

Toronto 2018 BUDGET



OPERATING BUDGET NOTES



Toronto Paramedic Services

2018 OPERATING BUDGET OVERVIEW

Toronto Paramedic Services is the sole provider of emergency medical response for the City of Toronto: a service area encompassing 650 square kilometres with a daytime population of 3.5 million people. This makes Toronto Paramedic Services the largest municipal paramedic service in Canada.

2018 Budget Summary

The total cost to deliver these services to Toronto residents is \$214.874 million gross and \$73.298 million net as shown below:

(in \$000's)	2017 Budget	2018 Preliminary Budget	Change	
			\$	%
Gross Expenditures	212,137.2	214,874.3	2,737.1	1.3%
Revenues	133,851.9	141,576.4	7,724.5	5.8%
Net Expenditures	78,285.3	73,297.9	(4,987.4)	(6.4%)

Base pressures of \$2.737 million primarily due to the increase in WSIB claims cost of \$2.536 million reflecting legislative change have been more than offset by provincial revenue adjustments related to Land Ambulance and CACC grants.

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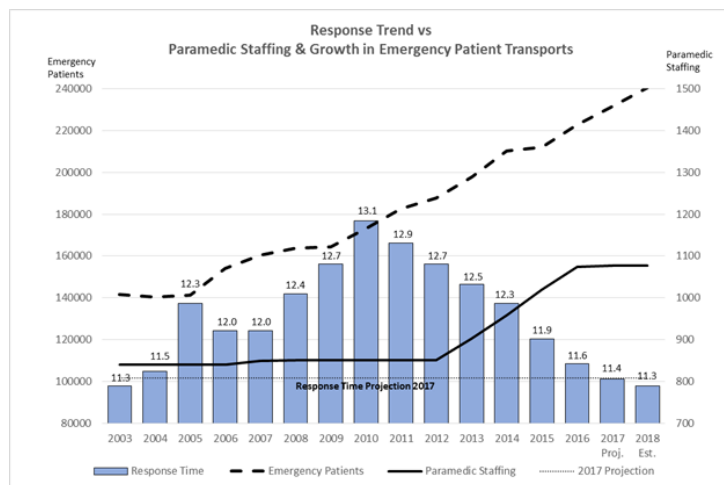
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FAST FACTS

- Toronto Paramedic Services is the largest municipal paramedic service in Canada.
- 215 ambulances and response vehicles will transport 231,440 patients to hospital in 2017, a 4.0% increase from 2016.
- 2017 estimated response time to life threatening calls will improve to 11.4 minutes from 11.6 minutes in 2016 and is expected to improve to 11.3 minutes in 2018.

TRENDS

- Since 2005, the number of emergency patient transports provided by Paramedic Services annually has increased by 90,031 patients (64%) from 141,409 transports in 2005 to a projected 231,440 transports in 2017 due to a growing and aging population.
- In 2017 alone, this translates to approximately 8,900 additional emergency transports over 2016.
- In spite of the increasing service demands, PS staffing remained relatively unchanged from 2002 to 2012. During the 2013 to 2016 period, City Council approved funding to increase staffing by 220 paramedic positions.
- With the increased staffing levels and through the implementation of several service efficiency initiatives, PS has been able to maintain a response time of 11.4 minutes in 2017.



KEY SERVICE DELIVERABLES FOR 2018

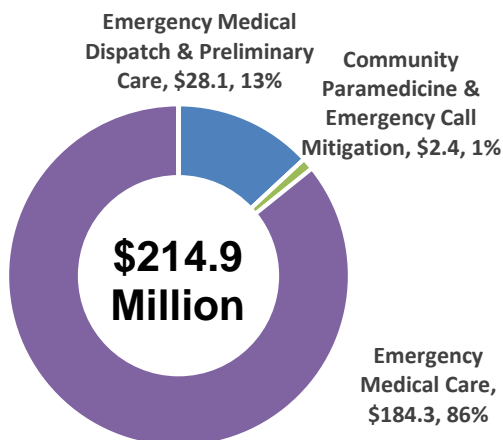
Toronto Paramedic Services (PS) is an industry-leading, public service organization with a mission to protect the quality of life in Toronto. PS is responsible for providing integrated, mobile, paramedic-based health care and transportation of patients with health emergencies as well as pre-hospital and out-of-hospital medical care to the special needs of vulnerable communities.

The 2018 Operating Budget will enable the Paramedic Services Programs to continue to:

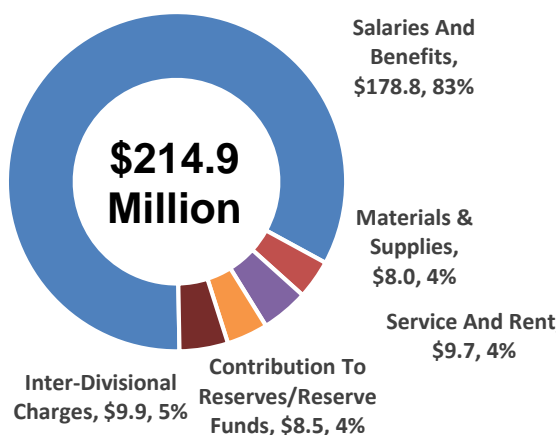
- Provide 24-hour emergency medical response from 45 ambulance stations located across the City with a fleet of 215 ambulances and an approved complement of 1,077 paramedics and 125 emergency medical dispatchers.
- Achieve targeted response times to life-threatening emergency calls within 11.3 minutes 90% of the time, with response time defined as the elapsed time from the receipt of the emergency call by the Central Ambulance Communications Centre to the arrival of the paramedic crew at the scene.
- Provide an estimated 240,700 emergency patient transports in 2018, an estimated increase of 4% over the 2017 projection of 231,440 emergency patient transports.
- Provide an estimated 37,800 hours of continuing medical education to Toronto Paramedic Services staff as mandated by the Ministry of Health and Long-Term Care and Paramedic Services' Base Hospital (medical oversight); upgrade training for 14 Primary Care Paramedics to the Advanced Care Paramedic level; and provision of International Trauma Life Support training to approximately 1,200 students.

Where the money goes:

2018 Budget by Service

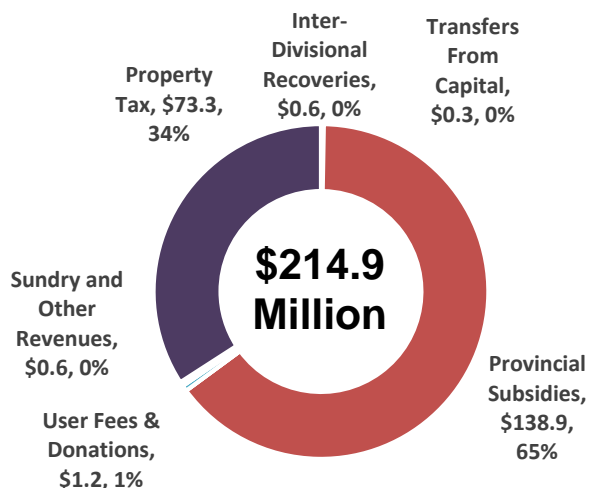


2018 Budget by Expenditure Category



2018 Budget by Funding Source:

Where the money comes from



OUR KEY ISSUES & PRIORITY ACTIONS

- **Increase in the number of emergency patient transports** with a projected annual increase of 3% to 5% due to a growing and aging population and polarized socio-economic status continues to be a challenge for Toronto Paramedic Services.
 - ✓ Continue to improve response times and life-saving programs (e.g., STEMI, a type of heart attack).
 - ✓ Utilize part-time paramedics to support the most efficient use of resources.
 - ✓ Ongoing improvements to Computer Aided Dispatch (CAD) systems to improve deployment and response time performance.
 - ✓ Continue call diversion strategies through Community Paramedicine.

2018 OPERATING BUDGET HIGHLIGHTS

- The 2018 Preliminary Operating Budget for Toronto Paramedic Services is \$214.874 million gross and \$73.298 million net represents a decrease of 6.4% to the 2017 Approved Operating Budget and includes budget reductions identified through the following:
 - ✓ Service efficiencies (\$0.854 million) redirected to 14 new positions.
 - ✓ Revenue adjustments (\$6.144 million).
- Staff complement will increase by 14 positions from 1,453.3 in 2017 to 1,467.3 in 2018.
- The 2018 Preliminary Operating Budget provides funding for:
 - ✓ 240,700 emergency patient transports.
 - ✓ Emergency medical response 24/7, 365 days a year.
 - ✓ 37,800 hours of continuing medical education and provision of International Trauma Life Support training to 1,200 students.

Actions for Consideration

Approval of the 2018 Preliminary Budget as presented in these notes requires that:

1. City Council approve the 2018 Preliminary Operating Budget for Toronto Paramedic Services of \$214.874 million gross, \$73.298 million net for the following services:

<u>Service:</u>	<u>Gross (\$000s)</u>	<u>Net (\$000s)</u>
Emergency Medical Dispatch & Preliminary Care:	28,124.5	570.2
Community Paramedicine & Emergency Call Mitigation:	2,423.2	327.3
Emergency Medical Care:	<u>184,326.6</u>	<u>72,400.4</u>
Total Program Budget	<u><u>214,874.3</u></u>	<u><u>73,297.9</u></u>

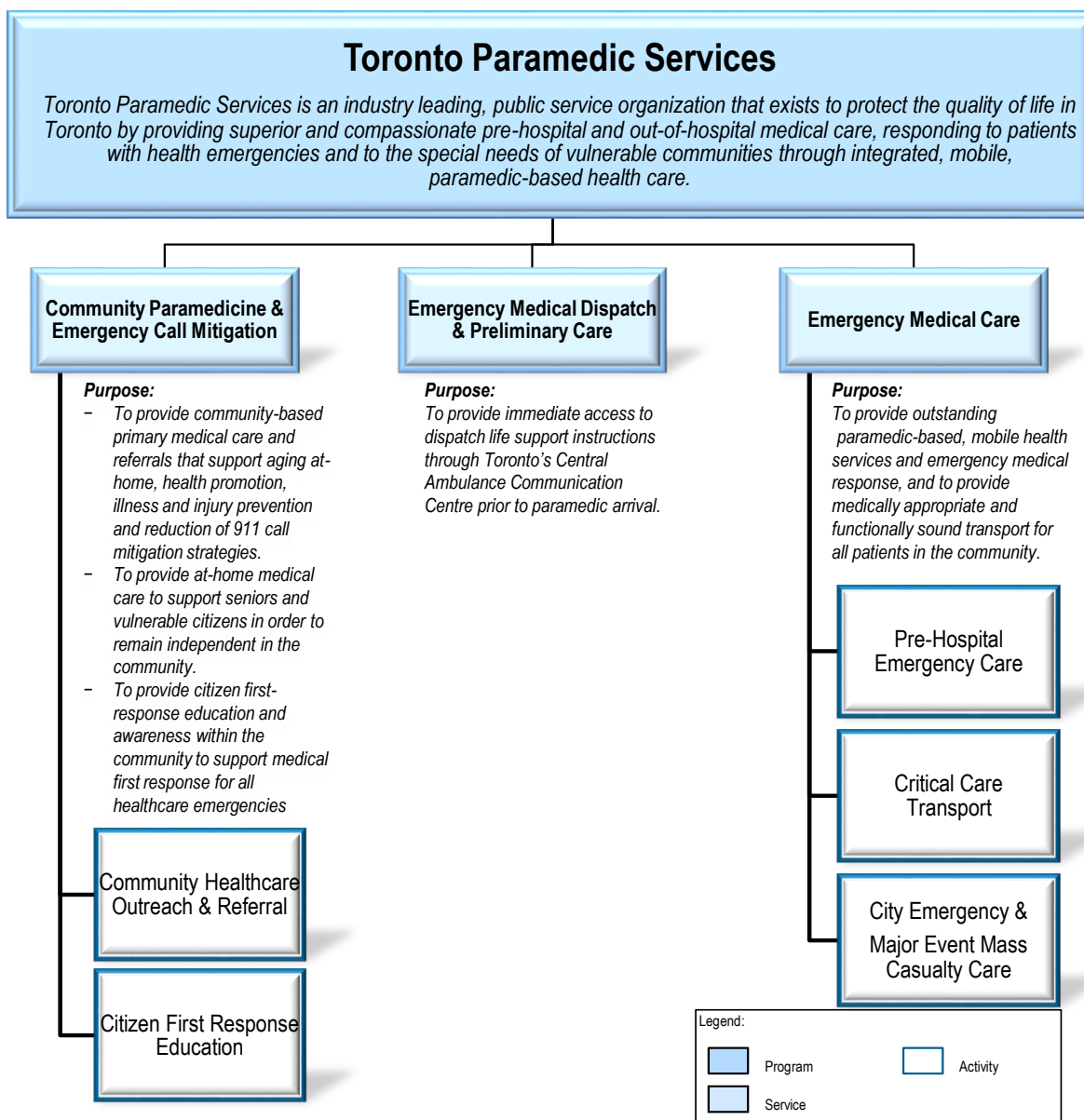
2. City Council approve the 2018 service levels for Toronto Paramedic Service as outlined on pages 14, 16, and 20 of this report, and associated staff complement of 1,467.3 positions, comprising of 2 capital project delivery positions and 1,465.3 operating service delivery positions.
3. City Council approve the technical adjustments to user fees and other fee changes for Toronto Paramedic Services identified in Appendix 7, for inclusion in the Municipal Code Chapter 441 "Fees and Charges".



