



EMERGENCY SERVICES COMMITTEE AGENDA

Emergency Services Committee Meeting
Wednesday, April 18, 2018
Tom Davies Square

COUNCILLOR RENE LAPIERRE, CHAIR

Gerry Montpelier, Vice-Chair

MEETING CANCELLED

4:00 p.m. EMERGENCY SERVICES COMMITTEE MEETING
COMMITTEE ROOM C-11

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DECLARATIONS OF PECUNIARY INTEREST AND THE GENERAL NATURE THEREOF

PRESENTATIONS

1. Paramedic Services Public Education Campaign for Early Stroke Recognition - FAST
(ELECTRONIC PRESENTATION) (FOR INFORMATION ONLY)

4 - 14

- Melissa Roney, Acting Deputy Chief of Emergency Services

(This report provides information on the Paramedic Services Public Education Campaign for Early Stroke Recognition.)

2. Greater Sudbury Fire Service Fire Prevention and Public Education Division
(ELECTRONIC PRESENTATION) (FOR INFORMATION ONLY)

- Graham Campbell, Deputy Fire Chief

(This presentation provides an overview of the day-to-day operations and legislative requirements of Fire Prevention and the innovative programs of Public Education.)

CONSENT AGENDA

(For the purpose of convenience and for expediting meetings, matters of business of repetitive or routine nature are included in the Consent Agenda, and all such matters of business contained in the Consent Agenda are voted on collectively.

A particular matter of business may be singled out from the Consent Agenda for debate or for a separate vote upon the request of any Councillor. In the case of a separate vote, the excluded matter of business is severed from the Consent Agenda, and only the remaining matters of business contained in the Consent Agenda are voted on collectively.

Each and every matter of business contained in the Consent Agenda is recorded separately in the minutes of the meeting.)

CORRESPONDENCE FOR INFORMATION ONLY

- C-1. Report dated March 29, 2018 from the Interim General Manager of Community Safety regarding Community Safety Department Update. **15 - 31**
(FOR INFORMATION ONLY)

(This report provides a summary of the Community Safety Department statistics and a briefing on current and upcoming activities.)

- C-2. Report dated March 28, 2018 from the Interim General Manager of Community Safety regarding Proposed Changes to Fire Protection and Prevention Legislation. **32 - 51**
(FOR INFORMATION ONLY)

(This report provides information regarding potential changes to the Fire Protection and Prevention Act (FPPA) proposed to take effect January 1, 2019.)

- C-3. Report dated March 29, 2018 from the Interim General Manager of Community Safety regarding Paramedic Services – Provincial Emergency Response Time Standards. **52 - 56**
(FOR INFORMATION ONLY)

(This report provides information regarding the 2018 response time plan for the City of Greater Sudbury Paramedic Services.)

REGULAR AGENDA

MANAGERS' REPORTS

- R-1. Report dated March 29, 2018 from the Interim General Manager of Community Safety regarding Paramedic Response Unit (PRU) Conversion Standardization. **57 - 59**
(RESOLUTION PREPARED)

(This report proposes standardization of Paramedic Response Unit conversion utilizing Rowlands Emergency Vehicle Products as the vendor of record.)

- R-2. Report dated March 29, 2018 from the Interim General Manager of Community Safety regarding Land Ambulance Vendor Standardization.

60 - 64

(RESOLUTION PREPARED)

(This report proposes maintenance of a standardized ambulance fleet through the utilization of Demers Ambulance of Beleoil, Quebec as our vendor of record.)

ADDENDUM

CIVIC PETITIONS

QUESTION PERIOD AND ANNOUNCEMENTS

NOTICES OF MOTION

ADJOURNMENT

For Information Only

Paramedic Services Public Education Campaign for Early Stroke Recognition - FAST

Presented To: Emergency Services
Committee

Presented: Wednesday, Apr 18,
2018

Report Date Tuesday, Mar 27, 2018

Type: Presentations

Resolution

For Information Only.

This report provides information on the Paramedic Services
Public Education Campaign for Early Stroke Recognition.

Signed By

No signatures or approvals were
recorded for this report.

Greater Sudbury Paramedic Services

***FAST* Action to Create More Stroke Survivors**

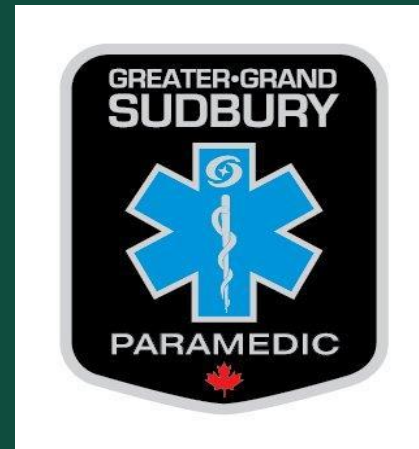
City of Greater Sudbury

Emergency Services Committee

April 18, 2018

Partners in Stroke Awareness

FAST Campaign



Stroke

- Sudden loss of brain function resulting from lack of blood flow due to bleeding or blood clot
- When blood can't reach an area of the brain, the cells in that area die. The surrounding brain tissue is at risk but can be salvaged if immediate treatments can help restore blood flow to those cells

Stroke *FAST* Campaign

- Educate the public to signs of stroke
- Decrease time to treatment through public awareness decals on Paramedic Services vehicles

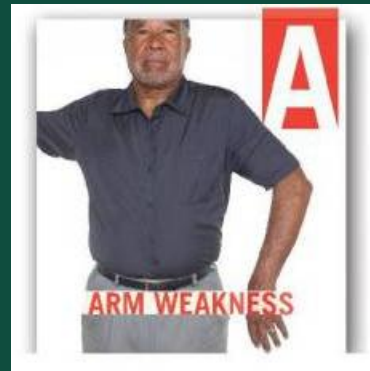


CGS Paramedic Services Ambulance and PRU Decals

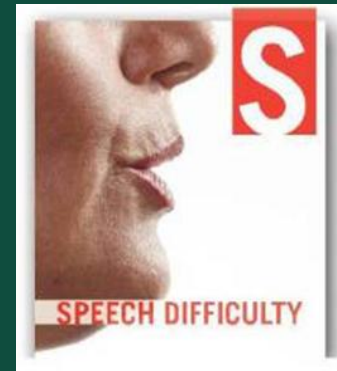
FACE is it drooping?
A RMS can you raise both?
S PEECH is it slurred or jumbled?
T IME to call 9-1-1 right away.



Face
– is it
drooping?



Arms
– can
you raise
both?



Speech
– is it
slurred or
jumbled?



Time
– call 911
right away!

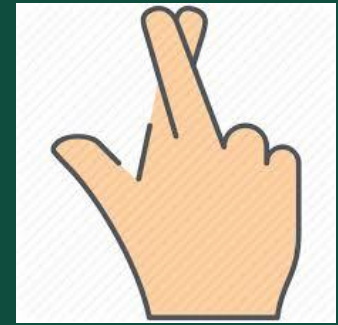
Stroke Facts

- Leading cause of adult acquired disability
- Third leading cause of death in Canada
- 62,000 strokes in Canada every year, roughly 17% of these patients die
- Survivors have varying degrees of recovery

2017 Paramedic Services Stroke Data

Arrived at hospital via ambulance	Arrived at hospital via friend or relative
393 patients	296 patients
Total Patients = 689	

Our Commitment



- Agreement with Heart and Stroke to have *FAST* decals on Paramedic Services vehicles for two years
- Continued membership on the NEO Stroke Network Steering Committee
- Continuously improve our prehospital stroke care



Alignment with NEO Stroke Network & Health Sciences North

I am pleased that Sudbury Paramedic Services has taken this opportunity, provided by the Heart and Stroke Foundation, to offer the public another means to learn that stroke is an emergency and people must act FAST. Every minute counts”.

Dr. Padma Puranam, Medical Director of the Northeastern Ontario Stroke Network and HSN Stroke Program

For Information Only

Community Safety Department Update

Presented To:	Emergency Services Committee
Presented:	Wednesday, Apr 18, 2018
Report Date	Thursday, Mar 29, 2018
Type:	Correspondence for Information Only

Resolution

For Information Only

Relationship to the Strategic Plan / Health Impact Assessment

This report refers to operational matters.

Report Summary

This report for information only was prepared to provide the Emergency Services Committee with statistical information regarding number of calls for Fire and Paramedic Services along with good news stories and an update on Emergency Management.

Financial Implications

There are no financial implications associated with this report.

Signed By

Report Prepared By

Michael MacIsaac
Executive Deputy Chief of Community Safety
Digitally Signed Mar 29, 18

Financial Implications

Jim Lister
Manager of Financial Planning and Budgeting
Digitally Signed Mar 29, 18

Recommended by the Department

Joseph Nicholls
Interim General Manager of Community Safety
Digitally Signed Mar 29, 18

Recommended by the C.A.O.

Ed Archer
Chief Administrative Officer
Digitally Signed Mar 29, 18

Greater Sudbury Emergency Management Update Report



Presented to: Emergency Services Committee on April 18, 2018

This report aims to provide The City of Greater Sudbury Emergency Services Committee with an update on good news stories and relevant statistics as well as recent business activities within the Emergency Management Section of the Community Safety Department.

The Emergency Management Section provides leadership, guidance and direction to ensure the city is safe. Governed by the Emergency Management and Civil Protection Act (EMCPA) with guidance from the Office of the Fire Marshall and Emergency Management, City Council and the Greater Sudbury Emergency Management Advisory Panel, the primary focus is to contribute to the safety of citizens through the effective management of community risks and emergencies.

Emergency Operations Centre (EOC) Support Staff Training

The Emergency Operations Centre (EOC) Support Staff team consists of employees from across the organization who have volunteered to provide support to the Community Control Group during an EOC activation. Support Staff are trained on EOC activation and deactivation procedures, operation of crisis communication software as well as administrative duties. Currently, there are 29 EOC Support Staff members.

The first training session for 2018 was held over a course of two weeks (Jan 30-Feb 16) with 13 EOC Support Staff in attendance.

Water Wastewater WebEOC Training

As part of the City's internal tracking mechanisms for issues, the Water/Wastewater Division utilizes the crisis management software WebEOC. While this software is primarily intended for use during large emergencies, its capabilities lend itself to use in other areas as well. Water/Wastewater utilizes this software to track watermain issues. With the spring season approaching it was time to review the system with all appropriate staff to ensure that it continues to meet the needs of all. Through this review an area of concern was noted regarding automatically timestamping records. Through work with the vendor we have been able to rectify this issue and the system should work as required, enabling consistent tracking of watermain issues.

Red Cross PDA

At the February 27th meeting of Council a report on the Red Cross Personal Disaster Assistance (PDA) Grant was delivered with an associated bylaw (2018-37) being approved. Passing of this bylaw allows the General Manager of Community Safety to enter into agreement with the Canadian Red Cross to assist monetarily with personal disaster relief. As part of the 2018 budget process, there was



approval for an additional \$10,000 to be added to this fund bringing the total amount available to \$30,000.

