Equipment Replacement Program* project (\$0.170 million added each year in 2019-2021, \$0.175 million added each year in 2022-2027) to account for inflation and the devaluation of the Canadian dollar against the US dollar. In addition, costs were added (\$0.575 million in 2028) for lifecycle replacement of medical equipment.
- Due to new development charge funding becoming available, cash flow funding for the *Multi-Function Station #3* project was accelerated to begin in 2023 from 2024. Acceleration of this project is in support of the long-term strategy to modernize PS' service delivery model to meet call demand pressures.
- Following a City-wide review of unmet capital priorities, debt funding of \$7.000 million gross and debt has been added to expand the Multi-Function Station #2 to reach its full capacity of 7.97 acres at the 330 Progress Ave. facility.
 - This added funding will allow PS to consolidate recruitment and education facilities currently provided at several locations, including the Head Quarters 4330 Dufferin St., and relocate them to 330 Progress Ave. allowing the Central Ambulance Communications Centre at 4330 Dufferin St. accommodate new staff added in 2018/2019 respond to the growth in call volumes.
- Despite the added capital investments as noted above, Toronto Paramedic Services requires an additional \$80.8 million in capital funding that could not be accommodated during the 2019 Budget process. These unmet capital needs are discussed in detail in the following sections.

In summary, Toronto Paramedic Services faces many service challenges and budget pressures in 2019. Both the Staff Recommended 2019 Operating Budget and 2019 – 2028 Capital Budget and Plan will continue to support and implement the PS' Multi-Function Station Plan and address service priorities while maintaining service levels for residents and businesses across the city.

Additional Service Demands

Capital Unmet Needs Not Included in the 2019 – 2028 Staff Recommended Capital Budget and Plan

The "Unmet Capital Needs" identified by Toronto Paramedic Services, are noted in the table below and will require additional debt funding to proceed. The "Unmet Capital Needs" identified cannot be accommodated within the City's current debt targets given the limitations on debt servicing costs and therefore were not included in the 10-Year Staff Recommended Capital Plan for PS. These projects will be included on the list of unfunded "Capital Priorities" considered for future funding in future year budget processes.

Table 8: Unmet Capital Needs Not Included in the Staff Recommended 10-Year Capital Plan

Project Description (In \$ Millions)	Total Project	Non-Debt Funding	Debt Required	Cash Flow (In \$ Millions)										
				2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	
NOT INCLUDED														
<i>Multi-Function Station #4</i>	5.830		5.830							0.500	8.500	9.100	(3.150)	(9.120)
<i>New Communications Centre</i>	75.000	56.250	18.750				0.600	9.400	40.000	25.000				
Total Unmet Needs (Not Included)	80.830	56.250	24.580				0.600	9.400	40.500	33.500	9.100	(3.150)	(9.120)	

- *Multi-Function Station #4*: This project currently resides in the 10-Year Capital Plan with a projected timeframe for construction between 2026 and 2029 at a cost of \$20.000 million. PS requires additional funding of \$5.830 million in order to accelerate the project starting in 2024 with completion in 2026.
- *New Communications Centre*: Requires \$75.000 million in funding to manage the deployment and assignment of an increasing number of emergency calls.
 - Efficiencies have been achieved through technological and scheduling changes necessary to meet current operational demands of the Centre however these increasing demands are now taxing the limited physical space available.

- Demand for emergency transports continues to rise at a rate of approximately 4% per year (which equates to approx. 9,000 new patients each year), due to an aging and growing population. The addition of part-time call receivers has enabled PS to match current call demand however there is no further room for expansion to meet the growth in staffing and technology infrastructure necessary to meet future needs.

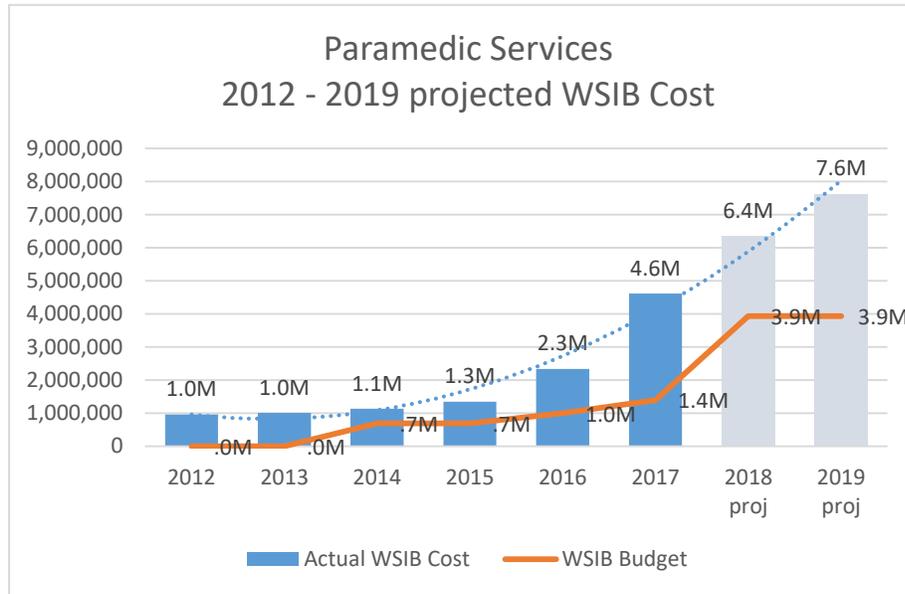
OTHER ISSUES IMPACTING THE 2019 BUDGET

Toronto Paramedic Services Delivery Model

- The call demand for emergency medical response has increased by 92,727 or 40% over the last ten years driven by an aging and growing Toronto population. The increasing demand, under the current deployment model, requires significant investment in infrastructure to continue to maintain the level of services provided by Toronto Paramedic Services.
- To accommodate growth in emergency call volumes, PS, as part of the long-term strategy, is focusing on migrating towards a "Multi-Function Facility System" versus the current stand-alone "Ambulance Station infrastructure". This change enhances operational efficiency of paramedics by providing improved flexibility in their scheduling and deployment, which positions them to better respond to system demands. This involves construction of 4 or 5 multi-function stations, each with 20 or more garage bays, across Toronto.
- Funding of \$0.250 million was included in PS' 2016 Approved Capital Budget and Plan for the *Infrastructure Study* project. The *Infrastructure Study* project, which was completed in 2018, involved extensive research to determine the most economical and efficient way to convert PS' existing service delivery model to the new Multi-Function Station model.
- Paramedic Services first Multi-Function Station (North West) at 1300 Wilson Avenue became operational for logistical staff in October 2017. The 2018-2027 Approved Capital Budget and Plan included funding for 2 additional multi-function stations, *Multi-Function Station #2* (North-East) at 330 Progress Avenue and *Multi-Function Station #3* (South-East).
- PS currently has 45 geographically dispersed ambulance stations and service district centres. The long term plan for PS identified the need to explore options to optimize the location of new stations to convert or replace some ambulance stations with smaller paramedic posts (vehicle bays for up to 2 ambulance vehicles) while identifying existing ambulance stations that could be disposed of to expedite the conversion process.
- Ambulance posts require a smaller footprint than regular ambulance stations as there is no requirement for staff parking or medical supplies storage. Eventual replacement of ambulance stations with smaller, more efficient ambulance posts will allow PS to have ambulances posted at more locations throughout the catchment area which will reduce response times.
- The Multi-Function Station & Post Model maximizes real estate by deploying more ambulances in fewer, large stations where logistical functions are completed. Small-footprint posts, co-located with other public services provide staff with rest periods and dynamic.
- The 2019-2028 Staff Recommended Capital Plan provides \$62.670 million for further investment into 3 multi-function stations and 2 ambulance posts in support of PS' long-term strategy to create a more efficient service model to help address future growth.
- PS is currently working on a multi-year real estate strategy for the new Service Delivery Model with CreateTO. With the expertise of a property valuation consultant and CreateTO, PS will continue to evaluate options to optimize site locations for the 45 existing ambulance stations and service district centres and is required to report back in time for the 2020 budget process on a planned approach to the future service delivery model that includes financial information necessary to inform future years' decision making processes.

Bill 163 Effects on Worker's Safety Insurance Board (WSIB) Claims

- On April 5th, 2016, the Ontario government passed Bill 163, the *Supporting Ontario's First Responders Act (Posttraumatic Stress Disorder)*, 2016. Bill 163 amended the *Workplace Safety and Insurance Act, 1997* (WSIA) to create a statutory presumption that PTSD diagnosed in first responders is work-related, unless the contrary is proven. This facilitates access to worker's insurance benefits and treatment for such workers. As an employer of first responders, PS has experienced significant financial impact due to enhanced benefit entitlements.
- The chart below demonstrates the increasing trend in WSIB costs PS has experienced since the passage of Bill 163.



- PS strives to improve the health and well-being of the team as well as the frontline staff they support and respond to every day. In February 2017, PS formally launched its Psychological Health and Wellness Plan to provide a variety of resources that support and strengthen employees' mental health, reduce stigma and promote resiliency. All staff have received training adapted from the Canadian military, titled "Road to Mental Readiness" (R2MR). Peer Resource Team members received added training to recognize suicide risk, as well as prevention strategies.
- Building on the prior training, peer-led suicide prevention and intervention training was included in all staff continuing education sessions in 2018. This training has also been added to the curriculum for all new Paramedics and Emergency Medical Dispatchers (EMDs).
- In 2018, PS responded to 2 large-scale, multi-patient casualty incidents -- Yonge Street Van Attack and Danforth Mass Shooting. With the significant increase in traumatic and stress-related incidents, PS' 30-member Peer Resource Team (PRT) is being stretched as a voluntary peer-to-peer support system.
- The 2018 Approved Operating Budget added \$2.536 million to respond to the presumptive Provincial Legislation to accept PTSD claims. The 2019 Staff Recommended Operating Budget maintains the 2018 Budget levels, as WSIB claims are unpredictable in nature and the full impact is not known at this time. This will allow the actual costs to be reassessed and the budget established based on normalized expenditure trends. PS will continue to monitor trends in WSIB claims throughout 2019.

OTHER ISSUES IMPACTING THE 2019 BUDGET**Modernization, Transformation and Innovation Initiatives**

As noted in the previous sections, PS continues to strive and take strategic actions to make its operations more efficient and effective by taking measures aimed at process and infrastructure improvements with the overall objective of ensuring that timely emergency medical care is made available to residents while ensuring the health and safety of paramedics.

