

2. BILL 81 AMBULANCE ACT AMENDMENTS

COMMITTEE RECOMMENDATION, AS AMENDED

WHEREAS there is considerable concern about what will happen on Jan. 1, 2000 in terms of computer malfunctions due to the Y2K "bug", and;

WHEREAS this has prompted the mobilization of military and police to deal with potential problems related to this issue, and;

WHEREAS the transfer of responsibility for ambulance service from the Province to regional government is slated to happen on Jan. 1, 2000;

BE IT RESOLVED THAT Council request the Minister of Health amend the legislation to require the transfer from provincial to municipal responsibility on Feb.1, 2000, as it would be unwise to attempt to make a major turnover of the service on the very day where the functionality of computer systems is in serious doubt, and;

FURTHER that copies of this resolution be forwarded to the Association of Municipalities in Ontario and to local M.P.P.s.

DOCUMENTATION

1. Director, Policy and Legislative Services report dated 10 Dec 98 is immediately attached.
2. Extract of Draft Minute, Community Services Committee 17 Dec 98 immediately follows the report and includes a record of the vote.

Our File/N/Réf.            L.1.1.99  
 Your File/V/Réf.

DATE                        10 December 1998

TO/DEST.                  Community Services Committee

FROM/EXP.                Kelly D. McGee, Director, Policy & Legislative Services  
 Legal Department

SUBJECT/OBJET         **BILL 81 *AMBULANCE ACT* AMENDMENTS**

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**DEPARTMENTAL RECOMMENDATION**

**That the Community Services Committee recommend Council receive this report for information.**

**BACKGROUND**

On November 23, 1998, the Provincial Government of Ontario introduced Bill 81, the *Tax Credits and Revenue Protection Act, 1998* (hereafter, referred to as “the Act”). According to the Ontario Government, Bill 81, if passed, will complete measures announced in the Province’s May 1998 budget and implement measures to address the recent Supreme Court of Canada decision on Ontario’s probate fees. However, in addition to dealing with tax matters, Bill 81 introduces proposed amendments to the *Ambulance Act*. The impacts of these amendments are discussed below.

**Bill 81 - Part 1 - Ambulance Act Amendments**

The language of the proposed amendments broadens the power of the Province to act by order to designate a delivery agent and create a “designated area” for land ambulance service delivery. Under Bill 81, a “delivery agent” may be a local or upper-tier municipality, an agency, board or commission established by the Province. A “designated area” may be any geographic area of the province as described in an order. Under the existing *Ambulance Act*, a “designated area” could not include an upper-tier municipality. Bill 81 allows the Minister of Health to create a “designated area” for land ambulance service that includes one or more upper-tier municipalities.

Part III of the *Ambulance Act* currently gives all upper-tier municipalities responsibility for ensuring the proper provision of land ambulance services by January 1, 2000. Under Bill 81, if the Minister of Health creates a designated area that includes an upper-tier municipality as part of that area, that upper-tier municipality ceases to have any automatic right for ensuring the provision of land ambulance services. A delivery agent will be designated, by the Minister, for that purpose. Again, according to Bill 81, a “delivery agent” may be an upper-tier or local municipality, an agency, board or commission. Where an upper-tier municipality is not included in a “designated area” created by the Minister, that upper-tier municipality will continue to have responsibility for land ambulance services as currently contemplated under the *Ambulance Act*.

### Consideration of Bill 81 in the Ontario Legislature

There is no indication in the proposed amendments as to where, when or why the power to designate a service area might be exercised by the Minister. There was no accompanying ministerial news release or announcement that spoke to the *Ambulance Act* amendments. Excerpts from the Ontario Legislature, during second reading debate of Bill 81, are attached as Appendix “A”. In his opening comments at the start of second reading debate, Mr. Terence Young, speaking on behalf of Minister Eves, stated:

The amendments proposed in this bill broaden the definition of "designated area" to include upper-tier municipalities where designed by the minister as part of a consolidated municipal service management structure; make it possible to consolidate service delivery management, in a single service delivery agent, for land ambulance and other services in any area of the province.

There is no mention in Bill 81 of what is intended by a “consolidated municipal service management structure” or what is meant by consolidating service delivery management or what other services might be included in this consolidation. The only hint of what was intended is reflected later in the November 30, 1998 legislative debate, where Mr. Young, in discussing fire, police and ambulance response, is quoted as saying:

We think we should be amalgamating services and empowering the municipalities to take local control. This bill moves much closer towards that. They can amalgamate the services, they could eventually get to amalgamate the dispatch, and provide better service at lower cost.

