REPORTS

293. From the Fire and Paramedic Chief
Report 2002/07/12

Implementation of Two Additional Ambulances
File GF-3 (Vol. 25)

Recommending:

1) That two additional 24-hour equivalent ambulances be put into service immediately.

2) That the Fire Paramedic Service's permanent establishment be increased by 24 paramedics to staff these units.

3) That the additional ambulances and associated resources be funded from the anticipated 2002 photo technology revenues.

4) That the balance of funding for this initiative in 2003 and beyond be referred to the 2003 Budget Process.

5) That the CAO be delegated responsibility to negotiate a new "Emergency Medical Response and Inter-facility Transfer Services Agreement", on the basis of user pay 50%, City 25% and Province 25%.

6) That the CAO proceed with the amalgamation of fire and paramedic services.

7) That the Proper Officers of the City be authorized to do all things necessary to implement the intent of the foregoing, including the execution of any documents related thereto.

Moved by Councillor Eadie,
That the recommendations be concurred in with the following amendment to Recommendation No. 6), namely:

That recommendation No. 6) be amended by adding the following words at the end thereof, namely:

"that the amalgamation plan be submitted to Council for approval,"

and a Clause forwarded to Council.

Carried

RE: IMPLEMENTATION OF TWO ADDITIONAL AMBULANCES

For submission to: Executive Policy Committee

Original report signed by: W. H. Shoemaker, Fire & Paramedic Chief

Report date: July 12, 2002

In camera item: No

Recommendation(s):

1) That two additional 24-hour equivalent ambulances be put into service immediately.
2) That the Fire Paramedic Service's permanent establishment be increased by 24 paramedics to staff these units.
3) That the additional ambulances and associated resources be funded from the anticipated 2002 photo technology revenues.
4) That the balance of funding for this initiative in 2003 and beyond be referred to the 2003 Budget Process.
5) That the CAO be delegated responsibility to negotiate a new "Emergency Medical Response and Inter-facility Transfer Services Agreement", on the basis of user pay 50%, City 25% and Province 25%, and that an inter-jurisdiction committee be struck to identify how costs will be determined under the combined fire emergency medical organization.
6) That the CAO proceed with the amalgamation of fire and paramedic services.
7) That the Proper Officers of the City be authorized to do all things necessary to implement the intent of the foregoing, including the execution of any documents related thereto.

Report Summary

Key Issues:

1. The increasing call volumes being experienced by the City of Winnipeg have put a strain on current ambulance resources and resulted in periods of time where no ambulances are available for dispatch.
2. Manitoba Health has agreed to fund the WRHA's portion of operational costs to provide two additional 24-hour equivalent ambulances for a period of two years effective immediately.
3. Twenty-four additional paramedics must be hired to implement these additional ambulances.

Implications of the Recommendation(s):

General Implications:

☐ None

☐ For the organization overall and/or for other departments

☑ For the community and/or organizations external to the City of Winnipeg

☑ Involves a multi-year contract

Comment: Better ambulance service would be provided to the citizens of Winnipeg. Involves cost-sharing agreement with Manitoba Health.

Policy implications:

☑ No

☐ Yes

Comment:

Financial Implications:

☐ Within approved current and/or capital budget

☑ Current and/or capital budget adjustment required

Comment: Manitoba Health has agreed to provide an ambulance and fund the WRHA's portion (25%) of its operational costs for a period of two years. The remaining service costs are funded by user fees (50%) and the City of Winnipeg (25%). It is anticipated that the source of funding for the additional ambulances will be from 2002 photo technology revenues.

Beyond mid-2004, the City of Winnipeg must obtain additional funding from the WRHA to continue this service. The net budget adjustment required for the City's portion of this initiative for 2003 and beyond will be referred to the budget process.

Report

Recommendation(s):

1) That two additional 24-hour equivalent ambulances be put into service immediately.
2) That the Fire Paramedic Service's permanent establishment be increased by 24 paramedics to staff these units.
3) That the additional ambulances and associated resources be funded from the anticipated 2002 photo technology revenues.
4) That the balance of funding for this initiative in 2003 and beyond be referred to the 2003 Budget Process.
5) That the CAO be delegated responsibility to negotiate a new "Emergency Medical Response and Inter-facility Transfer Services Agreement", on the basis of user pay 50%, City 25% and Province 25%.
6) That the CAO proceed with the amalgamation of fire and paramedic services.
7) That the Proper Officers of the City be authorized to do all things necessary to implement the intent of the foregoing, including the execution of any documents related thereto.

Reason for the report:

Rising emergency medical call volumes necessitate the addition of ambulance resources. There have been several occasions where no ambulances are available to be dispatched, and these occurrences have been increasing.

Manitoba Health's commitment to fund the WRHA's portion of operational costs alleviates the need for immediate negotiations with the WRHA for additional funds. Negotiations can be

aimed toward obtaining funding for the years 2004 and beyond to keep this additional ambulance in service.

History:

Over the past few years, there has been a steady increase in the number of emergency medical calls received by the Winnipeg Fire Paramedic Service (WFPS). There have been several occasions where no ambulances are available to be dispatched, and these occurrences have been increasing.

