

**LEGISLATIVE ASSEMBLY OF THE
NORTHWEST TERRITORIES
10TH ASSEMBLY, 1ST SESSION**

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RESPONSIBILITY FOR AMBULANCE SERVICES

IN THE NORTHWEST TERRITORIES

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The question of responsibility for the provision of ambulance services in the Northwest Territories has from time to time been a concern, to some degree or other, of every tax-based municipality.

Because the City of Yellowknife provides a full time, 24 hour a day service and because although the City charges a \$40.00 per call for city residents and still incurs an approximate \$125,000 annual deficit in the operation each year it was decided that we should carry out some in-depth research into the matter to determine where the responsibility should rest.

The first revelation was that nowhere either by legislation, regulation or policy is the matter of the provision of ambulance services addressed by the Government of the Northwest Territories. This is interesting in that it raises the question as to whether those municipalities operating such services have legislative authority to do so. In view of this one must further ask how it is that municipalities are operating ambulance services. The answer to this must be, in part, speculative. Until recent times (10 - 15 years depending upon the community and its location) all health care and associated services were provided by either National Health and Welfare, Northern Health Services Branch in the predominantly native communities, or employers in resource based communities. Most patients requiring hospitalization were medically evacuated by air to a medical centre and the associated ground transportation was simply provided by whatever means happened to be available.

As communities grew, private clinics came into existence, and public health care facilities (hospitals) materialized Northern Health Services gradually became more specific to meeting the needs of the native population. A government sponsored

Health Care Plan was implemented by the Government of the Northwest Territories which provided the financial resources so that residents could receive health care in a manner traditional to all other parts of Canada.

It appears that in this evolutionary process the requirement for ambulance services was overlooked by the senior levels of government.

However, the need for such service became apparent in communities, particularly those that have grown dramatically in the last decade. Since the need was most identifiable at the local level it was the local governments who responded to the need by providing services through the use of their own resources. Early after the establishment of the Department of Local Government a policy was introduced providing for a one-time Capital grant of \$12,000 for the purpose of assisting communities to purchase ambulances. However even with this the responsibility for providing an ambulance service was never identified or recognized by the Territorial Government.

It is felt that this present situation exists as an administrative oversight. Perhaps, we the municipalities, are as much or more responsible for this oversight than the Government of the Northwest Territories. Although we recognized the need at the local level and tried to respond to the need we never questioned just who should be responsible. Individual communities may have questioned this from time to time but we didn't make a determined effort to find out just how it is done elsewhere and what level of government is responsible for it nor did we question our authority to operate ambulances. This particular aspect raises some serious concerns with regard to the legal liabilities that we assume when providing ambulance services.

On the contrary it may be argued that to suggest that the absence of legislation, regulation, or policies is simply an oversight, is without real foundation and that it could simply be assumed that these services since the need is at the local level should be a local responsibility. It is felt that this can be more than adequately countered by the question "Who then is responsible for ambulance service on the many miles of highway that exist outside of municipal boundaries"? There is no service provided by the Territorial Government on Territorial highways nor is there any existing provision for it. This striking vacuum could only lead one to assume it has never been seriously considered in areas of Territorial or for that matter municipal jurisdiction.

The City of Yellowknife's research has been comprehensive and time consuming. Every province and the Yukon Territory was contacted, first to determine what department or agency was responsible for this activity, and second we then had to contact the appropriate agencies to acquire the detailed information we needed to carry out this research.

The results are very interesting. The first and most important revelation is that with the exception of the Northwest Territories and Alberta the level of government responsibilities for providing ambulance services is the province or territory. Indeed most often the provinces have contracted private companies, individuals or municipalities to carry out the physical task but the Yukon Territory actually operates the service with their own staff and vehicles.

The Province of Alberta is the anomaly. There is no one piece of legislation that deals specifically with ambulance services nor is there one department that has been assigned this responsibility. Five different Provincial Acts address five different aspects of ambulance services as follows:

<u>ACT*</u>	PROVISIONS FOR
Public Services Vehicles Act	Setting standards of ambulance equipment. Class A Class B
Municipal Government Act	Municipalities may set standards for operators, equipment and rates.
Highway Traffic Act	Use of light and sirens and licensing requirements
Public Health Act	Qualification and training of operators.
Health Occupations Act	Regulations and standards for paramedics.

* These are a very brief summary of the essential points in the various acts. We are advised that there is conflict between some of them and a major concern not provided for in Alberta is legislation providing liability protection for operators.

There are no provincial subsidies to Alberta ambulance operators or user patients. This raises the question of how ambulance operators are able to raise sufficient revenue to provide adequate service and if it is private enterprise, which is the majority, how they make a profit given that economic costs to individuals are usually prohibitive. The President of the Alberta Ambulance Operators Association was contacted

and we were advised that they charge an economic rate that supports a viable business (in Edmonton this rate is \$17.00 per call plus \$1.38 per kilometer). We were also advised that in excess of 70% of calls their revenue is guaranteed by third parties such as vehicle insurance, Department of Health and Welfare or individually subscribed supplementary health insurance plans. It is virtually a user pay system. A very few municipalities do provide a subsidy to operators and these are nominal. In the case of the City of Edmonton it is \$1.43 per capita. The Yellowknife subsidy would amount to about \$12.50 per capita.

