



EMERGENCY SERVICES COMMITTEE AGENDA

Emergency Services Committee Meeting
Thursday, October 15, 2020
Tom Davies Square - Council Chamber / Electronic Participation

COUNCILLOR GERRY MONTPELLIER, CHAIR

Rene Lapierre, Vice-Chair

4:00 p.m. EMERGENCY SERVICES COMMITTEE MEETING
COUNCIL CHAMBER / ELECTRONIC PARTICIPATION

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ROLL CALL

DECLARATIONS OF PECUNIARY INTEREST AND THE GENERAL NATURE THEREOF

REGULAR AGENDA

PRESENTATIONS

1. Report dated September 21, 2020 from the General Manager of Community Safety regarding Fire Services Technical Response and Hazardous Materials (HAZMAT) Response. **4 - 7**
(ELECTRONIC PRESENTATION) (FOR INFORMATION ONLY)
 - Jesse Oshell, Deputy Fire Chief

(This presentation provides information regarding the Greater Sudbury Fire Services response to technical incidents and provides an update to the hazardous materials response program currently under development.)
2. Report dated September 21, 2020 from the General Manager of Community Safety regarding Community Paramedic Services' Role in the Response to COVID-19 . **8 - 9**
(ELECTRONIC PRESENTATION) (FOR INFORMATION ONLY)
 - Melissa Roney, Deputy Chief of Emergency Services

(This presentation provides information regarding the Community Paramedic Services' role in response to the COVID-19 emergency.)

MEMBERS' MOTIONS

CORRESPONDENCE FOR INFORMATION ONLY

- I-1. Report dated September 21, 2020 from the General Manager of Community Safety regarding Fire Services Update. **10 - 14**
(FOR INFORMATION ONLY)

(This report provides information regarding recent business activities, relevant statistics and good news stories within the Fire Services Division, Community Safety Department.)
- I-2. Report dated September 21, 2020 from the General Manager of Community Safety regarding Fire Services Public Education. **15 - 20**
(FOR INFORMATION ONLY)

(This report provides information regarding current public education programs, initiatives and partnerships.)
- I-3. Report dated September 24, 2020 from the General Manager of Community Safety regarding 2019 Operating Expenses by Fire Station. **21 - 28**
(FOR INFORMATION ONLY)

(This report provides information regarding the 2019 operating expenses apportioned by fire station as requested by resolution ES2020-03.)

- I-4. Report dated September 21, 2020 from the General Manager of Community Safety regarding Emergency Management Update. **29 - 32**
(FOR INFORMATION ONLY)

(This report provides information regarding recent business activities, relevant statistics and good news stories within the Emergency Management Section, Community Safety Department.)

- I-5. Report dated September 20, 2020 from the General Manager of Community Safety regarding Paramedic Services Update. **33 - 39**
(FOR INFORMATION ONLY)

(This report provides information regarding recent business activities, relevant statistics and good news stories within the Paramedic Services Division, Community Safety Department.)

- I-6. Report dated September 17, 2020 from the General Manager of Community Safety regarding Paramedic Services - 2019 Response Time Standards Report. **40 - 45**
(FOR INFORMATION ONLY)

(This report provides information regarding the Response Time Standards submission to Ministry of Health for 2019 Paramedic response times.)

ADDENDUM

CIVIC PETITIONS

QUESTION PERIOD

ADJOURNMENT

For Information Only

Fire Services Technical Response and Hazardous Materials (HAZMAT) Response

Presented To: Emergency Services Committee

Presented: Thursday, Oct 15, 2020

Report Date: Monday, Sep 21, 2020

Type: Presentations

Resolution

For Information Only

Relationship to the Strategic Plan / Health Impact Assessment

This report refers to operational matters.

Report Summary

This report describes the Greater Sudbury Fire Services response to technical incidents and provides an update to the hazardous materials response program currently under development.

Financial Implications

There are no financial implications associated with this report.

Signed By

Report Prepared By

Jesse Oshell
Deputy Fire Chief
Digitally Signed Sep 21, 20

Financial Implications

Steve Facey
Manager of Financial Planning & Budgeting
Digitally Signed Sep 21, 20

Recommended by the Department

Joseph Nicholls
General Manager of Community Safety
Digitally Signed Sep 22, 20

Recommended by the C.A.O.

Ed Archer
Chief Administrative Officer
Digitally Signed Sep 22, 20

Purpose

This report describes the Greater Sudbury Fire Services response to technical incidents and provides an update to the hazardous materials response program currently under development. These two disciplines represent core functions under the National Fire Protection Association (NFPA) standard 1006 and 1072 being that these are the focus of Provincial recommendations for delivery and training. Greater Sudbury Fire Services provides training and response in several technical disciplines across the entire municipality. This is done following the guidelines set forth under the Occupational Health and Safety Act (Section 21 Guidance Notes), the Office of the Ontario Fire Marshal (Academic Standards and Evaluation), and the National Fire Protection Association.

Executive Summary

The Ontario Fire Marshal released guidance for minimum performance standards on technical response and training with direct communication to Fire Departments in 2018. These job performance requirements (JPR's) ensure objectives, training and response shall be performed safely and competently. The Ontario Fire Marshal communicates to those who perform technical response the dangers of these activities which occur normally under adverse conditions. Maintaining a standard training program following NFPA 1006 is not mandatory but recommended by the Ontario Fire Marshal as a minimum for all rescue operations.

Greater Sudbury Fire Services, under the authority contained within the Establishing and Regulating Bylaw, provides six technical rescue disciplines at various levels of capability. These technical responses are deployed from specific stations, trained in the requisite knowledge to deliver the skill and service required, and who responds to all areas across the municipality.

