



ASSOCIATION OF
MANITOBA
MUNICIPALITIES

Meeting with the Honourable Kelvin Goertzen
Minister of Health, Seniors and Active Living

2017

Introduction 1

Priority Issues 2

 1) Health Practitioner Recruitment and Retention..... 2

 2) The Mental Health Amendment Act 3

 3) Community Capital Contributions for Health Facilities 4

Appendix A – Active Resolutions 5

Introduction

- The Association of Manitoba Municipalities (AMM) appreciates the opportunity to meet with Minister Kelvin Goertzen and representatives of the Department of Health, Seniors and Active Living.
- The AMM encourages the Province of Manitoba to consider municipal concerns as well as the effects of funding decisions on local communities throughout the budget process.
- This document outlines the AMM's position and recommendations on a number of important municipal issues relevant to the Health, Seniors and Active Living portfolio.

Priority Issues

1) Health Practitioner Recruitment and Retention

The AMM recommends the government:

- ❖ *Consult with the AMM and municipalities on the development of the Physician Recruitment and Retention program; and*
 - ❖ *Review and harmonize Manitoba's physician licensing requirements with other provincial jurisdictions to increase the number of physicians in rural Manitoba.*
- Currently, more than 90 per cent of Manitoba municipalities are reporting doctor shortages while nearly 95 per cent are allocating financial resources to recruit and retain health practitioners in local communities.
 - On annual basis, local communities are spending more than \$1 million on recruitment and retention efforts even though more doctors are graduating in Canada than ever before.
 - Moreover, Manitoba consistently has one of the lowest physician-to-population ratios when compared to other provinces and territories.
 - While there is no single solution to this complex problem, the AMM welcomes the provincial government's commitment to establish a Physician Recruitment and Retention program for local communities throughout Manitoba.
 - The AMM also appreciates serving on the Rural Physician Recruitment Advisory Committee and expects concrete recommendations to be expeditiously acted upon by the provincial government.
 - However, the AMM believes the Province of Manitoba should take immediate steps to review and harmonize Manitoba's physician licensing requirements with other jurisdictions across Canada to improve Manitoba's competitiveness.
 - The Province should also continue to pursue innovative strategies to support gains that have already been made, and fully implement all the recommendations from the Brandon Medical Education Study to help address the shortage of physicians and physician assistants throughout Manitoba.

2) The Mental Health Amendment Act

The AMM recommends the government:

- ❖ ***Consult with the AMM and municipalities when establishing the training program for 'qualified persons' to ensure effective implementation in local communities.***
- According to the Canadian Mental Health Association, 20 per cent of Canadians will personally experience a mental illness in their lifetime.
- Given the complex links between mental health and the criminal justice system, police responses to mental health issues continue to be a topic of significant discussion both within Manitoba and across Canada.
- The AMM wishes to reiterate its thanks to Minister Goertzen and Minister Stefanson for re-introducing *The Mental Health Amendment Act* and ensuring its passage in the Legislative Assembly.
- As *The Mental Health Amendment Act* will enable a 'qualified person' other than a police officer to assume custody of and supervise an individual who's awaiting a mental health assessment, these changes should significantly reduce policing costs and help ensure police service coverage in local communities.
- Consultation with the AMM and municipalities when establishing the corresponding training program and guidelines for 'qualified persons' is essential for ensuring the effective implementation of these changes in local communities.

3) Community Capital Contributions for Health Facilities

The AMM recommends the government:

- ❖ ***Reduce required community capital contributions for health facilities while moving toward funding all health facilities provincially.***
- Municipalities continue to struggle to provide funding to health capital projects whose design and costs are determined by the Province of Manitoba.
- This policy requires communities to fund at least 10 per cent of all local health capital projects while municipalities are typically expected to contribute funding even though health care is a provincial responsibility.
- The AMM appreciates provincial flexibility towards communities who must fulfill this requirement, and encourages the Province of Manitoba to reduce the required contribution to a fixed 5 per cent of the project's cost, regardless of the payment schedule.
- In addition, the AMM urges the Province of Manitoba to look at alternative ways to build new health facilities by working with not-for-profit community groups and providing support through leasing agreements.
- This type of approach would not require a large upfront investment from the Province of Manitoba while at the same time create flexibility for the future.