Part 1:

2018-2020 Service Overview and Plan

Program Map



Service Customer

Community Paramedicine & Emergency Call Mitigation

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

Indirect (Beneficiary)

- Residents
- Visitors

Emergency Medical Dispatch & Preliminary Care

- 911 Callers
- Incident Victims
- Hospitals

Indirect (Beneficiary)

- Residents
- Visitors

Emergency Medical Care

- Patient
- Hospitals
- Health Care Providers

Indirect (Beneficiary)

- Residents
- Visitors

Table 1
2018 Preliminary Operating Budget and Plan by Service

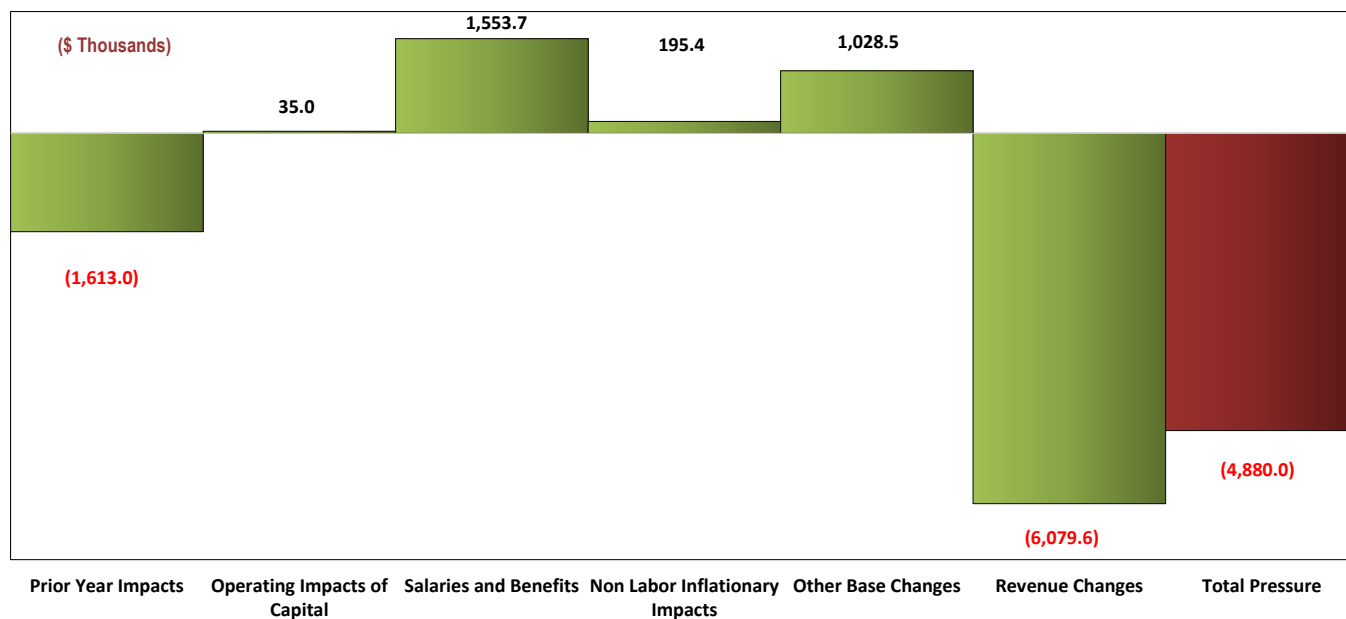
(In \$000s)	2017		2018 Preliminary Operating Budget			2018 Preliminary vs. 2017 Budget Change		Incremental Change			
	Budget	Projected Actual	Base	New/Enhanced	Total Budget			2019 Plan		2020 Plan	
By Service	\$	\$	\$	\$	\$	\$	%	\$	%	\$	%
Emergency Medical Dispatch & Preliminary Care											
Gross Expenditures	28,443.8	28,433.8	28,124.5	0.0	28,124.5	(319.3)	(1.1%)	474.4	1.7%	266.7	0.9%
Revenue	27,793.7	28,393.7	27,554.3	0.0	27,554.3	(239.4)	(0.9%)	889.0	3.2%	391.3	1.4%
Net Expenditures	650.1	40.1	570.2	0.0	570.2	(79.8)	(12.3%)	(414.6)	(72.7%)	(124.5)	(80.0%)
Community Paramedicine & Emergency Call Mitigation											
Gross Expenditures	2,439.4	2,389.4	2,423.2	0.0	2,423.2	(16.2)	(0.7%)	24.8	1.0%	24.9	1.0%
Revenue	2,020.9	2,165.0	2,095.9	0.0	2,095.9	75.0	3.7%	44.5	2.1%	(45.5)	(2.1%)
Net Expenditures	418.5	224.4	327.3	0.0	327.3	(91.2)	(21.8%)	(19.7)	(6.0%)	70.4	22.9%
Emergency Medical Care											
Gross Expenditures	181,254.1	181,356.9	184,326.6	0.0	184,326.6	3,072.6	1.7%	2,096.4	1.1%	1,371.1	0.7%
Revenue	104,037.3	104,437.3	111,926.2	0.0	111,926.2	7,889.0	7.6%	3,442.0	3.1%	1,891.9	1.6%
Net Expenditures	77,216.8	76,919.6	72,400.4	0.0	72,400.4	(4,816.4)	(6.2%)	(1,345.5)	(1.9%)	(520.8)	(0.7%)
Total											
Gross Expenditures	212,137.2	212,180.1	214,874.3	0.0	214,874.3	2,737.1	1.3%	2,595.7	1.2%	1,662.8	0.8%
Revenue	133,851.9	134,996.0	141,576.4	0.0	141,576.4	7,724.5	5.8%	4,375.5	3.1%	2,237.8	1.5%
Total Net Expenditures	78,285.3	77,184.1	73,297.9	0.0	73,297.9	(4,987.4)	(6.4%)	(1,779.9)	(2.4%)	(575.0)	(0.8%)
Approved Positions	1,453.3	1,446.3	1,467.3	0.0	1,467.3	14.0	1.0%	(0.0)	(0.0%)	0.0	

The Toronto Paramedic Service's 2018 Preliminary Operating Budget is \$214.874 million gross and \$73.298 million net, representing a 6.4% decrease to the 2017 Approved Net Operating Budget and is below the reduction target of 0% as set out in the 2018 Operating Budget Directions approved by Council.

- Base pressures are mainly attributable to inflationary increases in salaries and benefits, increased funding requirements for the Workplace Safety Insurance Board (WSIB) claim payments, increased patient transport growth and fleet maintenance expenditures.
- The above pressures were mitigated through revenue adjustments, primarily for CACC and Land ambulance grants.
- Approval of the 2018 Preliminary Operating Budget will result in Toronto Paramedic Services increasing its total staff complement by 14 positions from 1,453.3 to 1,467.3.
- The 2019 and 2020 Plan increases are attributable to known salary and benefits offset by an increase in provincial subsidies for salaries and benefit increases.

The following graphs summarize the operating budget pressures for Toronto Paramedic Services and the actions taken to offset/reduce these pressures to meet the budget reduction target.