Within each technical discipline is a defined level of capability of the firefighters:

1. Awareness – This level represents the minimum capability of individuals who provide response to technical rescue incidents, allowing them to identify the technical rescue implications and secure the scene until Operational or Technical level responders arrive.
2. Operations – This level represents the capability of individuals to respond to technical rescue incidents and to identify hazards, use equipment, and apply limited techniques specified in the standard to support and participate in technical rescue incidents.
3. Technician – This level represents the capability of individuals to respond to a technical rescue incident and to identify hazards, use equipment, and apply advanced techniques specified in the standard necessary to coordinate, perform, and supervise technical rescue incidents.

The specific disciplines and capability levels in Greater Sudbury Fire Services are:

1. Rope / High Angle Rescue – Technical Level
2. Vehicle (AutoExtrication) Rescue – Operations Level
3. Surface Water Rescue – Technical Level
4. Swift Water Rescue – Technical Level
5. Ice Rescue – Technical Level
6. Confined Space Rescue – Technical Level

Future considerations and planning are in progress for the following disciplines, which have training programs in various stages of development:

1. Watercraft Rescue – Training program under development
2. Trench Rescue – Training program under development, supported by CGS
Water/Wastewater - Equipment procurement underway

Hazardous materials response is performed through a team of trained firefighters who specialize in detecting, containing and removing any release of defined substances in order to control or stabilize an incident. In 2019, Council approved the implementation of a Hazardous Response program to the Technician level by 2022.

The capability level in Greater Sudbury Fire Services for Hazardous Response is:

1. Full Time Firefighters – Awareness Level
2. Volunteer Firefighters – Awareness Level / Maintenance training scheduled (2021)
3. Hazmat Responders – Operations Level scheduled (2021)

The hazardous materials program encompasses incidents such as:

1. Chemical reactions that may overcome a person with fumes.
2. A fuel spill that is not contained and may impact life safety or the environment.
3. A release of chemical(s) from a facility or storage location that may require evacuation.
4. Substances of unknown origin or composition that can be life threatening.

Analysis

As Greater Sudbury has a network of over 3000 kms of traveled roadway, 330 lakes inside its borders, and is home to a vast industrial sector, there are significant risks within the municipality, which require Fire Services to maintain a level of technical response.

The definition of the disciplines that are provided across the municipality are:

1. Rope / High Angle Rescue – Ability to perform rescues using rope systems, which incorporate high or low angle scenarios that are an immediate threat to life safety.
2. Vehicle (Auto Extrication) Rescue – Utilization of specialized rescue tools which are applied to remove trapped occupants from vehicles.
3. Surface Water Rescue – Rescue of person(s) from standing water (water that does not move faster than a walking pace).
4. Swift / Ice Water Rescue – Rescue of person(s) from fast flowing water or water that has frozen to become ice.
5. Confined Space Rescue – The removal of person(s) from a space that has not been constructed for human occupancy or where hazards exist due to location or contents, such as manholes and underground utility vaults.

Training dedicated to the current technical response disciplines and the hazardous materials program encompasses over 600 hours of specific, instructor led theory and practical exercises. In addition, each discipline has a number of hours which must be completed annually in order to maintain certification and proficiency in that particular technical program.

Training hours for each specific discipline are:

1. Rope / High Angle Rescue – 140 Hours
2. Vehicle (Auto Extrication) Rescue – 178 Hours
3. Surface Water Rescue – 92 Hours
4. Swift / Ice Water Rescue – 230 Hours

Annual certification and proficiency hours for each specific discipline are set at 20% of the total training hours of each technical discipline. As an example, each year Swift/Ice Water responders will train a minimum 46 hours in this skill. To maintain certification, every five years, the entire discipline training program must be completed.

The extremely complex and technical nature of these responses dictate calculated risk mitigation plans that begin with a specialized dispatching protocol that allocates proper resources and trained personnel to the emergency incident.

Full Time Firefighter station assignment for Technical Response is as follows:

1. Station 1 (Van Horne) – Rope / High Angle / Vehicle Rescue
2. Station 2 (Minnow Lake) – Surface / Swift / Ice / Vehicle Rescue
3. Station 3 (New Sudbury) – Hazardous Material / Vehicle Rescue
4. Station 4 (Long Lake) – Surface / Swift / Ice / Vehicle Rescue
5. Station 16 (Val Therese) – Hazardous Material / Vehicle Rescue

Volunteer Firefighter station assignment for Technical Response is as follows:

1. Stations 6 (Waters) / 7 (Lively) / 8 (Whitefish) / 10 (Azilda) / 11 (Chelmsford) / 12 (Dowling) / 18 (Capreol) / 20 (Garson) / 23 (Coniston) / 24 (Wahnapitae) – Vehicle Rescue

Response to the technical disciplines occurs out of the assigned stations and is deployed to anywhere in the municipality as required. Travel time can be a factor depending on the technical discipline required and the location of the emergency incident.

The average number of technical responses per discipline (based on a three-year average) are:

1. Rope / High Angle Rescue – 2 incidents per year (see NOTE)
2. Vehicle (AutoExtrication) Rescue – 30 incidents per year
3. All Water Rescues – 6 incidents per year

NOTE – Rope technical response can also be a part of water rescue and other fire suppression emergencies which are not specific incidents just for the rope discipline. The use of the Ladder Platform apparatus in the application of the rope discipline also lends to the utilization of these skills to many other non-technical incident types.

Summary

The technical response disciplines in the Greater Sudbury Fire Services are highly specialized, high risk, yet low frequency responses, which require a significant amount of dedicated time for training and skills development. These responses are critical in our municipality and provide protection to the public at all times. Building on these skills and ensuring resources are in place remain a priority to known risks within our community.