Appendix A – Active Resolutions

AMM Resolution #42-2016

Topic: Health Cards

Sponsor(s): City of Dauphin (Parkland District)

Department(s): Manitoba Health, Seniors and Active Living

WHEREAS for years the Province of Manitoba has directed new residents to the local municipal office to obtain information and apply for a Manitoba Health Card; and

WHEREAS the provision of health care services falls within the provincial mandate; and

WHEREAS Manitoba Health, Seniors and Active Living recently revamped its website to include a new electronic Manitoba Health Card Registration Form;

THEREFORE BE IT RESOLVED THAT the AMM lobby the Province of Manitoba to revise its policies and/or practices by removing all references to local municipal offices providing assistance or being involved in the Manitoba Health Card registration process.

AMM Resolution #13-2015

Topic: Trans Canada Trail Funding

Sponsor(s): Municipality of Harrison Park (Midwestern District), Municipality of Roblin (Midwestern District)

Department(s): Manitoba Health, Seniors and Active Living, Environment and Climate Change Canada

WHEREAS the Trans Canada Trail Network runs through the province of Manitoba providing recreational benefits to all citizens;

AND WHEREAS Trails Manitoba is the parent body for the 22 Trail Groups in the province who are the keepers of Trans Canada Trail;

AND WHEREAS these individual Trail Groups in Manitoba must receive their financial assistance for trail maintenance through grants from Trails Manitoba;

AND WHEREAS there is currently no annual funding from the Province of Manitoba for the maintenance requirements in the annual Trails Manitoba budget leaving a crippling shortfall;

AND WHEREAS municipalities that house the Trans Canada Trail Groups are often called upon to bear the financial burden of ongoing trail maintenance and projects;

THEREFORE BE IT RESOLVED THAT the AMM lobby the Province of Manitoba to allocate funding to Trails Manitoba in order to meet the demands of maintenance on the Trans Canada Trail in Manitoba.

AMM Resolution #19-2015

Topic: Medical Inter-Facility Transportation

Sponsor(s): LGD of Pinawa (Eastern District)

Department(s): Manitoba Health, Seniors and Active Living

WHEREAS approximately 90% of ambulance transports are for non-emergency inter-facility transports;

AND WHEREAS this significantly impacts the availability of ambulances for emergencies;

AND WHEREAS there are other jurisdictions where a significant number of non-emergency inter-facility transports are managed by private organizations;

AND WHEREAS an alternative method of inter-facility transportation would free up ambulances and EMS staff for emergencies plus increase capacity for proactive in-home visits (Community Paramedics) by EMS personnel with higher risk patients, and in particular, the elderly, which has been proven to be highly effective in other jurisdictions in Canada;

AND WHEREAS EMS staff could also have capacity for assisting in rural Emergency Room care;

AND WHEREAS this scenario would improve the quality of health care in rural areas, reduce the number of 911 calls, and likely reduce the cost of providing rural health care;

AND WHEREAS the member municipalities of the Eastern Region Community Health Committee are prepared to participate in a pilot project;

THEREFORE BE IT RESOLVED THAT the AMM lobby the Province of Manitoba to facilitate a pilot project to establish the feasibility of privately managed medical inter-facility transportation.

AMM Resolution #20-2015

Topic: Physician License Review

Sponsor(s): Municipality of Roblin (Midwestern District), RM of Yellowhead (Midwestern District)

Department(s): Manitoba Health, Seniors and Active Living

WHEREAS the College of Physicians and Surgeons of Manitoba's mandate is to protect the public as consumers of medical care and to promote the safe and ethical delivery of medical care by physicians in Manitoba;

AND WHEREAS the College made changes to the International Medical Graduate (IMG) licensing procedure that has had a huge, negative impact on communities in Manitoba because regulations aren't as stringent in other provinces;

THEREFORE BE IT RESOLVED THAT the AMM lobby the Province of Manitoba to review the licensure requirements for physicians;

AND FURTHER BE IT RESOLVED THAT the AMM lobby the Province of Manitoba to ensure Manitoba IMG license requirements are harmonized with other provinces.