The thrust of Mr. Young’s statements in the Legislature are repeated by Conservative member Joseph Tascona in his address to the Legislature on December 3, 1998. Beyond the suggestion that Bill 81 lays the foundation for consolidated service delivery management, the scope of what is intended is neither contained in Bill 81 nor explained by the Ontario Government. The *Ambulance Act* currently includes no authority to assume or amalgamate fire or police services or dispatch. Therefore, the practical application of either Mr. Young’s or Mr. Tascona’s statements remains unclear.

### Assumption of Responsibility

Under the existing *Ambulance Act*, an upper-tier municipality can assume responsibility for the proper provision of land ambulance service before January 1, 2000. Under Bill 81, delivery agents, as designated by the Minister of Health, are also permitted to assume responsibility for the proper provision of land ambulance service before January 1, 2000.

Under Bill 81, an upper-tier municipality's power to assume responsibility either before or after January 1, 2000, would be limited to areas where the Minister has not included that upper-tier municipality in a "designated area" or where the Minister has included the upper-tier municipality in a "designated are", but has also designated that upper-tier municipality as the "delivery agent".

### Land Ambulance Costs

Bill 81 also includes expanded Ministerial powers to make regulations regarding the distribution of land ambulance costs where the "designated area" includes an upper-tier municipality. If such is the case, the allocation of costs may be by agreement amongst the parties, by arbitration or by such other method and subject to such other conditions as may be prescribed by regulation. These changes outlined in Bill 81 respond largely to the possibility of a designated delivery area that includes more than just one upper-tier municipality.

### CONCLUSION

According to Conservative member of Parliament, Joseph Tascona, in his address to the Ontario Legislature on Bill 81, on December 3, 1998,

The proposed amendments: (1) broaden the definition of "designated area" to include upper-tier municipalities, where designated by the minister as part of the consolidated municipal service management structure; (2) make it possible to consolidate service delivery management in a single-service delivery agent for land ambulance and other services in any area of the province; and (3) create new regulation-making powers for, among other things, agreements and arbitrations as a means of determining the apportionment of land ambulance service costs within or between upper-tier municipalities and/or delivery agents.

The major thrust of Part I of Bill 81, is to introduce Ministerial power to create land ambulance service delivery areas that include an upper-tier municipality. If the Minister of Health exercises this power, then the upper-tier municipality no longer has an automatic right to assume responsibility of the proper provision of land ambulance service. The Minister must designate the "delivery agent", which can be the upper-tier municipality.

To date, Bill 81 has received three days of second reading debate in the Ontario Legislature. On December 9, 1998 the Honorable Jim Wilson moved a government notice of motion (a time allocation motion) asking that the Speaker "put every question necessary to dispose of the second reading stage of the bill without further debate or amendment, and at such time, the bill shall be ordered for third reading". As of December 10, 1998, Bill 81 has not had second reading.

The Legal Department will keep Council advised as to the status of the Bill. If I can be of any further assistance, please do not hesitate to contact me.

*Approved by  
Kelly D. McGee*

KDM

Attach. ( 1 )

c.c. Regional Chair  
Regional Councillors  
Joanne Yelle-Weatherall, Director, Land Ambulance Services  
Dr. Robert Cushman, Medical Officer of Health

**APPENDIX A****Excerpts from the Hansard record of statements made in the Ontario Legislature on Bill 81****November 30, 1998****Mr. Young, on behalf of Mr. Eves, moved second reading**

This bill also includes non-taxation measures intended to fine-tune the realignment of local services.

Schedule A of the *Services Improvement Act, 1997*, amended the *Ambulance Act* to provide for the transfer to municipalities of full-funding responsibility for land ambulance services as of January 1, 1998, and full responsibility for ensuring the proper provision of such services as of January 1, 2000.

The amendments proposed in this bill broaden the definition of "designated area" to include upper-tier municipalities where designed by the minister as part of a consolidated municipal service management structure; make it possible to consolidate service delivery management, in a single service delivery agent, for land ambulance and other services in any area of the province; and create new regulation-making powers for, among other things, agreements and arbitration as a means of determining the apportionment of land ambulance service costs within or between upper tier municipalities and/or delivery agents. All this is to empower municipalities to do more with less.