For Information Only

Community Paramedic Services' Role in the Response to COVID-19

Presented To: Emergency Services Committee

Presented: Thursday, Oct 15, 2020

Report Date Monday, Sep 21, 2020

Type: Presentations

Resolution

For Information Only

Relationship to the Strategic Plan / Health Impact Assessment

The City of Greater Sudbury's Health Promotion and Care Transition Community Paramedic programs in partnership with Health Sciences North, supports Council's strategic initiative to create a healthier community through community paramedic programs to meet the needs of vulnerable populations and reduce emergency responses and hospital admissions.

Report Summary

This presentation provides the Emergency Services Committee with an update on the Community Paramedic Program activities in response to the COVID19 pandemic.

Financial Implications

There are no financial implications associated with this report.

Signed By

Report Prepared By

Melissa Roney
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Digitally Signed Sep 21, 20

Financial Implications

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EXECUTIVE SUMMARY

This presentation provides the Emergency Services Committee with an update on the Community Paramedic Program activities in response to the COVID19 pandemic.

The COVID-19 pandemic has caused all levels of government, industries, businesses, organizations and healthcare service providers to adapt to new requirements and protocols. Paramedics were no exception, having adapted the Community Paramedicine program to provide services to our most vulnerable residents during this medical pandemic.

Launched in 2015, Community Paramedics have been serving residents across the City of Greater Sudbury. The program has several clinical pathways, which include paramedic referrals to community services, 911 frequent caller follow-up and an in-home chronic disease management program.

While 9-1-1 calls remain the primary focus of Paramedic Services, the arrival of the COVID-19 pandemic has resulted in Paramedics being called upon to collaborate more than ever with primary-care providers, community leaders and agencies throughout the City to establish in-home COVID swabbing, health clinics within shelters and priority clearance COVID19 testing for admission to long-term care or hospice.

Summary

Paramedic Services has been supporting Public Health, Health Sciences North and Ontario Health North with COVID-19 swabbing of homebound individuals and swabbing in long-term care homes and other congregate settings during outbreaks. Over twenty five hundred patient visits and COVID swabs have been conducted to date. .

Community Paramedicine has been very successful in alleviating pressures on our local health care system and we are pleased that we were able to apply the specialized training and skills of our Paramedics to further support and assist some of our most vulnerable residents during this pandemic. Paramedics have stepped up to play an important role in the City's response to COVID-19 and in our eventual recovery

For Information Only

Fire Services Update

Presented To: Emergency Services Committee

Presented: Thursday, Oct 15, 2020

Report Date: Monday, Sep 21, 2020

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 was prepared to provide the Emergency Services Committee an overview of recent business activities, relevant statistics and good news stories in the Fire Services Division, Community Safety Department.

Financial Implications

There are no financial implications associated with this report.

Signed By

Report Prepared By

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Digitally Signed Sep 21, 20

Financial Implications

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EXECUTIVE SUMMARY

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.

Key Performance Indicators

Major Fire Loss Incidents July 1, 2020 – August 31, 2020		
Date	Location	Estimated Loss
Wednesday, July 1, 2020	4198 Lillian Street, Val Therese	\$629, 000
Sunday, July 5, 2020	62 Anna Street, Chelmsford	\$250, 000
Friday, July 24, 2020	35 Moreau Avenue, Garson	\$400, 000
Monday, August 10, 2020	487 Michael's South Shore Road, Dowling	\$165, 000
Friday, August 18, 2020	704 Finni Road, Wahnapiatae	\$ 230,000
Wednesday, August 30, 2020	160 St Joseph Street, Sudbury	\$130,000

Data Source: Fire House

Incident Type	Jan 1 – Aug 31, 2020	Jan 1 – Aug 31, 2019
Fires	222	218
Fire Alarms	659	738
Vehicle Collisions	283	450
Open Air Burning Response	339	142
Medical Assistance	430	658
Other Incidents (assisting other agencies, no incident found on arrival, etc.)	667	900
Total	2600	3106
TOTAL Estimated Loss for Fires	\$ 6,349,050	\$ 8,913,080

Data Source: Fire House



Public Fire Safety Education/Fire Prevention

Fire Inspections

The Fire Prevention section continued to conduct their mandated complaint and request inspections while complying with all Covid-19 health and safety protocols. The pandemic has caused local restaurant establishments to adjust their business plans to allow for expanded patios. Fire Prevention, Building Services, Alcohol Gaming Commission of Ontario, By-law and Economic Development are working collaboratively to expedite requests for new and existing patio extensions.

Fire Prevention has noticed an increase in burn permit applications being submitted for review and approval over the last month. All burn permit applications require a site visit and approval prior to being issued a burn permit.

Due to the pandemic outbreaks in Vulnerable Occupancies, the Fire Prevention section temporarily postponed the mandated fire inspections and fire drills with these occupancies. GSFS is currently working with the Ontario Fire Marshall Emergency Management (OFMEM) on alternative options in order to achieve fire safety compliance while adhering with Public Health instructions.

Public Education

During the pandemic, the Public Safety Officers (PSOs) worked with a community partner to develop three new commercials, which are being aired on local television channels at different times throughout the day. The commercial topics were:

- Working from Home due to Covid-19
- Fire Ban
- Back Yard Campfires

The traditional approach to delivering fire and life safety programs needed to be adjusted as follows:

- Development of a web based platform with online presentations to seniors, which received positive feedback from the participants.
- Increased the usage of the GSFS Twitter account to provide guidance on multiple safety topics, which included:
 - Kitchen Fire Safety
 - Campfire Safety
 - Discarding of Smoking Materials
 - Physical Distancing
 - Boating Safety

Fire Fleet/Logistics

Purchases

The Fleet section has been responsible for the purchase, inventory and distribution of Personal Protective Equipment related to Covid-19.



New structural firefighting hose and forestry hose have been purchased and will replace old existing hose throughout the GSFS apparatus.