AMM Resolution #30-2014

Topic: Increase Funding for Senior Services Boards

Sponsor(s): Village of Binscarth (Midwestern District)

Department(s): Manitoba Health, Seniors and Active Living

WHEREAS it is the purpose of Senior Services Boards in Manitoba to assist seniors and disabled persons to continue living independently and with dignity as long as possible;

AND WHEREAS the difference between the annual grant from the Province of Manitoba and the annual budget for the Senior Services Board in some municipalities is a shortfall of several thousand dollars;

AND WHEREAS it has become necessary for Seniors Coordinators to fundraise in order to pay their own wages, making recruitment and retention for these positions extremely difficult;

AND WHEREAS the Resource Coordinators dedicated more time to dealing with funding than developing programs to assist the seniors in their jurisdiction;

THEREFORE BE IT RESOLVED THAT the AMM lobby the Province of Manitoba to increase funding to Senior Services Boards in order to maintain staff to keep Senior Services Offices open to follow the mandate for which the Senior Services program was created; which is to assist seniors of our province in order for them to have an independent and comfortable quality of life.

AMM Resolution #24-2013

Topic: Palliative Care Services

Sponsor(s): Town of Russell (Midwestern District)

Department(s): Manitoba Health, Seniors and Active Living

WHEREAS access and provision of health care services throughout the Province of Manitoba are important to all residents of Manitoba;

AND WHEREAS all services from beginning of life to end of life are critical to a health care system that is compassionate and respectful;

AND WHEREAS the provision of palliative care is not always funded through Manitoba's Department of Health and is left to be organized and funded by local communities;

AND WHEREAS 'end of life' care should receive a greater level of support and recognition by Manitoba Health;

THEREFORE BE IT RESOLVED THAT the AMM lobby the Province of Manitoba to change the current funding arrangements so that palliative care services are given greater priority and greater resources through regional health authorities.

AMM Resolution #25-2013

Topic: Reduce Community Contribution Requirements

Sponsor(s): LGD of Pinawa (Eastern District)

Department(s): Manitoba Health, Seniors and Active Living

WHEREAS the Province of Manitoba (the Province) has a policy on community contributions to health capital (the Policy) projects whereby health capital projects will be cost shared between the Province and a community, the community paying at least 10 per cent and the Province paying the remainder of the costs associated with the health capital project;

AND WHEREAS the Policy states that the community contribution may be spread out in equivalent annual payments for a ten year period, resulting in a contribution of 20 per cent of the health capital projects;

AND WHEREAS the AMM presented Resolution 19/07 to Manitoba Health resolving that the Province of Manitoba remove the 10 per cent community contribution requirement;

AND WHEREAS Manitoba Health has not yet acted upon this Resolution;

THEREFORE BE IT RESOLVED THAT the AMM lobby the Province of Manitoba to reduce the community contribution requirement on any health care facilities to a fixed 5 per cent;

AND BE IT FURTHER RESOLVED THAT the community contributions be in the form of progress payments over the project construction period at the said fixed 5 per cent rate.

AMM Resolution #20-2010

Topic: Amend *The Mental Health Act*

Sponsor(s): LGD of Pinawa (Eastern District)

Department(s): Manitoba Health, Seniors and Active Living, Manitoba Justice

WHEREAS The Mental Health Act currently requires a peace officer to escort a patient and remain with the patient until seen by a qualified mental health worker;

AND WHEREAS this may take as long as 14 hours or longer before a qualified mental health worker is available to see the patient;

AND WHEREAS during that time, the RCMP members are not available to perform policing services in their region;

AND WHEREAS this is an inefficient use of RCMP members' time who are trained to provide policing services in their region;

AND WHEREAS this adds cost to policing services in the region;

THEREFORE BE IT RESOLVED THAT the AMM lobby the Province of Manitoba to amend The Mental Health Act to facilitate the orderly and timely transfer of custody at the mental health facility to free up peace officer time, while at all times maintaining the patient's care as the highest priority.