**Mr. Phillips:**

I want to begin to talk about some of the aspects of the bill. The very first part of Bill 81 is called the *Ambulance Act*. That's the very first part of the bill, the *Ambulance Act*. What's it designed to do? It's designed to download, to dump on to property tax \$200 million a year in ambulance costs.

This particular one, dumping ambulance costs, you may remember that Mike Harris went out and personally selected 14 people to look at things that should be put on to the municipal level and things that should be handled by the province. This was the Crombie Who Does What panel. One of the things that Crombie said was: "Don't do this. Don't put ambulances on to property taxes. It should never be there." This is the language they used: "The panel strongly opposes such a move," the Who Does What panel. "We are unanimous in the view that it shouldn't be done."

When you think about it, when we are trying to manage our entire health system, when we're trying to find, to use the jargon, a seamless system for our health care, to fragment it and to put ambulances on to municipal taxpayers is a fragmentation of the worst order. But Mike Harris, anxious to implement his income tax cut, loaded this on to the property tax. That's the very first part of this bill, ambulances, and what it essentially does is to give the minister unfettered rights to not only dictate how the ambulance services will be structured but dictate how they will be funded by municipalities. That's the first part of the bill.

**Mr. Crozier:**

...

One is that in the first part of the bill there are some changes to the Ambulance Act. We know that in the budget of May 1998, as my colleague from Scarborough-Agincourt has pointed out, there was some significant downloading to the municipalities. He covered very well the amount of that downloading and the effect it's had and will have on municipal taxes.

What I'd like to spend just a couple of minutes on is the idea, the reason, the logic, if there's any, for having land ambulance paid for by municipalities. It doesn't matter what tier it is, as this bill amends, or it doesn't matter who the delivery agent is. It's the idea that land ambulance should be paid for by municipalities.

I always have thought that, as part of our fully accessible, publicly accessible health care system, land ambulance would be part of that, just the same as air ambulance is. As the member for Scarborough-Agincourt said, the government was advised by the Who Does What committee not to put land ambulance on the backs of municipal taxpayers, not only because of the money involved but because of the whole idea that land ambulance is part of our health care system. Whoever would think that land ambulances, when they pull up to the hospital door, are not part of that system?

It was rather humorous to me that in the whole Who Does What story leading up to the downloading of the ambulances I was told of an almost hilarious anecdote, if it wasn't so serious: that the Ministry of Health didn't know that the provincial government owned the ambulances. The Ministry of Health apparently thought, and I assume the minister of the day at the time, that all the ambulance equipment was owned by the ambulance operators. I'm glad they got that clarified. It would be unfortunate if they didn't realize this. For the life of me, I can't imagine how they would have missed that.

But enough to say that I'd just like to raise the question, why is it that we're separating land ambulance service from the health care system and simply putting it on the backs of municipalities? The regulations, the rules are made by the Ministry of Health, and well they should be, so that the type of service that we receive from ambulances is the same across the province. I agree with that. That makes sense. It might even make common sense; I'm not sure. But why you would simply take that out of the health care system doesn't make sense to me. I wish that at some point in time the government would consider rethinking that particular question.

**Mr. Young:**

I wanted to respond to the member for Scarborough-Agincourt on a couple of comments he made earlier. He was referring to the changes in the act that will allow ambulance services to be provided and controlled locally. I want to comment on that, because in the region I live in, when you dial 911, you get three levels of government at your door. You get the fire service from the town - we get it from the town of Oakville - you get the police service from the region and you get the ambulance service from the province. So there you are, with three levels of government. We think there should be a better way. We think we should be amalgamating services and empowering the municipalities to take local control. This bill moves much closer towards that. They can amalgamate the services, they could eventually get to amalgamate the dispatch, and

provide better service at lower cost. Now there's a novel idea: better service at lower cost. That's what we're trying to do with the bill.

### **December 2, 1998 Second reading debate of Bill 81 resumed**

...

#### **Mr. Cullen:**

I'm more concerned about another element in the bill that deals with the transfer of responsibilities for ambulances to regional municipalities. Here we have proposed legislation that gives the minister the ability to either direct it to an upper-tier municipality or to another agency. Quite frankly, I think this calls out for amendment. If indeed there is going to be a proper downloading of these responsibilities to the regional level, the upper-tier level, whether it's regional government or county, they should have the option of how ambulance services should be provided in their community.