In order to meet these objectives, several measures have already been implemented or are underway as noted below:

- The Power Stretchers project which equips ambulances with powered stretcher systems has significantly reduced the number of heavy lifts for paramedics. Consequently, it is expected that both acute and chronic musculoskeletal lift-injuries will be reduced, leading to lower WSIB claims. Power stretchers were rolled out in 2018.
- The Community Medicine Expansion project to add 10 Community Paramedics and 8 emergency vehicles over a 2-year period will enable Toronto Paramedic Services to provide greater coverage throughout the City from 6:00am to midnight with the potential for 24-hour coverage, 7 days a week. Community Paramedics will respond to low priority calls or specific types of calls, reducing the need for full ambulance crews attending to frequent callers and reducing 911 call volumes.
- The Multi-Function Station #2 capital project at 330 Progress Avenue will support PS' long-term investment strategy by creating a 40 bay, multi-function ambulance station to centralize vehicle and equipment cleaning, restocking and maintenance functions. Upon completion in 2023, the station will create efficiencies through reduced end-of-shift overtime, increased ambulance availability for emergency responses, lower medical supplies and medication spoilage, as well as reduced SOGR costs when compared to older smaller stations.

ISSUES REFERRED TO THE 2019 BUDGET PROCESS

Implementation of the SmartTrack Stations Program and the Metrolinx Regional Express Rail Program

- At its meeting on April 24, 2018, City Council adopted EX33.1, "Implementation of the SmartTrack Stations Program and the Metrolinx Regional Express Rail Program", and authorized the City Manager to hire a total 52 temporary resources for the period of May 2018 to December 2020 dedicated to the implementation of the Regional Express Rail Program and the SmartTrack Stations Program. City Council directed the City Manager to undertake an annual review of resource requirements.

Link to report: <http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2018.EX33.1>

- Metrolinx's Regional Express Rail (RER) is a transformational program to provide increased service on core portions of the GO Rail network by 2024/25, and represents a \$13.5 B (2014\$) investment by the Province of Ontario. The Program will see an increase in GO service from 1,500 to 6,000 trains per week, providing more opportunities for travel in and around the city and region. RER includes electrification of five GO corridors, enhancements to Union Station, grade separations, new stations and upgrades to existing stations.
- The SmartTrack Stations Program includes six new SmartTrack stations on the Kitchener GO and Stouffville/Lakeshore East GO corridors, and is further defined in Attachment 1 of this report. The SmartTrack Stations Program will provide access to a service level of 6-10 minute peak frequencies at the six new stations and eight existing stations on the Kitchener GO and Stouffville/Lakeshore East GO corridors.
- The 2019 Staff Recommended Operating Budget for PS includes funding of \$0.093 million gross and \$0 net for 1.0 temporary position necessary for project planning and preparation, with the cost to be fully recovered from Metrolinx and the SmartTrack Capital Project.

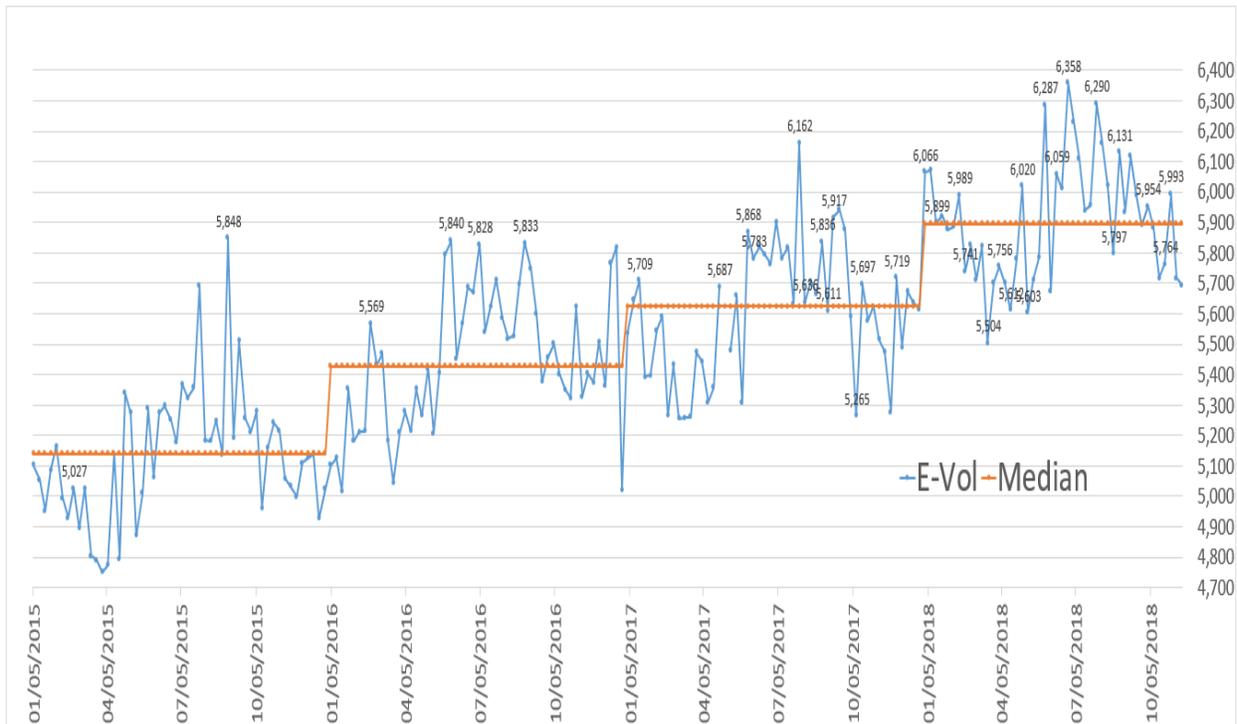
ISSUES IMPACTING FUTURE YEARS

Emergency Medical Call Demand Increase

- Toronto Paramedic Services (PS) has strived to efficiently manage the increased service demand and emergency patient transports experienced over the last 10 years. The main drivers of increased emergency medical calls and transports include, however are not limited to—
 - Aging population—After age 55, need for emergency transportation rises exponentially; In 2018 56% of all transports to hospital were for patients 55 years old or older (148,573 transports).
 - Rising population— PS treats approximately 10% of Toronto's growing population. The City of Toronto's population is projected to grow over the next decade at a rate of approximately 44,000 people every year (<https://www.fin.gov.on.ca/en/economy/demographics/projections/table10.html>)
 - Polarized socio-economic status—Compromised baseline health; fragmented support systems; increase in vulnerable and marginalized populations.
 - Greater need for specialized care due to a 17% increase in the transport of critical patients (stroke, trauma & STEMI (heart attack)).

- The graph below demonstrates the increasing call volume trend from 2015 to 2018 due to the factors noted above.

Call Volume Increases from 2015 to 2018



- The aging and increasing population is the primary factor driving increased call demand in Toronto and continues to produce system pressures in Paramedic Services. Emergency incidents continue to increase at a rate of 3%-5% annually. Between 2011 and 2017 calls increased by 23.7% (or 59,791 calls per year), and 2018 is projected to be up by a further 5.4% (a projected increase of 11,760 Emergency Incidents), which puts significant strain on the division's frontline operations.
- Since 2005, the number of emergency patient transports provided by Paramedic Services annually has increased by 93,337 patients (66%) from 141,409 transports in 2005 to a projected 234,746 transports in 2018 due to a growing and aging population. In 2018 alone, this translates to approximately 9,000 additional emergency transports over 2017.
- Response time refers to the entire elapsed time from answering the phone at PS' dispatch centre to arrival of the paramedics at the scene. The increasing call demand trend has impacted PS' response time to life threatening calls, reaching a peak of 13.1 minutes in 2010. This steadily improved to 11.5 minutes, 90% of the time, in 2017, due to paramedic staff resources added from 2013 to 2016. Despite PS efforts to mitigate the effects of the increasing call volume trend, 2018 has experienced a decline in the improved response trend with a projected response time of 11.8 minutes.
- PS' is requested to report back to Council in advance of the 2020 Budget process on activities taken to date to keep pace with the increasing call demand in paramedic services and provide future strategies that include financial, operational and staffing implications as well as targeted outcomes to help mitigate call volume and demand

WSIB Pressures

WSIB pressures related to Post Traumatic Stress Disorder injuries are expected to continue to increase based on experience from other provinces with similar presumptive legislation for first responders.

Peer Resource Team Support

The increased use of WSIB related to occupational stress injuries will necessitate additional support for the Peer Resource Team and related return-to-work case management.

Need for a Long-Term Staffing Plan – 3 to 5 Years

In 2013, the City Manager's Service and Organizational Review (<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.EX33.11>), confirmed that call demand for emergency medical response will continue to increase by 2 % to 4 % annually and identified that the City would require additional paramedics over a three year period to meet current and future demand. City Council approved an investment of 220 Paramedics from 2013 to 2016.

In 2018, Paramedic Services experienced a 5.4% increase in call demand over 2017. PS response time has not improved, with a projected response time of 11.8 minutes in 2018 and is not anticipated to improve based on growing service demand. The drivers of call demand remain the same as in 2013 and continue to drive the call volume at or above the expected growth rate.

Given the continued growth in call demand for Paramedic Services, and the 2013 City Manager's Service & Organizational Review, PS requires a multi-year staffing plan supplemented by mitigation strategies to address the approximately 4% annual growth.

