Manitoba
Municipal Relations

Municipal Service Delivery Improvement Program

Application Package

INSTRUCTIONS

1. Complete all sections of the Application Form. Clearly identify how your project aligns with the program eligibility requirements outlined in the Program Guidelines.

2. Attach:
    a. A copy of the municipal Council resolution indicating support for the proposed review.
    b. Any other project details, such as a work plan, history of the program budget, case studies, or other supporting documents, if available.

3. Submit your application by email to MSDIP@gov.mb.ca

4. Contact MSDIP@gov.mb.ca if you have questions about applying.

APPLICATION FORM

Part 1: Applicant Information

Name of Municipality/Planning District(s):

City of Winnipeg – Winnipeg Fire Paramedic Service

Name and position of primary contact person:

Christian Schmidt – Fire and Paramedic Chief

Part 2: Project Description

What service, process and/or program will your review evaluate?

The Winnipeg Fire Paramedic Service (WFPS) Community Paramedic program.

Why have you chosen this area to review? (E.g. rising costs, research/data supporting alternatives, circumstantial opportunity)

The Community Paramedic program is fully funded through the EMS contract with Shared Health. The program operational objectives and goals completely changed during the COVID-19 pandemic. This program utilizes specialty trained Advanced Care Paramedics to proactively provide care to individuals who frequently access emergency services for care, and those individuals who are at-risk for health deterioration that would result in access of emergency services (Attachment 1). During the COVID-19 pandemic the program objectives shifted to help support the health system in addressing the needs of patients suffering from COVID-19. As the health system demands related to COVID-19 have significantly changed, the Community Paramedic program has an opportunity to refocus and identify the specific program areas that would be most beneficial to the WFPS, the health care system and the community they serve.

Provide a summary of the objectives of your proposed service delivery review. Include a timeline and how you will use the report and recommendations (800 words maximum).

Please indicate preferred firm.

The primary objective of the service delivery review would be to analyse the current Community Paramedic program and identify the program areas that have the greatest impact on *improving the health and health outcomes for patients*, *reduce the reliance on ambulance response and transports*, and *reduce the overall number of emergency department visits for patients*. The Community Paramedic program has four main areas of focus that function to meet these goals and each area would require review.

- **Frequent Callers (Attachment 2)** – These are individuals who access emergency services greater than 10 times in 6-month period.
- **At-Risk Individual Referrals** – The Community Paramedic program receives electronic referrals from WFPS emergency crews for individuals in the community that appear to be at-risk for health decline often related to compromised social circumstances or poor chronic disease management.
- **Lab and Diagnostic Follow-up** – The Community Paramedic program provides follow up on health system patients in the community that have left facilities but require on-going treatment and care.
- **Enhanced Low Acuity Triage (ELAT) (Attachment 3)** – Community Paramedics provide a secondary medical screening over the phone for individuals who have accessed 911 for low acuity medical concerns. The Community Paramedic then determines if the individual does indeed require an ambulance response, or if they are best to seek care from a primary care provider.

An analysis of these four (4) program areas to identify which area has the greatest impact on the above listed goals will assist the WFPS in identifying opportunities for service delivery improvement in Community Paramedicine and which areas of focus would enhance overall service delivery for the WFPS and health care system. In 2022 the WFPS emergency response resources experienced increased zero (0) ambulance availability, and prolonged incidence of degraded response resource levels (less than 6 ambulances available for response city wide). The lack of available emergency resources creates an unacceptable risk for the community and for the individuals seeking emergent care. The Community Paramedic program not only assists the individuals seeking care by identifying the most appropriate resources to meet their needs (avoiding ER attendance), it also builds capacity for the WFPS emergency response resources. Reducing the incidence when an emergency vehicle is managing a low acuity medical complaint helps to ensure emergency resources are available when and where individuals need them.