In all other provinces where the service is provided by other than provincial agencies, the province provides some form of subsidy to the operator or picks up the actual cost of operation.

In all jurisdictions except Alberta there is specific legislation Orders-in-Council or policies in place for the operation, of ambulances.

These legislation, Orders-in-Council or policies specify such criteria as levels of funding or subsidies, standards of training for operators, legal authorities to operate, liability protection safety standards and ambulance equipment standards.

Another important concern associated with the lack of formal recognition of the provision of ambulance services is that there are a good many more factors that must be addressed other than just the financial responsibility. Foremost would be the concern that municipalities presently operating services in the Northwest Territories should have with regard to legal liabilities that have been assumed without benefit of protective legislation.

More detailed information of the most significant points have been summarized from the great deal of information received from the Provinces and the Yukon and is attached at Annex "A".

Should any members of the N.W.T.A.M. or Government of the Northwest Territories wish the detailed information we would be pleased to provide it.

As a result of conclusions drawn from our research we wish to request the support of the Association in asking the Government of the Northwest Territories to look at this situation seriously with a view to enact appropriate legislation to cover all facets of ambulance services in the Northwest and assume their rightful responsibility for the administrative and financial aspects of providing this service.

In view of the above the City of Yellowknife wishes to propose the following resolution to the Association of Municipalities of the Northwest Territories:

WHEREAS there has been no formal recognition of responsibility for the provision of ambulance services in the Northwest Territories; and

WHEREAS the provision of ambulance services has been recognized directly or indirectly in all other Canadian Provincial/Territorial jurisdictions as a Provincial/Territorial responsibility; and

WHEREAS there are a great number of miles of highway in the Northwest Territories for which no ambulance service is available

BE IT RESOLVED that the Government of the Northwest Territories be requested to research and study ambulance services in the Northwest Territories with a view to establishing a service with similar jurisdictional, financial administrative characteristics prevalent in other Provincial/Territorial jurisdictions in Canada.

	ONTARIO	MANITOBA	SASKATCHEWAN	ALBERTA	BRITISH COLUMBIA	YUKON, TERRITORY
Who is responsible?	The Ontario Ministry of Health, Emergency Health Services - Ambulance Service Branch	Manitoba Health Services Commission under the Department of Health	Ministry of Health	Municipalities and Alberta Ambulance Operator's Association	Emergency Health Services Commission	Department of Municipal and Community Affairs - Operated by the Government of the Yukon
Who is operator?	- Provincial & Municipal services - private companies - hospitals - volunteers	Ambulance services are operated by: - Fire Departments - Municipalities - private - hospital - licensed by Commission	- Municipalities either provide their own service or contract out - 55% are contracted out	- Municipalities - hospitals - volunteers - private contractors	- Fire Department - volunteers - ambulance societies	- Yukon Government Ambulance Service
If contracted, are subsidies paid?	- Not applicable	- A grant from the Department of Health is given to municipalities - Contracts are negotiated between private owners and the company providing service	- Yes, from Urban and Rural Affairs	- Alberta Blue Cross assists in fees depending on coverage	- The Commission is fully fully paid by the Provincial Government	
What is governing legislation?	Ambulance Act of Ontario	Public Health Act	Public Health Act	Municipal Act	Health Emergency Act	Internal Policies, legislation is not required
Additional revenue to cover cost of operation	- Full costs are borne by the Government of Ontario	From \$15.00 to \$75.00 flat rate plus from 65¢ to \$1.10 per km depending on distance	Funded by Urban and Rural Affairs - \$45.00 basic rate plus 34¢/km at the discretion of the Board	Emergency Response: \$72.00 + \$1.38/km Basic Life Support: \$90.00 + \$1.38/km Advanced Life Support: \$117.00 + \$1.38/km - by municipalities	Municipal residential rate is \$125.00 - maximum is \$162.00 - 26¢/km Industrial firms and non-residents - \$65.00 + \$1.23/km. These are about 10% of the actual costs and are not charged to all patients. Fees are to act as a deterrent.	\$30.00 per call + 33¢/mile over 15 miles - These rates are under review

	ONTARIO	MANITOBA	SASKATCHEWAN	ALBERTA	BRITISH COLUMBIA	YUKON, TERRITORY
What is standard of training?	St. John Ambulance Association First Aid Certificate or equivalent	- St. John First Aid Certificate - Will be implementing their own course	Emergency medical training courses through continuing education plus basic St. John's Ambulance Course	Emergency units may have St. John's Ambulance Training, Basic Life Support and Advanced Life Support, may consist of paramedics	- Several levels of training through the Justice Institute of B.C.	- St. John Advanced First Aid and C.P.R. Basic Rescuer - Regular course
What liability coverage is.	\$2,000,000 third party liability - minimum is \$1,000,000	- \$1,000,000 is carried - \$300,000 is minimum	Liability \$1,500,000 Malpractice \$500,000	Not available	Not available	\$1,000,000 liability
Are ambulance standards regulated.	Yes	Yes	Yes	No. - Are trying to implement regulations	Yes	Yes