REPORTING ON MAJOR CAPITAL PROJECTS: STATUS UPDATE

In compliance with the Auditor General's recommendations to strengthen accountability, additional status reporting on all major capital projects is required. The following projects have been reported on a quarterly basis during 2018:

Multi-Function Station #2 Project

Project Overview and Deliverables

- Toronto Paramedic Services' (PS) *Multi-Function Station #2* project involves the construction of a 40 bay multi-function ambulance station spanning roughly eight acres of land at 330 Progress Avenue. The new multi-function station will increase capacity to address the 3% to 5% annual increase in emergency call demand PS has experienced over the past decade, a trend that is expected to continue in the foreseeable future due to an aging and growing population. Implementation of this project will result in efficiencies such as mitigating end-of-shift overtime; reducing vehicle out-of-service time; increasing ambulance availability for emergency response; and more efficient use of staff and logistical resources. Key project deliverables include:
 - Stage 1 – Initiation and Development—Retain consultant for project development services; conduct interviews with stakeholders for requirements of the new facility; undertake feasibility study involving activities such as environmental assessment, geotechnical studies, site survey and traffic impact studies; develop conceptual design with end user input; review conceptual design with City Planning; and complete Class D estimate for construction.
 - Stage 2 – Preliminary Design and Preparation—Retain consultant to provide professional design and construction administration services for the new facility (Stages 2, 3, 4); preliminary (50%) design documents prepare; and Site Plan Approval (SPA) from City Planning attained (allow for up to 9 months).
 - Stage 3 – Detailed Design—Revision of preliminary design and development of “Issued for Permit” design documents based on response from the Site Plan Approval; building Permit issued; “Issued for Tender” (100% design) document prepared; construction scope of work and construction schedule developed; and class A estimate for construction provided.
 - Stage 4 – Procurement and Construction—General Contractor for construction retained through open tender; and new facility constructed.

Financial Update

Project name (In \$000s)	Initial Approval Date	Approved Project Cost	Life to Date Expenditures as at Dec 31, 2017	2018		2019	2020	2021	2022	2023	Projection To End of Project	Status	End Date		On Budget	On Time
				Budget	Year-End Projection *	Budget	Plan	Plan	Plan	Plan			Planned	Revised		
Multi-function Station #2	2017	25,800	340	460	150	295	5,396	5,854	8,974	4,481	25,490	On Track	Dec-22	Dec-23	Ⓞ	Ⓞ

* 2018 year-end projection based on the Q3 capital variance

On Budget **On Time**
 > 70% of Approved Project Cost Ⓞ On/Ahead of Schedule
 Between 50% and 70% Ⓢ Minor Delay < 6 months
 < 50% or >100% of Approved Project Cost Ⓡ Significant Delay > 6 months

Project Status

- Full feasibility study was completed and received from the consultants as of January 2018. Soil remediation and archeological assessments were completed in August 2018.

2019 Plan

- New funding of \$10.450 million has been added towards the project for cost escalations (\$3.450 million funded by development charges) due to delays in the design and preparation phase resulting from a lack of project management resources and also for an unmet need (\$7.000 million funded by debt) for expansion to reach full capacity of 7.97 acres at the 330 Progress Ave. facility, bringing the total project cost to \$25.800 million gross.
- Project management resources will be attained within the first quarter of 2019. The project will continue according to plan with the preliminary design and preparation phase scheduled for completion in December 2020. Full construction is expected to be completed December 2023.

Key Project Challenges

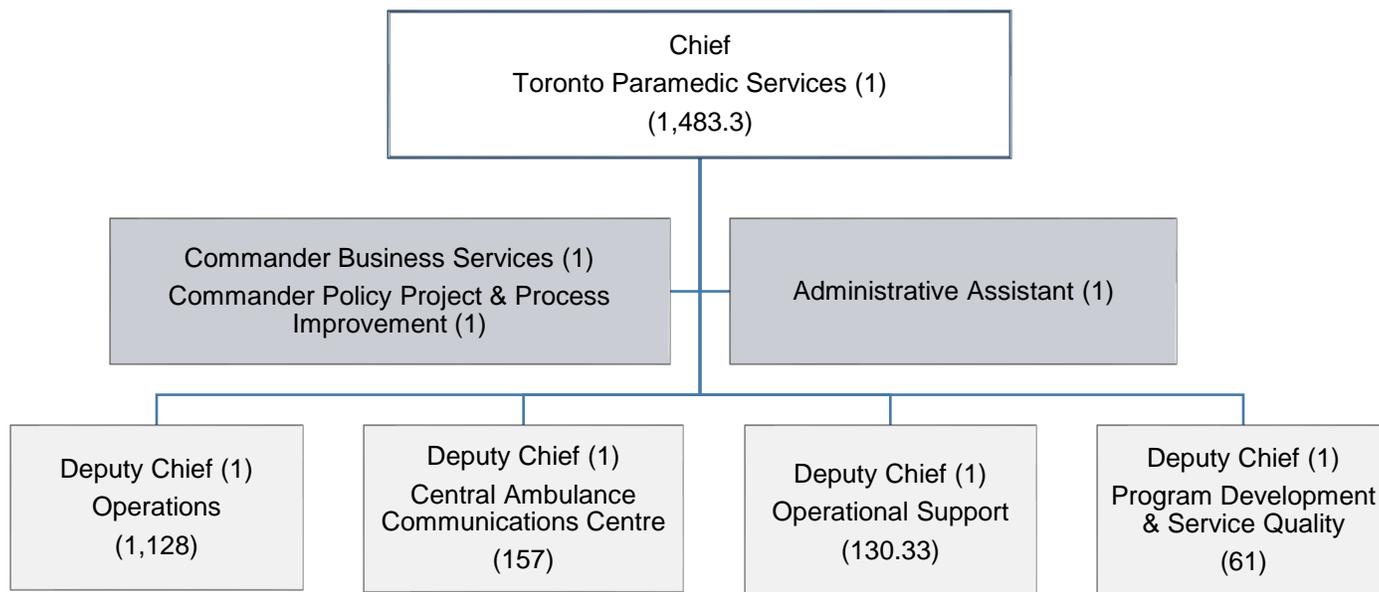
- The project has experienced challenges during the design phase as a result of a lack of adequate project management resources. It is expected that project management resources will be attained within the first quarter of 2019 to address challenges and continue the project according to plan.



APPENDICES

Appendix 1

2019 Organization Chart



The 2019 total staff complement includes the Paramedic Chief and staff for a total of 1,484.3 positions, comprising 2.0 capital positions and 1,482.3 operating positions as summarized in the table below.

2019 Total Complement

	Category	Senior Management	Management with Direct Reports	Management without Direct Reports/Exempt Professional & Clerical	Union	Total
Operating	Permanent	5.0	85.0	54.0	1,333.0	1,477.0
	Temporary			4.0	1.3	5.3
	Total Operating	5.0	85.0	58.0	1,334.3	1,482.3
Capital	Temporary			2.0	-	2.0
	Total Capital	-	-	2.0	-	2.0
Grand Total		5.0	85.0	60.0	1,334.3	1,484.3

Appendix 2

2019 Operating Budget by Service

Community Paramedicine & Emergency Call Mitigation

(In \$000s)	2018	2019			Changes		Incremental Change	
	Approved Budget	Base	New / Enhanced	Total Staff Recommended Budget			2020 Plan	2021 Plan
By Service	\$	\$	\$	\$	\$	%	\$	\$
Community Healthcare Outreach & Referral								
Gross Expenditures	1,606.9	2,100.8	353.2	2,454.0	847.1	52.7%	441.9	80.9
Revenue	1,196.7	1,028.2	0.0	1,028.2	(168.5)	(14.1%)	426.5	209.7
Net Expenditures	410.1	1,072.5	353.2	1,425.8	1,015.6	247.6%	15.4	(128.8)
Citizen First Response Education								
Gross Expenditures	1,462.5	973.9	0.0	973.9	(488.6)	(33.4%)	9.7	4.9
Revenue	1,177.5	1,004.7	0.0	1,004.7	(172.8)	(14.7%)	318.1	7.0
Net Expenditures	285.0	(30.8)	0.0	(30.8)	(315.8)	(110.8%)	(308.4)	(2.1)
Total								
Gross Expenditures	3,069.4	3,074.7	353.2	3,427.9	358.5	11.7%	451.7	85.9
Revenue	2,374.2	2,032.9	0.0	2,032.9	(341.3)	(14.4%)	744.6	216.7
Total Net Expenditures	695.1	1,041.8	353.2	1,395.0	699.9	100.7%	(293.0)	(130.8)
Approved Positions	21.6	19.4	5.0	24.4	2.8	12.8%	0.0	0.0

Emergency Medical Dispatch & Preliminary Care

(In \$000s)	2018	2019			Changes		Incremental Change	
	Approved Budget	Base	New / Enhanced	Total Staff Recommended Budget			2020 Plan	2021 Plan
By Service	\$	\$	\$	\$	\$	%	\$	\$
Emergency Medical Dispatch & Preliminary Care								
Gross Expenditures	29,017.1	28,396.1	0.0	28,396.1	(621.0)	(2.1%)	174.4	172.1
Revenue	28,347.2	28,180.2	0.0	28,180.2	(167.0)	(0.6%)	(335.4)	11.8
Net Expenditures	669.9	215.9	0.0	215.9	(454.0)	(67.8%)	509.8	160.4
Total								
Gross Expenditures	29,017.1	28,396.1	0.0	28,396.1	(621.0)	(2.1%)	174.4	172.1
Revenue	28,347.2	28,180.2	0.0	28,180.2	(167.0)	(0.6%)	(335.4)	11.8
Total Net Expenditures	669.9	215.9	0.0	215.9	(454.0)	(67.8%)	509.8	160.4
Approved Positions	191.2	186.8	0.0	186.8	(4.4)	(2.3%)	0.0	0.0

Emergency Medical Care

(In \$000s)	2018	2019			Changes		Incremental Change	
	Approved Budget	Base	New / Enhanced	Total Staff Recommended Budget			2020 Plan	2021 Plan
By Service	\$	\$	\$	\$	\$	%	\$	\$
Pre-Hospital Emergency Care								
Gross Expenditures	185,610.7	194,992.2	350.0	195,342.2	9,731.5	5.2%	2,169.0	1,335.8
Revenue	106,942.1	112,595.3	350.0	112,945.3	6,003.2	5.6%	(1,644.5)	(51.0)
Net Expenditures	78,668.6	82,396.9	0.0	82,396.9	3,728.3	4.7%	3,813.5	1,386.8
Critical Care Transport								
Gross Expenditures	4,168.9	3,555.2	0.0	3,555.2	(613.7)	(14.7%)	(7.0)	6.6
Revenue	3,647.0	3,479.3	0.0	3,479.3	(167.6)	(4.6%)	449.5	1.4
Net Expenditures	522.0	75.9	0.0	75.9	(446.0)	(85.5%)	(456.4)	5.2
AM-City Emergency & Major Event Mass Casualty Care								
Gross Expenditures	2,586.1	2,834.8	0.0	2,834.8	248.8	9.6%	(716.4)	17.4
Revenue	1,958.0	1,183.1	0.0	1,183.1	(774.9)	(39.6%)	880.5	12.7
Net Expenditures	628.1	1,651.8	0.0	1,651.8	1,023.7	163.0%	(1,597.0)	4.7
Total								
Gross Expenditures	192,365.7	201,382.3	350.0	201,732.3	9,366.6	4.9%	1,445.6	1,359.8
Revenue	112,547.1	117,257.7	350.0	117,607.7	5,060.6	4.5%	(314.5)	(37.0)
Total Net Expenditures	79,818.7	84,124.6	0.0	84,124.6	4,305.9	5.4%	1,760.1	1,396.7
Approved Positions	1,264.6	1,271.2	2.0	1,273.2	8.6	0.7%	(2.0)	(1.0)