The goal of the Red Cross Personal Disaster Assistance Program (PDA) is to alleviate human suffering and maintain human dignity by providing for the basic needs of impacted individuals and families. The City of Greater Sudbury has been providing funding to the Canadian Red Cross on a reimbursement basis to support its delivery of the PDA program since 2001. Due to the increasing demands and individuals in need over the last few years, and since the Red Cross has exceeded \$20,000 in costs for the PDA Program over the last four consecutive years, this updated bylaw will allow for annual funding up to a maximum level of \$30,000 for a five (5) year period from 2018-2022. This funding is used strictly for direct client assistance with items such as lodging, food and clothing. The Personal Disaster Assistance Program is available throughout the City of Greater Sudbury on a twenty-four hour, seven day-a-week basis via the local Red Cross network of trained personal disaster assistance volunteers.

Walden Winter Carnival

Emergency Management participated in the Walden Winter Carnival (February 10) and brought the Mobile Command Unit to provide public education and awareness to residents. Residents were given a tour of the Command Unit and were provided with materials on Emergency Preparedness and Sudbury Alerts.

Greater Sudbury Paramedic Services Update Report

Presented to: Emergency Services Committee on April 18, 2018



This report aims to provide the City of Greater Sudbury Emergency Services Committee with an update on good news stories and relevant statistics as well as recent business activities within the Paramedic Services Division of the Community Safety Department.

Greater Sudbury Paramedic Services is responsible for the delivery of a performance-based paramedic service that is in compliance with legislative and regulatory requirements, ensuring pre-hospital emergency medical care and transportation to those individuals suffering injury or illness focuses on clinical excellence, response time performance, patient outcomes, patient satisfaction, continuous quality improvement, and a healthy work environment conducive to professional growth.

Good News Stories

Paramedic Services “Bearamedic” – Paramedics in the Community

Paramedic Services has added a new member to its Public Education/Relations team. The new mascot, currently named “Bearamedic” will be officially unveiled to the public during Paramedic Week in May. “Bearamedic” is a custom-built mascot that will bring a different perspective to what can be a scary business of lights, sirens and accidents by using cheer and a friendly face to highlight the fact that Paramedic Services are there to help. A naming competition will be held in the coming months. Please welcome “Bearamedic” when deployed to many of the public events attended to by Paramedic Services. “Bearamedic” is a great addition to community events and will be an ambassador for safety and first aid messages in many different media forms.



Walden Winter Carnival

On February 12th, Paramedic Services attended the Walden Winter Carnival. Paramedics and Emergency Vehicle Technicians (EVT's) were on hand to display the remote response unit “Gator”, Ambulances and Paramedic Response Units in addition to Emergency Management who showcased the Mobile Command Unit. Paramedics and EVTs indicated that the public was very interested in the equipment and the deployment of these resources.





Polar Plunge



On March 3rd, Paramedics participated in the “Polar Plunge” event at Ramsey lake boat launch. The event, is hosted by the Ontario Law Enforcement Torch Run, is a fun opportunity to support Special Olympics athletes by taking a flying leap... into very cold water. Paramedics raised \$715 for this event.

Paramedic Services were also on hand to provide emergency support in case of a medical emergency.

25th Annual Snowmobile Safety Program

Paramedic Services participated along with other community partners to deliver training at the 25th annual snowmobile safety program. Approximately 30 students attended the training program that was held at the Lively District Secondary School. Paramedics discussed the importance of safety and survival when out on the trails. This is the second year that Paramedic Services has been requested to provide training at this program.

Paramedic Services Statistics

January 1- February 28, 2018

	* Priority Dispatched						
Month	1	2	3	4	2018 TOTAL	2017 TOTAL	% Change
January	88	189	521	1401	2199	1982	10.9%
February	81	201	500	1320	2102	1923	9.3%

Data Source: Interdev iMedic

* Priority Dispatched Definitions

Priority 1	Deferrable/Non-Emergency	a non-urgent call which may be delayed without being physically detrimental to the patient
Priority 2	Scheduled Transfers	any call which must be done at a specific time due to the limited availability of special treatment or diagnostic/ receiving facilities. Such scheduling is not done because of patient preference or convenience.
Priority 3	Prompt Emergency	any call which may be answered with moderate delay. All patients classified in this priority group are stable or under professional care and are not in immediate danger.



Priority 4	Urgent Emergency	refers to situations of a life or limb threatening nature and time is crucial.
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Paramedic Operations

The operations section provides pre-hospital emergency medical care and transportation as well as non-urgent transportation between health-care facilities, the airport and residences.

Relief Platoon Superintendent Hiring

In January, six Relief Platoon Superintendents were hired and orientation training completed in February for most of this group. The Relief Platoon Superintendents are responsible to cover for full time Platoon Superintendents when they are otherwise away from work and they ensure that a safe, effective, efficient and high quality paramedic service is provided at all times. Key functions include; direct supervision of on-duty Paramedics, ensuring effective and coordinated paramedic responses in compliance with all legislation and standards, addressing staffing and operational issues, and ensuring the safety of all on duty staff. Relief Platoon Superintendents are an essential component of our management team and help maintain effective communications lines between the regular leadership team and frontline staff.

ASIST Suicide Prevention Program

In February, as part of our continued commitment to employee wellness Paramedic Training Officers attended a two-day Applied Suicide Intervention Skills Training (ASIST) Suicide Prevention Certificate Program at Laurentian University. This course is a pre-requisite to take the ASIST Instructor Program. Internal ASIST instructors will deliver the Self Talk Program this Spring to all Peer Support Network (PSN) team members, the Platoon Superintendent (PS) Group & Administration, while our Paramedics will be provided with this training program during our Fall 2018 Training.

Over the course of their two-day workshop, ASIST participants learn to:

- Understand the ways that personal and societal attitudes affect views on suicide and interventions
- Provide guidance and suicide first aid to a person at risk in ways that meet their individual safety needs
- Identify the key elements of an effective suicide safety plan and the actions required to implement it
- Appreciate the value of improving and integrating suicide prevention resources in the community at large
- Recognize other important aspects of suicide prevention including life-promotion and self-care



Winter Survival Training

Recently all front line Paramedics, Platoon Superintendents, Platoon Trainers and Emergency Vehicle Technician Group completed the online BICO “Baby It’s Cold Outside” training. BICO is an awareness and educational program about hypothermia and cold injuries developed specifically for first responders.

The Platoon Superintendents, Platoon Trainers and Emergency Vehicle Technician Group then also attended a two-day GPS/Wilderness Survival Training session. The training covered GPS/Wilderness Survival, GPS, compass, and Mapping skills. These additional skills assist Paramedic Services when responding to requests for service in the many remote areas within our City.

Professional Standards

Professional Standards is responsible for the delivery of quality assurance programming consisting of clinical and service delivery auditing with the goal of improving patient safety and ensuring high quality clinical care thereby reducing risks. By also managing the electronic patient care record system, including quality assurance oversight, Professional Standards coordinates legal proceedings and maintains compliant handling of patient medical records within various legislative and regulatory requirements. Lastly, Professional Standards represents Paramedic Services amongst stakeholders within the community and participates in research studies to advance and ensure integration into the health-care framework.

Opioid Surveillance Working Group

Paramedic Services is part of a community-working group tasked with development of an early alert system for opioid related emergencies in our community. Members of this group include Greater Sudbury Paramedic Services, Health Sciences North, Greater Sudbury Police Services and Public Health Sudbury and Districts. Paramedic Services plays a major role on this working group in that we are often the first health care providers to note an increase in specific community health related emergencies. The ability for this group to utilize Paramedic Services enhanced monitoring of opioid emergencies as an alert for our community allows community service agencies and opioid users to be informed, prepared and empowered with real time knowledge of local opioid misuse trends.

The following is our most recent statistical update on opioid tracking in our community. As noted in a previous Update Report the overall number of patients in suspected opioid overdose still represents an extremely small number of our overall call volume. In regards to Paramedic administration of Naloxone (Narcan) a recent update to the Advanced Life Support (ALS) Standards allows Paramedic use of Naloxone without the need to seek advice from an emergency physician prior to administration. This, coupled with the specific documentation code for opioid overdose tracking which started on April 1, 2017, allows better monitoring of this issue. Data prior to April 2017 was reviewed to ascertain whether the overdose was possibly opioid in nature.



Paramedic Services Suspected Opioid Calls				
	2015	2016	2017	2018
January	1	4	4	3
February	4	1	7	10
March	5	2	5	
April	7	3	4	
May	7	1	2	
June	4	11	0	
July	6	3	14	
August	3	9	9	
September	6	6	12	
October	4	10	17	
November	6	9	12	
December	5	7	6	
TOTAL	58	66	92	13

Paramedic Administered Naloxone				
	2015	2016	2017	2018
January	0	2	0	1
February	1	1	2	7
March	0	0	1	
April	2	1	0	
May	2	2	0	
June	0	0	1	
July	0	0	5	
August	1	3	4	
September	0	2	7	
October	1	3	7	
November	2	0	9	
December	1	1	3	
TOTAL	10	15	39	8

Clinical Diversion

Under a pilot program with Health Sciences North Centre for Prehospital Care (HSNCPC) and the Ministry of Health and Long-Term Care (MOHLTC), Paramedics are able to offer an option of transport destination to appropriate 9-1-1 caller patients that divert them from the emergency department. This assists our health care system, in-line with the MOHLTC's Patients First Act, by ensuring the right patient receives the right care at the right time. The options of destination are either the normal protocol to the Emergency Department; HSN Withdrawal Management Services; HSN Crisis Intervention Services or HSN Crisis Intervention Mobile Team Response at the patients' home.

Year to date, we have seen the following data in relation to this diversion program:

- **12** to Withdrawal management services
- **5** to Crisis intervention services
- **4** to Crisis intervention mobile team

Logistics

The logistics section provides cleaning, management and maintenance of the Paramedic vehicle fleet, city heliports, specialized vehicles, and patient care equipment with the goal of ensuring vehicles and equipment are sanitized and stocked in accordance with all legislative requirements.

Workplace Improvement Project Updates

Project Safe Cab – As per legislation, all ambulance equipment must be secured for safe transport. An innovative and cost effective solution to secure items in the front driver's compartment has been developed and installed in the fleet.



Ambulance Patient Compartment – Improved cabinetry doors in the rear patient compartment of the fleet is also underway. These upgrades allow improved storage methods of securing equipment in order to keep our Paramedics, patients, and the public safe.

Work is underway with IT, Fleet and our current asset and inventory software provider (OPIQ), to review a fleet software program for Paramedic Services to more efficiently service our vehicles and provide exceptional record keeping.

A Request for Tender (RFT) was awarded to the vendor who will provide medical equipment dispensing cabinets at our satellite stations. This technology will integrate with our asset and inventory system further streamlining our inventory system. Installation expected in the next 3-5 weeks.

Demers Ambulance Inc., Project FX

Greater Sudbury Paramedic Services, and representatives from six other Paramedic Services from different regions of Ontario, along with teams of engineers and design consultants are participating in a provincial project with Demers Ambulance Inc. providing input in the design and development of a new ambulance for Ontario. Demers Ambulance is our ambulance vendor of record and one of only two certified ambulance manufacturers able to sell ambulances for the Ontario market. With the vast market share of ambulances within Canada, Demers is a leader in technological advancement in their industry. We have been invited to participate in Project FX due to our long history of working with Demers on design innovation. Front line Paramedics will participate in key steps in the design, ensuring the user and their needs are at the core of the design. We look forward to the results of this project.

Paramedic Services Training Section

Training involves the development and delivery of paramedic education that includes continuing medical education, operational training, new hire orientation, paramedic reintegration, and remedial education to address identified gaps in knowledge, skill or clinical decision making. Additionally, participation on national and international clinical research initiatives aimed at improving pre-hospital clinical care.