Key Cost Drivers



Actions to Achieve Budget Reduction Target

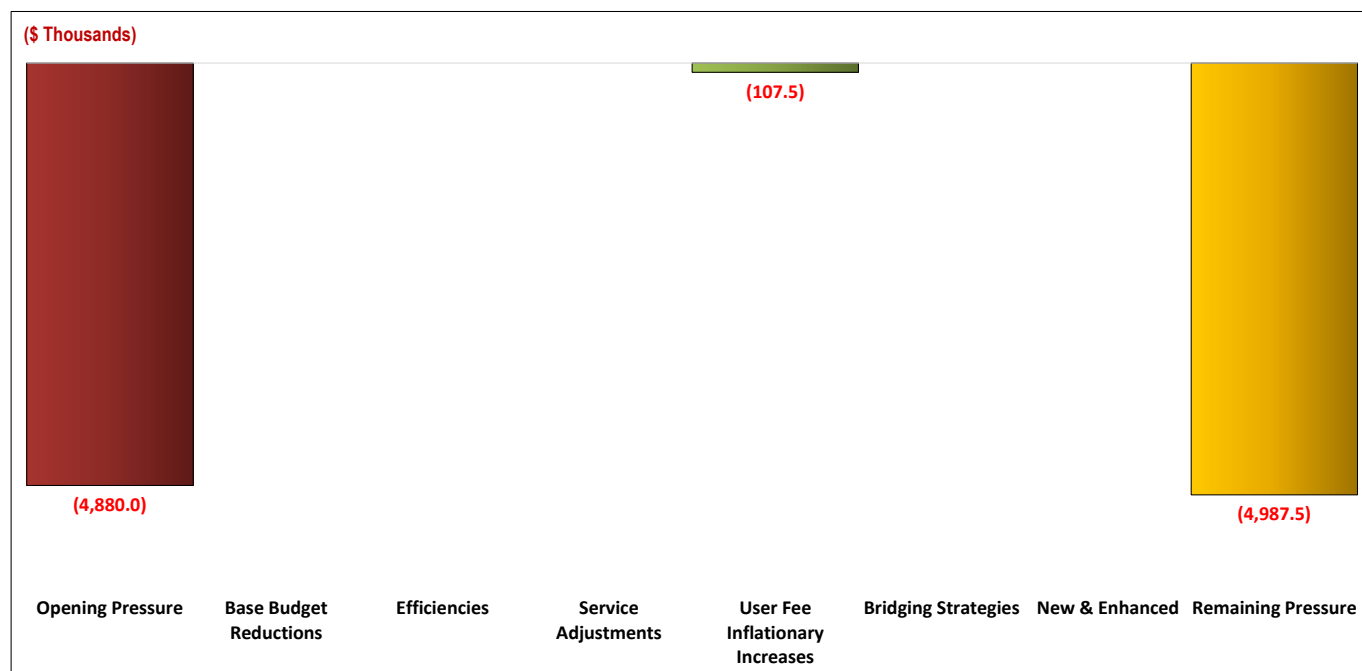


Table 2
Key Cost Drivers

(In \$000s)	2018 Base Operating Budget			Total	
	Emergency Medical Dispatch & Preliminary Care	Community Paramedicine & Emergency Call Mitigation	Emergency Medical Care		
	\$	\$	\$	\$	Position
Gross Expenditure Changes					
Prior Year Impacts					
1 Reversal of One-Time Provincial Funding for CAD Upgrade Training in the Central Ambulance Communications Centre (CACC)	(349.2)			(349.2)	
2 Reversal of One-Time Metrolinx Reimbursement for LRT Project Planning			(123.1)	(123.1)	
3 Reversal of One-Time Funding for Community Medicine Program		(95.2)		(95.2)	
4 Increase to CACC Base Funding for Administrative Overheads	16.7			16.7	
5 Annualization of Independence at Home (IAH) Program		95.2		95.2	
6 Discontinuation of Primary Care Paramedic (PCP) Program			(300.0)	(300.0)	(2.0)
Operating Impacts of Capital					
7 Delivery of Capital Projects (Power Stretchers, Additional Ambulances, NW Multi-Function Station)			365.5	365.5	
8 Temporary Capital Delivery Positions			314.0	314.0	2.0
Salaries and Benefits					
COLA, Progression Pay, Step Increases and Realignments	23.9	(23.7)	(982.6)	(982.4)	
Economic Factors					
Utilities	3.8	0.4	47.6	51.7	
Medical Equipment, Computer Hardware and Software maintenance	34.6	8.1	101.0	143.6	
Other Base Expenditure Changes					
Furnishings	20.0			20.0	
9 Interdivisional Charges	47.3	(0.2)	72.6	119.7	
10 Realignment of Budget between Services	(606.5)		620.8	14.3	
Insurance Deductible Adjustment			62.6	62.6	
11 Medical Supplies & Uniforms Cost Increases (Exchange Rate Fluctuation)			542.4	542.4	
Increased Fleet Maintenance			305.0	305.0	
WSIB Increase	490.2	(0.8)	2,046.8	2,536.2	
Total Gross Expenditure Changes	(319.3)	(16.2)	3,072.5	2,737.0	
Revenue Changes					
Prior Year Impacts					
1 Reversal of One-Time Provincial Funding for CAD Upgrade Training in the Central Ambulance Communications Centre (CACC)	(349.2)			(349.2)	
2 Reversal of One-Time Metrolinx Reimbursement for LRT Project Planning			(123.1)	(123.1)	
3 Reversal of One-Time Funding for Community Medicine Program		(95.2)		(95.2)	
4 Increase to CACC Base Funding (100% Provincially Funded)	16.7			16.7	
5 Annualization of Independence at Home (IAH) Program (100% Provincially Funded)		95.2		95.2	
6 Reduction of Primary Care Paramedic Program (Recovery from TESS)			(300.0)	(300.0)	
Provincial Funding for the Annualization of 2016-2017 Staff Additions			1,613.1	1,613.1	
Operating Impacts of Capital					
7 Delivery of Capital Projects (Power Stretchers, Additional Ambulances, NW Multi-Function Station)			330.5	330.5	
8 Temporary Capital Delivery Positions			314.0	314.0	
Base Revenue Changes					
9 Interdivisional Recoveries	0.6	(6.0)	9.6	4.2	
10 Realignment of Budget between Services	(283.2)	145.4	152.1	14.3	
11 Medical Supplies & Uniforms Cost Increases (Exchange Rate Fluctuation)			17.0	17.0	
User Fees Changes (Reduced Volume for Standby Film Fees)		(64.4)		(64.4)	
Provincial Funding Increase	365.0		5,779.0	6,144.0	
Total Revenue Changes	(250.0)	75.0	7,792.1	7,617.1	
Net Expenditure Changes	(69.2)	(91.2)	(4,719.6)	(4,880.1)	

Key cost drivers for Toronto Paramedic Services are discussed below:

Gross Expenditure Changes

- Prior Year Impacts
 - Reversal of one-time funding for three initiatives: CAD Upgrade Training in the Central Ambulance Communications Centre (funded by the Province), Light Rail Transit Project Planning (funded by Metrolinx), Community Medicine Program (funded by Toronto Local Health Integration Network) will result in \$0 net impact.
 - Discontinuation of the Primary Care Paramedic Program (funded by Toronto Employment and Social Services) for a \$0 net.
- Operating Impacts of Capital:
 - An increase in contribution to the Equipment Reserve and the Vehicle Reserve to ensure adequate funding is available for the replacement of power stretchers and ambulances and maintenance costs for the new Multi-Function station at 1300 Wilson Avenue, partially offset by provincial funding will result in a pressure of \$0.035 million.
- Salaries and Benefits
 - The COLA for Local 416 Paramedics is not included in the 2018 preliminary Budget for PS but is included in the 2018 Non-Program Expenditures Budget pending the outcome of arbitration. The 2018 salary and benefit projections for other negotiated agreements will result in savings of \$0.982 million in 2018.
- Economic Factors:
 - Inflationary increases for utility costs, medical equipment and computer hardware and software maintenance will create a pressure of \$0.195 million.

Other Base Changes

- Increase in Workplace Safety Insurance Board (WSIB) claim payments will result in a pressure of \$2.536 million due to the presumptive Provincial Legislation to accept Post Traumatic Stress Disorder (PTSD) claims.
- The exchange fluctuations applied to contracts for medical supplies and uniforms will add a pressure of \$0.525 million.
- An increase is required for fleet maintenance costs of \$0.305 million for vehicle parts, vehicle tires, vehicle maintenance and permit fees to support the increased number of vehicles on the road, partly from increased emergency call volume, and US exchange rate fluctuations.

Revenue Changes

- Land Ambulance Funding of 50% for the 2017 annualized costs of 59 new positions added in 2016 results in a net reduction of \$1.613 million.
- The provincial funding for the Land Ambulance and CACC programs will result in revenue changes of \$6.144 million.

The 2018 service changes for Toronto Paramedic Services consist of service efficiencies of \$0.108 million and \$0.854 million which will be redirected to provide funding for 14 new positions relieving the paramedics from vehicle and equipment preparation duties during shift change.

Table 3
Actions to Achieve Budget Reduction Target
2018 Preliminary Service Change Summary

Description (\$000s)	Service Changes						Total Service Changes			Incremental Change			
	Emergency Medical Dispatch & Preliminary Care		Community Paramedicine & Emergency Call Mitigation		Emergency Medical Care		\$	\$	#	2019 Plan		2020 Plan	
	Gross	Net	Gross	Net	Gross	Net	Gross	Net	Pos.	Net	Pos.	Net	Pos.
Base Changes:													
Base Revenue Changes													
User Fee Inflationary Increases		(10.6)				(96.9)		(107.5)					
Base Revenue Change		(10.6)				(96.9)		(107.5)					
Sub-Total		(10.6)				(96.9)		(107.5)					
Service Efficiencies													
NW District Centralized Vehicle Cleaning									14.0				
Sub-Total									14.0				
Total Changes		(10.6)				(96.9)		(107.5)	14.0				

Service Efficiencies

User Fee Inflationary Increases

- Inflationary increases in user fees will provide savings of \$0.108 million.

NW District Centralized Vehicle Cleaning

- On April 18, 2017, PS received occupancy of the ground floor of its first Multi-Function Paramedic Station (North West) at 1300 Wilson Avenue that became operational for logistical staff in October 2017.
- PS is modifying its delivery model to improve performance and better utilize Paramedic resources for the annual emergency medical call demand increases at their new North West Multi-Function Paramedic Station at 1300 Wilson Avenue by assigning vehicle and equipment preparation duties to the Vehicle & Equipment Preparation Technicians (VEPTs) paid at a lower wage rate appropriate for those duties.
- Currently Paramedics are responsible for cleaning, preparing, and ensuring the proper functioning of assigned equipment at the start of their shift and for stocking and cleaning their vehicles at the end of their shifts which results in overtime costs and less vehicles and Paramedics on the road.
- Reassigning of preparation/coordination of vehicles from paramedics to specialized logistical staff (VEPTs) who will perform shift-specific preparations for ambulances and other emergency vehicles such as clean, repair, stock and make-ready a pool of up to 50 ambulances will improve ambulance and paramedics availability to respond to emergency medical calls and to meet continued growth in emergency call demand in the near future.
- Reduction in paramedic overtime, medical supplies spoilage, better hospital relief and equitable use of vehicles will result in savings of \$0.854 million, which will be redirected to hire 14 new permanent VEPTs effective May 2018. For more information please refer to the Issue Section on page 24.

Approval of the 2018 Preliminary Operating Budget for Toronto Paramedic Services will result in 2019 incremental net savings of \$1.780 million and 2020 incremental net savings of \$0.575 million, as discussed in the following section.

Table 5
2019 and 2020 Plan by Program

Description (\$000s)	2019 - Incremental Increase					2020 - Incremental Increase				
	Gross Expense	Revenue	Net Expense	% Change	Position	Gross Expense	Revenue	Net Expense	% Change	Position
Known Impacts:										
Prior Year Impact										
Increase to CACC Base Funding for Administrative Overheads	12.7	12.7				11.9	11.9			
Work Term Student Harmonization	0.9		0.9			0.2		0.2		
Reduction in Primary Care Paramedic (PCP) Program	(50.0)		(50.0)							
Operating Impacts of Capital										
Delivery of Capital Projects	185.3	182.8	2.6			28.5	92.7	(64.2)		
Temporary Capital Delivery Positions	6.0	6.0				6.0	6.0			
Salaries and Benefits	2,242.6	1,522.6	720.0			1,503.8		1,503.8		
Other Base Changes										
Furnishings	(42.0)		(42.0)							
IDC/IDR	26.2	(7.0)	33.2			27.2	(46.9)	74.0		
Economic Factors for Medical and Computer Maintenance	22.6		22.6			(3.8)		(3.8)		
Medical Supplies and Uniforms Cost Increases		262.7	(262.7)							
Fleet Maintenance		152.5	(152.5)							
Revenue										
User Fee for Inflationary Increases		24.1	(24.1)				24.1	(24.1)		
Provincial Funding		2,027.9	(2,027.9)				2,060.9	(2,060.9)		
Total Incremental Impact	2,404.3	4,184.2	(1,779.9)		0.00	1,573.7	2,148.7	(575.0)		0.00

Future year incremental costs are primarily attributable to the following:

Known Impacts:

- Discontinuation of funding for Primary Care Paramedics (PCP) Program from Toronto Employment and Social Services (TESS) will result in additional savings of \$0.050 million in 2019.
- Salaries, step and progression pay increases for known negotiated contracts will result in a pressure of \$0.720 million in 2019 and \$1.504 million in 2020. The COLA for Local 416 Paramedics is not included in 2018 as it is under negotiation.
- Paramedic Services is projecting additional provincial funding of \$0.415 million for uniforms, medical supplies and fleet maintenance that reflects the Provincial share of 50% for budget increases approved in 2018. The Province funds its 50% share in the 2nd year of operations.
- Provincial funding (CACC grant and Land Ambulance grant) will result in increased revenues of \$2.028 million in 2019 and \$2.061 million in 2020.



Part 2:

2018 Preliminary Operating Budget by Service

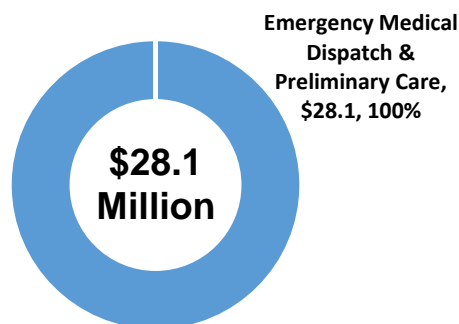
Emergency Medical Dispatch & Preliminary Care

What We Do

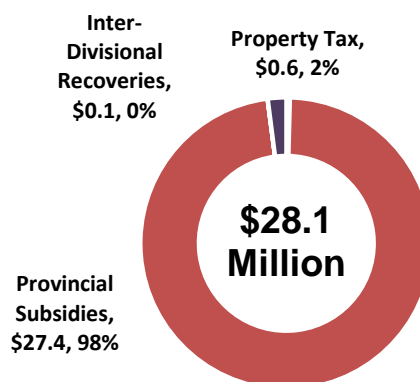
Emergency Medical Dispatch & Preliminary Care

- Provide immediate access to dispatch life support instructions through Toronto's Central Ambulance Communications Centre prior to paramedic arrival.