Appendix 3

2019 Service Levels

Community Paramedicine & Emergency Call Mitigation

Activity	Type	Service Level Description	Status	2016	2017	2018	2019
Citizen First Response Education	Safe City - Emergency Medical Training Courses Provided	Number of Emergency Medical training courses delivered	Approved	1,000	650	800	800
			Actual	729	690		
	Number of Registered (PAD) Public Access Defibrillators = (AED) Automated External Defibrillators	Number of registered AEDs	Approved	1,523	1,550	1,575	1,575
			Actual	1,547	1,570		

Emergency Medical Dispatch & Preliminary Care

Activity	Type	Service Level Description	Status	2016	2017	2018	2019
Emergency Medical Dispatch & Preliminary Care	Length of time in minutes to process life threatening calls 90% of the time	Length of time in minutes to process life threatening calls 90% of the time	Approved	3 minutes 0 seconds	2 minutes 47 seconds	2 minutes 53 seconds	3 minutes 0 seconds
			Actual	2 minutes 53 seconds	3 minutes 7 seconds		
	Emergency Calls Processed	Number of Calls Processed	Approved	360,611	368,397	394,289	410,061
			Actual	360,449	379,124		

The 2019 Service Levels have been adjusted (bolded in the charts) from the approved 2018 Service Levels for Length in time in minutes to process life-threatening calls 90% of the time and Emergency Calls Processed due to annual volume adjustments.

- The "length of time in minutes to process life threatening calls" has been adjusted to 3:00 minutes 90% of the time in 2019 from 2:53 minutes 90% of the time in 2018 to 3:00 minutes based on prior years' growth trends.
- The "number of emergency calls processed" has been increased by 15,772 in 2019 from 2018 levels based on prior years' growth trends.

Emergency Medical Care

Activity	Type	Service Level Description	Status	2016	2017	2018	2019
Pre-Hospital Emergency Care	Number of Emergency Calls (Unique Incidents)	Number of emergency calls for unique incidents	Approved	296,597	305,092	324,293	337,265
			Actual	293,358	311,820		
	Number of Patient Transports ¹	Number of patient transports	Approved	227,242	231,440	234,746	244,136
			Actual	222,538	225,717		
	Length of time in minutes to arrive at life threatening calls 90% of the time	Number of minutes to arrive at life threatening calls 90% of the time	Approved	11.6 minutes	11.4 minutes	11.3 minutes	11.8 minutes
			Actual	11.6 minutes	11.5 minutes		

1 - Formerly "Transport of critically-ill patients between health care facilities" Type and Sub Type. This is a correction from previous years.

The 2019 Service Levels have been adjusted (bolded in the charts) from the approved 2018 Service Levels for Number of Emergency Calls (Unique incidents) and Number of Patient Transports due to annual volume adjustments.

- The "number of emergency calls for unique incidents" has been increased by 12,972 in 2019 from 2018 levels based on prior years' growth trends.
- The "number of patient transports" has been increased by 9,390 for 2019 from 2018 levels based on prior years' growth trends.
- The "length of time in minutes to arrive at life threatening calls 90% of the time" has changed to 11.8 minutes 90% of the time based on the 2018 experience.

Appendix 5

Summary of 2019 New / Enhanced Service Priorities

New / Enhanced Service Description (in \$000s)	New and Enhanced Services Priorities						Total			Incremental Change			
	Community Paramedicine & Emergency Call		Emergency Medical Dispatch & Preliminary		Emergency Medical Care		\$		Position	2020 Plan		2021 Plan	
	Gross	Net	Gross	Net	Gross	Net	Gross	Net	#	Net	Pos.	Net	Pos.
Enhanced Service Priorities													
Staff Initiated:													
Additional Paramedics for the Community Paramedicine at Home Program Focused on 911 Call Mitigation	353.2	353.2					353.2	353.2	5.0	242.6		(139.3)	(5.0)
Additional Temporary Education Superintendents and Supplies for the Primary Care Paramedic (PCP) Training Program Delivered to Low-Income Residents (\$0.350M Gross)					350.0		350.0		2.0		(2.0)		
Sub-Total Staff Initiated	353.2	353.2			350.0		703.2	353.2	7.0	242.6	(2.0)	(139.3)	(5.0)
Total Enhanced Services	353.2	353.2			350.0		703.2	353.2	7.0	242.6	(2.0)	(139.3)	(5.0)
Total 2019 New / Enhanced Services	353.2	353.2			350.0		703.2	353.2	7.0	242.6	(2.0)	(139.3)	(5.0)

2019 Operating Budget - Staff Recommended New and Enhanced Services Summary by Service (\$000's)

Form ID		Community and Social Services Program - Toronto Paramedic Services	Adjustments				2020 Plan Net Change	2021 Plan Net Change
Category	Equity Impact		Gross Expenditure	Revenue	Net	Approved Positions		
16815		Additional Community Paramedics to Focus on 911 Call Mitigation						
72	Positive	Description:						
<p>The 2018 Approved Operating Budget included funding of \$0.355 million gross and net to fund 5 additional Community Paramedics and operating expenditures for 4 additional vehicles to provide coverage throughout the City from 06:00 am. to midnight with the potential for 24-hour coverage, 7 days a week. The 2019 Staff Recommended Operating Budget includes new funding of \$0.353 million gross and net for a further 5 Community Paramedics and operating expenditures for 4 vehicles to enable Toronto Paramedic Services to continue to focus on 911 call mitigation.</p>								
Service Level Impact:								
<p>The Community Paramedicine at Home Program has demonstrated a 57% reduction in 911 call demand from frequent callers. 911 call demand, which had been increasing by 4% to 5% annually, is mitigated when Community Paramedics visit frequent user clients, connect them with existing support resources and providing them with the necessary care. The increased number of Community Paramedics in 2019 will assist in continuing to focus on 911 call mitigation.</p>								
Equity Statement:								
<p>The Community Paramedicine @ Home Program Expansion budget proposal's overall equity impact is medium-positive for persons with low income, persons with disabilities and vulnerable seniors. Individuals from these equity seeking groups are often unable to access health services, and frequently depend on 911 as their primary means of health care. The Home Program Expansion will mitigate this dependency on emergency services and positively impact access to health services by treating patients at home or by facilitating alternate pathways to healthcare.</p>								
Service: Community Paramedicine & Emergency Call Mitigation								
Total Staff Recommended Changes:		353.2	0.0	353.2	5.00	242.6	(139.3)	
Staff Recommended New/Enhanced Services:		353.2	0.0	353.2	5.00	242.6	(139.3)	

Category:

71 - Operating Impact of New Capital Projects
72 - Enhanced Services-Service Expansion

74 - New Services
75 - New Revenues

2019 Operating Budget - Staff Recommended New and Enhanced Services Summary by Service (\$000's)

Form ID		Community and Social Services Program - Toronto Paramedic Services	Adjustments				2020 Plan Net Change	2021 Plan Net Change
Category	Equity Impact		Gross Expenditure	Revenue	Net	Approved Positions		

16815 Resources for Primary Care Paramedic CP Program Delivered to Low-Income Residents

72 Positive **Description:**

The 2019 Staff Recommended Budget includes funding of \$0.350 million gross, \$0 net, for 2 Education Superintendents (\$0.314 million) and program supplies (\$0.036 million) for the delivery of the Primary Care Paramedic (PCP) Training Program. In partnership with Toronto Employment & Social Services (TESS), PS will deliver a 16-month paramedic education program to low-income individuals. TESS identifies potential program applicants who currently receive support through Ontario Works. PS puts the identified applicants through a screening process to determine those best suited for success in the program. The program is recognized and approved by the MOHLTC as equivalent to a college Paramedic Program and therefore the graduates are qualified to write the Provincial certification exam (AEMCA). The program produces an average of ten graduates, most of whom gain employment with the City of Toronto. The program is fully funded by TESS through the province under the Employee Assistance funding envelope.

Service Level Impact:

A new PCP Training Program does not begin every year. 2019 will be the first year of a new 16-month program. For 2019, staff have been able to recruit 12 applicants from diverse communities to become life-saving professionals. With the additional funding, TPS will be able to provide the applicants with a paramedic education equivalent to a 2-year Paramedic college program.

Equity Statement:

The PCP Program for TESS program budget proposal's overall equity impact is low positive. Low income residents' access to training and employment will be positively impacted. The program provides employment and financial benefits to unemployed and underemployed residents of Toronto. This is a 16-month program in Primary Care Paramedic training, which is equivalent to a 2-year Paramedic college program. It produces an average of ten graduates per program, most of whom have gained employment with the City of Toronto.

