

## Provincial Health System Overhaul: An EOWC Perspective

*Briefing Note for AMO Conference, August 2019*

The EOWC appreciates that the Province has set out to “build a public health care system centred on the patient and redirecting money to front-line services – where it belongs – to improve the patient experience. Patients and families will have access to faster, better and more connected services in a system in which family doctors, hospitals, and home and community care providers work as a team to cover the patient’s entire circle of care.” (Source: 2019-20 Provincial Budget)

Your government’s plan is to return to operating annual budget surpluses beginning in 2023-24, with forecasted expenses totaling \$173.2 billion. Total health care expenses in that same year are projected at \$67.9 billion (39.2% of total expenses). The EOWC understands the Government’s current fiscal situation.

The EOWC also recognizes that change will require innovative thinking and the development of new approaches in order to improve service delivery to residents and businesses across Ontario. The EOWC shares the Government’s desire to reduce the overall burden on taxpayers. However, simply passing costs to another level of government is not that answer. The EOWC looks forward to working closely with the Province in order to find new approaches and solutions that will support our mutually aligned objectives.

Since the Province announced its intentions to overhaul the Ontario Health system in order to develop a model that is more streamlined, efficient and responsive to patient needs, the EOWC has taken a very proactive approach in order look at proposed health care changes through a local lens.

The EOWC has a long history of working collaboratively with the Province in order to promote shared interests. The EOWC prides itself on its relationship with government, and furthermore, its ability to speak with a unified voice and bring together the entire region of Eastern Ontario at one table. By doing so, we can gather the necessary research and provide a portrait of the “situation on the ground,” and help better inform the provincial ministries of the current municipal realities.

In our deliberations, the EOWC has established the following guiding principles:

- 1) Say for pay – where municipalities are required to pay for services, a governance model needs to be in place that allows municipalities to have a say in program development and delivery;
- 2) Value for taxpayer money – residents must benefit from savings that are realized through efficiencies;
- 3) Service delivery must be designed to reflect the communities we serve - one size does not fit all;
- 4) Regional collaboration – unified voice for Eastern Ontario;

- 5) Open and transparent decision-making; and
- 6) Leveraging new technologies to improve service delivery.

As the Province moves forward on its Ontario Health overhaul – including municipally funded and operated services such as paramedic services, long-term care and public health units – our request is that the EOWC be given a priority spot at the discussion table. Here is why:

## 1) Paramedic Services

In order to be proactive and better positioned to inform the ongoing Provincial discussions, the EOWC prepared a two-part RFP, to engage a consultant that would undertake a comprehensive study of Eastern Ontario Paramedic Services. The EOWC strives to provide ground level insight and deliver well-researched solutions. Through August and September, we will be completing a comprehensive “current state” review and financial analysis of Eastern Ontario paramedic services – at our own expense. This review will better inform options for best practices and efficiencies.

Additionally, changes to the *Ambulance Act* would allow paramedics to transport patients to alternative destinations (other than a hospital) and broaden their ability for on-scene medical treatment. This would help ensure that patients are getting the right care, in the right setting.

EOWC members have spent the past 22 years fixing the problems that were created when ambulance services were privately operated. Not only is this public service delivery model superior and most efficient, it also best meets the needs of Eastern Ontario residents.

We understand your government is currently considering:

- A plan to restructure Ontario’s 52 ambulance services to 10;
- The streamlining of ambulance dispatch services by integrating 59 emergency health services operators, and 22 dispatch centers in Ontario; and
- Future consultation with municipalities and key stakeholders (AMO, the Ontario Association of Paramedic Chiefs, etc.).



12 paramedic services across rural eastern Ontario answer more than 268,000 calls in 2018 – an increase of 6% from 2017. In other words, 2 in 10 residents will call 911 this year for paramedic services to receive critical treatment and support.

### RECOMMENDATION:

That the Province consults with the EOWC in a meaningful way as they continue to review Paramedic Services in Ontario. The EOWC strongly supports the streamlining of ambulance dispatch services and the integration of new technologies that will improve how emergencies are triaged and allow for resources to be deployed more efficiently.

The EOWC also supports changes to the *Ambulance Act* in order to allow for paramedics to transport patients to alternative destinations (other than a hospital) and broaden paramedics’ ability for on-scene medical treatment.