Training Programs

Our training section delivers training for paramedics and logistics staff and provides advice and training programs to the Peer Support Team. Below is a summary of the various training programs our training section has developed and or delivered within this reporting period.

- BICO (Baby its Cold Outside) On-line Training Certificate: educational videos and self-assessment modules on hypothermia and cold related injuries for responders.



- GPS & Wilderness Survival Training: Ground Search & Rescue, mapping, compass & GPS, cold-water rescue and adventure smart training for improving safety for remote responses with our new remote response unit.
- Weed Out the Risk Program: Harm reduction and cognitive behavioral therapy based program associated with the risks of using marijuana and driving.
- Driver Remediation for Paramedics/EVTs, which focuses on preventable collisions and safety of workers and the public.
- Mental Health Presentation for Emergency Vehicle Technicians: Road to Mental Readiness follow up and review of the Peer Support Team roles.

Community Paramedicine

The Community Paramedicine section of Paramedic Services utilizes Paramedics in non-emergent work providing home visits, clinical interventions and preventative health initiative assisting our most vulnerable citizens to remain independent as they age healthfully. This work has shown to reduce demands for 9-1-1 calls, emergency department visits and hospital admissions.

Care Transitions Community Paramedic Program

The Care Transitions Community Paramedic (CTCP) Program has been active since January 12, 2015 and has seen 436 Patients since inception. This program is provided by two full-time specially trained Advanced Care Paramedics who are able, through an expanded scope of practice, to provide education and medical interventions for three targeted chronic diseases (Congestive Heart Failure, Chronic Obstructive Pulmonary Disease and Diabetes). The goal of this program is to improve our patients' quality of life at home, decrease reliance on emergency response of Paramedic Services and decrease re-admissions to the hospital. The following results represent details from January 1, 2018 to February 26, 2018:

- **187** current active patients received **218** scheduled home visits between January and February 2018, broken down as follows:
 - Phone Consultations = **25**
 - Initial Visits = **21**
 - Follow-up = **152**
 - Just in time (JIT) Visits = **20**
- Just in Time Visits (JIT) are more urgent visits that occur when the patient contacts the CTCP outside of the patients' regular scheduled appointment. Patients are usually requesting assistance due to a symptom or an exacerbation of a medical condition. The paramedic will see this patient immediately before any of the scheduled appointments for the day.



- The Care Transitions Program closed four days in January and three days in February due to Paramedic illness and bereavement leave. Staffing is a challenge this program faces, however our goal is to train new staff in Q2.

Health Promotion Community Paramedic Program

The Health Promotion Community Paramedic (HPCP) program is a compilation of various prevention and health education initiatives that work to ensure our most vulnerable populations are linked to community health services and can obtain healthy lifestyle education and prevention information. The initiatives provided include Paramedic Referrals; Wellness Clinics targeting older adults and homeless populations; Rapid Mobilization Table (RMT) response; collaboration with community partner groups to work towards healthy and safe communities; case management of frequent 9-1-1 users and annual Free Bystander Hands-Only CPR training sessions for our citizens. The goal of this program is to ensure that our vulnerable populations are able to remain living healthfully at home for longer without reliance on Paramedic Services or the local emergency department. The following results represent details from January 1, 2018 to February 26, 2018:

- 40 Paramedic Referrals to NE LHIN Home and Community Care (formerly CCAC)
- 16 Shelters Clinics performed
- 16 Older adult Clinics (CP@Clinic) performed
- 12 RMT working group responses & 2 presentations to RMT by Paramedic Services
- 8 Community Health Concern Reports

Moving forward the HPCP program is looking to expand older adult clinics into the community of Capreol, and is awaiting finalization of the McMaster University Collaborative Research Agreement. We are also working towards becoming a part of a frequent 9-1-1 user program. This program is a sister program of CP@Clinic and is called CP@Home, which aims to assist those who frequently rely on Paramedic Services to assist with unmet needs at home. Through this initiative, the HPCP will provide assessments, education and community program links/referrals to lessen the reliance on the emergency health care system and refocus help from community health care services.

Bystander Hands-Only CPR Blitz

Every year the Health Promotion Community Paramedic Program provides Free Hands-Only CPR and External Defibrillator (AED) training. This initiative is in partnership with the Heart and Stroke Foundation. We utilize their Family and Friends education program which teaches bystander hands only CPR and we also share their health promotion and education pamphlets. The Heart and Stroke Foundation handles all of our bookings for the CPR Blitz sessions and attempts to attend each session to assist with registration of the participants.

The objective of this initiative is to impart, in our citizens, the importance of initiating chest compressions and utilization of an AED as soon as possible, if available, to help to save the life of

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someone suffering a sudden cardiac arrest (SCA). As per the Heart and Stroke Foundation data, for every minute that passes without chest compressions being performed, the probability of survival from the sudden cardiac arrest decrease by 10%!

Each session is approximately two hours long, teaching the basics of chest compressions and AED use. Artificial Respirations or rescue breathing is left out of this level of training as it is a barrier for many to not initiate chest compressions; some feel "mouth to mouth" performed on a stranger would lead to disease contraction or it is something that they are just not comfortable with.

Since the inception of the free Hands-Only CPR Blitz sessions in 2014, Greater Sudbury Paramedic Services has educated 944 citizens this life saving skill.

As of the writing of this Report, during the 2018 Bystander Hands-Only CPR Blitz season we have taught 208 participants in 10 of the 13 scheduled sessions.

Greater Sudbury Fire Services Update Report

Presented to: Emergency Services Committee on April 18, 2018



This report aims to provide The City of Greater Sudbury Emergency Services Committee with an update on good news stories and relevant statistics as well as recent business activities within the Fire Services Division of the Community Safety Department.

Fire Services is responsible for delivering proactive public safety and response programs to prevent emergencies wherever possible and to preserve and enhance life, property, and the environment where response is required.

Good News Stories

Fire Services featured at Rainbow Schools Heritage Fair

Brooklyn Basso, student at Northeastern Elementary School, researched her Heritage Fair project on Greater Sudbury Fire Services; Brooklyn's grandfather was a Firefighter with the former Town of Valley East. On February 24, Brooklyn was given a tour of Fire Services and access to historical information and vintage firefighting equipment that is on display at Main Station.

On March 1, Brooklyn's project was judged at the school level where she was chosen to proceed to the city wide Heritage Fair!



Fire Services and Water/Wastewater coordinated Confined Space Training.

Over a period of two weeks in January and early February, Fire Services and Water/Wastewater collaborated to provide confined space rescue training to 116 Water/Wastewater employees. This training initiative is a result of recent enhanced training within Fire Service to offer Confined Space



Response in the community. Water/Wastewater has worked in partnership with Fire Services, assisting in the funding for the creation of this necessary program. As a result of this very successful co-training, fire responders and water/wastewater employees have gained an intimate knowledge of each other's equipment, training, skills and capabilities which will be invaluable in the event of an emergency incident.



Fire Operations

Fire Operations are the response branch of the Fire Service, responding to emergency and non-emergency incidents. Response incidents fall into four general categories; medical responses, technical rescues, hazardous material responses, and of course fires. Additionally, Fire Operations takes part in fire response preparation activities such as Fire Safety Walkthroughs, Tactical Pre-Plan activities, and training activities. The Operations group is made up of both Volunteer and Career responders.

Fire Services Response Statistics

January 1, 2018 – February 28, 2018

Major Fire Loss Incidents		
Date	Location	Estimated Loss
January 3, 2018	Laurier St West, Sudbury	\$150, 000
February 8, 2018	Glendale Ct, Sudbury	\$225, 000
February 9, 2018	Ferguson Ave, Capreol	\$130, 000
February 10, 2018	Radar Rd, Hanmer	\$115, 000
TOTAL Estimated Loss for all 37 Fires		\$1, 036, 000



January 1, 2018 – February 28, 2018

Incident Type	2018 Totals	2017 Totals
Fires	37	35
Fire Alarms	203	174
Vehicle Collisions	230	113
Open Air Burning Response	8	2
Medical Assistance	119	105
Other Incidents (assisting other agencies, no incident found on arrival, etc.)	228	195
Total	825	624

Data Source: Fire House

Public Fire Safety Education/Fire Prevention

Public Fire Safety Education and Fire Prevention work hand in hand to proactively deliver programs aimed at ensuring safe communities. Public Education provides directed and focused fire safety programs to reduce risk where fire code enforcement has a diminished impact and where emergency response is delayed due to the city's geography.

Fire Prevention conducts inspections, and enforces various sections of municipal by-laws and provincial legislation. The section's goal is to reduce the possibility and severity of fire or explosion, by providing tools, resources and leadership to the community, with a focus on disadvantaged and vulnerable citizens.

Apartment Building High Rise Fire Safety Campaign

Prompted by a few apartment fires the last few months, public education has taken a step to increase awareness and educate tenants in high rise apartment buildings on what to do in the event the fire alarm goes off in their building. Beginning early March 2018 this initiative will commence at 256 Caswell Dr. Public Fire Safety Education staff will be present to answer any questions and will have handouts for tenants regarding fire safety in high rise apartment buildings.

March also kicks off the season for the home show at the Sudbury arena as well as the cottage show in Garson, which will both have Public Fire Safety staff in attendance.

Follow @CGSFireServices on twitter for other fire safety messages as well as notification of events where Fire Services will be attending throughout the year.



Keeping Our Community Fire Code Safe

Fire prevention officers have been busy inspecting and investigating request and complaint inspections throughout the City with 224 inspections being conducted so far this year. Fire Prevention continuously works with landlords and the public to ensure that commercial property is maintained in such a manner that promotes fire safety for all, including tenants' well-being. The Fire Prevention section is committed to not only deliver professional, and consistent property inspections under the Ontario Fire Code, but is also available to assist and answer any questions or concerns that the citizens of Greater Sudbury may have.

Fire Fleet/Logistics

Fleet provides logistical and maintenance support to ensure fire vehicles, equipment and buildings are maintained and repaired in accordance with applicable legislation, regulations, policy and manufacturers' suggested standards.

Current Overview

The Fire Services Fleet and Logistics Section is in charge of the care and maintenance of all of the buildings, apparatus, equipment, Personal Protective Equipment, and supplies for the service. They coordinate the maintenance of fire apparatus with the City's Fleet Garage, and for the maintenance of the fire and paramedic services stations with City's Assets Management Section. Currently, Fire Services Fleet and Logistics is continuing to assess the current stations in reference to designated substances, and ensuring that the prioritized remediation is scheduled for mitigation.

The Fleet Section is also in the process of replacing several of the large fire services apparatus, as approved during the Capital Budget process.

Training

Training involves the development and delivery of fire services related training programs, including recruit training, officer development, emergency care, equipment operator training, fire suppression, and fire prevention. They also oversee operation of fire training grounds.

Current Overview

The Fire Services Training Section currently consists of a Chief Training Officer, and three Training Officers. This section directs the training for all 108 career and 265 volunteer firefighters. Training not only speaks to the actual hands-on delivery to the fire fighters, but also includes research into industry best practices, program development, and collaboration with outside training agencies. Further, the Training Section ensured that all departmental training conforms to all regulatory and legislative oversight.