Effective September 30, 2023 the WFPS will no longer receive the annual funding of $700,000 designated for two (2) of the Community Paramedic response vehicles that were dedicated to support the health system COVID response. This resource reduction will limit the WFPS to only two (2) response resources to complete all four program areas of focus. These two (2) resources will not be sufficient to adequately maintain all areas of program focus, thus a review is required to identify which program area(s) will have the greatest benefit for service delivery. This review will also be utilized to assist in developing the evidence to present Shared Health with opportunities for future resource investment. The current demand for emergency service resources is significant, and the continued demands for fiscal responsibility require the WFPS to ensure that finances are being invested in the most appropriate resources to support service delivery.

Once the analysis of the four program areas has occurred the WFPS will be able to determine which program area(s) provide the greatest impact on the defined goals. This will allow the WFPS to focus the finite resources on this program area, which can occur immediately.

Preferred Firm – Myer Norris Penny – MNP – Due to their familiarity with the WFPS operations and the Community Paramedic program operating model, MNP is best positioned to assist with this review.

Part 3: Estimated Return on Investment (ROI)/Service Delivery Improvement	
Estimated ROI calculation	
Current cost of the program ($)	
Total Investment ($)	
Return on Investment ($)	
Return on Investment (%)	
Payback Period (months or years)	
Or Estimated Service Delivery Improvement	
Service Delivery Improvement or savings:	While difficult to quantify, the estimated benefits and reduced demand on the health care system far exceed the cost of a Community Paramedic response vehicle. Quantifying the total benefits of improved health outcomes is difficult. The Community Paramedic program benefits have been measured in the reduction of emergency department visits, reduction in the use of ambulance transports, and prevention of illness (specifically HIV). The Community Paramedic program has previously demonstrated a 56% reduction in 911 calls and a 65% reduction in Emergency Department visits for patients receiving care from the Community Paramedic program (Attachment 1), totalling thousands of avoided transports since the program was implemented. The service cost of each ambulance transport in Manitoba is $1,511, which is subsidized by the patient at $250 per transport, resulting in a $1,261 system cost per transport. An annual reduction of 1,000 transports would result in over $1.20m in savings, or approximately the cost of staffing one (1) 24-hour ambulance. The health system cost for an Emergency Department visit is difficult to calculate, but has been estimated at over $400 per visit in Manitoba. This same reduction would result in an annual

	$0.40m in savings. As demonstrated in Attachment 3, the ELAT program averted nearly 2,000 ambulance responses, and 1,200 hospital visits. An annual cost avoidance of over $2.80m. The Community Paramedicine program has screened the community for HIV for many years. The program currently uses more rapid HIV screening tests than any other program in Manitoba, and they have been responsible for identifying dozens of HIV positive patients. Once patients have been identified as having HIV the Community Paramedic program supports the patient in connecting with care, and assists them with receiving life saving medication. It is unknown exactly how many cases of HIV they have prevented by stopping the spread, but it has been estimated that it is approximately 10 individuals per identified case. The estimated lifetime costs for HIV medication is between $0.50m - $0.75m per patient. The focus on identification and prevention has saved tens of millions of dollars, and more importantly has offered clients an improved level of health and wellbeing.

Part 4: Certification

I have reviewed this application and the supporting material and certify that it is accurate to the best of my knowledge and understanding.

I guarantee that staff resources will be dedicated to completing this review in partnership with a third-party consultant.

I acknowledge that the consultant will produce a report with recommendations and it will be made public.

Name:

Ryan Sneath
Position/title: Deputy Chief, Paramedic Operations and Training, Winnipeg Fire Paramedic Service
Date: August 31, 2023

Part 5: Attachments

a. A copy of the municipal Council resolution indicating support for the proposed project.
b. Additional project details and/or supporting documents. This information will be used as part of the project evaluation.


Attachment 1 - Community Paramec


Attachement 2 - Community Paramec


Attachment 3 - ELAT Data 2022.pdf