2018 Service Budget by Activity (\$Ms)



2018 Service by Funding Source (\$Ms)



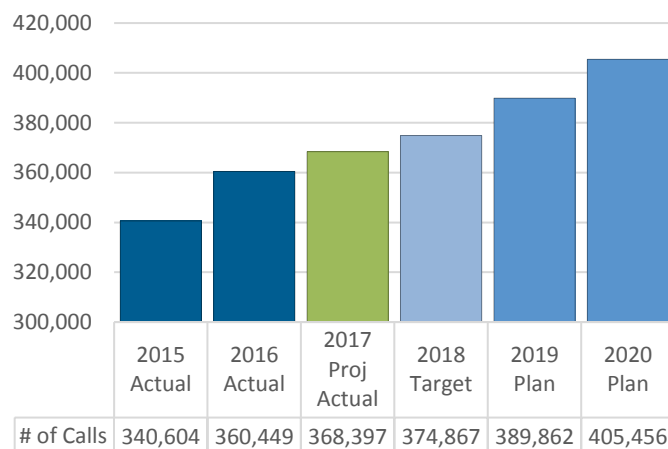
2018 Service Levels Emergency Medical Dispatch & Preliminary Care

Activity	Type	Service Level Description	Status	2015	2016	2017	2018
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	New in 2016	3.0 minutes	2 minutes 47 seconds	2 minutes 53 seconds
			Actual	2 minutes 51 seconds	2 minutes 53 seconds		
	Emergency Calls Processed	Number of Calls Processed	Approved	New in 2016	360,611	368,397	389,862
			Actual	340,604	360,449		

Except for annual volume adjustments, the 2018 Service Levels are consistent with the approved 2017 Service Levels for Emergency Medical Dispatch & Preliminary Care. The increased length of time in minutes to process life threatening calls 90% of the time to 2 minutes 53 seconds in 2018 is due to the increased number of calls processed.

Service Performance Measures

Number of Calls Processed



- The number of emergency calls to be processed is projected to increase at a rate of 4% per year with projected number of calls of 368,397 in 2017 increasing to 374,867 in 2018.
- Emergency Calls are rising at a rate greater than Toronto's population growth.
- An aging population also contributes to the increased number of Emergency Calls received

Table 6
2018 Preliminary Service Budget by Activity

	2017	2018 Preliminary Operating Budget							Incremental Change					
	Approved Budget	Base Budget	Service Changes	Preliminary Base	Prelim. Base Budget vs. 2017 Budget		New/Enhanced	Prelim Budget	2018 Prelim Budget vs. 2017 Budget		2019 Plan		2020 Plan	
						% Change				%		%		%
(\$000s)	\$	\$	\$	\$	\$	%	\$	\$	\$	%	\$	%	\$	%
GROSS EXP.														
Emergency Medical Dispatch & Preliminary Care	28,443.8	28,124.5		28,124.5	(319.3)	(1.1%)		28,124.5	(319.3)	(1.1%)	474.4	1.7%	266.7	0.9%
Total Gross Exp.	28,443.8	28,124.5		28,124.5	(319.3)	(1.1%)		28,124.5	(319.3)	(1.1%)	474.4	1.7%	266.7	0.9%
REVENUE														
Emergency Medical Dispatch & Preliminary Care	27,793.7	27,554.3		27,554.3	(239.4)	(0.9%)		27,554.3	(239.4)	(0.9%)	889.0	3.2%	391.3	1.4%
Total Revenues	27,793.7	27,554.3		27,554.3	(239.4)	(0.9%)		27,554.3	(239.4)	(0.9%)	889.0	3.2%	391.3	1.4%
NET EXP.														
Emergency Medical Dispatch & Preliminary Care	650.1	570.2		570.2	(79.8)	(12.3%)		570.2	(79.8)	(12.3%)	(414.6)	(72.7%)	(124.5)	(80.0%)
Total Net Exp.	650.1	570.2		570.2	(79.8)	(12.3%)		570.2	(79.8)	(12.3%)	(414.6)	(72.7%)	(124.5)	(80.0%)
Approved Positions	189.7	189.2		189.2	(0.5)	(0.2%)		189.2	(0.5)	(0.2%)	(0.2)	(0.1%)		

The **Emergency Medical Dispatch & Preliminary Care** service is the initial access point to City of Toronto's Paramedic Services. This service responds to victims of illness or injury through its Central Ambulance Communications Centre (CACC). PS provides ambulance communication services that are seamless, integrated, accountable, accessible and responsive to the emergency requirements of the City of Toronto residents.

The Emergency Medical Dispatch & Preliminary Care service's 2018 Preliminary Operating Budget of \$28.125 million gross and \$0.570 million net is \$0.080 million or 12.3% under the 2017 Approved Net Budget.

- In addition to the base budget pressures common to all services, this service is experiencing an increase of \$0.047 million in maintenance costs to support Radio Infrastructure project shared equally by Toronto Police Service, Toronto Fire Services and Toronto Paramedic Services as well as increased WSIB costs of \$0.490 million due to higher PTSD claims.
- In order to offset these pressures, the 2018 Preliminary Operating Budget includes savings of \$0.323 million resulting from a realignment between services to better reflect cost of services provided as well as revenue changes from increased CACC grant funding from the Province totalling \$0.365 million.

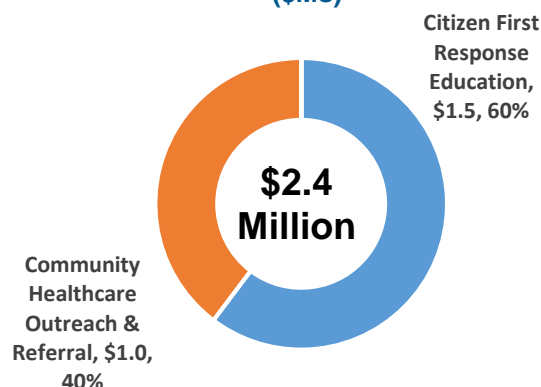
Community Paramedicine & Emergency Call Mitigation

What We Do

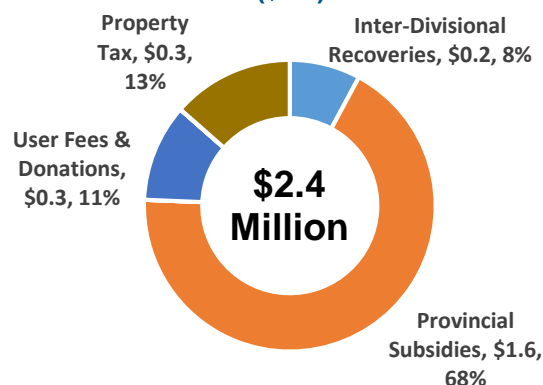


- Provide community-based primary medical care and referrals that support aging at home, health promotion, illness and injury prevention and reduction of 911 calls through emergency call mitigation strategies.
- Provide at-home medical care to support seniors and vulnerable citizens in order to remain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

2018 Service Budget by Activity (\$Ms)



2018 Service by Funding Source (\$Ms)



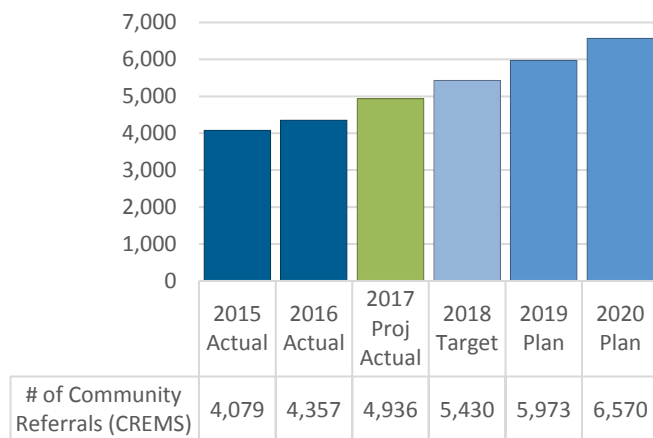
2018 Service Levels Community Paramedicine & Emergency Call Mitigation

Activity	Type	Service Level Description	Status	2015	2016	2017	2018
Citizen First Response Education	Safe city - Emergency Medical Training Courses Provided	Number of Emergency Medical training courses delivered	Approved	1000	1000	650	800
			Actual	782	729		
	Number of Registered (PAD) Public Access Defibrillators = (AED) Automated External Defibrillators	Number of registered AEDs	Approved	1,495	1,523	1,550	1,575
			Actual	1,501	1,547		

Except for annual volume adjustments, the 2018 Service Levels are consistent with the approved 2017 Service Levels for Community Paramedicine & Emergency Call Mitigation.

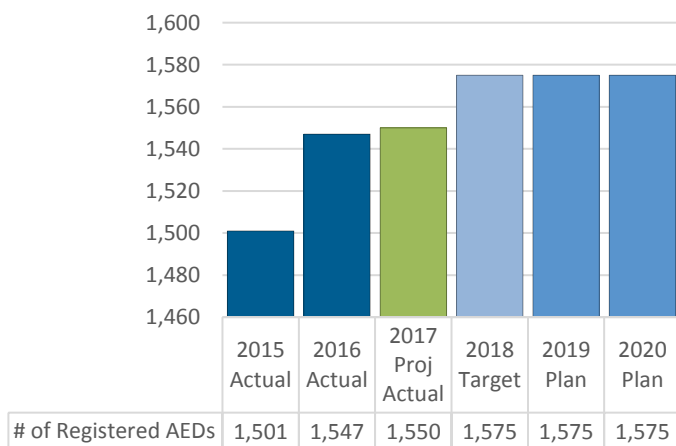
Service Performance Measures

Number of Community Referrals by Paramedic Services (CREMS)



- Paramedics refer patients to community health agencies which allow independent and supportive aging at home and reduces emergency department visits.
- The paramedic's ability to refer patients electronically to Community Care Access Centres was introduced in April 2013 leading to a significant increase in referrals.
- Further, due to an increasing and aging population, paramedic referrals are expected to increase significantly in 2018 and future years.

Number of Registered AEDs



- 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.

Table 6
2018 Preliminary Service Budget by Activity

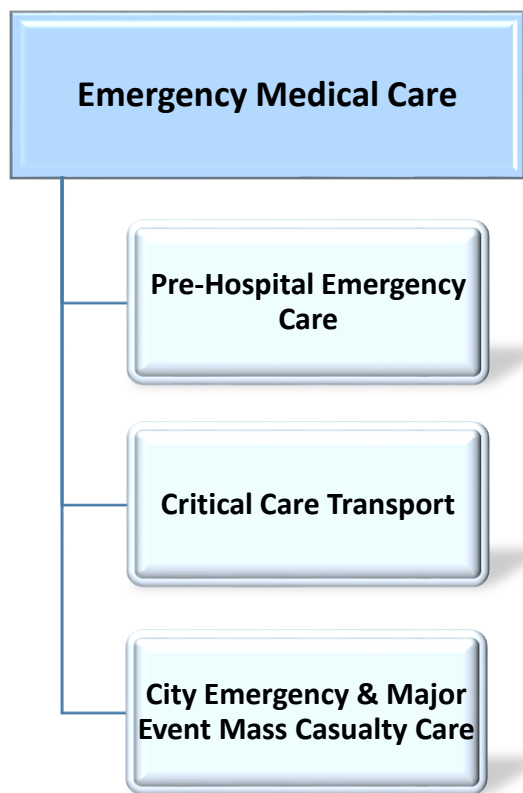
(\$000s)	2017	2018 Preliminary Operating Budget							Incremental Change					
	Approved Budget	Base Budget	Service Changes	Preliminary Base	Prelim. Base Budget vs. 2017 Budget	% Change	New/Enhanced	Prelim Budget	2018 Prelim Budget vs. 2017 Budget		2019 Plan		2020 Plan	
	\$	\$	\$	\$	\$	%	\$	\$	\$	%	\$	%	\$	%
GROSS EXP.														
Citizen First Response Education	1,436.9	1,460.7		1,460.7	23.8	1.7%		1,460.7	23.8	1.7%	21.1	1.4%	13.4	0.9%
Community Healthcare Outreach & Referral	1,002.4	962.5		962.5	(40.0)	(4.0%)		962.5	(40.0)	(4.0%)	3.7	0.4%	11.5	1.2%
Total Gross Exp.	2,439.4	2,423.2		2,423.2	(16.2)	(0.7%)		2,423.2	(16.2)	(0.7%)	24.8	1.0%	24.9	1.0%
REVENUE														
Citizen First Response Education	1,219.0	1,177.5		1,177.5	(41.6)	(3.4%)		1,177.5	(41.6)	(3.4%)	44.5	3.8%	(45.5)	(3.7%)
Community Healthcare Outreach & Referral	801.9	918.4		918.4	116.6	14.5%		918.4	116.6	14.5%	0.0	0.0%	0.0	0.0%
Total Revenues	2,020.9	2,095.9		2,095.9	75.0	3.7%		2,095.9	75.0	3.7%	44.5	2.1%	(45.5)	(2.2%)
NET EXP.														
Citizen First Response Education	217.9	283.2		283.2	65.3	30.0%		283.2	65.3	30.0%	(23.5)	(8.3%)	58.9	22.7%
Community Healthcare Outreach & Referral	200.6	44.0		44.0	(156.5)	(78.0%)		44.0	(156.5)	(78.0%)	3.7	8.5%	11.5	24.1%
Total Net Exp.	418.5	327.3		327.3	(91.2)	(21.8%)		327.3	(91.2)	(21.8%)	(19.7)	(6.0%)	70.4	18.6%
Approved Positions	14.6	14.6		14.6				14.6			(0.0)	(0.0%)		

The **Community Paramedicine and Emergency Call Mitigation** service is a non-emergency, community-based service with a focus on health promotion, system navigation and injury prevention. In this service, referrals are made by paramedics who respond to 911 calls based on a determination that a patient is in need of additional healthcare or support services.