Potential FPPA Changes

Due to legislative changes to firefighter training on the horizon, the Training Section has been forced to review all departmental training to review the conformance with the applicable National Fire Prevention Association (NFPA) Standards. Fire Departments throughout Ontario have been notified by the Office of the Fire Marshall and Emergency Management (OFMEM) which strongly recommends all Technical Rescue training in the Province conform to the relevant NFPA Standard(s).

OFMEM Communique (2018-02) has significant impact for the Technical Rescue training for all volunteer and career firefighters at the Greater Sudbury Fire Service. We currently offer the technical rescue service types of: Vehicle Extrication, Water and Ice Rescue, Swift Water Rescue, Rope Rescue (High and Low Angle), and Confined Space Rescue.

Boat Specific Training

The Training Section is currently delivering boat specific training required by Transport Canada for commercial boat operation, as part of the ongoing maintenance of the Water and Ice Rescue Program. The training consists of three parts; the Marine Emergency Duties (MED-A3), the Radio Operator Certification-Marine (ROC-M), and the Small Vessel Operator Proficiency (SVOP). Combined, these three required courses represent 40+ hours of training for each student.

For Information Only

Proposed Changes to Fire Protection and Prevention Legislation

Presented To: Emergency Services Committee

Presented: Wednesday, Apr 18, 2018

Report Date: Wednesday, Mar 28, 2018

Type: Correspondence for Information Only

Resolution

For Information Only

Relationship to the Strategic Plan / Health Impact Assessment

This report refers to the strategic priorities of: Quality of Life and Place, and Responsive, Fiscally Prudent, Open Governance.

Report Summary

This report aims to provide information to the Emergency Services Committee on recent changes being proposed by the Ministry of Community Safety and Correctional Services (MCSCS) to the Fire Protection & Prevention Act 1997 (FPPA).

There are three proposed regulatory changes being considered:

1. Mandatory training and certification for firefighters; 2. Community Risk Assessments; and 3. Public Reporting on Fire Responses.

These changes, if they proceed as proposed, will bring significant impacts to Greater Sudbury Fire Services; most notably, increased training costs, time and effort, and issues with recruitment and retention.

The Ministry of Community Safety and Correctional Services (MCSCS) sought public consultation on the proposed regulations between January 25th and March 18th, 2018. The Community Safety Department submitted comments during this process expressing their support of the positions of both the Association of Municipalities of Ontario (AMO) and the Ontario Association of Fire Chiefs (O AFC).

Financial Implications

Signed By

Report Prepared By

Michael MacIsaac
Executive Deputy Chief of Community Safety
Digitally Signed Mar 28, 18

Division Review

Graham Campbell
Interim Fire Chief
Digitally Signed Mar 28, 18

Financial Implications

Jim Lister
Manager of Financial Planning and Budgeting
Digitally Signed Apr 3, 18

Recommended by the Department

Joseph Nicholls
Interim General Manager of Community Safety
Digitally Signed Mar 28, 18

Recommended by the C.A.O.

Ed Archer
Chief Administrative Officer
Digitally Signed Mar 28, 18

There are no financial implications at this time as the legislation has not yet passed final reading, and the program has not been clearly defined.

Once the program has been defined and the legislation is passed, a report will come to Emergency Services Committee detailing the resources required to implement.

MCSCS Proposed Changes to Fire Service Regulations

Managers' Report Presented to: Emergency Services Committee on April 18, 2018

Background

The Ministry of Community Safety and Correctional Services (MCSCS) has proposed changes to the Fire Protection & Prevention Act 1997 (FPPA). The three proposed regulatory changes being considered include: mandatory training and certification for firefighters; community risk assessments; and public reporting on fire response. These regulatory changes arose as a result of MCSCS's establishment of the Fire Safety Technical Table. The mandate was to address public and firefighter safety based on coroner's inquests over the last few years. The Table included representatives from municipalities, firefighter associations and fire departments, including composite and volunteer fire departments.

The Ministry developed draft regulations to address the recommendations from the Table and released them for public consultation in January and February of this year. If these changes proceed as proposed, it will bring significant impacts to Greater Sudbury Fire Services. The Community Safety Department submitted comments during this process expressing local concerns as well as support of the positions of both the Association of Municipalities of Ontario (AMO) and the Ontario Association of Fire Chiefs (OAFIC). These submissions are attached in the Appendix for your information.

The proposed legislative changes to the FPPA are in line with the National Fire Protection Association (NFPA), an international trade organization that creates and maintains private, copyrighted standards and codes for usage and adoption by local governments. NFPA's code development process is open and consensus-based, meaning that anybody can participate in the development of these documents. More than 9,000 volunteer committee members with a wide range of professional expertise periodically review all NFPA codes and standards. The three proposed changes to the legislation are summarized below.

1. Mandatory Certification and Training for Fire Protection Services

The MCSCS has proposed the establishment of mandatory certification requirements, as set out by NFPA, for all new firefighters (both career and volunteer). The level of certification is dependent on the types of skills and services being provided and is laid out for many different employees within the fire service including: suppression firefighters, pump operators, technical rescuers, fire officers, and fire educators. These certification requirements would come into force January 1, 2019 with the exception of technical rescue certifications, which would come into force January 1, 2020. The MCSCS is also proposing that the mandatory certification requirements be applied to existing career and volunteer firefighters currently working in fire department, through a grandfathering and testing process, which would come into force on January 1, 2020.

The proposed legislation does not differentiate between career and volunteer firefighters. Within the legislation a firefighter is a firefighter. If they are going to perform a certain level and type of service, they must be trained and certified to do so under the applicable NFPA standard.

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2. Community Risk Assessment

The proposed Community Risk Assessment regulation details a process to identify, analyze, evaluate and prioritize public safety risks which should form the basis of City decision-making on the provision of fire protection services, fire safety education and fire prevention programs.

The risk assessment legislation contains nine profiles that must be completed within five years of the date of enforcement of the regulation (January 1, 2019) and must be reviewed annually and updated to properly reflect the current profiles. There will be a standard mandatory reporting form which will be set out by the Ontario Fire Marshall (OFM).

3. Public Reporting on Fire Responses

The public reporting regulation is set to be in force as of January 1, 2020, with a goal to increase transparency and accountability by ensuring that fire services submit data on a number of response time criteria. These reporting measures would be reported to Council prior to submission to the OFM who will then publish publically in a manner yet to be determined. While not implicitly stated within the regulation, as was done regarding firefighter certification, the proposed reporting standards are based on the NFPA standards. The NFPA 1710 standard is for full-time fire services and the NFPA 1720 standard is for volunteer and composite fire services. Since Greater Sudbury has a composite fire response model, we may need to use both standards depending on response zone and stations. Additionally, there are response times listed for fire departments to report on emergency medical responses.

Analysis

While the Community Safety Department supports the work of the Fire Safety Technical Table and also recognizes that regulatory change is a necessary step in the modernization of Ontario's Fire Services, we have identified several concerns with the proposed legislative changes related to firefighter certification:

- Training Costs
- Training Capacity
- Time-lines
- Recruitment and Retention of Volunteer Firefighters
- Technology Support (e-learning at stations)
- Provincial liability indemnification
- Two-year intern application
- Grandfathering process

We have also identified some concerns regarding the proposed Community Risk Assessments and Public Reporting requirements but in those cases, the impact to the City is not as significant as the Firefighter Certification requirements.

It is important to understand that each municipality has the ability to not only determine whether fire suppression services are established but to also set levels of service. So while the proposed changes in

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the FPPA direct minimum training requirements for firefighters, each municipality has the ability to determine service levels within the confines of the community. However, the proposed legislative changes mean that if the City wishes to continue to provide established suppression services and/or technical rescue such as water rescue or vehicle extrication, then CGS firefighters will need to be trained and certified to the appropriate level.

The standard to which a front-line firefighter must be certified to is NFPA 1001 which has two components: Firefighter Level 1 and Firefighter Level 2. Level 1 certification is deemed to be the standard for fire suppression activities for exterior attack only, while Level 2 is intended for both interior and exterior attack. The following table details the Mandatory Certification within the proposed legislation.

Item	Column 1 Fire protection service	Column 2 Certification standard
1.	Fire suppression activities, if the level of service provides for exterior attack only	NFPA 1001, "Standard for Fire Fighter Professional Qualifications", 2013 Edition, Level I
2.	Fire suppression activities, if the level of service provides for exterior and interior attack	NFPA 1001, "Standard for Fire Fighter Professional Qualifications", 2013 Edition, Level II
3.	Pump operations	NFPA 1002, "Standard for Fire Apparatus Driver/Operator Professional Qualifications", 2017 Edition, Chapter 5
4.	Supervise other firefighters	NFPA 1021, "Standard for Fire Officer Professional Qualifications", 2014 Edition, Level I
5.	Develop, implement or deliver a public education program and supporting materials	NFPA 1035, "Standard on Fire and Life Safety Educator, Public Information Officer, Youth Firesetter Intervention Specialist and Youth Firesetter Program Manager Professional Qualifications", 2015 Edition, Chapter 4, Level I
6.	Fire prevention inspections or plans examination activities	NFPA 1031, "Standard for Professional Qualifications for Fire Inspector and Plan Examiner", 2014 Edition, Level I
7.	Training courses for fire protection services	NFPA 1041, "Standard for Fire Service Instructor Professional Qualifications", 2012 Edition, Level I
8.	Dispatch fire department resources (personnel and equipment)	NFPA 1061, "Professional Qualifications for Public Safety Telecommunications Personnel", 2014 Edition, Level I
9.	Fire investigation activities	NFPA 1033, "Standard for Professional Qualifications for Fire Investigator", 2014 Edition
10.	Technical rescue activities	NFPA 1006, "Standard for Technical Rescue Personnel Professional Qualifications", 2017 Edition, in accordance with the level of service provided
11.	Hazardous materials response at the Technician Level	NFPA 1072, "Standard for Hazardous Materials/Weapons of Mass Destruction Emergency Response Personnel Professional Qualifications", 2017 Edition

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Training Costs

Training for career firefighters would be performed on duty and thus no additional costs would be incurred for training hours; however, volunteer firefighters would require additional training hours above the existing hours. To certify a new volunteer to NFPA 1001 (Level 1&2) within a two-year timeframe, a volunteer would need to attend and be paid for an additional hours at a cost of \$2,706 per firefighter. With an annual intake of nearly 40 volunteer firefighters per year, this would result in an additional cost of approximately \$108,240 per year for the City of Greater Sudbury. The following table details these requirements and the associated costs.

NFPA 1001 New Recruit Training	Level 1 (exterior)	Level 2 (interior)
Total Training Hours	120	80
New Recruit Training	*20	-
Annual Minimum Training Requirements per CBA	**24	**24
Additional Training Required Per New Recruit	76	56
Average probationary rate & volunteer firefighter rate	\$ 20.50	\$20.50
Total cost per new recruit (over 2 years)	\$1,558	\$1,148
Average number of new recruits per year (cohort)	40	40
NFPA 1001 Certification Cost per level	\$62,320	\$45,920
Total Certification Training Cost per cohort		\$108,240

* Approx. 20 hours of new hire training is dedicated to corporate training (i.e. health and safety, WHMIS, etc)

** Minimum volunteer training required within the collective agreement (they may attend more).

Estimated costs related to Technical Rescue will be in addition to the NFPA 1001 Level 1&2 training (200 hours). For example, nine of the City's fire stations currently offer Vehicle Rescue. To certify to the Operational level, allowing firefighters to respond utilizing a piece of equipment such as the "jaws of life" would require an additional 40 hours of training per firefighter for a total cost of \$136,776.

