

## AMO Delegation

### Offload Delay Backgrounder Report 2023

Thanks to provincial funding and support for innovative community paramedicine programs, Essex-Windsor EMS has made significant headway in improving the delivery of local health care and addressing long-standing, systemic issues that result in ambulances idling outside hospital emergency rooms.

But more can be done in Windsor and Essex County to maximize the effectiveness of precious Paramedic resources and improve the flow of patients through the health care system. We are a unique jurisdiction with specific challenges requiring targeted measures to address the offload delays crisis.

Jurisdictions across Ontario are facing similar challenges confronting Code Blacks and Code Reds, instances when no local ambulances or fewer than two ambulances are available to respond to calls. These delays can sometimes last for 12 hours or more and are an inefficient use of Paramedic resources and an obvious and ongoing risk to public safety. They have a negative impact on Paramedic morale and public faith in the system.

These issues are longstanding and systemic, caused by rules requiring Paramedics to remain with their patients until the patients have been admitted to congested hospitals. The causes are complex and multi-faceted and the problem requires a wholistic approach. The Province has shown its willingness to embrace innovative solutions to address the crisis and we are hopeful that spirit of ingenuity and collaboration will continue.

The crisis is particularly acute in Windsor and Essex County because of an overreliance of local residents on the 911 system fueled by a chronic physician shortage and an alarming dearth of Primary and After Hours Clinics with extended hours. Call volumes and incidents of Code Reds and Code Blacks spike during the evening hours in Windsor-Essex when clinics are closed.

The County of Essex declared a local State of Emergency on Oct. 17, 2022 in response to an alarming rise in the number of Code Blacks and Code Reds caused by offload delays outside hospitals. Code Blacks totalled 491 minutes through the

first two weeks of October compared to 116 minutes in all of September, 77 minutes in August and 31 minutes in July.

There was a noticeable decline in the number of Code Blacks and Code Reds following the emergency declaration but the reprieve was short-lived and the problem persists. There continues to be significant periods when ambulance coverage is limited. In July, for example, there were no ambulances available for 184 minutes and two or fewer available for 296 minutes.

The problem is only poised to grow worse given the accelerated residential, commercial and industrial growth taking place in Windsor-Essex. The number of calls for an ambulance in our region is expected to reach record levels in 2024, rising nearly 10 per cent by the end of the year for a total of 68,113 calls.

Hiring more Paramedics and increasing the number of ambulances on the road would partially address the problem but it would not directly confront the root causes: Too many people phoning 911 to access the emergency department and too many people being taken to emergency rooms for low acuity cases who could be treated elsewhere. What is required is a wholistic solution that addresses patient behaviour and flow and the shortage of physicians and primary clinics with extended hours in Windsor and Essex County.

### **The Problem: Offload Delays in Windsor-Essex**

Windsor and Essex County has an extraordinarily high percentage – the highest in Ontario – of patients who arrive by ambulance at emergency rooms. The provincial average for June was 19 per cent and the average for each of our three hospitals was 38 per cent, 31 per cent and 23 per cent. The story was similarly bleak in May. The provincial average was 18 per cent and the average for each of our three hospitals was 37 per cent, 30 per cent and 23 per cent.

This would be a serious issue affecting the quality of local health care even if our Paramedics could drop off patients at the hospital and quickly be back on the road. It is made significantly worse by the offload delays experienced at overwhelmed hospitals that can't admit patients quickly enough due to a lack of available beds.

It's not just patients who have to wait for long periods of time at hospital emergency rooms. Paramedics do, too, and that keeps them from being on the road responding to emergency calls.

While the lack of a robust regional transit system and our low population density partially contribute to this overreliance on residents using ambulances as a taxi service to emergency departments, the main contributors are a chronic shortage of family doctors and an alarming dearth of Primary and Urgent Care Clinics with extended hours.

More than 32,000 people in Windsor and Essex County are without a family doctor and nearly fifty per cent of those people live in neighbourhoods with the lowest average incomes, with many lacking access to their own vehicles. The shortage is such that a local advocacy group funded by the United Way, ProsperUs, has launched a campaign urging the region to accelerate physician recruitment efforts.

Windsor-Essex is a vast and largely rural region, outside of the population centres of Windsor and Leamington, so it lacks a critical mass of easily accessible Primary and Urgent Care Clinics common to other jurisdictions. Many of the clinics we do have do not have websites so it is difficult for residents to contact them.

People phone 911 because they feel they have no other options available to them and, when it comes to weekends and the hours from dusk to dawn in Windsor-Essex, they are right. It is no coincidence that EMS call volumes and Code Blacks and Code Reds spike in the evening hours when clinics are closed.

Essex-Windsor EMS has undertaken an extensive social media campaign and created a webpage to educate and encourage residents to Make the Right Call and only phone 911 in the event of a real emergency. Residents are encouraged to consult with their family doctor or visit a walk-in clinic but they cannot take those actions due to the issues listed above. As a result, they phone 911 and exacerbate the offload delays crisis at congested area hospitals.

### **The Solution: Reduce 911 Call Volumes and Increase Diversion Rates**

We are calling on the government of Ontario to undertake three specific actions to help our region deal with the offload delays crisis and the particular circumstances of Windsor and Essex County.

- 1) **Increase Base Funding for Physician Recruitment in Windsor-Essex:** If residents have family doctors, they will be less inclined to phone 911 for non-emergency reasons and they will receive more care and preventive treatment, improving their overall health and reducing the number of times they need medical assistance.
- 2) **Increase Funding for Primary and Urgent Care Clinics with Expanded Hours in Windsor-Essex:** Providing residents with after-hours options other than the emergency department is key to reducing offload delays as well as congestion in emergency room departments. By alleviating these systemic pressures, the delivery of health care services and programs will be improved across the spectrum.
- 3) **Create a Patient Navigator position in the Central Ambulance Communications Centre:** Modelled after a successful pilot program in the Niagara Region, this approach would empower a clinical patient navigator to divert low acuity 911 calls away from the emergency department.

The Government of Ontario has consistently shown its willingness to work with the County of Essex and Essex-Windsor EMS by funding and supporting innovative solutions to divert patients from the emergency room and provide residents the care and treatment they need where and when they need it.

These programs include:

- 1) A Community Assessment Triage Team that empowers Paramedics to treat and refer low acuity patients who don't require emergency care.
- 2) A Paramedic Offload Program allowing one ambulance crew to monitor up to four patients waiting for beds in hospital emergency rooms.
- 3) Fit to Sit program where low acuity patients are offloaded to the waiting room for assessment and triage, freeing up ambulance stretchers.
- 4) Low acuity transport diversion to alternate emergency departments.
- 5) Paramedic Patient Navigator in the Central Ambulance Communications Centre
- 6) Vulnerable Patient Navigator Program where Paramedics connect with frequent 911 callers to address issues and refer them to services before they call 911.

The province's support of these innovative initiatives has enabled Essex-Windsor EMS to make significant strides addressing the offload delays crisis. We are hopeful your government will consider the solutions advanced above so we can continue to make headway and improve the delivery of health care to all local residents.