The Community Paramedicine and Emergency Call Mitigation service's 2018 Preliminary Operating Budget of \$2.423 million gross and \$0.327 million net is \$0.091 million or 21.8% under the 2017 Approved Net Budget.

- In addition to the base budget pressures common to all services, this service is experiencing a reduction in user fees of \$0.064 million due to a decline in the volume of paramedic standbys for movie productions. This fee is collected for Paramedics to be onsite during the filming of movies.
- In order to offset these pressures, the 2018 Preliminary Operating Budget includes savings of \$0.145 million resulting from the reallocation of costs between services to better reflect cost of services provided.

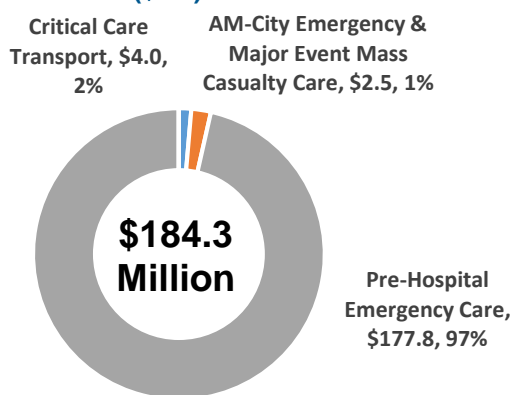
Emergency Medical Care



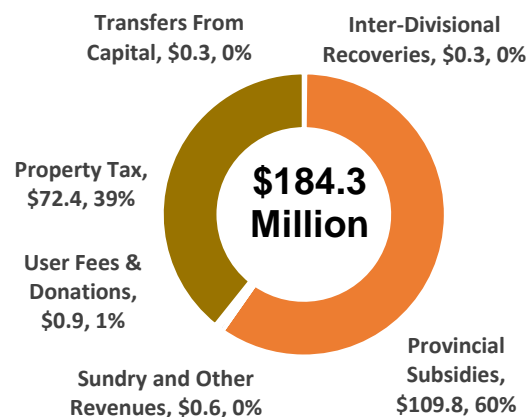
What We Do

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

2018 Service Budget by Activity (\$Ms)



2018 Service by Funding Source (\$Ms)



2018 Service Levels

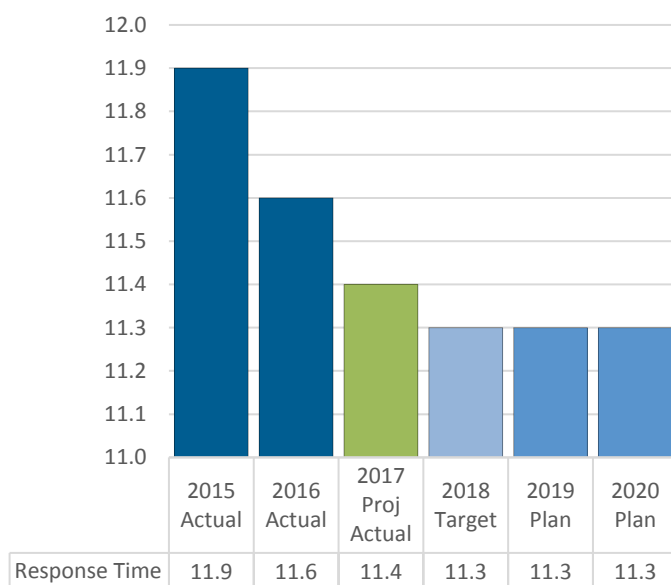
Emergency Medical Care

Activity	Type	Sub Type	Service Level Description	Status	2015	2016	2017	2018
Pre-Hospital Emergency Care	Emergency Calls (Unique Incidents)		Number of emergency calls for unique incidents	Approved	285,189	296,597	305,092	317,296
				Actual	282,075	293,358		
	Critical Care Transport	Transport of critically-ill patients between health care facilities	Number of patient transports	Approved	218,502	227,242	231,440	240,700
				Actual	212,189	222,538		
	Response Time		Number of minutes to arrive at life threatening calls 90% of the time	Approved	12.0 minutes	11.6 minutes	11.4 minutes	11.3 minutes
				Actual	11.9 minutes	11.6 minutes		

Except for annual volume adjustments, the 2018 Service Levels are consistent with the approved 2017 Service Levels for Emergency Medical Care.

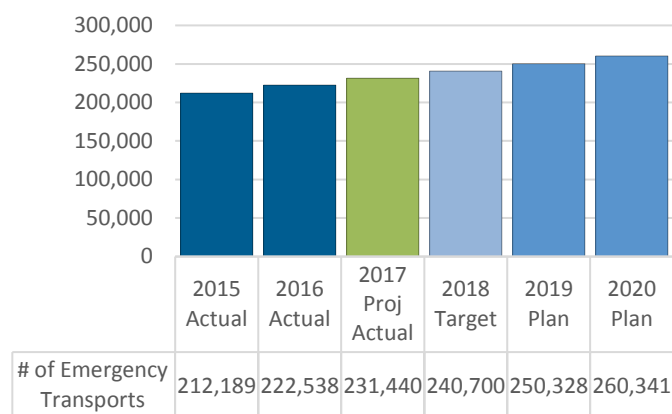
Service Performance Measures

Response Time



- Despite increased emergency call volumes, PS has been able to achieve an improvement in response time performance.
- Improved performance is attributed to: scheduling changes for frontline staff, (paramedics and dispatchers), use of part-time staff, new staff, use of improved dispatch technology, etc.
- The graph reflects the impact of continued growth in transports at a rate of 4% per year with no additional Paramedic positions in years 2018-2020.

Number of Emergency Transports Provided



- The number of Emergency Patient Transports is projected to increase at a rate of 4% per year.
- Emergency Patient Transports are rising at a rate greater than Toronto's population growth.
- An aging population also contributes to the increased number of Emergency Patient Transports.

Table 6
2018 Preliminary Service Budget by Activity

	2017	2018 Preliminary Operating Budget						Incremental Change					
	Approved Budget	Base Budget	Service Changes	Preliminary Base	Prelim. Base Budget vs. 2017 Budget	% Change	New/Enhanced	Prelim Budget	2018 Prelim Budget vs. 2017 Budget		2019 Plan	2020 Plan	
(\$000s)	\$	\$	\$	\$	\$	%	\$	\$	\$	%	\$	\$	%
GROSS EXP.													
AM-City Emergency & Major Event Mass Casualty Care	2,199.5	2,519.4		2,519.4	319.9	14.5%		2,519.4	319.9	14.5%	14.7	29.0	1.1%
Critical Care Transport	4,267.4	4,002.9		4,002.9	(264.5)	(6.2%)		4,002.9	(264.5)	(6.2%)	35.7	32.5	0.8%
Pre-Hospital Emergency Care	174,787.2	177,804.4		177,804.4	3,017.2	1.7%		177,804.4	3,017.2	1.7%	2,046.0	1,309.6	0.7%
Total Gross Exp.	181,254.1	184,326.6		184,326.6	3,072.6	1.7%		184,326.6	3,072.6	1.7%	2,096.4	1,371.1	0.7%
REVENUE													
AM-City Emergency & Major Event Mass Casualty Care	1,825.5	1,958.0		1,958.0	132.5	7.3%		1,958.0	132.5	7.3%	14.3	14.3	0.7%
Critical Care Transport	3,672.4	3,647.0		3,647.0	(25.5)	(0.7%)		3,647.0	(25.5)	(0.7%)	0.1	0.1	0.0%
Pre-Hospital Emergency Care	98,539.4	106,321.3		106,321.3	7,781.9	7.9%		106,321.3	7,781.9	7.9%	3,427.5	1,877.5	1.7%
Total Revenues	104,037.3	111,926.2		111,926.2	7,889.0	7.6%		111,926.2	7,889.0	7.6%	3,442.0	1,891.9	1.6%
NET EXP.													
AM-City Emergency & Major Event Mass Casualty Care	374.0	561.4		561.4	187.4	50.1%		561.4	187.4	50.1%	0.3	14.7	2.6%
Critical Care Transport	595.0	355.9		355.9	(239.1)	(40.2%)		355.9	(239.1)	(40.2%)	35.6	32.4	8.3%
Pre-Hospital Emergency Care	76,247.8	71,483.1		71,483.1	(4,764.7)	(6.2%)		71,483.1	(4,764.7)	(6.2%)	(1,381.5)	(567.9)	(0.8%)
Total Net Exp.	77,216.8	72,400.4		72,400.4	(4,816.4)	(6.2%)		72,400.4	(4,816.4)	(6.2%)	(1,345.5)	(520.8)	(0.7%)
Approved Positions	1,249.0	1,249.5	14.0	1,263.5	14.5	1.2%		1,263.5	14.5	1.2%	0.2	0.0%	

The **Emergency Medical Care** service provides emergency and preventative care to the people of Toronto through activities such as pre-hospital emergency care, inter-facility patient transport services and mass casualty care.

The Emergency Medical Care service's 2018 Preliminary Operating Budget of \$184.327 million gross and \$72.400 million net is \$4.816 million or 6.2% under the 2017 Approved Net Budget.

- In addition to the base budget pressures common to all services, this service is experiencing pressure of \$0.525 million for the cost of uniforms and medical supplies due to increase in paramedic positions approved between 2014 and 2016 and US exchange rate fluctuation, fleet maintenance to support increased number of vehicles utilized by paramedics for patient transport of \$0.305 million, and a realignment of non-payroll accounts to other services based on actual experience totalling \$0.469 million.
- These pressures were more than offset by revenue changes from increased Land Ambulance Funding of \$1.613 for the 2017 annualized costs of 59 new positions added in 2016 and \$5.779 million to fund PS' inflationary increases.
- This service also reflects the reassigning of preparation/coordination of vehicles from paramedics to specialized logistical staff (Vehicle & Equipment Preparation Technicians or VEPTs) to improve ambulance availability and better utilize paramedic resources required to meet continued growth in emergency call demand in the near future.
 - The cost of \$0.854 million for 14 positions is offset by operational efficiencies such as: reduction in paramedics' overtime, medical supplies spoilage, better hospital relief, equitable use of vehicles or improved paramedic scheduling.