Maintenance of the current technical rescue capabilities within our stations are noted in the table below and would require an additional 200 hours of training per firefighter at a total cost of \$235,176 for current personnel. This is in addition to costs associated with the base firefighter training requirements previously identified (i.e. NFPA 1001). The following table details only the costs associated to technical rescue under Item #10 Technical Rescue of the Mandatory Certification.

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NFPA Standard:	Hours of Training	# of Stations	# of Career	# of Volunteers	Training Costs
1006 (8) - Vehicle Rescue: Operations Level	40	14	108	139	\$136,776
1006 (9) - Animal Rescue: Technician Level	20	7	108	25	12,300
1006 (16) - Surface Water Rescue: Technician Level	20	7	108	25	12,300
1006 (19) - Ice Rescue: Technician Level	30	7	108	25	18,450
1006 (21) - Watercraft Rescue: Technician Level	30	7	108	25	18,450
1006 (22) - Floodwater Rescue: Technician Level	60	7	108	25	36,900
* Assumes pre-requisites are completed					
TOTAL	200				\$ 235,176

The increased costs associated with the proposed regulatory changes are substantial. In order to offset the costs being downloaded by the Province to our municipality, the Community Safety Department supports AMO's recommendation for adequate provincial funding to support the implementation and certification compliance of firefighters in meeting the new standards so that this does not become an unfunded mandate.

Training Capacity

The Greater Sudbury Fire Service only has three training officers to provide training and testing to nearly 400 firefighters. The time requirement to meet basic certification for new firefighters will be substantive. On average, each year the Service recruits approximately 40 firefighters to fulfill career and volunteer positions. The proposed standards will significantly increase the amount of time and cost to complete recruitments. This may require additional full time staffing and associated funding for the Fire Services Training Section which is being investigated in more detail.

Timelines

Given the amount of time and resources necessary to implement the changes required by the proposed legislation, along with suggestions to clarify some of the language, we support the recommendation by AMO and OAFB to extend the deadlines. Consideration of the municipal political landscape with an upcoming election and resulting delay in the adoption of the 2019 budget until after the end of this year must be taken into account. Additionally, current tax rates have already been approved through the 2018 budget process and there is no mechanism to adjust in-year. Without the time to establish proper funding through the normal budget process, the Service will not be able to achieve compliance within the timelines being proposed.

Lastly, certifications for technical rescue disciplines are complex and require the completion of a number of prerequisites. This means that compliance would not be achievable across the Fire Service within the proposed the timelines. Additionally, some materials for the technical rescue certification currently do

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not exist. The additional recommended time will allow municipalities to complete the necessary planning, training and funding decisions, prior to the compliance period.

Recruitment and Retention of Volunteer Firefighters

As one of the largest composite fire services in the Province, Greater Sudbury currently has over 260 volunteer firefighters, and shares AMO's concern that if this regulation is instituted, the substantial time commitment required for certification will further erode the ability to attract, recruit and retain volunteer firefighters. With an annual attrition rate of 15%, the Service needs to recruit 40 new volunteer firefighters each year to maintain the current complement. Requiring a commitment of 200 hours to attain NFPA 1001 certification may be too much for volunteer firefighters to dedicate and thus could be detrimental to both the attrition and recruitment rates. These training hours are related specifically to firefighter certification and do not address additional hours required for technical rescue and corporate training (i.e. health and safety).

Technological Support & Other Concerns

The ability to support the proposed changes over a short time period would require significant investment in technology to support an online Learning Management System (LMS). The current infrastructure within many fire stations would not support this learning model and substantial funding would be required to enable volunteer firefighters to obtain certification.

We have also noted other areas of concern within our submission to the MCSCS many of which align with AMO and the OAF. In summary, we believe the new internship period should be expanded to allow for Officer level positions to have the same advantage. We agree with AMO's concern of the significant risk of potential liability associated with not certifying under the grandfathering clause and only requiring certification for new hires. We further agree with the OAF position, that the grandfathering clause should be reevaluated, "to be made as broad as possible with updated eligibility so all current fire service personnel could be grandfathered to their current level". The Department also supports AMO's position in asking for provincial liability indemnification for all municipal governments who comply with the new regulations, similar to what occurred in the Province of Quebec. This would help to protect the City of Greater Sudbury for all existing firefighters not certified to the new mandatory standard for all categories of fire operations.

Community Risk Assessment

The Community Safety Department supports OAF's position with respect to community risk assessments. Municipal Property Assessment Corporation (MPAC) data should be used to classify building usage and amendments should be made to existing municipal agreements regarding what information is available to fire services. Finally, reporting against provincial trends would be more appropriate than making comparisons to other "like" municipalities.

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Public Reporting on Fire Responses

The Community Safety Department shares both AMO's and OAF's positions on the proposed public reporting regulation. Until the Ontario Standard Incident Reporting (SIR) system is overhauled and inconsistencies are corrected, the goal of standardization outlined will be unachievable and municipalities will continue to struggle with flawed data results. There are also many ambiguous and uncertain terms and definitions contained within the proposed public reporting legislation. It is also apparent that the reporting standards within the legislation align with NFPA 1710 and 1720, however without reference to such and with a glaring omission in allowances for local populations, densities and distances; the regulation lacks consistency and accuracy. Lastly, within the proposal are reporting metrics that are already the legislatively mandated responsibility for Paramedic Services within Ontario. This being the case, these measures should not be part of Fire Service reporting.

Conclusion/Next Steps

While the Community Safety Department supports the intent of this legislation to improve firefighter and community safety, the speed in which this regulatory change being proposed, creates a significant challenge for the Municipality. Representing municipalities and their fire services, both AMO and the OAF consultative submissions are in alignment with each other and are reflective of concerns for Greater Sudbury. Together, all are recommending a series of amendments to the proposals and state that without provincial support, in terms of funding and resources, compliance may not be achievable within the proposed timelines. With a lack of time for preparation, municipalities may be forced to make some difficult decisions regarding service levels. The Fire Service continues to monitor this evolving issue to determine what if any amendments come out of the consultation process. In addition, we continue to evaluate training options that would allow us to deliver firefighter certification training within the new legislative framework, if passed.

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<http://www.ontariocanada.com/registry/view.do?postingId=26806&language=en>

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Sent via e-mail: marie-france.lalonde@ontario.ca
registryfeedback@ontario.ca

March 7, 2018

The Honourable Marie-France Lalonde
Ministry of Community Safety and Correctional Services
George Drew Building, 18th Floor
25 Grosvenor Street
Toronto, Ontario M7A 1Y6

RE: Comments on Draft Fire Regulations (Proposal No: 18-CSCS002 & 18-CSCS004)

Dear Minister Lalonde:

The Association of Municipalities of Ontario (AMO), representing municipal governments who are the employers and funders of fire services in Ontario, would like to provide our comments on three draft regulations to the *Fire Protection and Prevention Act, 1997* (FPPA), that were recently released by the Ministry of Community Safety and Correctional Services (MCSCS):

1. Firefighter Certification;
2. Community Risk Assessment; and
3. Public Reports.

Municipal governments are in general supportive of the efforts to modernize the FPPA and enhance the professionalism of the Fire Services that serve Ontario communities. MCSCS established the Fire Safety Technical Table (Table) in January 2017, to provide advice to the Ministry on current and future fire safety challenges and opportunities, identify priorities for action, and support the development of evidence-based recommendations that will enhance fire safety in Ontario.

Since the Table was established, AMO has been attending these monthly meetings with the Ontario Association of Fire Chiefs (O AFC), Toronto Fire Services, the Ontario Professional Fire Fighters Association, and the Fire Fighters Association of Ontario, to provide informed input to your Ministry officials on minimum standards for professional fire service qualifications. There was not always consensus at the Table; however, there were active discussions. The Table's input was considered by MCSCS staff towards the development of these draft regulations, for your final review and approval.

Local elected officials across Ontario share in the Province's commitment to keep our communities safe by providing public and firefighter safety, and are interested in finding ways to modernize fire service delivery in this province. However, as the sole funders of fire

services in Ontario, we are recommending that the Ministry adopt key amendments to these proposed regulations before they are finalized as well as providing explicit provincial implementation resources and measures.

We are very concerned about the fiscal impacts of these proposed regulations and would ask for a public provincial commitment, prior to these regulations receiving approval, for adequate financial funding for implementation so that they do not become an unfunded mandate. We understand that MCSCS will be surveying fire services shortly to get a better handle on the resource needs for successful implementation, particularly with respect to the draft Firefighter Certification regulation, however, we need an upfront commitment from the Province that appropriate funding will be provided.

We are also very aware that many small municipalities will not be able to maintain a viable volunteer fire service if the proposed Firefighter Certification regulation is instituted, even if provincial funding is provided to assist implementation. These volunteer firefighters are deeply committed to their communities, however, the imposition of mandatory training and examination requirements may demand too much for too little return from them. These municipal governments will likely soon face the hard and public discussion of what fire services, beyond the FPPA required fire safety public education and fire prevention, can be realistically provided to their community.

We, along with the OAF, are asking that the draft Public Reports regulation be put on hold until an overhaul of the Ontario Standard Incident Reporting (SIR) is completed through the Table. Further, the current draft Public Reports regulation is not drafted well, has ambiguous language within it, and appears to be setting service level expectations for volunteer fire service response times (either within a composite service or a volunteer) as if they were full-time urban fire services. It is a municipal government's responsibility to set the level of fire services, including reporting standards. This draft regulation has been a challenging matter at the Table with a very short time for consideration and discussion. We are asking you directly that this proposed regulation not be approved at this time, even if some of the language is clarified in the next few weeks.

Further, we are frustrated and disappointed to see that MCSCS is proposing that medical response times by municipal fire services are included in the draft Public Reports regulation. AMO's and municipal governments' strong opposition to the provincial proposal to have fire-medical pilots is well known. The inclusion of medical responses in the draft regulation could be seen as a back-door measure to provide additional support for a fire-medical program in Ontario. It is exceedingly problematic that this draft regulation includes an Advanced Life Support response time for fire when this doesn't currently exist in Ontario along with a different AED onsite response than is legislatively required for paramedics, fire services, and citizen responses. We would respectfully demand that no medical response times are included in a future Public Reports regulation for municipal funded fire services.

As you will hear from our municipal members and the OAF, implementing these fire regulations will take substantial effort, time, and financial resources to ensure that they can comply with the legislation by the proposed commencement dates. While the proposed

Firefighter Certification regulation does state that some of the mandatory certification to be required for only new hires, it is our concern that there is great liability risk to a municipal government if it does not certify to the new mandatory standard for all categories of fire operations.

Therefore, AMO is asking that provincial liability indemnification be provided legislatively to accompany these draft regulations. This indemnification should be in place for all municipal governments who comply with these new regulations at least 12 months before the Firefighter Certification regulation comes into force. We understand that the Province of Quebec provided such indemnification as a quid pro quo for the requirement of mandatory certification of fire service personnel.

This is essential protection as throughout this exercise the Table has not received information on what the gap might be between those fire personnel that are, or could be, certified and those that will need to receive immediate training in order to be able to be certified by the time the regulation comes into force. For these reasons, we are asking for the certification regulation not to come into force until at least January 2020. We know that the Ministry staff have tried to gather this information, however, the gap analysis is not available. Therefore, current final decisions cannot be evidence-based, rather they need to be done from a risk mitigation perspective.