The following projects are currently underway and expected to be completed by December 31, 2020:

- Three Fire Engines from KME
- Two Tankers from Dependable
- One Ladder Truck from eOne

Annual Testing

The following inspections and testing have been completed for 2020:

- Annual Self Contained Breathing Apparatus (SCBA) testing has been completed.
- Annual Fire training tower simulator inspection completed by Drager. Inspection passed.
- Annual nondestructive aerial ladder testing completed. All apparatus passed (NFPA 1911).
- Annual pump testing occurring at Ramsey lake at the former Canoe Club site (NFPA 1911).
- Annual Ground ladder testing completed (NFPA 1932).

Vehicles and Building Maintenance

GSFS will be retrofitting a retired support truck to become the new on scene support vehicle that will attend all major incidents. The support vehicle will provide additional Personal Protective Equipment, firefighting appliances, nutritional and hydration needs to the emergency responders.

Vehicle exhaust capture systems are currently in progress for installation at five career fire station locations. CGS Building and Assets are working with Fire Fleet on the specific requirements. This project will significantly improve the H&S of all those who reside within the Fire Stations through the reduction of exhaust emissions in the stations.

Fire Training

Program Delivery

The Training section has been working on the delivery of the following programs:

- Swift Water Rescue annual training is on schedule.
- High Angle Rescue training – Specific skills are being developed.
- Pump Operations Learning Management System (LMS) based component in accordance with NFPA 1002 has been offered to Volunteer Firefighters. This program's duration is one year and will conclude in September 2021.
- Haz-Mat Awareness, Operations Core and Mission Specific is being delivered through LMS with the skills development assistance of the North Bay Fire Services. This



program aligns with all aspects of NFPA 1072. Academic, Standards & Evaluations (AS&E) Testing commenced in August of 2020.

- Volunteer Firefighters are continuing their training on skills development and maintenance for NFPA 1001 (1).
- A Career Firefighter training academy commenced on Monday, September 14, 2020 for eight new recruits. Graduation from the nine week recruit training will occur on November 13, 2020. This first step in firefighter development for Career Firefighters represents the core foundation for NFPA 1001 (1 & 2) Firefighter Professional qualifications, NFPA 1006 Technical Rescue Personal Professional qualifications, and Emergency First Response (EFR).



For Information Only

Fire Services Public Education

Presented To: Emergency Services Committee

Presented: Thursday, Oct 15, 2020

Report Date: Monday, Sep 21, 2020

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

Greater Sudbury Fire Services is mandated by the Fire Protection and Prevention Act, 1997 to establish a program in the municipality which must include public education with respect to fire safety and certain components of fire prevention.

This report provides a review of the existing programs and resources currently used to educate the citizens of Greater Sudbury as well as new formats and initiatives in development to address the challenges caused by Covid-19.

Financial Implications

There are no financial implications associated with this report.

Signed By

Report Prepared By

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Digitally Signed Sep 21, 20

Financial Implications

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Recommended by the Department

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Ed Archer
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Background

The Fire Protection and Prevention Act, 1997 (FPPA) requires all municipalities in Ontario establish a program which must include public education with respect to fire safety. These programs and education increase awareness which aim to reduce the loss of life and property within the municipality.

The Public Safety Officers, Fire Prevention Officers and Firefighters of the City of Greater Sudbury Fire Services (GSFS) bring life-saving messages to the community through many public fire safety education programs and activities.

These programs and activities target risks identified through a community risk assessment which considers previous fire losses, building stock, and the demographic profile of the municipality. GSFS partners with a variety of community groups and organizations who provide leadership and set good examples when working towards public fire safety education in the community.

The Public Education section is comprised of two Public Safety Officers (PSOs) dedicated to providing fire and life safety information to our community. The PSOs have achieved the certification of (National Fire Protection Association) NFPA 1035 Level I Public Fire and Life Safety Educator and Public Information Officer.

The COVID-19 pandemic has created some unique challenges pertaining to the delivery of our traditional presentations. The PSOs have developed and are working towards alternative options for the distribution of information while modifying our current programs to make them more web friendly and available online. The PSOs are following Public Health Ontario guidelines for physical distancing and group gatherings, as such have been delivering their information and safety messaging through alternative means such as video conferencing and online videos.

Public Education Programs and Activities



Inflatable House School Program

Fire safety education programs delivered at schools are one of the most effective ways to create future fire safe generations. The inflatable house provides students the opportunity to identify common hazards found in their home and tips on how to eliminate these hazards. The inflatable house emphasizes home escape planning and what to do in the event of a fire.

Due to COVID-19, PSOs are waiting on direction from Public Health and local School Boards when planning attendance at schools to conduct fire and life safety presentations. Alternative solutions are being considered

and developed in order to provide school aged children with fire and life safety information should these normative visits become postponed.

Fire Station Tours (Schools, Daycares, Community Groups)

Fire Services provides station tours to school children, families and a number of diverse community groups, providing an invaluable opportunity to educate the citizens of Greater

Sudbury. During these tours, participants are taught the importance of working smoke alarms and carbon monoxide detectors, home escape planning, and the roles and responsibilities of a Firefighter.

In order to protect the public and our first responders, all station tours have been postponed in order to keep fire stations safe while limiting the amount of potential exposures that can enter the fire halls.

What's Cooking - for Teens!

During their teen years, young people learn many life skills that will prepare them for the years ahead. However, a critical skill that many teens do not acquire is how to cook safely to prevent devastating fires and injuries. While most teens have some cooking responsibilities at home, within a few years they will be moving out to homes of their own. This is the perfect time for them to learn the basics of safe cooking.

Cooking is the number one cause of home fires in Ontario, so it is critical that young people be aware of the hazards and how to prevent them. "What's Cooking – for Teens!" focuses on the leading causes of kitchen fires and includes important information about smoke alarms and home escape planning.