Part 3:

Issues for Discussion

Issues Impacting the 2018 Budget

NW District Centralized Vehicle Cleaning

- The new North West Multi-Function Paramedic Station at 1300 Wilson Avenue that became operational in October, 2017 has added capacity in the system to address the 4%-5% annual increase in emergency medical call demand. The Multi-Function model is designed to increase ambulance availability, reduce end-of-shift overtime and vehicle downtime and to substitute Paramedic resources with lower cost logical resources for specific logistical tasks.
- Historically, in the small-station-based model of Paramedic service delivery in Toronto, Paramedics have been responsible for cleaning, preparing, and ensuring the proper functioning of assigned equipment at the start of their shift. They have also been responsible for stocking and cleaning their vehicles at the end of their shifts.
- The 2018 Preliminary Operating Budget reflects the addition of 14 new Vehicle & Equipment Preparation Technicians (VEPT's) to provide vehicle readiness and operational support for the North West Multi-Function Paramedic Station for improved availability to respond to emergency medical calls.
- Funding for these positions will be made possible by redirecting savings achieved through base budget reductions in several line items that include paramedic overtime, medical supplies spoilage, better hospital relief and equitable use of vehicles totaling \$0.854 million as noted in the table below:

2018 Budget Savings - Efficiencies		(\$000s)
Reduction in Wash Up/Lock Up Overtime		
Reduction in overtime as Paramedic Crew will no longer be responsible for cleaning and restocking of their vehicles at the end of each shift.		(316.6)
Medical Supplies Spoilage Reduction		
A centralized approach to storage of materials will prevent overstocking of ambulances and satellite posts to reduce spoilage. It is estimated that medical supplies costs can be reduced by 25% based on the experiences of other jurisdictions.		(56.3)
Drugs Spoilage Reduction		
A centralized approach to storage of drugs will significantly improve the management of drugs and reduce spoilage.		(33.3)
Better Hospital Relief		
Immediate availability at the beginning of shifts will allow Paramedics to relieve crews quickly that are held in hospital offload situations. This will reduce:		
1) End of shift Overtime		
2) Meal Break penalties		(60.9)
Equitable Use of Vehicles		
Reduction of the frequency of Preventative Maintenance (PM) checks.		(4.1)
Reduced Costs to Replace Ambulances Going Forward		
The Ambulance Remount Program will reduce the cost to replace ambulances going forward. In the next 10 years PS will remount between 16 to 20 ambulances per year which produces \$50K savings per vehicle.		(183.0)
Improved Part Time Paramedic Scheduling		
Improve the allocation of Part Time resources so that car counts are maintained.		(199.5)
Total Budget Efficiencies		(853.7)
Redirected Towards 14 Vehicle & Equipment Preparation Technicians		853.7

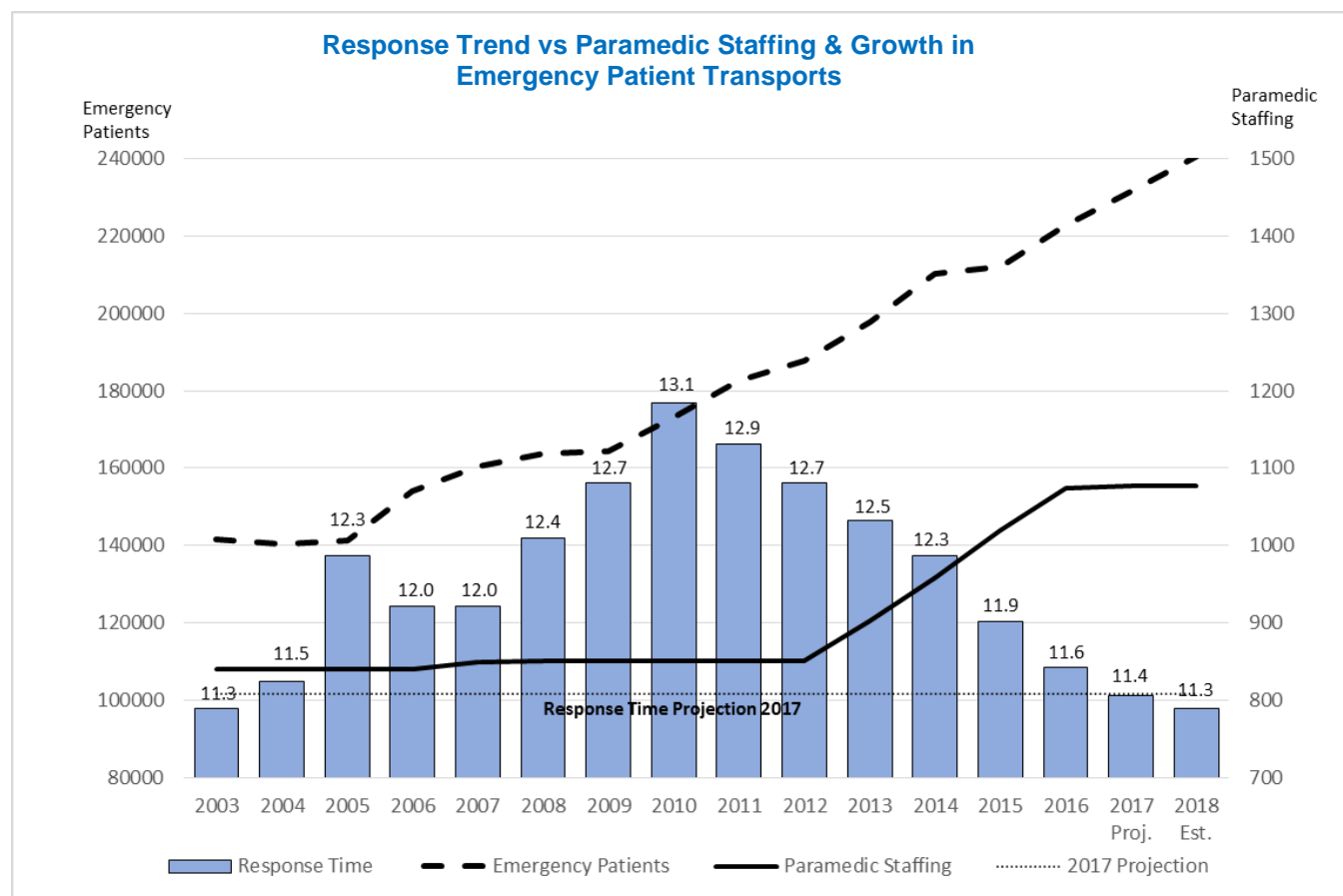
- This process improvement by assigning these key logistical duties to the Vehicle & Equipment Preparation Technicians (VEPTs) paid at a lower wage rate appropriate for those duties will help the Program increase ambulance availability for 911 calls by reducing delays in vehicle and equipment preparation and readiness. In addition, this process will reduce spoilage of supplies and help Paramedic Services meet the vehicle and equipment certification requirements for Ministry of Health and Long-Term Care audits every three years, by improving standards and streamlining cleaning, maintenance, and stocking/ re-stocking processes.

PS Operating Efficiencies and its impact on PS Response Time and Service Levels

- Toronto Paramedic Services has been successful in efficiently managing the increased service demand and emergency patient transports experienced over the last 10 years.
- The main drivers of increased emergency patient transports include and are not limited to:
 - Aging population:
 - After age 55, need for emergency transportation rises exponentially
 - PS treats 30% of all residents 75+ years of age at least once per year
 - Rising population:
 - In Toronto, PS is treating approximately 8% of the growing population per year
 - Polarized socio-economic status:
 - Compromised baseline health
 - Fragmented support systems
 - Reliance on PS and public services as the entry point to healthcare
 - No Family physician for significant portion of the population, resulting in PS as the initial contact
- This increasing demand trend has impacted PS' response time to life threatening calls, reaching a peak of 13.1 minutes in 2010, but has steadily improved to projected 11.4 minutes, 90% of the time, in 2017, the lowest response time in the past decade.
 - Response time refers to the entire elapsed time from answering the phone at PS' dispatch centre to arrival of the paramedics at the scene.

Emergency Transport and Emergency Response Trends

Chart 1a – Response Trends and Paramedic Staffing



As shown in the Chart 1a above:

- Since 2005, the number of emergency patient transports provided by Paramedic Services annually has increased by 90,000 patients (64%) from 141,409 transports in 2005 to a projected 231,440 transports in 2017 due to a growing and aging population.
- In 2017 alone, this translates to approximately 8,900 additional emergency transports over 2016.
- In spite of the increasing service demands, PS staffing remained unchanged from 2005 to 2012. City Council approved funding to increase staffing by 220 paramedic positions from 2013 to 2016.
 - As a result of the approved funding, PS has been able to steadily improve its service levels and is on track to achieve a projected response time of 11.4 minutes in 2017, 90% of the time, which is the lowest it has been since 2003, through the implementation of several initiatives resulting in the operating efficiencies described in the following sections.

Provincial Grant Shortfall for Central Ambulance Communications Centre (CACC) (100% Provincially Funded)

- The 2018 Preliminary Operating Budget for CACC assumes a provincial subsidy consistent with the established Provincial subsidy rate of 100% for CACC. The CACC program has experienced funding shortfalls since 2009.
- The funding shortfall is due to yearly cost of living adjustments for the CACC program, which are not currently funded by the Province.
- In 2015, PS included a reduction of \$1.200 million in CACC salaries and benefits with a corresponding reduction in the Provincial grant to better reflect the expected Provincial subsidy. With an increased CACC grant in 2017 this gapping target was reduced to \$0.829 million.
- In 2016, the Base CACC grant further reduced the operational shortfall by \$0.371 million and provided funding for 4 Administrative positions; however there remains a \$3.1M shortfall for Allocated Overhead costs that will continue in 2018.
- Negotiations continue with the Ministry of Health and Long Term Care to increase funding for the CACC program to 100% of gross expenditures.

Issues Referred to the 2018 Budget Process

New & Enhanced Not Included in the 2018 Preliminary Operating Budget

- Toronto Paramedic Services submitted 2 new and enhanced service priorities as noted in the table below, which will require additional funding of \$0.575 million gross and net and 5 new permanent positions.

Description (\$000s)	New and Enhanced						Total New and Enhanced			Incremental Change			
	Emergency Medical Dispatch & Preliminary Care		Community Paramedicine & Emergency Call Mitigation		Emergency Medical Care		\$ \$		Position	2019 Plan		2020 Plan	
	Gross	Net	Gross	Net	Gross	Net	Gross	Net	#	Net	Pos.	Net	Pos.
Enhanced Services Priorities													
Referred to Budget Process - Poverty Reduction (Original Plan)													
Community Paramedicine @ Home Program Expansion			355.2	355.2			355.2	355.2	5.0	524.1	5.0	4.0	
Total Enhanced Services			355.2	355.2			355.2	355.2	5.0	524.1	5.0	4.0	
New Service Priorities													
Staff Initiated:													
Custodial & Maintenance Costs - NW Multi-Function Station at 1300 Wilson Avenue	220.0	220.0					220.0	220.0		(110.0)			
Sub-Total Staff Initiated	220.0	220.0					220.0	220.0		(110.0)			
Total New Service Priorities	220.0	220.0					220.0	220.0		(110.0)			
Total New / Enhanced Services	220.0	220.0	355.2	355.2			575.2	575.2	5.0	414.1	5.0	4.0	

Community Paramedicine at Home Program Expansion – (\$0.355 million gross & net):

- This enhanced service priority requires \$0.355 million gross and net in 2018 for 5 Community Paramedics and four (4) vehicles to provide coverage throughout the City from 6:00 am to midnight with the potential for 24 hour coverage 7 days a week. Currently, the Program operates from 06:00 am to 4:00 pm, which leaves significant gaps in service delivery.
- The Program will help in mitigating 911 emergency medical call demand, which has been increasing by 4% to 5% per year. This will be achieved through community paramedics visits to frequent user clients and connecting them with existing supporting resources, thus getting them the care they need which mitigates further 911 calls.
- The Program has demonstrated a 57% reduction in 911 calls from frequent callers once a home visit has been completed and the appropriate referrals and connections have been implemented by the Community Paramedic.

