

JULY 8, 2025

JOINT SERVICES COMMITTEE

REPORT NO. JSC-026-2025

VIRTUAL TRIAGE AND ASSESSMENT CENTRE FUNDING REQUEST

**JEFFREY CARSS
CHIEF, PARAMEDIC SERVICE**

RECOMMENDATIONS

THAT the Joint Services Committee of Leeds Grenville provide direction and input to Paramedic Service staff regarding a proposal to establish a Leeds Grenville Virtual Treatment and Assessment Centre (LGVTAC) model of care for the United Counties of Leeds and Grenville, and

THAT the Joint Services Committee of Leeds Grenville provides direction and input to Paramedic staff regarding the submission of this model of care request to the Ontario Ministry of Health.

FINANCIAL IMPLICATIONS

Financial implications information here.

CLIMATE CHANGE IMPLICATIONS

Opportunities for incorporating energy efficiencies and climate change awareness into paramedic operations are identified and implemented where possible.

ACCESSIBILITY CONSIDERATIONS

Leeds Grenville Paramedic Service (LGPS) makes every effort to provide services in a manner that is inclusive, to ensure accessibility barriers are reduced or eliminated where possible.

COMMUNICATIONS CONSIDERATIONS

Based on the directions provided to staff, this matter may require communication back to the Joint Services Committee and the staff of LGPS. This item may also require extensive communication to the residents of Leeds Grenville regarding the services that will be provided. LGPS will work with the corporate communications officer with these communications.

BACKGROUND

Leeds and Grenville is a largely rural region, and residents are facing growing difficulties in accessing timely health care. Rural and small urban communities face unique healthcare access challenges, including: Limited access to primary care-especially for unattached patients, overutilization of emergency departments for low-acuity concerns, geographic and transportation barriers for vulnerable populations, and increased demand for in-home and community-centered health care solutions.

Emergency departments are seeing wait times that exceed provincial averages, while the number of practicing family physicians continues to decline due to retirements and staffing shortages. There are also minimal walk-in clinics or services outside of traditional hours available. These barriers are especially burdensome for vulnerable groups, including seniors and individuals with chronic conditions who lack a regular primary care specialist. The region's dispersed population and limited transportation options further intensify these challenges.

Virtual Triage and Assessment Centres have demonstrated their value during the pandemic and continue to evolve as a sustainable care delivery model. By integrating physicians, nurse practitioners and Community Paramedics, this VTAC will provide an innovative, proven, locally grounded solution that aligns with Ontario Health priorities around connected care and improved healthcare equity.

DISCUSSION/ALTERNATIVES

The Leeds Grenville Virtual Triage and Assessment Centre (LGVTAC) would serve as a streamlined and accessible entry point into the health care system for residents of the region. Under the clinical leadership of physicians and nurse practitioners, and with the support of community paramedics, LGVTAC would provide virtual consultations, clinical assessments, and treatment services. Community paramedics would enhance this care model by delivering in-person follow-up in the home when required, ensuring that patients receive appropriate care in the most suitable setting.

The program is designed to address the needs of three high-priority populations:

- Older adults who require regular monitoring and support,
- Individuals without attachment to a family doctor,
- People living with chronic illnesses such as COPD, congestive heart failure, and diabetes.

By focusing on these groups, the LGVTAC aims to reduce avoidable emergency department visits and 911 calls for non-urgent issues, while enhancing continuity and quality of care.

LGVTAC will support patients to connect virtually with an on-call primary care physician or nurse practitioner. These clinicians will assess and triage patients, provide medical advice and direction, prescribe medications and refer to appropriate services as needed.

Where in-person follow up is required (ie: vitals, diagnostics, home assessments), the Leeds Grenville Paramedic Service's established Community Paramedicine Program is ideally suited to anchor the in-person response component of the LGVTAC model. Already funded by both the Ontario Ministry of Long-Term Care and the Ministry of Health, the Community Paramedic Program is delivering essential services to at-risk residents, focusing on:

- Reducing avoidable Emergency Department visits/ED Diversion
- Managing medications and monitoring chronic conditions
- Health system navigation and healthcare literacy
- Helping seniors age safely at home awaiting long-term care and crisis placement
- Expanding support for primary care in the community
- Supporting discharges for alternate level of care (ALC) patients
- Providing support for acute palliative and end-of-life care

- Strengthening system capacity through integrated, collaborative care models.

Community Paramedics will be LGVTAC's in-home care providers, and will work with established system partners (primary care specialists, practitioners, family health teams, local hospitals and emergency departments, the public health unit, as well as support services for individuals in home) conducting assessments, delivering diagnostic testing and treatments, assisting with care planning, and offering follow-up support where required after LGVTAC assessments. This close integration with virtual care providers will greatly expand the reach of primary care and allow patients to receive necessary, equitable, timely and appropriate health care access while remaining safely in their communities.

LGVTAC represents a forward-thinking, collaborative approach to health care delivery—one that has been proven to enhance access and outcomes for residents across rural and underserved areas.

ATTACHMENTS

Attachment #1 VTAC Funding Request to be sent to the Ministry of Health.

The report set out above has been reviewed and the information verified by the individuals listed below.

JEFFREY CARSS
CHIEF, PARAMEDIC SERVICES

JUNE 26, 2025
DATE

AL HORSMAN
CHIEF ADMINISTRATIVE OFFICER

JUNE 26, 2025
DATE