This program has been designed with a PowerPoint presentation, video content and an electronic test that can be used during the pandemic. It can be distributed to an online audience with minimal modification to the program.

The Arson Prevention Program for Children (TAPP-C)

Fire-play and fire-setting by children and teens is an extremely dangerous behaviour that can result in substantial personal and economic loss to families and communities. TAPP-C is a program for children and teens who have been involved with fire-play and fire-setting behaviors such as playing with matches or lighters, burning paper or garbage, performing lighter "tricks", intentionally setting fire to buildings, or making bombs. It is an evidence-based collaborative program that involves the fire service and mental health professionals working together to ensure that all children involved with fire have the best chance possible for a safe and healthy future. As part of the TAPP-C program, fire department personnel work with juvenile fire-setters to improve home fire safety, teach fire safety knowledge and skills, and provide positive role models.

Child Welfare Professionals/Children's Aid Society

Most of the home fires that result in the injury and death of children are preventable, and many of the fires occur in homes where child welfare professionals are involved. The Public Education section recognizes the importance of working with child welfare professionals to help educate these families about fire prevention and safety. The PSOs train welfare professionals to raise their awareness about the risk factors associated with home fires, and so they are able to identify safety and prevention strategies that can be used by families.

Partnerships

The PSOs have developed a strong and lasting partnership with local business First General, to raise public awareness of fire prevention and safety. During 2020, three new television commercials were developed and aired on local television channels, covering issues including; Working from Home during Covid-19, Fire Bans, and Backyard Campfires. First General continues to be an excellent partner and resource for GSFS and was the recipient of the Jim Copeland Fire Safety Award in 2019 for outstanding contributions made by individuals, businesses, associations or the media in the field of fire prevention and public education.

Additional partnerships formed in 2020 include Duracell, Enbridge, FARFO, Corsi Real Estate, Rona, Lowes, and First Alert.

Social Media

GSFS uses social media to raise public awareness of fire prevention and safety, and to post information about community events or incidents. This includes a variety of social media platforms, including the fire department website <https://www.greatersudbury.ca/live/emergency-services/fire-services/> and Twitter @CGSFireServices. Over the last few months, Twitter has been the driving force behind our fire and life safety messaging to the community. The fire safety topics that have been distributed through Twitter are BBQ Safety, Open Air Burning Bylaw, Carbon Monoxide, Cooking Safety, Electrical Safety, Farm Safety, Wildfire-Fire Smart, Heating Safety, Home Escape Plans, Smoke Alarms, Smoking and Water Safety.

The PSOs work closely with Corporate Communications and have produced three public service announcements addressing the following fire safety issues: Common Causes of Fire, Fire Department Response and Safe Heating.

Fire Prevention Week



"Serve Up Fire Safety In The Kitchen" is the theme for Fire Prevention Week in 2020. During Fire Prevention Week, members of the GSFS typically promote fire and life safety through display booths located at high traffic areas. These events allow fire department personnel to speak to a wide range of people living in our community about fire safety. With the current COVID-19 situation, specific planning is underway at this time to ensure GSFS will be able to participate in our traditional activities for Fire Prevention Week (attending schools for fire drills, staffing booths at high traffic areas) or have alternative, safe distancing measures, in place. The PSOs are planning for both our traditional activities as well as new activities that will engage with public while ensuring safety due to pandemic restrictions.

Carbon Monoxide Awareness Week

Each year the first week of November is Carbon Monoxide Awareness Week. This is an opportunity to raise awareness of the dangers of carbon monoxide, how to protect you and your loved ones by preventing the build-up of carbon monoxide, and the importance of installing and maintaining carbon monoxide alarms.

Program Development

Smoke Alarm/Carbon Monoxide Program

Plans to redevelop our in-service smoke and carbon monoxide alarm program have been deferred until 2021 due to OFMEM Covid-19 directions. Fire Prevention had intended to initiate a single-family dwelling voluntary smoke and carbon monoxide education program.

Senior/Older Adult Programs

In Ontario, adults 65 years and older are at higher risk of dying in a fire than any other age group. Often these fires happen where people feel the safest – in their homes, and many are preventable. The PSOs are developing a program specific to seniors' safety while living in their home. The program will consist of a PSO conducting a safety inspection of the home, educating the senior on safety and answering any questions they may have. This program goes hand in hand with our "Remembering When – A fire and fall prevention program for older adults". Safety Information and resources will be provided to the homeowner for their information and review. The scheduled launch date of this program is fall of 2020 with CARP, formerly the Canadian Association of Retired Persons being the first to receive access to this program.

Post-Secondary Students Accommodation

Development of a program focused on post-secondary student accommodations is underway. The program is designed to allow the PSOs to work closely with students, faculty, management and various campus associations to raise awareness of fire safety at Laurentian University, Cambrian College and College Boreal.

Approximately 22,500 post-secondary students attend post-secondary schools in the City of Greater Sudbury every September, many of whom are living away from home for the first time. The program will allow PSOs to address the associated fire safety risks in a number of ways, including presentations to students on fire and life safety for both on and off campus living. Topics will include safe cooking practices, maintaining life safety devices in the home, home escape planning and having a fire safe attitude.