Service: Emergency Medical Care	350.0	350.0	0.0	2.00	0.0	0.0
Total Staff Recommended Changes:						
Staff Recommended New/Enhanced Services:	350.0	350.0	0.0	2.00	0.0	0.0

Summary:

Staff Recommended New / Enhanced Services:	703.2	350.0	353.2	7.00	242.6	(139.3)
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Category:

Appendix 6

2019 User Fee Rate Changes

Table 6a

User Fees Adjusted for Inflation and Other

Rate Description	Service	Fee Category	Fee Basis	2018	2019			2020	2021
				Approved Rate	Inflationary Adjusted Rate	Other Adjustments	Budget Rate	Plan Rate	Plan Rate
Standby Fees - Basic Life Support/Primary Care Paramedics (PCP Units)	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 4 hrs plus travel time	\$214.00	\$218.00		\$218.00	\$218.00	\$222.00
Standby Fees - Advanced Life Support (ACP Unit)	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 4 hrs plus travel time	\$220.00	\$224.00		\$224.00	\$225.00	\$230.00
Standby Fees - EMS Supervisors	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 4 hrs plus travel time	\$158.00	\$161.00		\$161.00	\$161.00	\$164.00
Standby Fees - Mountain Bike Paramedic	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 4 hrs plus travel time	\$113.00	\$115.00		\$115.00	\$115.00	\$117.00
Standard First Aid Course & CPR Level C Training (External) - SFA+C (EXTERNAL)	Toronto Paramedic Services	Market Based	Per person	\$109.00	\$111.00		\$111.00	\$111.00	\$113.00
Emergency First Aid & CPR Level A Training (External) - EFA+A (EXTERNAL)	Toronto Paramedic Services	Market Based	Per person	\$67.00	\$68.00		\$68.00	\$68.00	\$69.00
CPR Level C Training (External) - CPR-C (EXTERNAL)	Toronto Paramedic Services	Market Based	Per person	\$67.00	\$68.00		\$68.00	\$68.00	\$69.00
CPR Level A Training (External) - CPR-A (EXTERNAL)	Toronto Paramedic Services	Market Based	Per person	\$49.00	\$50.00	\$0.00	\$50.00	\$50.00	\$51.00
Emergency First Responder Training (External) - EFR (EXTERNAL)	Toronto Paramedic Services	Market Based	Per person	\$605.00	\$618.00		\$618.00	\$618.00	\$631.00
Targeted AED Site Responder Course With Standard First Aid Certification And Level C CPR - TRI	Toronto Paramedic Services	Market Based	Per person	\$125.00	\$127.00		\$127.00	\$127.00	\$129.00
AED Site Responder Course with Level C CPR Training (External) - CPR-C/AED (EXTERNAL)	Toronto Paramedic Services	Market Based	Per person	\$67.00	\$68.00		\$68.00	\$68.00	\$69.00
Renewal AED Site Responder Course with Level C CPR Training (External) - CPR-C/AED (RENEWAL-EXTERNAL)	Toronto Paramedic Services	Market Based	Per person	\$63.00	\$64.00		\$64.00	\$64.00	\$65.00

Rate Description	Service	Fee Category	Fee Basis	2018	2019			2020	2021
				Approved Rate	Inflationary Adjusted Rate	Other Adjustments	Budget Rate	Plan Rate	Plan Rate
CPR Level C Renewal Training (External) - CPR-C RENEWAL (EXTERNAL)	Toronto Paramedic Services	Market Based	Per person	\$49.00	\$50.00	\$0.00	\$50.00	\$50.00	\$51.00
Health Care Provider Level C Training - HCP - C	Toronto Paramedic Services	Market Based	Per person	\$65.00	\$66.00		\$66.00	\$66.00	\$67.00
Health Care Provider Renewal Training - HCP RENEWAL	Toronto Paramedic Services	Market Based	Per person	\$61.00	\$62.00		\$62.00	\$62.00	\$63.00
Standard First Aid Course & Health Care Provider Training - SFA+HCP	Toronto Paramedic Services	Market Based	Per person	\$130.00	\$132.00		\$132.00	\$132.00	\$134.00
Instructor Course (External)	Toronto Paramedic Services	Full Cost Recovery	Per person	\$605.00	\$618.00		\$618.00	\$618.00	\$631.00
Standby Fees - Emergency Response Unit (ERU) Paramedic	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 4 hrs plus travel time	\$113.00	\$115.00		\$115.00	\$115.00	\$117.00
Standby Fees - Gator Ambulance Crew	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 4 hrs plus travel time	\$225.00	\$229.00		\$229.00	\$230.00	\$235.00
Standby Fees - Marine Paramedic	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 4 hrs plus travel time	\$119.00	\$121.00		\$121.00	\$121.00	\$123.00
Standby Fees - Emergency Support Unit (ESU)	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 4 hrs plus travel time	\$214.00	\$218.00		\$218.00	\$218.00	\$222.00
Standby Fees - Emergency Medical Dispatcher	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 4 hrs	\$107.00	\$109.00		\$109.00	\$109.00	\$111.00
AED Site Responder Course with Level A CPR Training - CPR-A/AED INTERNAL/EXTERNAL	Toronto Paramedic Services	Market Based	Per Person	\$61.00	\$62.00		\$62.00	\$62.00	\$63.00
Standard First Aid Recertification Course - INTERNAL & EXTERNAL	Toronto Paramedic Services	Market Based	Per Person	\$79.00	\$80.00		\$80.00	\$80.00	\$81.00
ITLS - Access	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$369.00	\$377.00		\$377.00	\$377.00	\$385.00
ITLS - Advanced provider	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$421.00	\$430.00		\$430.00	\$430.00	\$439.00
ITLS - Advanced recertification	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$327.00	\$334.00		\$334.00	\$334.00	\$341.00
ITLS - Basic provider	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$421.00	\$430.00		\$430.00	\$430.00	\$439.00
ITLS - Basic recertification	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$327.00	\$334.00		\$334.00	\$334.00	\$341.00
ITLS -Instructor recertification	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$327.00	\$334.00		\$334.00	\$334.00	\$341.00
ITLS - Instructor training	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$441.00	\$450.00		\$450.00	\$451.00	\$461.00

Rate Description	Service	Fee Category	Fee Basis	2018	2019			2020	2021
				Approved Rate	Inflationary Adjusted Rate	Other Adjustments	Budget Rate	Plan Rate	Plan Rate
ITLS -Pediatric	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$298.00	\$304.00		\$304.00	\$304.00	\$310.00
ITLS - Re-test fee	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$57.00	\$58.00		\$58.00	\$58.00	\$59.00
PSU - Ambulance call report	Toronto Paramedic Services	Full Cost Recovery	Per Document	\$82.00	\$83.00		\$83.00	\$83.00	\$84.00
PSU - Audio recording	Toronto Paramedic Services	Full Cost Recovery	Per Recording	\$82.00	\$83.00		\$83.00	\$83.00	\$84.00
PSU - Dispatch record	Toronto Paramedic Services	Full Cost Recovery	Per Document	\$45.00	\$45.00	\$1.00	\$46.00	\$47.00	\$49.00
PSU - Paramedic interview	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 3 hours	\$111.00	\$113.00		\$113.00	\$113.00	\$115.00
PSU - Paramedic statement	Toronto Paramedic Services	Full Cost Recovery	Per Document	\$56.00	\$57.00		\$57.00	\$57.00	\$58.00
PSU - Statutory declaration	Toronto Paramedic Services	Full Cost Recovery	Per Document	\$82.00	\$83.00		\$83.00	\$83.00	\$84.00
Standby fee -after hours booking fee	Toronto Paramedic Services	Full Cost Recovery	Per Booking	\$78.00	\$79.00		\$79.00	\$79.00	\$80.00
ITLS - Tactical Medical Essentials	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$464.00	\$474.00		\$474.00	\$474.00	\$484.00
Emergency First Aid & CPR Level A Training (External) - EFA+A (EXTERNAL) - Group size of 2 to 16 persons	Toronto Paramedic Services	Market Based	Per Person	\$62.00	\$63.00		\$63.00	\$63.00	\$64.00
Emergency First Aid & CPR Level A Training (External) - EFA+A (EXTERNAL) - Group size of 17 to 64 persons	Toronto Paramedic Services	Market Based	Per Person	\$60.00	\$61.00		\$61.00	\$61.00	\$62.00
Emergency First Aid & CPR Level A Training (External) - EFA+A (EXTERNAL) - Group size of 65 or more persons	Toronto Paramedic Services	Market Based	Per Person	\$56.00	\$57.00		\$57.00	\$57.00	\$58.00
Emergency First Aid & CPR Level C Training (External) - EFA+C (EXTERNAL)	Toronto Paramedic Services	Market Based	Per Person	\$79.00	\$80.00		\$80.00	\$80.00	\$81.00
Emergency First Aid & CPR Level C Training (External) - EFA+C (EXTERNAL) - Group size of 2 to 16 persons	Toronto Paramedic Services	Market Based	Per Person	\$74.00	\$75.00		\$75.00	\$75.00	\$76.00
Emergency First Aid & CPR Level C Training (External) - EFA+C (EXTERNAL) - Group size of 17 to 64 persons	Toronto Paramedic Services	Market Based	Per Person	\$72.00	\$73.00		\$73.00	\$73.00	\$74.00

Rate Description	Service	Fee Category	Fee Basis	2018	2019			2020	2021
				Approved Rate	Inflationary Adjusted Rate	Other Adjustments	Budget Rate	Plan Rate	Plan Rate
Emergency First Aid & CPR Level C Training (External) - EFA+C (EXTERNAL) - Group size of 65 or more persons	Toronto Paramedic Services	Market Based	Per Person	\$68.00	\$69.00		\$69.00	\$69.00	\$70.00
Emergency First Aid & CPR Level B Training (External) - EFA+B (EXTERNAL)	Toronto Paramedic Services	Market Based	Per Person	\$67.00	\$68.00		\$68.00	\$68.00	\$69.00
Emergency First Aid & CPR Level B Training (External) - EFA+B (EXTERNAL) - Group size of 2 to 16 persons	Toronto Paramedic Services	Market Based	Per Person	\$62.00	\$63.00		\$63.00	\$63.00	\$64.00
Emergency First Aid & CPR Level B Training (External) - EFA+B (EXTERNAL) - Group size of 17 to 64 persons	Toronto Paramedic Services	Market Based	Per Person	\$60.00	\$61.00		\$61.00	\$61.00	\$62.00
Emergency First Aid & CPR Level B Training (External) - EFA+B (EXTERNAL) - Group size of 65 or more persons	Toronto Paramedic Services	Market Based	Per Person	\$56.00	\$57.00		\$57.00	\$57.00	\$58.00
Emergency First Aid & CPR Level A & AED Training (External) - EFA+A+AED (EXTERNAL)	Toronto Paramedic Services	Market Based	Per Person	\$75.00	\$76.00		\$76.00	\$76.00	\$77.00
Emergency First Aid & CPR Level A & AED Training (External) - EFA+A+AED (EXTERNAL) - Group size of 2 to 16 persons	Toronto Paramedic Services	Market Based	Per Person	\$70.00	\$71.00		\$71.00	\$71.00	\$72.00
Emergency First Aid & CPR Level A & AED Training (External) - EFA+A+AED (EXTERNAL) - Group size of 17 to 64 persons	Toronto Paramedic Services	Market Based	Per Person	\$68.00	\$69.00		\$69.00	\$69.00	\$70.00
Emergency First Aid & CPR Level A & AED Training (External) - EFA+A+AED (EXTERNAL) - Group size of 65 or more persons	Toronto Paramedic Services	Market Based	Per Person	\$64.00	\$65.00		\$65.00	\$65.00	\$66.00
Standard First Aid Course & CPR Level C Training (External) - SFA+C (EXTERNAL) - Group size of 2 to 16 persons	Toronto Paramedic Services	Market Based	Per Person	\$99.00	\$101.00		\$101.00	\$101.00	\$103.00
Standard First Aid Course & CPR Level C Training (External) - SFA+C (EXTERNAL) - Group size of 17 to 64 persons	Toronto Paramedic Services	Market Based	Per Person	\$95.00	\$97.00		\$97.00	\$97.00	\$99.00
Standard First Aid Course & CPR Level C Training (External) - SFA+C (EXTERNAL) - Group size of 65 or more persons	Toronto Paramedic Services	Market Based	Per Person	\$87.00	\$88.00		\$88.00	\$88.00	\$89.00