- Since 2014, Toronto Paramedic Services has received 100% provincial funding for Community Paramedics through the Ministry of Health and Long-Term Care for two Community Paramedic positions.
 - In 2017, the funding was downloaded to the Local Health Integration Networks (LHINs). With \$0.350 million in funding provided by LHINs, PS increased Community Paramedicine complement by three.
 - Given the successes of this Program's ability to reduce the numbers of 911 calls, a request of \$0.355 million gross and net is included on the list for New/Enhanced Service priorities for consideration during the 2018 budget process. Additional staff would be funded through the Land Ambulance Grant at a rate of 50% starting in 2019.
 - Approval of the Community Paramedicine at Home Program Expansion as an enhanced priority will require the approval of funding for the *Community Paramedicine Vehicles* capital project included in the 2018-2027 Preliminary Capital Plan for Toronto Paramedic Services at a total cost of \$0.560 million to expand PS's Fleet by 4 emergency response vehicles in 2018 and 4 in 2019.
- ***Custodial and Maintenance Costs for New North West Multi-Function Paramedic Station at 1300 Wilson Avenue (\$0.220 million gross & net)***
 - This new service priority at a cost of \$0.220 million will enable the provision of ongoing custodial/maintenance services for the new Multi-Function Station at 1300 Wilson Avenue that became operational in October 2017.



Appendices

Appendix 1

2017 Service Performance

Key Service Accomplishments

In 2017, Toronto Paramedic Services accomplished the following:

Emergency Medical Care

- ✓ Projected to transport 231,440 emergency patients to hospital in 2017.
- ✓ Paramedic Services' first-ever multifunction station began operation in the fall of 2017. Due to its strategic geographic location and proximity to the new Humber River Hospital, this new station is being used as part of the Division's active deployment plan.
- ✓ Continued to expand life saving programs such as: STEMI (type of heart attack), stroke, trauma and post-cardiac arrest patient care programs to reduce pre-hospital mortality and significantly improve quality of life for patients and families.
- ✓ Continued to implement the new model of care where Advanced Life Support (ALS) paramedic crews are targeted to respond more consistently to "ALS-appropriate" calls based on the Medical Priority Dispatch System (MPDS) software and analysis of paramedic electronic patient care records. This change will support more efficient use of resources and improved service as medical skills are more closely matched to patient needs.

Emergency Medical Dispatch & Preliminary Care

- ✓ Continued to improve processing of emergency calls using decision-support software which allows EMDs to more accurately anticipate, monitor and assign the right paramedic resources throughout the city.
- ✓ Upgraded the Medical Priority Dispatch Triage system to reduce extra steps and increase speed in the triage of life-threatening calls.
- ✓ Initiated a Part-time Emergency Medical Dispatcher (EMD) program, with the first class graduating in the fall, leading to a more efficient use of EMD resources.
- ✓ Continued to employ, during peak periods of call activity, a Patient Safety Advocate (PSA) function as part of the Division's strategy to mitigate possible service delays.

Community Paramedicine & Emergency Call Mitigation

- ✓ Continued to employ and investigate innovative emergency call diversion and mitigation strategies for low acuity calls to improve ambulance availability for high acuity calls.
- ✓ Continued to use the Community Paramedicine Program to re-direct specific patient groups to appropriate preventative, out-of-hospital medical care to minimize or eliminate their reliance on 911 and the hospital system.
- ✓ The Cardiac Safe City Program continued to coordinate and expand the Public Access Defibrillation (PAD) Program to save more lives.
- ✓ Received additional funding from the Ministry of Health & Long Term Care to expand the Independence at Home (IAH) initiative, designed to ensure that seniors 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.

Appendix 2

2018 Preliminary Operating Budget by Expenditure Category Program Summary by Expenditure Category

Category of Expense (\$000's)	2015 Actual	2016 Actual	2017 Budget	2017 Projected Actual *	2018 Preliminary Budget	2018 Change from 2017 Approved Budget		Plan	
	\$	\$	\$	\$	\$	\$	%	2019	2020
								\$	\$
Salaries And Benefits	162,833.3	169,451.0	177,397.8	177,645.7	178,846.3	1,448.5	0.8%	181,048.0	182,659.0
Materials & Supplies	5,872.4	6,887.5	6,440.6	6,610.6	7,047.9	607.3	9.4%	7,102.2	7,125.9
Equipment	1,097.0	1,008.1	989.8	989.8	993.5	3.7	0.4%	953.5	954.4
Service And Rent	9,333.8	9,456.9	9,329.5	9,229.5	9,576.0	246.5	2.6%	9,585.4	9,585.5
Contribution To Capital	697.9	938.4	600.0	600.0	831.3	231.3	38.6%	831.3	831.3
Contribution To Reserves/Reserve Funds	5,872.3	7,110.6	7,548.6	7,423.6	7,628.6	80.0	1.1%	7,972.6	7,972.6
Other Expenditures	23.6	44.5	10.3	10.3	10.3			10.3	10.3
Inter-Divisional Charges	9,675.6	9,559.2	9,820.7	9,670.7	9,940.4	119.7	1.2%	9,966.7	9,993.8
Total Gross Expenditures	195,405.9	204,456.3	212,137.2	212,180.1	214,874.3	2,737.1	1.3%	217,469.9	219,132.7
Inter-Divisional Recoveries	1,409.1	611.8	889.8	836.4	594.0	(295.8)	(33.2%)	587.1	540.2
Provincial Subsidies	117,137.6	124,682.6	131,108.6	132,461.2	138,880.7	7,772.1	5.9%	143,233.1	145,487.7
User Fees & Donations	1,245.1	1,141.5	1,137.1	1,107.1	1,180.2	43.0	3.8%	1,204.3	1,228.4
Transfers From Capital	75.0	75.0	75.0	75.0	314.0	239.0	318.7%	320.0	326.0
Sundry and Other Revenues	1,979.4	618.6	641.3	516.3	607.4	(33.8)	(5.3%)	607.4	607.4
Total Revenues	122,255.7	127,129.5	133,851.9	134,996.0	141,576.4	7,724.5	5.8%	145,951.9	148,189.7
Total Net Expenditures	73,150.2	77,326.7	78,285.3	77,184.1	73,297.9	(4,987.4)	(6.4%)	71,518.0	70,943.0
Approved Positions	1,326.3	1,433.5	1,453.3	1,446.3	1,467.3	14.0	1.0%	1,467.3	1,467.3

* Based on the 9-month Operating Variance Report

For additional information regarding the 2017 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, 2017" considered by City Council at its meeting on November 27, 2017.

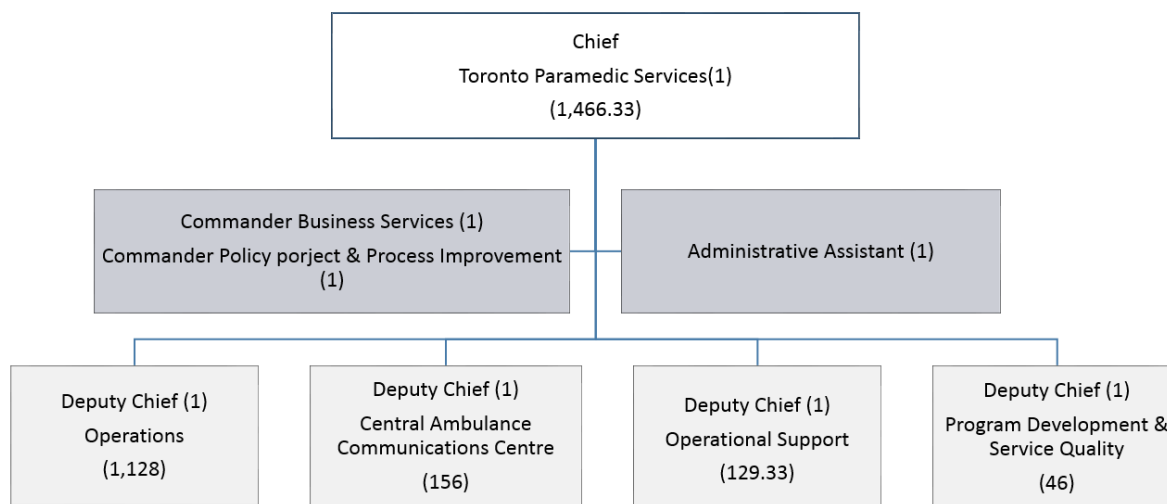
<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2017.BU37.2>

Impact of 2017 Operating Variance on the 2018 Preliminary Operating Budget

- The 2017 projected favourable net variance of \$1.101 million is mainly attributable to unplanned Land Ambulance Grant funding received late in 2017.
- The 2018 Preliminary Operating Budget reflects the increased provincial funding for the Land Ambulance and CACC programs.

Appendix 3

2018 Organization Chart



2018 Total Complement

	Category	Senior Management	Management with Direct Reports	Management without Direct Reports/Exempt Professional & Clerical	Union	Total
Operating	Permanent	5.0	83.0	54.0	1,321.0	1,463.0
	Temporary			1.0	1.3	2.3
	Total Operating	5.0	83.0	55.0	1,322.3	1,465.3
Capital	Permanent					
	Temporary			2.0		2.0
	Total Capital			2.0		2.0
Grand Total		5.0	83.0	57.0	1,322.3	1,467.3

Appendix 4

Summary of 2018 Service Changes

2018 Operating Budget - Preliminary Service Changes Summary by Service (\$000's)

Form ID		Citizen Focused Services A	Adjustments				2019 Plan Net Change	2020 Plan Net Change
Category	Equity Impact		Gross Expenditure	Revenue	Net	Approved Positions		
		Program - Toronto Paramedic Services						
2018 Preliminary Base Budget Before Service Changes:			214,874.3	141,576.4	73,297.9	1,453.33	(1,779.9)	(575.0)

12943 NW District Centralized Vehicle Cleaning

51 Positive

Description:

The new North West Multi-Function Ambulance Station at 1300 Wilson Avenue has added capacity to address the 4%-5% annual increase in emergency medical call demand using a model that is designed to increase ambulance availability, reduce end-of-shift overtime and vehicle downtime, and to substitute higher cost paramedic resources with lower cost logistical resources for specific logistical tasks. Savings of \$0.854 million achieved through these measures will be redirected to create 14 Vehicle & Equipment Preparation Technicians to provide vehicle readiness and operational support for the North West Multi-Function Ambulance Station. The Vehicle & Equipment Preparation Technicians will perform shift-specific preparations for ambulances and other emergency vehicles to support Paramedics and vehicles improved availability to respond to emergency medical calls.

Service Level Impact:

This change will modify PS's delivery model to improve performance, find efficiencies, and better utilize Paramedic resources by assigning key logistical duties to the Vehicle & Equipment Preparation Technicians paid at a lower wage rate appropriate for those duties. This process improvement will also help the Program increase ambulance availability for 911 calls by reducing delays in vehicle and equipment preparation and readiness.

Equity Statement:

This proposal will have a positive impact on vulnerable residents, particularly seniors and people with disabilities. The proposal will increase access to health services.