Fire Smart-Wild Fires

Public Education section is looking into adopting the Fire Smart–Wild Fires program developed by Fire Smart Canada. The program is designed to provide homeowners the information required to protect themselves and their property from wild fire. The program provides information on reducing the fire load around a property, proper yard maintenance, distancing to combustible materials and fire retardant building materials. More information on the Fire Smart Program can be located on the following website <https://firesmartcanada.ca/>

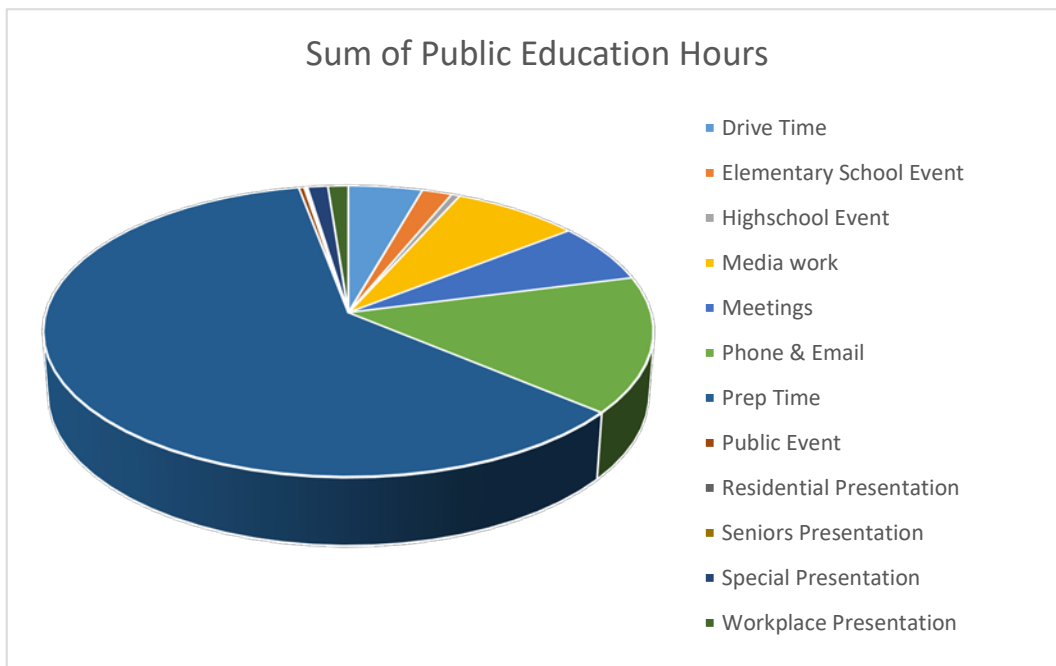
Summary

The Public Education section has been working diligently to review and update our current fire and life safety programs in order to make the delivery of the programs available through many different platforms and where possible, in person delivery. The updating of the current programs will provide additional options for distribution in the future and allow GSFS to reach a wider range of audience. The development of new programs will allow PSOs to address additional fire safety concerns/hazards and help to protect our vulnerable citizens while reducing the hazards and risk of a fire occurring in the residence. Social media has been an essential part of the Public Education section and continues to grow where, as an example, Twitter has allowed

GSFS to inform the community of the risks and hazards associated with fire and provide information and tips on how to protect yourself and family in the event a fire occurs.

Statistics (January 01, 2020 – August 31, 2020)

Row Labels	Sum of Hours
Drive Time	69
Elementary School Event	28
Highschool Event	8
Media work	119
Meetings	102
Phone & Email	235
Prep Time	948
Public Event	5
Residential Presentation	1
Seniors Presentation	2
Special Presentation	19
Workplace Presentation	19
Grand Total	1555



For Information Only

2019 Operating Expenses by Fire Station

Presented To: Emergency Services Committee

Presented: Thursday, Oct 15, 2020

Report Date Thursday, Sep 24, 2020

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

The 2019 fire services operating expenses have been apportioned by station utilizing several distribution methods and classified into cost categories. In order to provide a link between costs and service level, a high-level analysis based on unique calls by station and total vehicle runs by station was provided.

Financial Implications

There are no financial implications associated with this report.

Signed By

Report Prepared By

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Digitally Signed Sep 24, 20

Financial Implications

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Digitally Signed Sep 24, 20

Recommended by the Department

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General Manager of Community Safety
Digitally Signed Sep 24, 20

Recommended by the C.A.O.

Ed Archer
Chief Administrative Officer
Digitally Signed Sep 24, 20

Purpose

Report requested by resolution ES2020-03 at the February 12, 2020 Emergency Services Committee, "That staff be directed to prepare a report detailing the 2019 costs apportioned by station for all operating expenses to be presented at Emergency Services Committee in Q3".

Background

Operating expenses are derived from established service levels. These service levels are then translated into a financial plan for the year through the annual budget process. The budget for Fire Services is established based on actual historical trends as well as predicted future expenses to be incurred.

The annual operating budget for Fire Services is compiled for the City of Greater Sudbury as a whole. The budget is not based on individual stations since the City offers consistent service level standards for the community.

Financial Analysis

Total 2019 cost apportioned by fire station for all operating expenses.

Fire District	Fire Station Number	Fire Station Name	Total Cost
1	1	Van Horne	\$7,905,318
	2	Minnow Lake	\$3,855,238
	3	New Sudbury	\$3,936,395
	4	Long Lake	\$3,888,661
2	5	Copper Cliff	\$203,113
	6	Waters	\$427,201
	7	Lively	\$295,760
	8	Whitefish	\$310,393
	9	Beaver Lake	\$101,316
3	10	Azilda	\$500,843
	11	Chelmsford	\$593,133
	12	Dowling	\$307,007
	13	Vermillion Lake	\$45,462
	14	Levack	\$233,886
4	15	Val Caron	\$239,656
	16	Val Therese	\$2,019,872
	17	Hanmer	\$311,247
	18	Capreol	\$295,933
5	20	Garson	\$425,841
	21	Falconbridge	\$127,450
	22	Skead	\$117,893
	23	Coniston	\$263,293
	24	Wahnapitae	\$292,739
Total Cost			\$26,697,650