	ONTARIO	MANITOBA	SASKATCHEWAN	ALBERTA	BRITISH COLUMBIA	YUKON, TERRITORY
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2. Who is operator?	- Provincial & Municipal services - private companies - hospitals - volunteers	Ambulance services are operated by: - Fire Departments - Municipalities - private - hospital - licenced by Commission	- Municipalities either provide their own service or contract out - 55% are contracted out	- Municipalities - hospitals - volunteers - private contractors	- Fire Department - volunteers - ambulance societies	- Yukon Government Ambulance Service
3. If contracted, are subsidies paid?	- Not applicable	- A grant from the Department of Health is given to municipalities - Contracts are negotiated between private owners and the company providing service	- Yes, from Urban and Rural Affairs	- Alberta Blue Cross assists in fees depending on coverage	- The Commission is fully fully paid by the Provincial Government	
4. What is governing legislation?	Ambulance Act of Ontario	Public Health Act	Public Health Act	Municipal Act	Health Emergency Act	Internal Policies, legislation is not required
5. Additional revenue to cover cost of operation	- Full costs are borne by the Government of Ontario	From \$15.00 to \$75.00 flat rate plus from 65¢ to \$1.10 per km depending on distance	Funded by Urban and Rural Affairs - \$45.00 basic rate plus 30¢/km at the discretion of the Board	Emergency Response: \$72.00 + \$1.38/km Basic Life Support: \$90.00 + \$1.38/km Advanced Life Support: \$117.00 + \$1.38/km - by municipalities	Municipal residential rate is \$125.00 - maximum is \$162.00 - 25¢/km Industrial fires and non-residents - \$65.00 - \$1.23/km. These are about 10% of the actual costs and are not charged to all patients. Fees are to act as a deterrent.	\$90.00 per call + 33¢/mile over 15 miles - These rates are under review

	NEWFOUNDLAND	NOVA SCOTIA	NEW BRUNSWICK	PRINCE EDWARD ISLAND	QUEBEC
Who is responsible?	Department of Health controls payment/regulations. Board of Commissioners of Public Utilities regulates the ambulance service	Department of Health	Department of Health	Health Services Commission - Standards and Administration Division of the Hospital Services Commission	Health and Social Services Council
Who is operator?	- Hospitals - private commercial operators - service clubs - community councils	- Private ambulance operators and hospitals (2)	- Hospitals - volunteers - municipality - private Ambulance operators	- P.E.I. Ambulance Operators Association	- Montreal Police - Co-ordination Centre for health emergencies - for Montreal and area - private and public operators
If contracted, are subsidies paid?	- Subsidies and mileage are paid by the Department of Health	- Yes, Department of Health	- Yes, Department of Health	- Yes, Provincial	- Yes, Provincial
What is governing legislation	Motor Carrier Act and regulations	Order-in-Council	Ambulance Services Act	Public Health Act	Health and Social Services Act
Additional revenue to cover cost of operation.	Monthly grant \$150.00 plus mileage per ambulance as follows: First 50 miles - 77¢/mi. After 50 miles - 66¢/mi. Under 50 miles - 1 - 20 miles \$20.00 21 - 30 miles \$25.00 31 - 40 miles \$30.00 41 - 50 miles \$35.00	- Negotiated annually - funding for training is supplied = \$75,000 - Total subsidy = \$725,000	- Department of Health pays: training, equipment, ambulance, radio, licensing, and Administration for a total of \$743,900	To Reimburse ambulance operators for costs associated per trip per vehicle: - mileage is paid - ambulance grant is made Patient rate = \$53.00 Mileage rate = \$ 1.10 Ambulance Grant = \$4,500 each Budget for Training = \$530.00 A user fee of \$40.00 is also charged	Not available

	NEWFOUNDLAND	NOVA SCOTIA	NEW BRUNSWICK	PRINCE EDWARD ISLAND	QUEBEC
5. What is standard of training?	St. John's Ambulance provides first aid courses	Classroom training = 162 hours Practical training = 960 hours Observation in emergency room = 24 hours - contracted to St. John Ambulance Service	Total of 60 hours	- Requesting 80-120 hours in future - requires certificate from St. John's Ambulance or Canadian Red Cross	- Training required
7. What liability coverage is carried?	Minimum is \$250,000 third party liability, \$ 75,000 PL and PD	\$1,000,000 recommended per vehicle	\$300,000 liability	- None required, however, Board is informed of coverage, obtained and in turn will request more if necessary	No: available
8. Are ambulance standards regulated?	Yes	Yes - inspected every three months	Yes	Yes	Yes