Rate Description	Service	Fee Category	Fee Basis	2018	2019			2020	2021
				Approved Rate	Inflationary Adjusted Rate	Other Adjustments	Budget Rate	Plan Rate	Plan Rate
Targeted AED Site Responder Course With Standard First Aid Certification And Level C CPR - TRI - Group size of 2 to 16 persons	Toronto Paramedic Services	Market Based	Per Person	\$115.00	\$117.00		\$117.00	\$117.00	\$119.00
Targeted AED Site Responder Course With Standard First Aid Certification And Level C CPR - TRI - Group size of 17 to 64 persons	Toronto Paramedic Services	Market Based	Per Person	\$111.00	\$113.00		\$113.00	\$113.00	\$115.00
Targeted AED Site Responder Course With Standard First Aid Certification And Level C CPR - TRI - Group size of 65 or more persons	Toronto Paramedic Services	Market Based	Per Person	\$103.00	\$105.00		\$105.00	\$105.00	\$107.00
Standard First Aid Course & Health Care Provider Training - SFA+HCP - Group size of 2 to 16 persons	Toronto Paramedic Services	Market Based	Per Person	\$120.00	\$122.00		\$122.00	\$122.00	\$124.00
Standard First Aid Course & Health Care Provider Training - SFA+HCP - Group size of 17 to 64 persons	Toronto Paramedic Services	Market Based	Per Person	\$116.00	\$118.00		\$118.00	\$118.00	\$120.00
Standard First Aid Course & Health Care Provider Training - SFA+HCP - Group size of 65 or more persons	Toronto Paramedic Services	Market Based	Per Person	\$108.00	\$110.00		\$110.00	\$110.00	\$112.00
Standard First Aid Recertification Course - INTERNAL & EXTERNAL - Group size of 2 to 16 persons	Toronto Paramedic Services	Market Based	Per Person	\$74.00	\$75.00		\$75.00	\$75.00	\$76.00
Standard First Aid Recertification Course - INTERNAL & EXTERNAL - Group size of 17 to 64 persons	Toronto Paramedic Services	Market Based	Per Person	\$72.00	\$73.00		\$73.00	\$73.00	\$74.00
Standard First Aid Recertification Course - INTERNAL & EXTERNAL - Group size of 65 or more persons	Toronto Paramedic Services	Market Based	Per Person	\$68.00	\$69.00		\$69.00	\$69.00	\$70.00
CPR Level A & AED Training (External) - CPR-A & AED (EXTERNAL)	Toronto Paramedic Services	Market Based	Per Person	\$55.00	\$56.00		\$56.00	\$56.00	\$57.00
CPR Level C & AED Training (External) - CPR-C & AED (EXTERNAL)	Toronto Paramedic Services	Market Based	Per Person	\$60.00	\$61.00		\$61.00	\$61.00	\$62.00
CPR Level C & AED Renewal Training (External) - CPR-C & AED RENEWAL (EXTERNAL)	Toronto Paramedic Services	Market Based	Per Person	\$55.00	\$56.00		\$56.00	\$56.00	\$57.00
Health Care Provider Level A Training - HCP - A	Toronto Paramedic Services	Market Based	Per Person	\$60.00	\$61.00		\$61.00	\$61.00	\$62.00

Rate Description	Service	Fee Category	Fee Basis	2018	2019			2020	2021
				Approved Rate	Inflationary Adjusted Rate	Other Adjustments	Budget Rate	Plan Rate	Plan Rate
AED Site Responder Course with Level A CPR Training - CPR-A/AED INTERNAL/EXTERNAL - Group size of 2 to 16 persons	Toronto Paramedic Services	Market Based	Per Person	\$58.00	\$59.00		\$59.00	\$59.00	\$60.00
AED Site Responder Course with Level A CPR Training - CPR-A/AED INTERNAL/EXTERNAL - Group size of 17 to 64 persons	Toronto Paramedic Services	Market Based	Per Person	\$56.00	\$57.00		\$57.00	\$57.00	\$58.00
AED Site Responder Course with Level A CPR Training - CPR-A/AED INTERNAL/EXTERNAL - Group size of 65 or more persons	Toronto Paramedic Services	Market Based	Per Person	\$55.00	\$56.00		\$56.00	\$56.00	\$57.00
AED Site Responder Course with Level C CPR Training (External) - CPR-C/AED (EXTERNAL) - Group size of 2 to 16 persons	Toronto Paramedic Services	Market Based	Per Person	\$62.00	\$63.00		\$63.00	\$63.00	\$64.00
AED Site Responder Course with Level C CPR Training (External) - CPR-C/AED (EXTERNAL) - Group size of 17 to 64 persons	Toronto Paramedic Services	Market Based	Per Person	\$60.00	\$61.00		\$61.00	\$61.00	\$62.00
AED Site Responder Course with Level C CPR Training (External) - CPR-C/AED (EXTERNAL) - Group size of 65 or more persons	Toronto Paramedic Services	Market Based	Per Person	\$59.00	\$60.00		\$60.00	\$60.00	\$61.00
Renewal AED Site Responder Course with Level C CPR Training (External) - CPR-C/AED (RENEWAL-EXTERNAL) - Group size of 2 to 16 persons	Toronto Paramedic Services	Market Based	Per Person	\$58.00	\$59.00		\$59.00	\$59.00	\$60.00
Renewal AED Site Responder Course with Level C CPR Training (External) - CPR-C/AED (RENEWAL-EXTERNAL) - Group size of 17 to 64 persons	Toronto Paramedic Services	Market Based	Per Person	\$56.00	\$57.00		\$57.00	\$57.00	\$58.00
Renewal AED Site Responder Course with Level C CPR Training (External) - CPR-C/AED (RENEWAL-EXTERNAL) - Group size of 65 or more persons	Toronto Paramedic Services	Market Based	Per Person	\$55.00	\$56.00		\$56.00	\$56.00	\$57.00

Table 6b**New User Fees**

Rate Description	Service	Fee Category	Fee Basis	2019 Budget Rate	2020 Plan Rate	2021 Plan Rate
Standby Fees - Mountain Bike Paramedic Team - ACP	Emergency Medical Care	Full Cost Recovery	Per Hour - Minimum 4 hrs plus travel time	\$206.00	\$210.00	\$214.00
Standby Fees - Mountain Bike Paramedic Team - PCP	Emergency Medical Care	Full Cost Recovery	Per Hour - Minimum 4 hrs plus travel time	\$187.00	\$191.00	\$195.00
Standby Fees - Gator Ambulance Crew - ACP	Emergency Medical Care	Full Cost Recovery	Per Hour - Minimum 4 hrs plus travel time	\$210.00	\$214.00	\$218.00
Standby Fees - Gator Ambulance Crew - PCP	Emergency Medical Care	Full Cost Recovery	Per Hour - Minimum 4 hrs plus travel time	\$191.00	\$195.00	\$199.00
PSU-ACR - Patient	Emergency Medical Care	Full Cost Recovery	Per Document	\$30.00	\$31.00	\$32.00
PSU-Paramedic statement - incident report	Emergency Medical Care	Full Cost Recovery	Per Hour - Minimum 3 hours	\$113.00	\$115.00	\$117.00

Table 6c**User Fees for Discontinuation**

Rate Description	Service	Fee Category	Fee Basis	2018 Approved Rate	Year Introduced	Reason for Discontinuation
Standby Fees - Mountain Bike Paramedic	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 4 hrs plus travel time	\$113.00		To differentiate and reflect the cost of PCP versus ACP. This user fee will be replaced with AM100 & AM101
Standby Fees - Gator Ambulance Crew	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 4 hrs plus travel time	\$225.00		To differentiate and reflect the cost of PCP versus ACP. This user fee will be replaced with AM102 & AM103
PSU-Paramedic statement	Toronto Paramedic Services	Full Cost Recovery	Per Document	\$56.00		This user fee is not used anymore as the information on the statement are not applicable to the end user. This user fee will be replaced with AM105

Appendix 7

**2019 Capital Budget;
2020 - 2028 Capital Plan Including Carry Forward Funding**

(In \$000s)	Total App'd Cash Flows to Date*	2019 Budget	2020 Plan	2021 Plan	2022 Plan	2023 Plan	2024 Plan	2025 Plan	2026 Plan	2027 Plan	2028 Plan	2019 - 2028 Total	Total Project Cost
Total Expenditures by Category													
Health & Safety													
Defibrillator Replacement Purchases					2,640	2,640	660					5,940	5,940
Power Stretchers	400				1,600	1,600	1,600	1,600	1,600	1,600	1,600	11,200	11,600
Sub-Total	400				4,240	4,240	2,260	1,600	1,600	1,600	1,600	17,140	17,540
State of Good Repair													
Medical Equipment Replacement Program	330	500	500	500	525	525	550	550	550	575	575	5,350	5,680
Mobile Data Communications	500	800	300	300	300	300	250	550	300	300	330	3,730	4,230
Radio Infrastructure for Portable Coverage	550	859	1,750	400						610	610	4,229	4,779
Sub-Total	1,380	2,159	2,550	1,200	825	825	800	1,100	850	1,485	1,515	13,309	14,689
Service Improvement													
Community Paramedicine Vehicles	339	306										306	645
Sub-Total	339	306										306	645
Growth Related													
Additional Ambulances	3,801	1,161	1,000	1,000								3,161	6,962
Ambulance Post Program	200	200	1,400	400	150	505	1,345					4,000	4,000
Multi-Function Station #2	800	605	5,396	5,854	8,974	4,481						25,310	26,110
Multi-Function Station #3						500	4,000	6,454	7,596			19,500	19,500
Multi-Function Station #4									400	4,650	9,120	14,170	14,170
Sub-Total	4,601	1,966	7,796	7,254	9,124	5,486	5,345	6,454	7,996	5,600	9,120	66,141	70,742
Total Expenditures by Category (including carry forward from 2018)	6,720	4,431	10,346	8,454	14,189	10,551	8,405	9,154	10,446	8,685	12,235	96,896	103,616