Finally, the EOWC vigorously defends the public service delivery model for paramedic services in order to provide Eastern Ontario residents with the best possible care.

## 2) Long-Term Care

The EOWC has developed a lengthy list of suggestions and recommendations on how the Province could reduce red tape and find efficiencies in long-term care facilities. We provided comment as part of the Province's consultations back in February and March, and are eagerly awaiting your comments and feedback.

Municipalities are vital partners in the delivery of long-term care, and EOWC members have the expertise of operating long-term care homes. In total, the EOWC members currently operate 2,238 long-term care beds. The EOWC is well positioned to inform best options for service delivery and efficiencies in long-term care. The current level of detailed CMI reporting drives up the administrative burden and reduces front line staff time. For example, a simplified per bed funding approach would allow for staff time to be directed to front line care.

Publicly operated long-term care homes provide the best value for residents and help ensure that services continue to meet local needs. EOWC members invest approximately \$38 million a year in long-term care operations. Investments in long-term care provide overall savings by diverting patients from more expensive treatment options.



Municipal governments in eastern Ontario spend approximately \$38 million every year to operate 2,200 LTC beds.

### RECOMMENDATION:

As a funding partner in long-term care, the EOWC requests that the Province consider us as an active partner, through the transformation of the Ontario Health system, in order to inform long-term care considerations. The EOWC is also concerned by section 40 of Bill 74, *The People's Health Care Act, 2019*, which affords the Province the ability to transfer municipal assets including employees of an organization.

## 3) Public Health Units

We understand that the Ministry has proposed the following:

- Changing the cost-sharing arrangement with municipalities to reflect an increased municipal role, beginning in 2019-20;
- Creating 10 Regional Public Health Entities, governed by autonomous boards of health, phased-in over the next three years, to replace the 35 existing Units;
- Modernizing Public Health Ontario to reflect changes in the health and public health landscape; and
- Maintaining service levels and encouraging Public Health to look for administrative efficiencies, rather than front-line cuts.



There are currently 7 public health units serving one million rural residents.

While the Ministry has expressed its commitment to working with boards of health, public health units and municipalities through the modernization process, the EOWC has already begun working closely with Public Health officials, the Province and other municipal partners to provide input. A summary report highlighting preferred options is being prepared. This is yet another example of the EOWC taking a proactive approach and working together with key partners as a cohesive group in response to the Province's proposals.

#### **RECOMMENDATION:**

The EOWC truly wishes to be an active partner in these processes. We are able to leverage our experience, expertise, and local connections in order to assist the Province with modernizing public health and finding cost savings and efficiencies. The EOWC is well-positioned to work collectively with urban cities, public health officials, and the Province to mutually determine the ideal boundaries, funding and governance model for Eastern Ontario in order to protect public health service delivery.

## **4) Ontario Health Teams**

The EOWC was working closely with the Province's Strategic Transformation Office, including a series of meetings and conference calls. Moving forward, we will continue to work with the Ministry of Municipal Affairs and Housing and the Deputy Minister of Health.

We understand that Ontario Health Teams (OHTs) are being proposed as a new model of integrated care delivery, which would aim to reduce the complexity of the current health care system, and deliver a more coordinated system of care for patients and their families/caregivers across multiple care settings.

With respect to the government's introduction of OHTs, there was an overwhelming response from Eastern Ontario and an understanding of the need to work together towards common goals for strengthening local services. Our region has demonstrated an unwavering commitment to participating in the Province's plan to change the way health care is delivered.

#### **RECOMMENDATION:**

The EOWC requests a seat at the table as the Government moves forward with the implementation of OHTs. As highlighted, municipalities make significant contributions to the overall health care system, as funding contributors and service delivery agents.

## **Conclusion**

If the Province is open to consultation and partnership, the EOWC would be willing to collaborate and work alongside the Province to achieve mutually aligned goals and objectives. The EOWC is also seeking a commitment to working collaboratively with senior government officials on all of the aforementioned priorities. The EOWC is also looking for clarification on objectives and timing as the Government moves forward on the transformation of Ontario's health system.

The EOWC is a strong and reputable municipal partner. We can leverage our knowledge, experience and insights to create opportunities and drive positive change. We share the same priorities as the Province – value for money and best service delivery. Simply put, it makes sense that we work together in the spirit of teamwork and cooperation in order to enhance patient care, ensure efficient front-line service delivery, and end hallway medicine.