

Ambulance Act Legislative Consultation Including Fire-Medic Proposal

The Ministry of Health and Long-Term Care (MOHLTC) is now having an immediate and short Phase 1 consultation in order that they can introducing legislation in the upcoming Fall 2017 session to amend the *Ambulance Act*, [Emergency Health Services System Modernization: Briefing Paper on Legislative Amendments to the Ambulance Act](#). There are proposed substantial changes to emergency health services, including providing alternative paramedic options for medical treatment, medical oversight, and inter-facility transportation of critical patients. These changes will have operational and cost implications for municipal governments and District Social Service Administration Boards (DSSABs) delivering ambulance services.

Municipal governments and DSSABs are strongly encouraged to respond to the government consultation. Responses may be submitted until **July 26, 2017**. For further information on how to submit a response and for the consultation documents, please see the linked MOHLTC paper above.

The government is seeking to expand the scope of paramedics to provide alternate on-scene treatment. If adopted, paramedics will have the ability and authority to refer patients to destinations other than hospitals, as is currently required by law. This proposal needs careful consideration. While it may benefit patients and avert low-acuity emergency room visits, it raises serious questions about standards, training, and liability for municipal governments and DSSABs that need to be resolved before proceeding.

The proposed changes will also open the door to the use of the fire-medical model. In a recent announcement in June, [Province Announces Emergency Services Changes](#), the Minister committed that once the Act is changed and a regulation is in place, that two pilot projects will test the use of firefighters certified as paramedics to respond to calls. Given the legislative process, it is likely these pilots will not occur until 2018 at the earliest and perhaps not at all – if there are no willing municipal governments that agree to host these pilots. There is still time for municipal input into this proposal.

If the two pilots are truly to be voluntary, AMO is demanding that the interest arbitrators must be prohibited in law from replicating them on unwilling municipal governments. As seen in the 24-hour shift pilots, interest arbitrators replicated them – even for municipal governments that opposed implementation of 24-hour shifts. The government must address the labour relations concerns of municipal employers prior to these pilots'

introduction by amending the *Fire Protection and Prevention Act*, as it amends the *Ambulance Act*.

There is still no evidence available that such pilots would improve patient outcomes, yet municipal labour and risk management issues are significant. If the government proceeds with these pilots, there must be a commitment to conducting a third-party proof of concept evaluation. AMO will continue to actively engage the Province about the pilots' implications and advocate on behalf of municipal governments.

AMO is working with the government through AMO's Health Task Force and other municipal sector targeted consultations on behalf of our membership. Although there has been an understandable focus on the fire-medical concept, there is a broad range of priority policy changes the government is planning to include in these legislative amendments that require thoughtful municipal consideration and responses. Although this phase of the MOHLTC consultation is short and is scoped largely to the actual legislative amendments, we are ensured that there will be opportunity for further consultations in the Fall and beyond for those wider program design elements, such as the fire-medical pilots.

AMO and its municipal partners will also continue to urge MOHLTC to make immediate improvements to the call triaging and dispatch system, as well as addressing the current non-urgent transfer requirements on an emergency service. Both matters are part of the MOHLTC Phase 2 plan to enhance emergency services in Ontario.