We do thank the Ministry for its commitment to make sure all the training and associated examinations related to the mandatory Firefighter Certification regulation will be provided at no charge to the municipal fire service. That said we do need new financial resources to cover the expected staffing costs for training that this new regulation will require.

We also ask that grandfathering provisions associated with this mandatory certification are made as broad as possible. In the ideal state, grandfathering should be re-opened with updated eligibility, so all current fire service personnel could be grandfathered to their current level. At a minimum, grandfathering should be re-opened to all fire services as those who could have been certified in 2014, when voluntary, should have every opportunity to be certified now.

In closing, we are asking for the proposed Public Reports regulation not go forward at this time and the following key amendments or provincial commitments, prior to the proposed Firefighter Certification and the Community Risk Assessment regulations, be approved:

- Provincial commitment to fund new firefighter certification costs so that it is not an unfunded mandate for municipal governments;
- The Province provide, in legislation, liability indemnification for all municipal governments who certify their firefighters to the standards in the Firefighter Certification regulation and that this is done at least 12 months before this regulation comes into force;
- The proposed Firefighter Certification regulation does not come into force any earlier than January 1, 2020;

- Technical amendments to the draft Firefighter Certification Community Risk Assessment as per the attached appendix as well as those provided in the OAFC submission;
- The draft Public Reports regulation be held and not approved until Ontario's Standard Incident Response (SIR) framework, system improvements, and implementation strategies are discussed and consensus is achieved at the Table; and
- Medical responses are not included in any future reporting requirements for municipal funded fire services.

We trust that the Ministry appreciates the rationale behind why these key amendments are needed, and will recognize the significant burdens and impacts these regulations will have, especially on small, rural and northern municipalities if the fiscal, risk management, timing, and technical aspects are not resolved well.

For these reasons, further consultation with AMO and the municipal sector is needed before finalizing the regulations to ensure that these can be implemented successfully. We look forward to meeting with you soon to discuss these draft regulations.

Sincerely,



Lynn Dollin
AMO President

cc: The Honourable Kathleen Wynne, Premier of Ontario
The Honourable Bill Mauro, Minister of Municipal Affairs

Appendix A

Technical Comments on the Proposed Firefighters Certification

AMO's Proposed Change	Rationale
<p>Intern Firefighter</p> <ul style="list-style-type: none"> ▪ The Internship Program of 24 months needs to be expanded to include all applicable areas and positions, such as Fire Inspectors and Fire Officer I & II, replacing the limiting language found in section 3(b). 	<p>As it is currently written, the regulation only applies to new hires.</p>
<p>Transition</p> <ul style="list-style-type: none"> ▪ In the ideal state, grandfathering should be re-opened with updated eligibility, so all current fire service personnel could be grandfathered to their current level. At a minimum, grandfathering should be re-opened to all fire services as those who could have been certified in 2014, when voluntary, should have every opportunity to be certified now. ▪ OFMEM must also ensure timely access to free, online training and testing for departments. 	<p>Opening the grandfathering provision to <u>all</u> existing firefighters for a limited time could alleviate significant cost pressures for municipalities and unorganized territories. We are aware that there has been significant training over the years to NFPA standards outlined in the regulations, which should limit risk exposure.</p> <p>Access to free, online training and testing will aid the certification process and reduce municipal travel expenses. Otherwise, success/compliance is not likely.</p>

AMO's Proposed Change	Rationale
<p>Commencement</p> <ul style="list-style-type: none"> While departments should begin the work to move their department toward compliance with the regulation, the commencement date should be extended to at least January 1, 2020. Certification for some individual chapters with NFPA 1006 may not be available for the January 1, 2020 deadline. Therefore, additional wording should be added, allowing the Authority Having Jurisdiction (AHJ) to manage the implementation of NFPA 1006 Technical Rescue as the standards are updated, published, and testing/skills are made available, in order to support and complete the certification process. 	<p>A delayed commencement date will enable the provincial government to provide the necessary funding for training and liability indemnification 12 months prior to the regulations coming into force.</p>
<p>Table 1: Mandatory Certification</p> <ul style="list-style-type: none"> Wording should be introduced to ensure future updates to NFPA standards are implemented by the AHJ as standards are updated, published, and testing/skills are made available. 	<p>As certification for some individual chapters within NFPA 1006 may not be available for the January 1, 2020 deadline, allowing the AHJ to implement this, will support and complete the certification process.</p>

Technical Comments on the Proposed Community Risk Assessments Regulation

AMO's Proposed Change	Rationale
<p>Mandatory Use</p> <ul style="list-style-type: none"> ▪ The new requirements for a community risk assessment must be accompanied with guidance and resources from OFMEM and/or MCSCS to ensure that the data that is being required is retrievable, and the forms which are being used are user-friendly and accessible. 	<p>This regulation will require significant support and assistance for small rural and northern municipalities in meeting the new requirements of a community risk assessment. Standardized fillable forms for fire departments, and ensuring the criteria are easy to understand is needed to obtain success/compliance.</p>
<p>Commencement</p> <ul style="list-style-type: none"> ▪ The commencement date should be extended to at least July 1, 2019 or ideally January 1, 2020 to allow municipalities to transition from the existing simplified risk assessment, and become trained on the new requirements. 	<p>This will allow OFMEM & MCSCS to secure resources and roll out the tools that will make success/compliance with this regulation possible.</p>
<p>Schedule 1: Mandatory Profiles</p> <ul style="list-style-type: none"> ▪ The reference to building stock and classifications should use MPAC data to classify building usage in regards to fire risk, with amendments to existing municipal agreements about what information is available to fire services. ▪ The line about reporting the "state of compliance with the fire code" in Section 2 be deleted. 	<p>Further analysis is needed to determine if the MPAC information currently accessible by each municipality is sufficient to complete risk assessment profiles.</p> <p>The line needs to be deleted because it is directly dependent upon municipalities' set level of service for fire prevention (e.g. fire inspections upon request or complaints as permitted, under the FPPA).</p>

AMO's Proposed Change	Rationale
<ul style="list-style-type: none"> ▪ Section 6 needs to be removed. ▪ Section 9(2) should be edited to remove the requirement to compare to other "like" municipalities. 	<p>In a multi-tier government (e.g. lower-tier fire, upper-tier EMS and provincial police), the data required for a public safety response profile, as currently called for in the draft regulation, is not attainable.</p> <p>Comparison to other "like" communities will be difficult to achieve. Reporting to provincial trends would be more appropriate.</p>

Technical Comments on the Proposed Public Reports Regulation for the purposes of illustrating the challenges the current draft contains.

Please note AMO is asking that this draft regulation be put on hold at this time.

AMO's Proposed Change	Rationale
<p>Do Not Approve this Regulation</p> <p>An overhaul of Ontario's Standard Incident Reporting (SIR) framework needs to be completed before any public reporting regulation is approved and implemented.</p>	<p>The Table should reconvene to discuss SIR system improvements and implementation strategies, while the proposed regulation is put on hold.</p>
<p>Medical Responses</p> <p>Medical responses are not included in any future reporting requirements for municipal funded fire services</p>	<p>Not appropriate for fire services reporting in Ontario.</p>
<p>Ambiguous Language</p> <p>The proposed regulation is not reflective of the different types of service delivery across the province. Need to use the terms "full-time", "composite" and "volunteer" firefighters or services for clarity.</p> <p>Greater clarity is needed on who or what the regulation applies to. "Fire departments" are often not a legal entity, and therefore, might not be able to be compelled to report pursuant to the FPPA.</p> <p>The proposed regulation references "non-volunteer firefighters" often," which is not a term used Ontario to describe any member of its fire service. If this is to define full-time firefighters, then use the term "full-time".</p>	<p>The draft language is ambiguous with respect to composite departments and may have the result of volunteers within a composite service being misclassified as full-time firefighters.</p> <p>Wording used throughout the proposed regulation in reference to "fire department" reporting accountabilities is problematic and confusing.</p> <p>This term needs to be clarified to be understood.</p>
<p>Composite Fire Services</p> <p>Reporting by composite fire services should have those areas that are serviced by full-time firefighters should report to urban response standards and the volunteer</p>	<p>Schedule 1.1 (1) appears to have the potential impact of having some composite services into an urban standard reporting as the first truck may not include a volunteer</p>

AMO's Proposed Change	Rationale
firefighters should report to rural response standards.	firefighter but the next few trucks to arrive do have mostly volunteer firefighters.
<p>Response Standards for Volunteer Services</p> <p>Delete the 90% reference in Schedule 2(1) 1 as rural response standards for volunteer fire services do not require a 90% performance level.</p>	<p>It would appear that this proposed regulation is trying to establish service levels not required by the rural response standard in volunteer firefighter service areas. For volunteer services, the response time depends on the population, density and distances to cover.</p>

For Information Only

Paramedic Services – Provincial Emergency Response Time Standards

Presented To:	Emergency Services Committee
Presented:	Wednesday, Apr 18, 2018
Report Date	Thursday, Mar 29, 2018
Type:	Correspondence for Information Only

Resolution

For Information Only

Relationship to the Strategic Plan / Health Impact Assessment

This report refers to operational matters.

Report Summary

City Council is responsible to establish response time targets for our municipality and report annually to the Ministry of Health and Long Term Care (MOHLTC) on our compliance with the established response time plan.

Paramedic Services has submitted the response time standards plan for 2018, based on the best available call information and evidence-based medical practices currently experienced in Sudbury. This plan is considered both achievable and builds on the current performance of Sudbury Paramedic Services through its tiered response protocol with Fire Services and the local public access defibrillation program.

Financial Implications

There are no financial implications associated with this report.

Signed By

Report Prepared By

Paul Kadwell
Assistant Deputy Chief of Paramedic Services
Digitally Signed Mar 29, 18

Financial Implications

Jim Lister
Manager of Financial Planning and Budgeting
Digitally Signed Mar 29, 18

Recommended by the Department

Joseph Nicholls
Interim General Manager of Community Safety
Digitally Signed Mar 29, 18

Recommended by the C.A.O.

Ed Archer
Chief Administrative Officer
Digitally Signed Mar 29, 18

BACKGROUND

Response Time Standard Framework

City Council is responsible to establish response time targets for our municipality and report annually to the Ministry of Health and Long Term Care (MOHLTC) on our compliance with the established response time plan as set out in *Regulation 257/00* under the *Ambulance Act*. This Regulation allows municipal input into the response standards and permits for medically relevant differences among call types.

Key aspects of the regulations include:

- Multiple response time targets based on medically relevant categories;
- Allows for variable percentile performances; and,
- The targets of time and percentile performance can be maintained or changed at the discretion of Council.

The timelines for submission and reporting are:

- October 1 of each year report to the MOHLTC the response time standards, as approved by Council, for the upcoming year;
- By March 31 of each year, file the previous year's response time actuals with the MOHLTC; and,
- Between April and June of each reporting year, the municipal response time plan and results achieved will be posted on the MOHLTC website for public viewing.