CITY OF TORONTO

Gross Expenditures (\$000's)

Toronto Paramedic Services

						Current and Future Year Cash Flow Commitments							Current and Future Year Cash Flow Commitments Financed By											
Sub-Project No.	Project Name	Ward	Stat.	Cat.		2019	2020	2021	2022	2023	Total 2019-2023	Total 2024-2028	Total 2019-2028	Provincial Grants and Subsidies	Federal Subsidy	Development Charges	Reserves	Reserve Funds	Capital from Current	Other 1	Other2	Debt - Recoverable Debt	Total Financing	
AMB908017 Multi-Function Station #3																								
1	2	Multi-Function Station #3 (FACILITY)	CW	S6	05	0	0	0	0	500	500	19,000	19,500	0	0	11,238	0	0	0	0	0	8,262	0	19,500
Sub-total						0	0	0	0	500	500	19,000	19,500	0	0	11,238	0	0	0	0	0	8,262	0	19,500
AMB907920 Multi-Function Station #2																								
1	3	Multi-Function Station #2 (FACILITY)	21	S2	05	605	5,396	5,854	2,974	3,481	18,310	0	18,310	0	0	10,565	0	0	0	0	0	7,745	0	18,310
1	5	Multi-Function Station #2 (FACILITY)	21	S3	05	0	0	0	6,000	1,000	7,000	0	7,000	0	0	0	0	0	0	0	0	7,000	0	7,000
Sub-total						605	5,396	5,854	8,974	4,481	25,310	0	25,310	0	0	10,565	0	0	0	0	0	14,745	0	25,310
AMB908160 Ambulance Post Program																								
1	1	Ambulance Post Program (2023-2025)	CW	S6	05	0	0	0	150	505	655	1,345	2,000	0	0	1,200	0	0	0	0	0	800	0	2,000
1	2	Ambulance Post - Rexdale	02	S5	05	200	1,400	400	0	0	2,000	0	2,000	0	0	0	0	0	0	0	0	2,000	0	2,000
Sub-total						200	1,400	400	150	505	2,655	1,345	4,000	0	0	1,200	0	0	0	0	0	2,800	0	4,000
AMB908484 Multi-Function Station #4																								
1	1	MULTI-FUNCTION #4 (FACILITY)	CW	S6	05	0	0	0	0	0	0	14,170	14,170	0	0	5,650	0	0	0	0	0	8,520	0	14,170
Sub-total						0	0	0	0	0	0	14,170	14,170	0	0	5,650	0	0	0	0	0	8,520	0	14,170
AMB000137 Mobile Data Communications																								
2	9	Mobile Data Communications - Future years	CW	S6	03	0	300	300	300	300	1,200	1,730	2,930	0	0	0	0	0	0	0	0	2,930	0	2,930
2	18	Mobile Data Communications - 2018	CW	S2	03	500	0	0	0	0	500	0	500	0	0	0	0	0	0	0	0	500	0	500
2	19	Mobile Data Communications - 2019	CW	S4	03	300	0	0	0	0	300	0	300	0	0	0	0	0	0	0	0	300	0	300
Sub-total						800	300	300	300	300	2,000	1,730	3,730	0	0	0	0	0	0	0	0	3,730	0	3,730
AMB906057 Radio Infrastructure for Portable Coverage																								
2	8	Ambulance Radio Replacement - 2016-2018	CW	S2	03	9	0	0	0	0	9	0	9	0	0	0	0	0	0	0	0	9	0	9
2	9	Ambulance/Portable Radio Replacement - 2019-2020	CW	S5	03	450	550	0	0	0	1,000	0	1,000	0	0	0	0	0	0	0	0	1,000	0	1,000
2	11	Ambulance/Portable Replacement Radios-Future years	CW	S6	03	0	0	0	0	0	0	1,220	1,220	0	0	0	0	0	0	0	0	1,220	0	1,220
2	12	Dispatch Console Replacement - Future years	CW	S6	03	0	1,200	400	0	0	1,600	0	1,600	0	0	1,265	0	0	0	0	0	335	0	1,600
2	13	Dispatch Console Replacement - Deferral	CW	S2	03	400	0	0	0	0	400	0	400	0	0	115	0	0	0	0	0	285	0	400
Sub-total						859	1,750	400	0	0	3,009	1,220	4,229	0	0	1,380	0	0	0	0	0	2,849	0	4,229
AMB907921 Additional Ambulances																								

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Gross Expenditures (\$000's)

Toronto Paramedic Services

Sub- Priority	Project No. SubProj No.	Project Name Sub-project Name	Ward	Stat.	Cat.	Current and Future Year Cash Flow Commitments and Estimates						Current and Future Year Cash Flow Commitments and Estimates Financed By												
						2019	2020	2021	2022	2023	Total 2019-2023	Total 2024-2028	Total 2019-2028	Provincial Grants and Subsidies	Federal Subsidy	Development Charges	Reserve Reserves	Reserve Funds	Capital from Current	Other 1	Other2	Debt - Recoverable Debt	Total Financing	
Financed By:																								
		Development Charges				715	6,690	3,205	2,974	1,166	14,750	17,479	32,229	0	0	32,229	0	0	0	0	0	0	0	32,229
		Reserves (Ind. "XQ" Ref.)				500	500	500	4,765	4,765	11,030	11,064	22,094	0	0	0	22,094	0	0	0	0	0	0	22,094
		Debt				3,216	3,156	4,749	6,450	4,620	22,191	20,382	42,573	0	0	0	0	0	0	0	0	42,573	0	42,573
Total Program Financing						4,431	10,346	8,454	14,189	10,551	47,971	48,925	96,896	0	0	32,229	22,094	0	0	0	0	42,573	0	96,896

Status Code	Description
S2	S2 Prior Year (With 2019 and/or Future Year Cashflow)
S3	S3 Prior Year - Change of Scope 2019 and/or Future Year Cost(Cashflow)
S4	S4 New - Stand-Alone Project (Current Year Only)
S5	S5 New (On-going or Phased Projects)
S6	S6 New - Future Year (Commencing in 2020 & Beyond)

Category Code	Description
01	Health and Safety C01
02	Legislated C02
03	State of Good Repair C03
04	Service Improvement and Enhancement C04
05	Growth Related C05
06	Reserved Category 1 C06
07	Reserved Category 2 C07

Appendix 8

2019 Cash Flow and Future Year Commitments Including Carry Forward Funding

(In \$000s)	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	Total 2019 Cash Flow & FY Commits
Expenditures:											
Previously Approved											
<i>Additional Ambulances</i>	161										161
<i>Community Paramedicine Vehicles</i>	306										306
<i>Mobile Data Communications</i>	500										500
<i>Multi-Function Station #2</i>	605	5,396	5,854	2,974	3,481						18,310
<i>Radio Infrastructure for Portable Coverage</i>	409										409
Subtotal	1,981	5,396	5,854	2,974	3,481						19,686
Change in Scope											
<i>Multi-Function Station #2</i>				6,000	1,000						7,000
Subtotal				6,000	1,000						7,000
New w/Future Year											
<i>Additional Ambulances</i>	1,000										1,000
<i>Ambulance Post Program</i>	200										200
<i>Medical Equipment Replacement Program</i>	500										500
<i>Mobile Data Communications</i>	300										300
<i>Radio Infrastructure for Portable Coverage</i>	450										450
Subtotal	2,450										2,450
Total Expenditure (including carry forward from 2018)	4,431	5,396	5,854	8,974	4,481						29,136
Financing:											
Debt/CFC	3,216	306	3,514	6,000	4,320						17,356
Reserves/Res Funds	500										500
Development Charges	715	5,090	2,340	2,974	161						11,280
Total Financing	4,431	5,396	5,854	8,974	4,481						29,136

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Gross Expenditures (\$000's)

Toronto Paramedic Services						Current and Future Year Cash Flow Commitments and Estimates						Current and Future Year Cash Flow Commitments and Estimates Financed By										
<u>Sub- Project No. Project Name</u>	Ward	Stat.	Cat.	2019	2020	2021	2022	2023	Total 2019-2023	Total 2024-2028	Total 2019-2028	Provincial Grants and Subsidies	Federal Subsidy	Development Charges	Reserve Reserves	Reserve Funds	Capital from Current	Other 1	Other2	Debt - Recoverable Debt	Total Financing	
Financed By:																						
Development Charges				715	5,090	2,340	2,974	161	11,280	0	11,280	0	0	11,280	0	0	0	0	0	0	0	11,280
Reserves (Ind. "XQ" Ref.)				500	0	0	0	0	500	0	500	0	0	0	500	0	0	0	0	0	0	500
Debt				3,216	306	3,514	6,000	4,320	17,356	0	17,356	0	0	0	0	0	0	0	0	17,356	0	17,356
Total Program Financing				4,431	5,396	5,854	8,974	4,481	29,136	0	29,136	0	0	11,280	500	0	0	0	0	17,356	0	29,136

Status Code	Description
S2	S2 Prior Year (With 2019 and/or Future Year Cashflow)
S3	S3 Prior Year - Change of Scope 2019 and/or Future Year Cost(Cashflow)
S4	S4 New - Stand-Alone Project (Current Year Only)
S5	S5 New (On-going or Phased Projects)

Category Code	Description
01	Health and Safety C01
02	Legislated C02
03	State of Good Repair C03
04	Service Improvement and Enhancement C04
05	Growth Related C05
06	Reserved Category 1 C06
07	Reserved Category 2 C07