Service: AM-Emergency Medical Care

Preliminary Service Changes:	0.0	0.0	0.0	14.00	0.0	0.0
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Total Preliminary Service Changes:	0.0	0.0	0.0	14.00	0.0	0.0
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Summary:

Total Preliminary Service Changes:	0.0	0.0	0.0	14.00	0.0	0.0
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Total Preliminary Base Budget:	214,874.3	141,576.4	73,297.9	1,467.33	(1,779.9)	(575.0)
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Category:

51 - Efficiency Change 52 - Revenue Change 59 - Service Change

Appendix 6

Inflows/Outflows to/from Reserves & Reserve Funds

Program Specific Reserve / Reserve Funds

Reserve / Reserve Fund Name (In \$000s)	Reserve / Reserve Fund Number	Projected Balance as of Dec. 31, 2017 *	Withdrawals (-) / Contributions (+)		
			2018	2019	2020
		\$	\$	\$	\$
Projected Beginning Balance		1,687.7	1,687.7	2,268.7	2,742.7
Vehicle Reserve	XQ1018				
<i>Proposed Withdrawals (-)</i>			(3,989.0)	(4,460.0)	(4,584.0)
<i>Contributions (+)</i>			4,570.0	4,934.0	4,944.0
Total Reserve / Reserve Fund Draws / Contributions		1,687.7	2,268.7	2,742.7	3,102.7
Balance at Year-End		1,687.7	2,268.7	2,742.7	3,102.7

* Based on 9-month 2017 Reserve Fund Variance Report

Reserve / Reserve Fund Name (In \$000s)	Reserve / Reserve Fund	Projected Balance as of	Withdrawals (-) / Contributions (+)		
			2018	2019	2020
		\$	\$	\$	\$
Projected Beginning Balance		805.1	805.1	1,597.1	2,823.2
Equipment Reserve	XQ1019				
<i>Proposed Withdrawals (-)</i>			(730.0)	(330.0)	(330.0)
<i>Contributions (+)</i>			1,522.0	1,556.1	1,573.1
Total Reserve / Reserve Fund Draws / Contributions		805.1	1,597.1	2,823.2	4,066.3
Balance at Year-End		805.1	1,597.1	2,823.2	4,066.3

* Based on 9-month 2017 Reserve Fund Variance Report

Corporate Reserve / Reserve Funds

Reserve / Reserve Fund Name (In \$000s)	Reserve / Reserve Fund Number	Projected Balance as of Dec. 31, 2017 \$	Withdrawals (-) / Contributions (+)		
			2018 \$	2019 \$	2020 \$
Projected Beginning Balance		28,251.5	28,251.5	28,531.5	28,811.5
Sick Leave Reserve Fund	XR1007				
<i>Proposed Withdrawals (-)</i>					
<i>Contributions (+)</i>			280.0	280.0	280.0
Total Reserve / Reserve Fund Draws / Contributions		28,251.5	28,531.5	28,811.5	29,091.5
Balance at Year-End		28,251.5	28,531.5	28,811.5	29,091.5

* Based on 9-month 2017 Reserve Fund Variance Report

Reserve / Reserve Fund Name (In \$000s)	Reserve / Reserve Fund Number	Projected Balance as of \$	Withdrawals (-) / Contributions (+)		
			2018 \$	2019 \$	2020 \$
Projected Beginning Balance		25,981.0	25,981.0	27,264.5	28,548.0
Insurance Reserve Fund	XR1010				
<i>Proposed Withdrawals (-)</i>					
<i>Contributions (+)</i>			1,283.5	1,283.5	1,283.5
Total Reserve / Reserve Fund Draws / Contributions		25,981.0	27,264.5	28,548.0	29,831.5
Balance at Year-End		25,981.0	27,264.5	28,548.0	29,831.5

* Based on 9-month 2017 Reserve Fund Variance Report

Appendix 7a

User Fees Adjusted for Inflation and Other

Rate Description	Service	Fee Category	Fee Basis	2017	2018			2019	2020
				Approved Rate	Inflationary Adjusted Rate	Other Adjustment	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	\$210.00	\$214.00		\$214.00	\$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	\$216.00	\$220.00		\$220.00	\$225.00	\$230.00
Standby Fees - EMS Supervisors	Toronto Paramedic Services	Full Cost Recovery	Minimum 4 hrs plus travel time	\$155.00	\$158.00		\$158.00	\$161.00	\$164.00
Standby Fees - Mountain Bike Paramedic	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 4 hrs plus travel time	\$111.00	\$113.00		\$113.00	\$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	\$109.00		\$109.00	\$111.00	\$113.00
Emergency First Aid & CPR Level A Training (External) - EFA+A (EXTERNAL)	Toronto Paramedic Services	Market Based	Per person	\$67.00	\$67.00		\$67.00	\$68.00	\$69.00
Emergency First Responder Training (External) - EFR (EXTERNAL)	Toronto Paramedic Services	Market Based	Per person	\$605.00	\$605.00		\$605.00	\$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	\$125.00		\$125.00	\$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	\$67.00		\$67.00	\$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	\$63.00		\$63.00	\$64.00	\$65.00
CPR Level C Renewal Training (External) - CPR-C RENEWAL (EXTERNAL)	Toronto Paramedic Services	Market Based	Per person	\$49.00	\$49.00	\$0.00	\$49.00	\$50.00	\$51.00
Health Care Provider Level C Training - HCP - C	Toronto Paramedic Services	Market Based	Per person	\$65.00	\$65.00		\$65.00	\$66.00	\$67.00
Health Care Provider Renewal Training - HCP RENEWAL	Toronto Paramedic Services	Market Based	Per person	\$61.00	\$61.00		\$61.00	\$62.00	\$63.00
Standard First Aid Course & Health Care Provider Training - SFA+HCP	Toronto Paramedic Services	Market Based	Per person	\$130.00	\$130.00		\$130.00	\$132.00	\$134.00
Instructor Course (External)	Toronto Paramedic Services	Full Cost Recovery	Per person	\$605.00	\$605.00		\$605.00	\$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	\$111.00	\$113.00		\$113.00	\$115.00	\$117.00
Standby Fees - Gator Ambulance Crew	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 4 hrs plus travel time	\$221.00	\$225.00		\$225.00	\$230.00	\$235.00
Standby Fees - Marine Paramedic	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 4 hrs plus travel time	\$117.00	\$119.00		\$119.00	\$121.00	\$123.00
Standby Fees - Emergency Support Unit (ESU)	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 4 hrs plus travel time	\$210.00	\$214.00		\$214.00	\$218.00	\$222.00

Rate Description	Service	Fee Category	Fee Basis	2017	2018			2019	2020
				Approved Rate	Inflationary Adjusted Rate	Other Adjustment	Budget Rate	Plan Rate	Plan Rate
Standby Fees - Emergency Medical Dispatcher	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 4 hrs	\$105.00	\$107.00		\$107.00	\$109.00	\$111.00
AED Site Responder Course with Level A CPR Training - CPR-A/AED	Toronto Paramedic Services	Market Based	Per Person	\$61.00	\$61.00		\$61.00	\$62.00	\$63.00
INTERNAL/EXTERNAL Standard First Aid Recertification Course - INTERNAL & EXTERNAL	Toronto Paramedic Services	Market Based	Per Person	\$79.00	\$79.00		\$79.00	\$80.00	\$81.00
ITLS - Access	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$369.00	\$369.00		\$369.00	\$377.00	\$385.00
ITLS - Advanced provider	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$421.00	\$421.00		\$421.00	\$430.00	\$439.00
ITLS - Advanced recertification	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$327.00	\$327.00		\$327.00	\$334.00	\$341.00
ITLS - Basic provider	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$421.00	\$421.00		\$421.00	\$430.00	\$439.00
ITLS - Basic recertification	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$327.00	\$327.00		\$327.00	\$334.00	\$341.00
ITLS -Instructor recertification	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$327.00	\$327.00		\$327.00	\$334.00	\$341.00
ITLS - Instructor training	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$441.00	\$441.00		\$441.00	\$451.00	\$461.00
ITLS -Pediatric	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$298.00	\$298.00		\$298.00	\$304.00	\$310.00
ITLS - Re-test fee	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$57.00	\$57.00		\$57.00	\$58.00	\$59.00
Ambulance call report	Toronto Paramedic Services	Full Cost Recovery	Per Document	\$81.00	\$82.00		\$82.00	\$83.00	\$84.00
Audio recording	Toronto Paramedic Services	Full Cost Recovery	Per Recording	\$81.00	\$82.00		\$82.00	\$83.00	\$84.00
Dispatch record	Toronto Paramedic Services	Full Cost Recovery	Per Document	\$44.00	\$44.00	\$1.00	\$45.00	\$47.00	\$49.00
Paramedic interview	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 3 hours	\$109.00	\$111.00		\$111.00	\$113.00	\$115.00
Paramedic statement	Toronto Paramedic Services	Full Cost Recovery	Per Document	\$55.00	\$56.00		\$56.00	\$57.00	\$58.00
Statutory declaration	Toronto Paramedic Services	Full Cost Recovery	Per Document	\$81.00	\$82.00		\$82.00	\$83.00	\$84.00
Standby fee -after hours booking fee	Toronto Paramedic Services	Full Cost Recovery	Per Booking	\$77.00	\$78.00		\$78.00	\$79.00	\$80.00
ITLS - Tactical Medical Essentials	Toronto Paramedic Services	Full Cost Recovery	Per Person	\$464.00	\$464.00		\$464.00	\$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	\$62.00		\$62.00	\$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	\$60.00		\$60.00	\$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	\$56.00		\$56.00	\$57.00	\$58.00
Emergency First Aid & CPR Level C Training (External) - EFA+C (EXTERNAL)	Toronto Paramedic Services	Market Based	Per Person	\$79.00	\$79.00		\$79.00	\$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	\$74.00		\$74.00	\$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	\$72.00		\$72.00	\$73.00	\$74.00

Rate Description	Service	Fee Category	Fee Basis	2017	2018			2019	2020
				Approved Rate	Inflationary Adjusted Rate	Other Adjustment	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	\$68.00		\$68.00	\$69.00	\$70.00
Emergency First Aid & CPR Level B Training (External) - EFA+B (EXTERNAL)	Toronto Paramedic Services	Market Based	Per Person	\$67.00	\$67.00		\$67.00	\$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	\$62.00		\$62.00	\$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	\$60.00		\$60.00	\$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	\$56.00		\$56.00	\$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	\$75.00		\$75.00	\$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	\$70.00		\$70.00	\$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	\$68.00		\$68.00	\$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	\$64.00		\$64.00	\$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	\$99.00		\$99.00	\$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	\$95.00		\$95.00	\$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	\$87.00		\$87.00	\$88.00	\$89.00
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	\$115.00		\$115.00	\$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	\$111.00		\$111.00	\$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	\$103.00		\$103.00	\$105.00	\$107.00

Rate Description	Service	Fee Category	Fee Basis	2017	2018			2019	2020
				Approved Rate	Inflationary Adjusted Rate	Other Adjustment	Budget Rate	Plan Rate	Plan Rate
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	\$120.00		\$120.00	\$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	\$116.00		\$116.00	\$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	\$108.00		\$108.00	\$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	\$74.00		\$74.00	\$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	\$72.00		\$72.00	\$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	\$68.00		\$68.00	\$69.00	\$70.00
CPR Level A & AED Training (External) - CPR-A & AED (EXTERNAL)	Toronto Paramedic Services	Market Based	Per Person	\$55.00	\$55.00		\$55.00	\$56.00	\$57.00
CPR Level C & AED Training (External) - CPR-C & AED (EXTERNAL)	Toronto Paramedic Services	Market Based	Per Person	\$60.00	\$60.00		\$60.00	\$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	\$55.00		\$55.00	\$56.00	\$57.00
Health Care Provider Level A Training - HCP - A	Toronto Paramedic Services	Market Based	Per Person	\$60.00	\$60.00		\$60.00	\$61.00	\$62.00
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	\$58.00		\$58.00	\$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	\$56.00		\$56.00	\$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	\$55.00		\$55.00	\$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	\$62.00		\$62.00	\$63.00	\$64.00

Rate Description	Service	Fee Category	Fee Basis	2017	2018			2019	2020
				Approved Rate	Inflationary Adjusted Rate	Other Adjustment	Budget Rate	Plan Rate	Plan Rate
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	\$60.00		\$60.00	\$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	\$59.00		\$59.00	\$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	\$58.00		\$58.00	\$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	\$56.00		\$56.00	\$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	\$55.00		\$55.00	\$56.00	\$57.00

Appendix 7d

User Fees for Technical Adjustments

Rate Description	Service	Fee Category	Fee Basis	2017 Approved Rate	2018 Budget Rate	Reason for Adjustment
PSU-Ambulance call report	Toronto Paramedic Services	Full Cost Recovery	Per Document	\$81.00	\$82.00	Add PSU in front of the rate description to allow identification of the user fee as it pertains to the PSU unit within TPS division.
PSU-Audio recording	Toronto Paramedic Services	Full Cost Recovery	Per Recording	\$81.00	\$82.00	
PSU-Dispatch record	Toronto Paramedic Services	Full Cost Recovery	Per Document	\$44.00	\$45.00	
PSU-Paramedic interview	Toronto Paramedic Services	Full Cost Recovery	Per Hour - Minimum 3 hours	\$109.00	\$111.00	
PSU-Paramedic statement	Toronto Paramedic Services	Full Cost Recovery	Per Document	\$55.00	\$56.00	
PSU-Statutory declaration	Toronto Paramedic Services	Full Cost Recovery	Per Document	\$81.00	\$82.00	