Reportable Call Criteria

The response time framework is based on the following:

1. The percentage of times that a person equipped to provide any type of defibrillation has arrived on-scene to provide defibrillation to **sudden cardiac arrest patients within six minutes** of the time notice is received. (*A bystander, emergency responder or Paramedic with a defibrillator will stop the clock*).
2. The percentage of times that an ambulance crew has arrived on-scene to provide ambulance services to sudden cardiac arrest patients or other patients categorized as **CTAS 1 within eight minutes** of the time notice is received respecting such services.
3. The percentage of times that an ambulance crew has arrived on-scene to provide ambulance services to patients categorized as **CTAS 2, 3, 4 and 5 within the response time targets set by the upper-tier municipality** or delivery agent under its response time plan.

Canadian Triage Acuity Scale

The response time standards utilize the Canadian Triage Acuity Scale (CTAS) as shown in (Figure 1). CTAS is a medically proven triage tool currently utilized by all hospitals and Paramedics in Ontario. CTAS is based on a five-level scale with Level 1 (resuscitation) representing the "sickest" patients and Level 5 (non-urgent) representing the least ill group of patients. CTAS scores are based on an assessment of the patient's condition by the paramedic after arrival at the scene.

Patient Severity Categories

Level of Acuity	Type of Call
Sudden Cardiac Arrest	Patient has no vital signs
CTAS 1	Critically ill or have potential for rapid deterioration
CTAS 2	Potential to life, limb or function, requiring rapid medical intervention, controlled acts
CTAS 3	May progress to serious problem. Associated with significant discomfort or affecting ability to function.
CTAS 4	Conditions that would benefit from intervention or reassurance
CTAS 5	Non urgent, chronic, without evidence of deterioration

Figure 1

Improving Response Times

Paramedic Services continues to evaluate and pursues opportunities that have the potential to improve response times, these include:

Medical Tiered Response Protocol – review the current protocol for Greater Sudbury Fire Services who respond to Sudden Cardiac Arrests and Unconscious calls;

Public Access Defibrillator Program – continue to work with community partners to expand the number of public access defibrillator units within the city.

Paramedic Services - System Status Plan Review – assess deployment and resource utilization with an aim to improve response times within Greater Sudbury;

Paramedic Training Officer in the Field (Pilot) – Paramedic Training Officer (PTO) are regularly scheduled on the road, Monday to Friday to provide education to the Paramedics, while on shift. The PTO pairs up with one Paramedic from a crew, the second Paramedic is assigned to a Paramedic Response Unit (PRU) during this time. We are evaluating the impact of utilizing this PRU resource in locations, within our catchment area.

Ambulance Off Load Delay (AOD) Nurse Program – the reduction of Ambulance delays can free up available Paramedic Services resources resulting in improved response times.

Response Time Targets

The response time standards for sudden cardiac arrest and CTAS 1 calls have a fixed time set by the Province of six (6) and eight (8) minutes respectively. These fixed times are based on the most current medical evidence for these calls. The City reports on the percentile of time a defibrillator (*Paramedic, Fire, or public access defibrillator*) for sudden cardiac arrest calls or a Paramedic for all CTAS 1 calls has arrived at the patient for each of these categories.

For CTAS 2 to CTAS 5 patients, the City is to set both the response time target and the percentile these response times are achieved. Paramedic Services submitted the following response time targets in for 2018 (Figure 2).

Level of Acuity	Target Time	Percentage
Sudden Cardiac Arrest	6 minutes (set by MOHLTC)	70%
CTAS 1	8 minutes (set by MOHLTC)	80%
CTAS 2	10 minutes (set by CGS)	85%
CTAS 3	15 minutes (set by CGS)	85%
CTAS 4	15 minutes (set by CGS)	85%
CTAS 5	15 minutes (set by CGS)	85%

Figure 2

Paramedic Services is not recommending a change in the current plan for 2018. The response time targets have been determined by the following:

- Retrospective review of Sudbury's 2015, 2016 and 2017 response time performance for Sudden Cardiac Arrest and CTAS 1 to CTAS 5.
- Review of response time performance data and targets from other land ambulance services in Ontario.
- In consultation with the Services' Medical Director.

Response Times for 2017

Paramedic Services achieved the response time targets that were submitted for 2017 (Figure 3).

Level of Acuity	RTS in Minutes	RTS Approved	2017 RTS
Sudden Cardiac Arrest	6 minutes (set by MOHLTC)	70 %	73%
CTAS 1	8 minutes (set by MOHLTC)	80 %	80%
CTAS 2	10 minutes (set by CGS)	85 %	88%
CTAS 3	15 minutes (set by CGS)	85 %	97%
CTAS 4	15 minutes (set by CGS)	85 %	97%
CTAS 5	15 minutes (set by CGS)	85 %	97%

Figure 3

Conclusion

Paramedic Services has submitted the response time standards plan as provided above (Figure 2) for 2018, based on the best available call information and evidence-based medical practices in Sudbury. This plan is considered both achievable and builds on the current performance of Sudbury Paramedic Services through its tiered response protocol with Fire Services and the local public access defibrillation program.

Request for Decision

Paramedic Response Unit (PRU) Conversion Standardization

Presented To: Emergency Services Committee

Presented: Wednesday, Apr 18, 2018

Report Date Thursday, Mar 29, 2018

Type: Managers' Reports

Resolution

THAT the City of Greater Sudbury authorizes the Community Safety Department, Paramedic Services Division to maintain a standardized Paramedic Response Unit (PRU) fleet through purchasing of vehicle conversion services from Rowland Emergency Vehicle Products Inc. of Mississauga, ON for the next five (5) years in accordance with the Purchasing By-law Section 7 as outlined in the report entitled "Paramedic Response Unit (PRU) Conversion Standardization" from the Interim General Manager of Community Safety presented at the Emergency Services Committee meeting on April 18, 2018.

Relationship to the Strategic Plan / Health Impact Assessment

This report refers to operational matters.

Report Summary

The Paramedic Services Division seeks Council authorization to maintain a standardized Paramedic Response Unit (PRU) fleet converted and outfitted by Rowland Emergency Vehicle Products of Mississauga, ON. Since 2005 and mostly recently in 2013, Council approved Paramedic Services Division to move to a standardized PRU fleet (CS2013-66). The benefits of a standardized PRU fleet allow the Service to effectively manage the fleet in the areas of vehicle management, training, logistics, and maintenance by reducing fleet variation.

Financial Implications

There are no financial implications as the cost to up fit Primary Response Units is funded within existing budgets.

Signed By

Report Prepared By

Melissa Roney
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Digitally Signed Mar 29, 18

Financial Implications

Jim Lister
Manager of Financial Planning and Budgeting
Digitally Signed Apr 3, 18

Recommended by the Department

Joseph Nicholls
Interim General Manager of Community Safety
Digitally Signed Mar 29, 18

Recommended by the C.A.O.

Ed Archer
Chief Administrative Officer
Digitally Signed Apr 3, 18

Paramedic Response Unit (PRU) Standardization

BACKGROUND

The City of Greater Sudbury Paramedic Services completes over 64,296 vehicle responses annually, travelling over 1.1M kilometers (fleet data software) with a fleet of twenty-three (23) ambulances, and eight (8) Paramedic Response Units (a Sport Utility Vehicle (SUV) style vehicle staffed by a single Paramedic).

The City of Greater Sudbury Paramedic Services Division, as part of our annual vehicle replacement program, requires between one and two new PRUs each year. New vehicles replace those vehicles that have reached or exceeded their service life of 72 months and typically have almost 300,000 kilometers.

The City's Paramedic Services Division purchases SUV style, emergency response certified vehicles to ensure the safety of our staff and the motoring public. These vehicles have specific safety enhancements and are only available for sale to recognized emergency service agencies. The vehicles are designed for emergency response with improved handling, braking, cooling system, electrical systems and ready to accept vehicle up fitting (emergency warning, communications and storage systems) to convert them to emergency vehicles.

These vehicles are purchased using normal tender purchasing by-laws. These assets are purchased under the Broader Public Service of Ontario and as such are eligible for concessions (discounts) on vehicles included in the Ministry of Government Services Vendor of Record arrangement. These base vehicles must then be sent to a conversion vendor to be up-fitted in order to be used as a certified PRU in Ontario. The vendor completes the conversion ensuring the completed vehicle complies with the Ontario Provincial Land Ambulance & Emergency Response Vehicle Standard.

There are three (3) main Ontario vendors able to provide "certified" PRUs. Selected options are added to the base units to improve operational capability, medical storage, ergonomics, emergency warning lights and sirens, while enhancing Paramedic and public safety. A Sudbury-built PRU costs approximately \$65,000 (net).

Rowland Emergency Vehicle Products has extensive experience within the Paramedic conversion market and is a recognized leader in the design and building of Ontario Paramedic specialty vehicles. Rowland Emergency Vehicle Products had previously been the exclusive Vendor of Record (VOR) contract with the Ministry of Health and Long-Term Care to carry out all PRU conversion work on their behalf until this responsibility was transferred to the municipalities. With Council approval, it is permissive for non-competitive purchases under Part 22, Section 1(b)(i) of the Purchasing By-Law.

The City of Greater Sudbury Paramedic Division's experience with Rowland Emergency Vehicle Products has been very positive, with few concerns related to the vehicles quality of work performed. Rowland's has consistently demonstrated strong after sales service through a commitment to problem resolution and solid technical support. Rowland's has developed a reputation in the Paramedic sector for quality materials and workmanship.

BENEFITS OF PRU STANDARDIZATION

Fleet standardization is important to the Paramedic Services Division due to the large number of Paramedics working in these unique vehicles. Standardization allows the Service to effectively manage the fleet in the areas of vehicle management, training, logistics and maintenance by reducing fleet variation.

The following are the key advantages and benefits of fleet standardization:

- Greater control of fleet logistical operations in terms of managing standard practices for daily vehicle processing. This work includes locating equipment, restocking, cleaning and disinfecting processes.
- Standard compartment cabinet layout allows equipment to be stored in a consistent, familiar manner across the entire fleet. This allows Paramedics to easily locate emergency supplies and equipment when arriving to treat a patient under demanding emergency conditions.
- Solid familiarization of build quality, control and performance characteristics improves safety for Paramedics as they work from these vehicles.
- Training required for Paramedics consists of existing competencies, knowledge and behaviors, no new formal training needed.

RECOMMENDATION

THAT the City of Greater Sudbury Paramedic Division maintains a standardized PRU fleet through purchasing vehicle conversion services from Rowland Emergency Vehicle Products Inc. of Mississauga, ON for the next five (5) years in accordance with the purchasing by-law section 7. In the event there is a special requirement for a non-standard response unit or where provincial certification standards change or emerging technological advancements present themselves, a public tender may be issued by the City.

Request for Decision

Land Ambulance Vendor Standardization

Presented To: Emergency Services Committee

Presented: Wednesday, Apr 18, 2018

Report Date Thursday, Mar 29, 2018

Type: Managers' Reports

Resolution

THAT the City of Greater Sudbury authorizes the City's Paramedic Services Division to maintain a standardized ambulance fleet through purchases from Demers Ambulance of Beloeil, Quebec for the next five (5) years as outlined in the report entitled "Land Ambulance Vendor Standardization" from the Interim General Manager of Community Safety presented at the Emergency Services Committee meeting on April 18, 2018.

Relationship to the Strategic Plan / Health Impact Assessment

This report refers to operational matters.