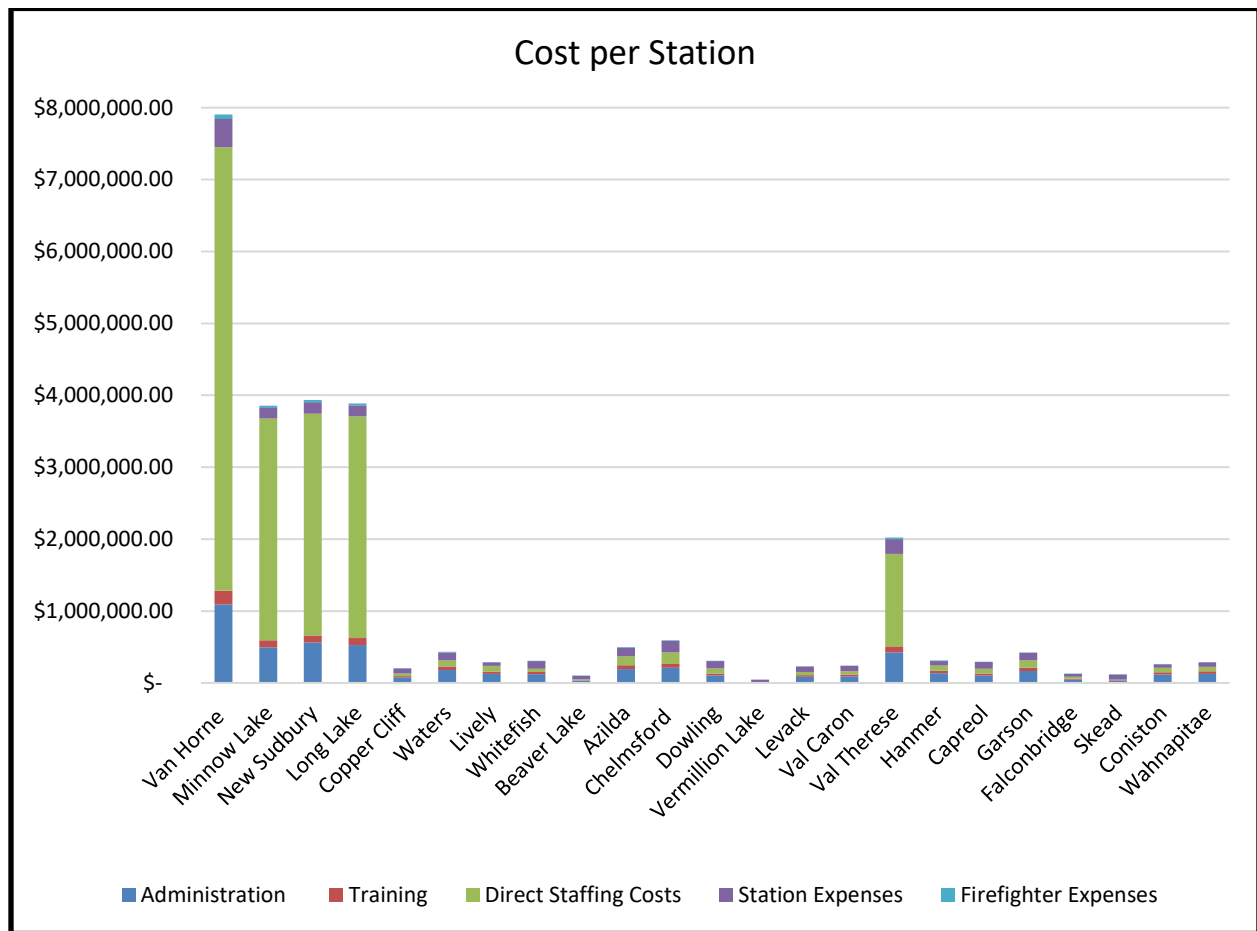
All of the 2019 Fire Services operating costs were included in the analysis with the exception of costs related to fire prevention and education. These costs were excluded since they relate to services delivered to the community as a whole and are unrelated to fire districts and stations.

Operating expenses were first broken down into cost categories based on the nature of the expense. These categories allow for distinction between operating expenses that are fixed & variable in nature.

For the purpose of this report, the operating expense categories identified are:

- Administrative & overhead
- Training expense
- Direct staffing
- Station expense
- Firefighter expense

Where applicable, costs that were distinct and location-specific were allocated to each of the stations. For instance, insurance and energy costs are location-specific which means they are allocated directly to each station. Non-distinct costs were then allocated to the stations based on common denominators. For example, training costs were allocated to the stations based on staffing ratios.