In Ottawa-Carleton, we have an absolutely scandalous situation. I have in my hands a report that went to the regional municipality of Ottawa-Carleton dealing with an independent audit of ambulance response times in Ottawa-Carleton. You may know that the response times for ambulances are governed by legislation here in Ontario, the Ambulance Act, and that the legislative requirement for response time under provincial legislation, approved by this House and by the government through the Ministry of Health, in an urban area is nine minutes, 90% of the time. This means that the population in an urban area, whether it's Ottawa-Carleton, Hamilton, Toronto, London, Windsor, any urban area, the taxpayers there can expect to receive, 90% of the time in nine minutes, an ambulance to meet their emergency needs.

The audit that was done in Ottawa-Carleton discovered that 90% of the time in the urban area the response time was 13½ minutes, a full four and a half minutes late. Because we have some of the top cardiac treatment centres on the continent, Dr Wilbert Keon's institute at the Ottawa Civic, as well as the work done by Dr Justin Maloney to bring in paramedics, which Ottawa-Carleton was a leader on, we know that four-and-a-half-minute time is so crucial to get treatment there, to get the paramedics there so they can save lives and bring people directly to hospital so that they be given the best treatment and recover from their experience.

To find ourselves in a situation in the urban area where we're looking at 13½ minutes, 90% of the time, when the legislative maximum - I mean, there are municipalities at better than nine minutes, 90% of the time, but we're talking about the legislative ceiling, maximum, and yet here in Ottawa-Carleton, under the ministry's administration, we find this terrible drop in standards.

When all this responsibility goes down to the regional municipality, it's that level of government that should have total control because they will be responsible, accountable to their taxpayers for the level of service and will be able to put in the appropriate resources. Unfortunately, the act does not allow all the ambulance services to go directly to regions and counties; there is an opportunity for them to go elsewhere. I don't think that's the right way to go. This is an important public service. It has to go to an accountable, responsible body, and I would think it is the regional municipalities and the counties that would best be the judge of that, seeing that they're going to have to pay for it anyway. Here the minister may direct it to another body, but the



regional and county taxpayers will still have to pay the full freight. Why can they not have direct control over this? That's an important issue.

**Mr. Doug Galt:**

...

He made a lot of reference to the downloading of ambulance, which in fact was a transfer of ambulance, the revenue-neutral of the Who Does What. The ambulance services fit in with the other emergency activities - and that was the intent - that are being run by the municipality, the police and the fire services.

If he remembers back to the AMO conference, the Minister of Municipal Affairs and Housing was there as was the Minister of Health, and suggested to AMO if they had a better idea, please come forward with it. I understand that AMO is considering and may come forward in the not-too-distant future with a new suggestion on how ambulance services might be provided in Ontario.

**December 3, 1998 - second reading debate of Bill 81 resumed in the Ontario Legislature**

**Mr. Joseph N. Tascona:**

There are other areas I want to deal with. Of fundamental importance is the Ambulance Act. Schedule A of the Services Improvement Act, 1997, amended the Ambulance Act to provide for the transfer to municipalities of full funding responsibility for land ambulance services as of January 1, 1998, and full responsibility for ensuring the proper provision of such services as of January 1, 2000.

The proposed amendments (1) broaden the definition of "designated area" to include upper-tier municipalities, where designated by the minister as part of the consolidated municipal service management structure; (2) make it possible to consolidate service delivery management in a single-service delivery agent for land ambulance and other services in any area of the province; and (3) create new regulation-making powers for, among other things, agreements and arbitrations as a means of determining the apportionment of land ambulance service costs within or between upper-tier municipalities and/or delivery agents.

BILL 81 AMBULANCE ACT AMENDMENTS

- Director, Policy and Legislative Services report dated 10 Dec 98

Ms. Joanne Yelle-Weatherall, Director, Land Ambulance Services, spoke about a recent meeting between regional staff and senior staff from the Ministry of Health, where Ministry staff made a serious commitment to look at regional staff's proposal. The proposal addresses the issues of funding, technology and timing and is specific and detailed about what regional staff need to provide residents of Ottawa-Carleton with a performance-based, one service provider, fully accountable ambulance system. Ministry officials made no commitment other than to say the proposal would be given serious consideration. As well, the Ministry has asked its consultant to undertake additional work, and to report back by the end of December 1998. In turn the Ministry's review of the consultant's findings is to be completed by the end of January 1999. Regional staff reiterated the importance of a timely decision and have indicated the Region's plans will be seriously compromised by tardy or delayed decisions.

