MINISTRY OF HEALTH
COMMUNITY PARAMEDIC
LONG-TERM CARE PROGRAM

Thank you!

Your government is investing $87 million each year in partnership with municipalities, Indigenous communities and district service boards to deliver the Community Paramedicine for Long-Term Care program across Ontario. This partnership is a lifeline and safety net for our seniors and most vulnerable residents. Thank you on behalf of our clients and their families who have received more than 32,312 visits and been supported by the County of Renfrew Community Paramedic Long-Term Care Program thanks to your Government's commitment.

Proposal

The County of Renfrew has two requests of the Minister of Long-term Care and the Government of Ontario.

1. We are seeking a future commitment to "base funding" the highly successful Community Paramedicine Long-Term Care program, in advance of the end of the current contract period. This commitment is critical to ensuring stability for our clients and secure our organizational ability to optimize the impact of this important program to our community.
2. We are requesting that the government increase funding to the County of Renfrew by $1 million annually as a reallocation from the $20 million annual surplus. This funding will support an increase of more than 10,000 hours of direct client care across the County of Renfrew. As a flagship Community Paramedicine for Long-Term Care program, your support will assist the County of Renfrew to extend the reach of the Ministry of Long-Term Care to Ontarians by addressing opportunities and issues related to:
   - rurality,
   - seniors and vulnerable populations lacking attachment to primary care
   - expanding links with seniors in the community,
   - improving transitions into LTC,
   - providing team-based care and clinical and diagnostic back-up to Long-Term Care facilities needing surge capacity assistance,

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- connecting with Ontario Health Teams in addition to increasing our case load, duration and frequency of care per client.

Background

Since 2020, the Ontario government has been expanding the innovative and impactful Community Paramedicine for Long-Term Care program. This initiative has helped an extraordinary number of seniors and vulnerable Ontarians on long-term care waitlists and others, keeping them safe and improving their quality of life while remaining in their own homes. The Ministry of Long-Term Care currently provides the County of Renfrew $2 million / year, on a time limited, contract basis.

As a pioneer of Community Paramedicine dating back to 2007, the County of Renfrew delivers a suburban and rural, community-based model of care. Community Paramedics leverage their skills, knowledge and community connections to provide proactive and preventative care in-home and/or remotely to meet the needs of our seniors and vulnerable clients (Batt et al., 2021; Eaton et al., 2020, 2022). The range of clinical services offered through the Community Paramedic program includes chronic disease and frailty management, remote and care plan monitoring for vulnerable populations, hospital and 911 diversion, and social and health inequalities in the County of Renfrew. Community Paramedics provide clinical assessments, point of care diagnostics, treatment, system navigation, and care coordination day and night (Shannon et al., 2023).

Community Paramedics are valued members of team-based care teams across the County of Renfrew as demonstrated through fully integrated with mature partnerships and expanded roles within the retirement and Long-Term Care facilities as well as the County of Renfrew Virtual Triage and Assessment Centre (RCVTAC), Ontario Health Teams, primary care teams, hospital's and emergency department staffing, home and community care support, palliative care teams, and rural health hubs and mental health and addictions programs such as the County of Renfrew mesa model of compassionate care.

Impact of Community Paramedicine Long-Term Care (CPLTC)

As originally envisioned by the Minister and Ministry of Long-Term Care in 2020, programs are to be delivered through local communities by providing access to health services 24-7, through in-home and remote methods, such as online or virtual supports including:

- Non-emergency home visits and in-home testing procedures
- Ongoing monitoring of changing or escalating conditions to prevent or reduce emergency incidents
- Additional education about healthy living and managing chronic diseases; and
- Connections for participants and their families to home care and community supports

Consistent with the original vision, the collective effort of all participating Community Paramedicine programs across Ontario has been able to achieve the following preliminary goals as reported by programs and the Ministry of Long-Term Care in February of 2024:

Daily cost per client: ~ $8.40/client/day

System Utilization:

- Clients with a Length of Stay (LOS) < 6 months, are associated with 24% reduction in ED utilization and 19% reduction in hospital admissions reducing the impact on clients and health system pressures.
- Overall results 10% reduction in ED utilization & 7% reduced hospital admissions based on longer Length of Stay in the CPLTC program.
- 911 calls decreased by 22-32% among all CP clients reducing pressures on Paramedic Services and protecting valuable 911 resources for emergency response capacity.

Wait List Stabilization: CPLTC clients on the Long-Term Care waitlist are less likely to be reprioritized into crisis category, when compared to the general population aged 75+.

Clients are less likely to experience deterioration in their health condition when in the care of Community Paramedics.

Client Satisfaction: Clients, their caregivers and family members are very satisfied with the program and felt that the program was accessible, reactive, proactive, and safe.

Alternate Level of Care: Overall, fewer CPLTC clients were being admitted into hospitals, however, of those that were admitted, more were designated as requiring an alternate level of care.

At a local level, the County of Renfrew model of care for chronic disease and frailty management achieves similar and often superior outcomes than are forecasted based upon province wide data as presented by the Ontario Ministry of Long-Term Care, 2023.