The increases in call volume are due to a number of factors, including the increase in number and age of Winnipeg's population, increased utilization of the service, and reorganizations within the WRHA.

Discussion:

Over the past few years, there has been a steady increase in the number of EMS calls received by the WFPS, resulting in increasing occasions where units are simultaneously committed to calls (and unavailable for another call). This currently occurs at least once per 12-hour shift, and on some night shifts, this situation has lasted for several hours.

Two additional 24-hour equivalent ambulances would enable the service to decrease the strain on its resources and reduce or eliminate the times when no resources are available for dispatch. This would also relieve some of the additional stress on the paramedics who must cope with the ever-increasing call volumes on a 24-hour basis. However, implementation of two additional ambulances would require the hiring of 24 more paramedics.

The WFPS currently has 13 24-hour equivalent ambulances. The addition of two more 24-hour equivalent ambulances will bring this number to 15 24-hour equivalent ambulances, which is still less than the 16 24-hour equivalent ambulances recommended in the TriData report. Currently, ambulance resources are already over-burdened, and when faced with steadily increasing call volumes, are insufficient. The workloads currently experienced in the WFPS are contributing to increased response times, decreased unit availability, and undue amounts of stress placed upon the paramedics.

Ambulance service is funded through a cost-sharing agreement with the Winnipeg Regional Health Authority. The service is currently funded approximately 50% by ambulance fees, 25% by the City of Winnipeg, and 25% by the WRHA.

Manitoba Health will fund the WRHA portion of their operational costs for a period of two years. The City of Winnipeg is responsible for its share of operational costs for the remainder of 2002 ($134,220), and for every year thereafter. Additional operational funding must be obtained

from the WRHA for general expense increases in addition to the funding of these ambulance units, regardless.

In return for Manitoba Health's commitment to fund the operation of these additional ambulances, WFPS will allow the province's rural paramedics a chance to ride on high-volume ambulances to obtain skills and preceptorship to complete their training program. The WFPS considers this a win-win situation, the province's training needs are fulfilled, and the WFPS gets much-needed additional ambulance resources. The preceptorship requirement does not place a burden on the WFPS, because it results in an additional paramedic riding on some ambulances.

In 2000, the City of Winnipeg entered into a three-year agreement with the Winnipeg Regional Health Authority for the provision of ambulance services. While the agreement has not yet expired, the expansion of the scope of services, growth and demand for services, and the new funding commitment from the Province, necessitates a review of the current agreement to incorporate these new realities. One of the principles of a new agreement with the Province and WRHA is that the City will proceed with the amalgamation of fire and ambulance services. It is therefore recommended that the CAO be delegated responsibility to negotiate a new agreement on behalf of the City.

Financial Impact Statement **Date:** July 12, 2002

Project Name: **First Year of Program** **2002**

Implementation of Two Additional Ambulances

	2002	2003	2004	2005	2006
Capital					
Capital Expenses Required	$ -	$ -	$ -	$ -	$ -
Less: Existing Budgeted Costs	-	-	-	-	-
Additional Capital Budget Required	$ -	$ -	$ -	$ -	$ -
Funding Sources:					
Debt - Internal	$ -	$ -	$ -	$ -	$ -
Debt - External	-	-	-	-	-
Grants (identify)	-	-	-	-	-
Reserves, Equity, Surplus	-	-	-	-	-
Other - Enter Description Here	-	-	-	-	-
Total Funding	$ -	$ -	$ -	$ -	$ -
Total Additional Capital Budget Required	$ -				
Total Additional Funding Required	$ -				
Current Expenditures/Revenues					
Direct Costs	$ 536,880	$ 929,760	$ 1,012,144	$ 1,110,328	$ 1,132,535
Less: Incremental Revenue/Recovery	402,660	697,320	632,590	555,164	566,268
Net Cost/(Benefit)	$ 134,220	$ 232,440	$ 379,554	$ 555,164	$ 566,267
Less: Existing Budget Amounts	-	-	-	-	-
Net Budget Adjustment Required	$ 134,220	$ 232,440	$ 379,554	$ 555,164	$ 566,267

Additional Comments: Direct costs include salaries and benefits for staff, uniforms and equipment costs. Vehicle operating costs are not included as they are to be assumed by Manitoba Health. Contributions from Manitoba Health are assumed at 25% of costs for 2002 and 2003 and 25% of half a year's costs for 2004 for one ambulance. User fees are assumed cover 50% of costs on an annual basis. The net budget adjustment represents the City of Winnipeg share for 2002, 2003 and half of 2004 and the combined City of Winnipeg and WRHA shares thereafter.

(original signed by)

Bodo Roloff
Manager of Finance & Administration

In preparing this report, there was consultation with and concurrence by:

Manitoba Health and the Winnipeg Regional Health Authority have been involved in ongoing discussions regarding the provision of an additional ambulance.

This Report Submitted By:

Department: Winnipeg Fire Paramedic Service
Division: Administration
Prepared by: Janice Dooley
Date: July 12, 2002

Approved:

"original report signed by"

W. H. Shoemaker