Ms. Yelle-Weatherall said another issue of concern to Ministry staff is the Region's agreements with neighbouring counties. Regional staff explained that neighbouring counties are at different stages of development, and have taken differing positions from that of the RMOC. Nonetheless, some progress has been made and regional staff will attempt to get agreement in principle with the neighbouring counties as early as possible in the new year.

The Director, Policy and Legislative Services Division, Ms. Kelly McGee, provided information on the passage of Bill 81, introduced in the Legislature in November and anticipated to receive Royal Assent before the end of 1998. This is a huge tax bill, referred to as the Tax Credits and Revenue and Protection Act that contains the following amendments to the *Ambulance Act*:

- the amendment increases the power of the Minister of Health to create designated areas for ambulance service delivery that can now include an upper tier municipality;
- should the Minister of Health creates an area that includes an upper tier, that municipality loses its automatic right to assume responsibility for the proper provision of land ambulance service on January 1, 2000;
- the Minister of Health is required to designate a delivery agent for the newly-created designated area; the delivery agent can be an upper tier municipality, a lower tier municipality, or an agency, board or commission.

Extract of Draft Minute  
Community Services Committee  
17 December 1998

Ms. McGee said Bill 81 raises the possibility that an upper tier municipality will be included in a designated area created by the Minister and the Minister decides who delivers ambulance service in that area. She made reference to a recent communication from the Minister's office to Ms Yelle-Weatherall, saying that Bill 81 is only intended for Northern Ontario, however she noted there is nothing in the language of the Bill which states this intent. In addition, because of the uncertainty about how the *Ambulance Act* will be used, staff have included in the report excerpts from the Hansard record of statements made in the Ontario Legislature on Bill 81 for Committee and Council's information.

The Medical Officer of Health, Dr. R. Cushman, stated that while there will be a transfer of funds associated with the dispatch function, that amount will likely be half of what is needed to properly run an ambulance service. Joanne Yelle-Weatherall spoke about the Expression of Interest, saying staff have prepared the document and are meeting with the consultants to iron out specific details, proceeding on the assumption that dispatch will be under the Region's control. The Expression of Interest document will be released before the end of the month, and staff will report back to Committee and Council with options for consideration.

Councillor H. Kreling expressed his concern about the future of ambulance service in Ottawa-Carleton in light of the information provided by staff. He said he felt Council should advise the Minister of Health it has grave concerns about the recent legislative changes and about the perception the Province will deal with matters as it wants and withdraw if it encounters problematic situations.

In response to a question from Councillor D. Holmes, Ms. McGee said it was entirely possible that the power of the Minister is discretionary and that the *Ambulance Act* will continue as it is, allowing upper tier municipalities to assume ambulance service on January 1, 2000. She added that the power to create a designated area would be done by Ministerial Order, not through regulation.

The Committee Chair, A. Munter drew attention to the fact that previous Council Motions talk about working with neighbouring counties and having a dispatch function that covers the entire area. He wanted to ensure that any Motion brought forward in response to the changes highlighted by staff not preclude these activities from happening. Dr. Cushman indicated that staff, in its dialogue and through its correspondence with the Minister, will highlight some of the concerns raised. Councillor A. Loney suggested that, as this matter will rise to Council, it would be in order to introduce a Motion expressing concern at that time.

Extract of Draft Minute  
Community Services Committee  
17 December 1998

The Committee then considered the following Motion:

Moved by A. Munter

**WHEREAS there is considerable concern about what will happen on Jan. 1, 2000 in terms of computer malfunctions due to the Y2K "bug", and;**

**WHEREAS this has prompted the mobilization of military and police to deal with potential problems related to this issue, and;**

**WHEREAS the transfer of responsibility for ambulance service from the Province to regional government is slated to happen on Jan. 1, 2000;**

**BE IT RESOLVED THAT Council request the Minister of Health amend the legislation to require the transfer from provincial to municipal responsibility on Feb.1, 2000, as it would be unwise to attempt to make a major turnover of the service on the very day where the functionality of computer systems is in serious doubt, and;**

**FURTHER that copies of this resolution be forwarded to the Association of Municipalities in Ontario and to local M.P.P.s.**

CARRIED, as amended