Currently, the County of Renfrew CPLTC program is aware of 1,281 patients in need of support. There are more than 10,000 patients on the Community Paramedic roster who also have varying levels of need for attention. Currently the Ministry of Long-Term Care is supporting the work of 10 Community Paramedic FTEs, with an average caseload of 150 patients/ FTE or what should be approximately 1,500 of the highest priority patients.

The CPLTC program continues to engage in community-based needs assessments and work with partners to be proactive in addressing issues related to the social and structural determinants of health while increasing equitable access to health care amongst our most vulnerable populations throughout the County of Renfrew. This model is focused on stabilizing a patient's urgent clinical needs while improving their quality of life, therefore reducing the need for crisis placement into long-term care, alternate level of care and emergency department visits (Brohman et al., 2015/17).

While the provincial average of reduction in 911 calls was 22-32%, the County of Renfrew reduction achieved is 32% amongst our general CPLTC clients and a 65% reduction has been observed among our CPLTC clients with high 911 utilization (3+ 911 calls within one year). The intended consequence of the CPLTC program has resulted in an increase in availability of 911 resources to service community-based needs and improve clinical outcomes.

Cost Comparison

The CPLTC program has proven to be a highly cost-effective and impactful intervention for vulnerable Ontarians. At $8.40 per client/day, which is less than 15% of the government-funded portion of a basic long-term care bed costs, (Ontario Ministry of Long-Term Care, 2023). CPLTC programs provide a stabilizing effect on seniors, vulnerable Ontarians and their families, while mitigating system pressures and costs across the Long-Term Care sector and health services.

Table 1: "Cost comparison of CPLTC program and alternatives. Table retrieved from the 2023 Ontario Ministry of Long-Term Care "Program Evaluation Community Paramedicine for Long-Term Care (CPLTC)" report.

Table 5. Cost comparison of CPLTC program and alternatives

Bed type	Average daily cost per client
CPLTC Program	$8.40†
Home and community care	$102.34
Long-term care homes bed (long-stay basic)	$65.32
Hospital bed	$1,274
Alternate Level of Care (ALC) bed	$1,100-$1,500

† *Average CPLTC cost/client/day FY2022/23 = Total estimated CPLTC funds spent during FY2022/23 / unique clients served / average length of stay = $72.6 million/ 36,046 / (240 days/annum) = $8.40*

Expansion of the County of Renfrew Community Paramedicine program as requested, will serve to further reduce system pressures, mitigate suffering and loss of independence by seniors and vulnerable people.

Conclusion

The current demographic profile is defined by an increasingly older population with significantly greater incidence of complex chronic disease. Our seniors and vulnerable residents are facing unprecedented barriers to accessing primary care, acute care and long-term care coupled with pressures on home care, affordable housing, mental health services and social isolation.

We are committed to addressing these issues with your support and we welcome an opportunity to expand the reach of the Ministry of Long-Term care, stabilize our funding relationship and expand our partnership through strategic program expansion that is a high priority for our community and an opportunity to scale and spread the Renfrew County and Ontario model of Community Paramedicine Long -Term Care.

References

Batt, A.M., Hultink, A., Lanos, C., Tierney, B., Grenier, M., and Heffern, J. (2021). Advances in Community Paramedic Response to COVID-19. *CSA Group*. https://www.csagroup.org/wp-content/uploads/CSA-Group-Research-Advances-in-Community-Paramedicine-in-Response-to-COVID-19.pdf

Brohman, MK, Green ME, Dixon, J, Whittaker, R, Fallon, L. (2015/17) Community Paramedicine Remote Patient Monitoring (CPRPM): Benefits Evaluation & Lessons Learned, Toronto, ON: *Canada Health Infoway; 2018.*

Eaton, G., Tierney, S., Wong, G., Oke, J., Williams, V., and Mahtani, K.R. (2023). Understanding the roles and work of paramedics in primary care: a national cross-sectional survey. *BMJ Open., 12*. doi: 10.1136/bmjopen-2022-067476

Eaton, G., Wong, G., Williams, V., Roberts, N., and Mahtani, K.R. (2020). Contribution of paramedics in primary and urgent care: a systematic review. *British Journal of General Practice. 70*(695), e421-e426. https://doi.org/10.3399/bjgp20X709877

Nolan, M. (2023). Community Paramedics Supporting Ontarians Eligible for Long-Term Care. *International Roundtable on Community Paramedicine (IRCP).* https://ircp.info/Portals/11/Meetings/2023/19.D.2%20Nolan.pdf?ver=KkQGS8Msgteh8gCvaqBPLA%3d%3d

Ontario Ministry of Long-Term Care. (2023) *Program Evaluation: Community Paramedics for Long-Term Care (CPLTC).*

Ruest, M., Ashton, C., Millar, J. (2017) *Community Health Evaluations Completed Using Paramedic Service (CHECUPS).*

Shannon, B., Baldry, S., O'Meara, P., Foster, N., Martin, A., Cook, M., Stewart, K. and Miles, A. (2023). The definition of a community paramedic: An international consensus. *Paramedicine., 20*(1), 4-22. https://doi.org/10.1177/27536386221148993