Report Summary

The City of Greater Sudbury Paramedic Services seeks Council authorization to maintain a standardized ambulance fleet with Demers Ambulance Incorporated. In July 2004, and more recently in 2013 Council approved Paramedic Services Division to move to a standardized ambulance fleet (CS2013-31). The benefits of a standardized Demers fleet are important to Paramedic Services in terms of; operations of standard vehicle configurations, solid Paramedic familiarization of vehicle performance and driving characteristics, experienced fleet technical staff coupled with years of experience, a standard inventory of parts to minimize vehicle downtime, and a reliable and comfortable ride for patients that the Demers Ambulance provides.

Financial Implications

The purchase of Ambulances are approved by Council during the capital budget process and funded through the Land Ambulance Reserve. The contribution to reserve is funded by the Ministry of Health &

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Report Prepared By

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Financial Implications

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Manager of Financial Planning and
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Recommended by the Department

Joseph Nicholls
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Recommended by the C.A.O.

Ed Archer
Chief Administrative Officer
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Long-Term Care on a 50/50 cost sharing basis. As a result, no additional funds are required at this time.

Ambulance Standardization

BACKGROUND

The City of Greater Sudbury Paramedic Services completes over 64,296 vehicle responses annually, travelling over three million kilometers with a fleet of twenty-three (23) ambulances and eight (8) Paramedic Response Units (a Sport Utility Vehicle (SUV) style single Paramedic unit). Ambulance vehicle standardization has been a successful fleet strategy in Paramedic Services since first approved by Council in 2003 and continued to demonstrate its value for the past 15 years.

The City of Greater Sudbury Paramedic Services Division, as part of our annual vehicle replacement program, requires three (3) new ambulances each year. These new vehicles replace those vehicles that have reached or exceeded their service life.

The Ontario Ministry of Health and Long-Term Care (MOHLTC) Emergency Health Services Branch (EHSB) continues to ensure as part of their mandate, only those ambulances certified for the Ontario market are used in the delivery of ambulance services. The MOHLTC indicates the following: Canadian vendors have vehicles certified under the *Ontario Provincial Land Ambulance and Emergency Response Vehicle Standard – Version 5* and are able to provide certified ambulances for use by Ontario Paramedic Services.

Ambulance Manufacturer	Cost
Demers Ambulances Inc., Beloeil, QC	\$109,376/*\$121,000
Crestline Coach Inc., Saskatoon, SK	\$108,403/*\$124,000

*These comparative prices are base models only and do not reflect chassis rebates (\$10,500 for 2017), optional upgrades which adds approximately \$30,000 to the base price. Selected options are added to the base units to improve ergonomics and enhance Paramedic and patient safety.

A Sudbury build ambulance costs approximately \$153,521 (net). Additionally, Sudbury Paramedic Services has been part of a Preferred Vendor Program offered by Demers, whereby we realize a long-term customer discount of \$5,680 on each vehicle purchased. Demers Ambulance Incorporated is one of the largest ambulance manufacturers in North America and is a leader in Canadian ambulance design, manufacture and distribution. Demers Ambulances Incorporated has the majority of the Ontario market with Crestline Coach being second. There are currently no other ambulance manufacturers in Canada that can sell certified ambulances for use by Paramedic Services in Ontario.

Paramedic Service's experience with Demers Ambulances has been very positive, supported by years of Demers strong after sales service, timely commitment to problem resolution and dependable technical support. The City of Greater Sudbury Paramedic

Services Division continues to work with Demers Ambulances Incorporated in developing new technologies and interior designs that improve patient, paramedic and public safety as well as vehicle serviceability. Examples include custom designed center console for computer storage and charging and equipment mounts for specific hand sanitizing solutions designed for quick and easy access for Paramedics.

Current Sudbury built ambulances conform to the following:

- Demers Mystere MX164A Type III Modular Ambulance
- GM Gas chassis 3500 (diesel phased out as recommended by Fleet Services to save capital and operating costs)
- 159" wheel base
- Paramedic Mobility Safety Seating
- High performance LED warning system
- Bariatric carrying capability
- Cab console and computer technology/mounts
- Reversing sensors and camera, power seats, electric and heated mirrors

BENEFITS OF FLEET STANDARDIZATION

Fleet standardization is important to the Paramedic Services Division due to the large number of Paramedics working in these unique vehicles. Standardization allows the Service to more efficiently and effectively manage the fleet in the areas of vehicle maintenance, training, logistics and overall management when reducing fleet variation.

The following are the key advantages and benefits of fleet standardization:

- Standard patient compartment cabinet layout allows equipment to be stored in a consistent, familiar manner across the entire fleet. This allows Paramedics to easily locate emergency supplies and equipment when treating a patient under demanding emergency patient care and resuscitation conditions.
- Greater control of fleet logistical operations in terms of managing standard practices for daily vehicle processing. This work includes locating equipment, restocking, cleaning and disinfecting processes.
- Solid familiarization of vehicle driving and control characteristics improves safety for Paramedics, patients and the community.

- Training required for Paramedics builds on existing competencies and behaviors, as they only need to learn about operating and working within one type of vehicle.
- City fleet and vendor may better manage warranties and technical support across the entire fleet with one stop shopping.
- A preventative maintenance program is reliable, predictable and simple to manage with a standardized fleet. Eliminates a need for different/unique vendor parts to maintain a variety of ambulances and saves on storage space for needed parts, reducing delays for mechanical repairs.
- Fleet Services' Mechanics require one set of special tools, manuals, schematics used for diagnostics, adjustments and repairs.
- Faster and more efficient repairs due to technician familiarization, training, and experience with a single ambulance type.
- Fleet Services may interchange parts between vehicles to maintain serviceability and reduce vehicle down time.

Mechanics have received certified training from Demers Ambulance engineers who come to Sudbury to provide training, which improves maintenance quality and technical proficiency while decreasing down time.

RECOMMENDATION

THAT the City of Greater Sudbury Paramedic Services Division maintains a standard ambulance fleet for the next five (5) years with Demers Ambulance Incorporated. With Council approval, it is permissive for non-competitive purchases under Part 22, Section 1(b)(i) of the Purchasing By-Law.



City of Greater Sudbury Charter

WHEREAS Municipalities are governed by the Ontario Municipal Act, 2001;

AND WHEREAS the City of Greater Sudbury has established Vision, Mission and Values that give direction to staff and City Councillors;

AND WHEREAS City Council and its associated boards are guided by a Code of Ethics, as outlined in Appendix B of the City of Greater Sudbury's Procedure Bylaw, most recently updated in 2011;

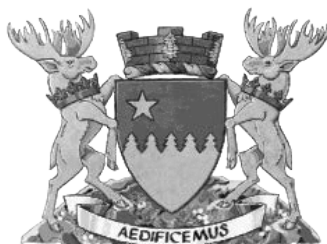
AND WHEREAS the City of Greater Sudbury official motto is "Come, Let Us Build Together," and was chosen to celebrate our city's diversity and inspire collective effort and inclusion;

THEREFORE BE IT RESOLVED THAT Council for the City of Greater Sudbury approves, adopts and signs the following City of Greater Sudbury Charter to complement these guiding principles:

As Members of Council, we hereby acknowledge the privilege to be elected to the City of Greater Sudbury Council for the 2014-2018 term of office. During this time, we pledge to always represent the citizens and to work together always in the interest of the City of Greater Sudbury.

Accordingly, we commit to:

- Perform our roles, as defined in the Ontario Municipal Act (2001), the City's bylaws and City policies;
- Act with transparency, openness, accountability and dedication to our citizens, consistent with the City's Vision, Mission and Values and the City official motto;
- Follow the Code of Ethical Conduct for Members of Council, and all City policies that apply to Members of Council;
- Act today in the interest of tomorrow, by being responsible stewards of the City, including its finances, assets, services, public places, and the natural environment;
- Manage the resources in our trust efficiently, prudently, responsibly and to the best of our ability;
- Build a climate of trust, openness and transparency that sets a standard for all the City's goals and objectives;
- Always act with respect for all Council and for all persons who come before us;
- Ensure citizen engagement is encouraged and promoted;
- Advocate for economic development, encouraging innovation, productivity and job creation;
- Inspire cultural growth by promoting sports, film, the arts, music, theatre and architectural excellence;
- Respect our historical and natural heritage by protecting and preserving important buildings, landmarks, landscapes, lakes and water bodies;
- Promote unity through diversity as a characteristic of Greater Sudbury citizenship;
- Become civic and regional leaders by encouraging the sharing of ideas, knowledge and experience;
- Work towards achieving the best possible quality of life and standard of living for all Greater Sudbury residents;



Charte de la Ville du Grand Sudbury

ATTENDU QUE les municipalités sont régies par la Loi de 2001 sur les municipalités (Ontario);

ATTENDU QUE la Ville du Grand Sudbury a élaboré une vision, une mission et des valeurs qui guident le personnel et les conseillers municipaux;

ATTENDU QUE le Conseil municipal et ses conseils sont guidés par un code d'éthique, comme l'indique l'annexe B du Règlement de procédure de la Ville du Grand Sudbury dont la dernière version date de 2011;

ATTENDU QUE la devise officielle de la Ville du Grand Sudbury, « Ensemble, bâtissons notre avenir », a été choisie afin de célébrer la diversité de notre municipalité ainsi que d'inspirer un effort collectif et l'inclusion;

QU'IL SOIT RÉSOLU QUE le Conseil de la Ville du Grand Sudbury approuve et adopte la charte suivante de la Ville du Grand Sudbury, qui sert de complément à ces principes directeurs, et qu'il y appose sa signature:

À titre de membres du Conseil, nous reconnaissons par la présente le privilège d'être élus au Conseil du Grand Sudbury pour le mandat de 2014-2018. Durant cette période, nous promettons de toujours représenter les citoyens et de travailler ensemble, sans cesse dans l'intérêt de la Ville du Grand Sudbury.

Par conséquent, nous nous engageons à :

- assumer nos rôles tels qu'ils sont définis dans la Loi de 2001 sur les municipalités, les règlements et les politiques de la Ville;
- faire preuve de transparence, d'ouverture, de responsabilité et de dévouement envers les citoyens, conformément à la vision, à la mission et aux valeurs ainsi qu'à la devise officielle de la municipalité;
- suivre le Code d'éthique des membres du Conseil et toutes les politiques de la municipalité qui s'appliquent à eux;
- agir aujourd'hui pour demain en étant des intendants responsables de la municipalité, y compris de ses finances, biens, services, endroits publics et du milieu naturel;
- gérer les ressources qui nous sont confiées de façon efficiente, prudente, responsable et de notre mieux;
- créer un climat de confiance, d'ouverture et de transparence qui établit une norme pour tous les objectifs de la municipalité;
- agir sans cesse en respectant tous les membres du Conseil et les gens se présentant devant eux;
- veiller à ce qu'on encourage et favorise l'engagement des citoyens;
- plaider pour le développement économique, à encourager l'innovation, la productivité et la création d'emplois;
- être une source d'inspiration pour la croissance culturelle en faisant la promotion de l'excellence dans les domaines du sport, du cinéma, des arts, de la musique, du théâtre et de l'architecture;
- respecter notre patrimoine historique et naturel en protégeant et en préservant les édifices, les lieux d'intérêt, les paysages, les lacs et les plans d'eau d'importance;
- favoriser l'unité par la diversité en tant que caractéristique de la citoyenneté au Grand Sudbury;
- devenir des chefs de file municipaux et régionaux en favorisant les échanges d'idées, de connaissances et concernant l'expérience;
- viser l'atteinte de la meilleure qualité et du meilleur niveau de vie possible pour tous les résidents du Grand Sudbury.