Appendix 9

2019 Capital Budget with Financing Detail

(Phase 2) 12-Toronto Paramedic Services Sub-Project Category: 01,02,03,04,05,06,07 Type: B Sub-Project Status: S2 Type: C Sub-Project Status: S2,S3,S4,S5



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**Toronto Paramedic Services
Sub-Project Summary**

Project/Financing Priority Project	Project Name	Start Date	Completion Date	2019	Financing									
				Cash Flow	Provincial Grants Subsidies	Federal Subsidy	Developmt Charges	Reserves	Reserve Funds	Capital From Current	Other 1	Other 2	Debt	Debt - Recoverable
1	<u>AMB907920 Multi-Function Station #2</u>													
1	3 Multi-Function Station #2 (FACILITY)	01/01/2017	12/31/2021	605	0	0	0	0	0	0	0	0	605	0
	Project Sub-total:			605	0	0	0	0	0	0	0	0	605	0
1	<u>AMB908160 Ambulance Post Program</u>													
1	2 Ambulance Post - Rexdale	01/31/2019	12/31/2021	200	0	0	0	0	0	0	0	0	200	0
	Project Sub-total:			200	0	0	0	0	0	0	0	0	200	0
2	<u>AMB000137 Mobile Data Communications</u>													
2	18 Mobile Data Communications - 2018	01/01/2018	12/31/2019	500	0	0	0	0	0	0	0	0	500	0
2	19 Mobile Data Communications - 2019	01/01/2019	12/31/2020	300	0	0	0	0	0	0	0	0	300	0
	Project Sub-total:			800	0	0	0	0	0	0	0	0	800	0
2	<u>AMB906057 Radio Infrastructure for Portable Coverage</u>													
2	8 Ambulance Radio Replacement - 2016-2018	01/01/2016	07/30/2018	9	0	0	0	0	0	0	0	0	9	0
2	9 Ambulance/Portable Radio Replacement - 2019-2020	01/01/2019	12/31/2019	450	0	0	0	0	0	0	0	0	450	0
2	13 Dispatch Console Replacement - Deferral	01/01/2018	12/31/2022	400	0	0	115	0	0	0	0	0	285	0
	Project Sub-total:			859	0	0	115	0	0	0	0	0	744	0
3	<u>AMB907921 Additional Ambulances</u>													
1	4 Additional Ambulances (2018)	01/01/2018	12/31/2018	161	0	0	0	0	0	0	0	0	161	0
3	2 Additional Ambulances (2019)	01/01/2019	12/31/2019	1,000	0	0	600	0	0	0	0	0	400	0
	Project Sub-total:			1,161	0	0	600	0	0	0	0	0	561	0
3	<u>AMB908486 Community Paramedicine Vehicles</u>													
3	1 Community Paramedic Vehicles	01/01/2018	12/31/2019	306	0	0	0	0	0	0	0	0	306	0
	Project Sub-total:			306	0	0	0	0	0	0	0	0	306	0
5	<u>AMB907787 Medical Equipment Replacement Program</u>													
5	8 Medical Equipment Replacement - 2019	01/01/2019	01/01/2019	500	0	0	0	500	0	0	0	0	0	0
	Project Sub-total:			500	0	0	0	500	0	0	0	0	0	0
Program Total:				4,431	0	0	715	500	0	0	0	0	3,216	0

Status Code Description
 S2 S2 Prior Year (With 2019 and/or Future Year Cashflow)
 S3 S3 Prior Year - Change of Scope 2019 and/or Future Year Cost(Cashflow)
 S4 S4 New - Stand-Alone Project (Current Year Only)
 S5 S5 New (On-going or Phased Projects)

Category Code Description
 01 Health and Safety C01
 02 Legislated C02

Category Code Description

03	State of Good Repair C03
04	Service Improvement and Enhancement C04
05	Growth Related C05
06	Reserved Category 1 C06
07	Reserved Category 2 C07

Appendix 10

Inflows and Outflows to/from Reserves and Reserve Funds

2019 Operating Budget

Program Specific Reserve / Reserve Funds

Reserve / Reserve Fund Name (In \$000s)	Reserve / Reserve Fund Number	Projected Balance as of Dec. 31, 2018 *	Withdrawals (-) / Contributions (+)		
			2019	2020	2021
		\$	\$	\$	\$
Beginning Balance		1,412.0	1,412.0	1,778.0	2,240.0
Vehicle Reserve	XQ1018				
<i>Withdrawals (-)</i>			(4,807.0)	(5,502.0)	(7,211.0)
<i>Contributions (+)</i>			5,173.0	5,964.0	6,760.0
Total Reserve / Reserve Fund Draws / Contributions		1,412.0	1,778.0	2,240.0	1,789.0
Balance at Year-End		1,412.0	1,778.0	2,240.0	1,789.0

* Based on 9-month 2018 Reserve Fund Variance Report

Reserve / Reserve Fund Name (In \$000s)	Reserve / Reserve Fund Number	Projected Balance as of Dec. 31, 2018 *	Withdrawals (-) / Contributions (+)		
			2019	2020	2021
		\$	\$	\$	\$
Beginning Balance		1,597.0	1,597.0	2,671.0	3,955.0
Equipment Reserve	XQ1019				
<i>Withdrawals (-)</i>			(500.0)	(500.0)	(500.0)
<i>Contributions (+)</i>			1,574.0	1,784.0	1,984.0
Total Reserve / Reserve Fund Draws / Contributions		1,597.0	2,671.0	3,955.0	5,439.0
Balance at Year-End		1,597.0	2,671.0	3,955.0	5,439.0

* Based on 9-month 2018 Reserve Fund Variance Report

Corporate Reserve / Reserve Funds

Reserve / Reserve Fund Name (In \$000s)	Reserve / Reserve Fund Number	Projected Balance as of Dec. 31, 2018 *	Withdrawals (-) / Contributions (+)		
			2019	2020	2021
		\$	\$	\$	\$
Beginning Balance		25,869.7			
Sick Leave Reserve	XR1007				
<i>Withdrawals (-)</i>					
<i>Contributions (+)</i>			280.0	280.0	280.0
Total Reserve / Reserve Fund Draws / Contributions					
Balance at Year-End		25,869.7			

* Based on 9-month 2018 Reserve Fund Variance Report

Reserve / Reserve Fund Name (In \$000s)	Reserve / Reserve Fund Number	Projected Balance as of Dec. 31, 2018 *	Withdrawals (-) / Contributions (+)		
			2019	2020	2021
		\$	\$	\$	\$
Beginning Balance		31,921.8			
Insurance Reserve	XR1010				
<i>Withdrawals (-)</i>					
<i>Contributions (+)</i>			1,283.5	1,283.5	1,283.5
Total Reserve / Reserve Fund Draws / Contributions					
Balance at Year-End		31,921.8			

* Based on 9-month 2018 Reserve Fund Variance Report

Inflows and Outflows to/from Reserves and Reserve Funds

2019 – 2028 Capital Budget and Plan

Program Specific Reserve / Reserve Funds

Reserve / Reserve Fund Name (In \$000s)	Project / Sub Project Name and Number	Projected Balance as at Dec 31, 2018 *	Contributions / (Withdrawals)										Total
			2019 Budget	2020 Plan	2021 Plan	2022 Plan	2023 Plan	2024 Plan	2025 Plan	2026 Plan	2027 Plan	2028 Plan	
XQ1019 Equipment Reserve Fund	Beginning Balance	1,597	1,597	2,671	3,955	5,439	2,758	177	130	447	864	1,356	
	<i>Withdrawals (-)</i>												
	<i>Medical Equipment Replacement</i>		(500)	(500)	(500)	(525)	(525)	(550)	(550)	(550)	(575)	(575)	(5,350)
	<i>Defibrillator Replacements</i>					(2,640)	(2,640)	(264)					(5,544)
	<i>Power Stretcher Replacements</i>					(1,600)	(1,600)	(1,600)	(1,600)	(1,600)	(1,600)	(1,600)	(11,200)
	Total Withdrawals		(500)	(500)	(500)	(4,765)	(4,765)	(2,414)	(2,150)	(2,150)	(2,175)	(2,175)	(22,094)
<i>Contributions (+)</i>		1,574	1,784	1,984	2,084	2,184	2,367	2,467	2,567	2,667	2,767	22,445	
Total Contributions		1,574	1,784	1,984	2,084	2,184	2,367	2,467	2,567	2,667	2,767	22,445	
Balance at Year-End		1,597	2,671	3,955	5,439	2,758	177	130	447	864	1,356	1,948	351

* Based on 9-month 2018 Reserve Fund Variance Report

Corporate Reserve / Reserve Funds

Reserve / Reserve Fund Name (In \$000s)	Project / Sub Project Name and Number	Projected Balance as at Dec 31, 2018 *	Contributions / (Withdrawals)										Total
			2019 Budget	2020 Plan	2021 Plan	2022 Plan	2023 Plan	2024 Plan	2025 Plan	2026 Plan	2027 Plan	2028 Plan	
XR2119 Development Charge Reserve	Beginning Balance	2,063	2,063	3,724	3	(44)	145	2,129	192	45	(33)	1,706	
	<i>Withdrawals (-)</i>												
	<i>Additional Ambulances</i>		(600)	(600)	(600)								(1,800)
	<i>Dispatch Console</i>		(115)	(1,000)	(265)								(1,380)
	<i>Multi-Function Station #2</i>			(5,090)	(2,340)	(2,974)	(161)						(10,565)
	<i>Ambulance Post #1</i>						(505)	(695)					(1,200)
	<i>Multi-Function Station #3</i>						(500)	(3,996)	(3,304)	(2,638)	(800)		(11,238)
	<i>Defibrillators</i>							(396)					(396)
	<i>Multi-Function Station #4</i>									(400)	(450)	(4,800)	(5,650)
Total Withdrawals		(715)	(6,690)	(3,205)	(2,974)	(1,166)	(5,087)	(3,304)	(3,038)	(1,250)	(4,800)	(32,229)	
<i>Contributions (+)</i>		2,376	2,969	3,158	3,163	3,150	3,150	3,157	2,960	2,989	3,049	30,121	
Total Contributions		2,376	2,969	3,158	3,163	3,150	3,150	3,157	2,960	2,989	3,049	30,121	
Balance at Year-End		2,063	3,724	3	(44)	145	2,129	192	45	(33)	1,706	(45)	(2,108)

* Based on 9-month 2018 Reserve Fund Variance Report