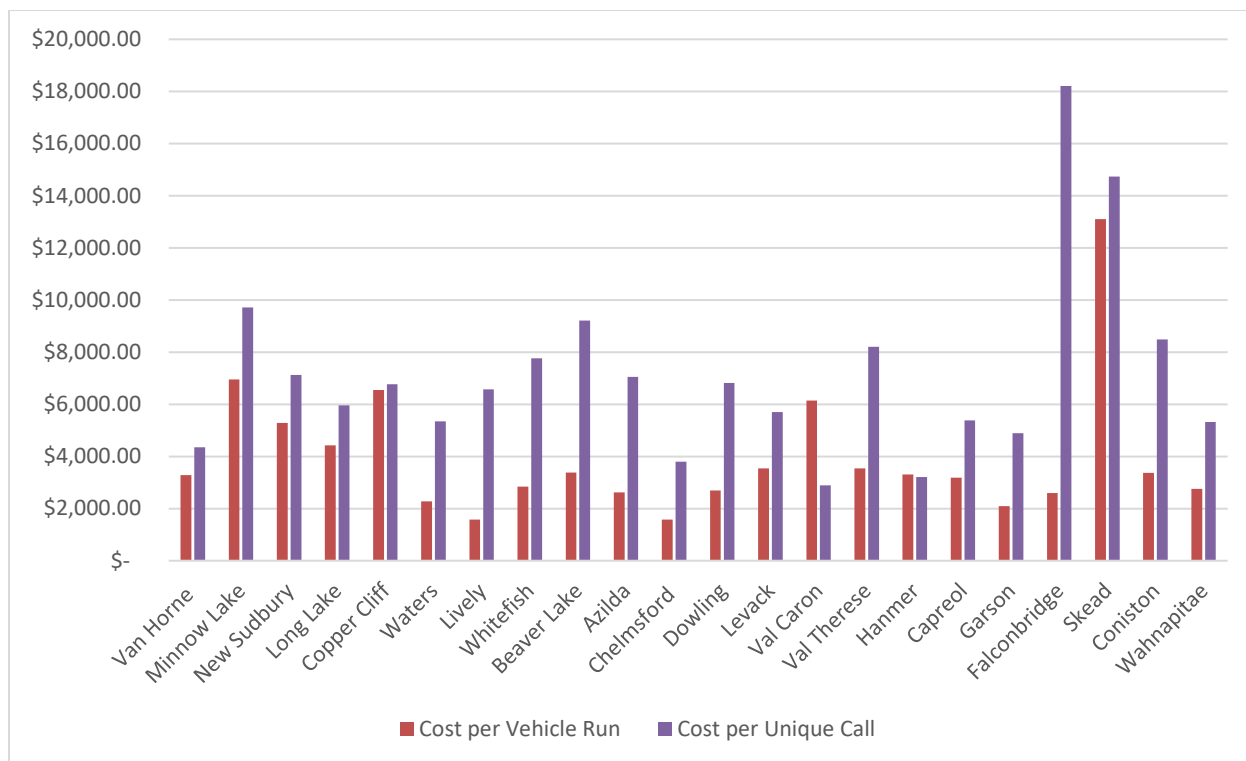
Appendix A includes a financial breakdown of operating expense by category. Appendix B provides definitions of the five cost categories.

Data Analysis

In order to connect costs to service levels, a comparison of cost per unique calls by station and cost per total vehicle runs by station were considered.

Unique calls for service can be defined as each emergency incident to which Fire Services is called to attend. Each unique call for service includes all units which are part of the incident.

Total vehicle runs per station can be defined as the total number of times a station deployed a vehicle to an emergency incident. Each unique call for service may include several vehicles runs from various stations.



Vermillion Lake Station has been excluded from this analysis since as it does not have any firefighters assigned. The last firefighter assigned to this station was reassigned to the Dowling Fire Station in 2018. The building still continues to be maintained and station costs continue to be incurred. Calls for service in this response area are responded to by Dowling and Chelmsford stations, which has been the case for a number of years.

The average cost per vehicle run & unique call, omitting Vermillion Lake station, is:

Station Type	Average Cost per Vehicle Run	Average Cost per Unique Call
Career Station	\$4,989.67	\$6,791.06
Composite Station	\$3,537.43	\$8,210.86
Volunteer Station	\$3,743.22	\$7,186.33
All Stations	\$3,960.49	\$7,161.03

Conclusion

The 2019 fire services operating expenses have been apportioned by station utilizing several distribution methods and categorized by cost category as requested. In order to provide a link between costs and service level, a high level analysis based on unique calls by station and total vehicle runs by station was provided.

Resources Cited

Fire Protection and Prevention Act, 1997, S.O. 1997, c.4

<https://www.ontario.ca/laws/statute/97f04>

Fire Service – Establishing and Regulating By-Law Update

<https://agendasonline.greatersudbury.ca/index.cfm?pg=agenda&action=navigator&id=1521&itemid=18145&lang=en>

Appendix A: Total Operating Expenses by Fire Station

Fire District	Fire Station Number	Station Name	Administration	Training	Direct Staffing Costs	Station Expenses	Firefighter Expenses	TOTAL
1	1	Van Horne	\$ 1,089,644.36	\$ 193,260.33	\$ 6,168,582.85	\$ 391,999.50	\$ 61,831.30	\$ 7,905,318.34
	2	Minnow Lake	\$ 497,451.45	\$ 96,630.16	\$ 3,084,291.42	\$ 145,949.50	\$ 30,915.65	\$ 3,855,238.19
	3	New Sudbury	\$ 563,810.48	\$ 96,630.16	\$ 3,084,291.42	\$ 160,747.29	\$ 30,915.65	\$ 3,936,395.01
	4	Long Lake	\$ 525,892.31	\$ 96,630.16	\$ 3,084,291.42	\$ 150,931.76	\$ 30,915.65	\$ 3,888,661.30
2	5	Copper Cliff	\$ 76,689.78	\$ 20,013.36	\$ 32,700.92	\$ 70,563.52	\$ 3,145.42	\$ 203,113.00
	6	Waters	\$ 180,368.92	\$ 46,697.84	\$ 87,160.32	\$ 105,634.73	\$ 7,339.32	\$ 427,201.13
	7	Lively	\$ 126,787.78	\$ 31,131.89	\$ 77,952.89	\$ 54,994.42	\$ 4,892.88	\$ 295,759.86
	8	Whitefish	\$ 123,693.60	\$ 31,131.89	\$ 40,949.10	\$ 109,725.98	\$ 4,892.88	\$ 310,393.46
	9	Beaver Lake	\$ 31,019.94	\$ 6,671.12	\$ 11,735.76	\$ 50,840.41	\$ 1,048.47	\$ 101,315.70
3	10	Azilda	\$ 193,389.89	\$ 51,145.25	\$ 128,400.16	\$ 119,869.64	\$ 8,038.30	\$ 500,843.26
	11	Chelmsford	\$ 211,629.21	\$ 51,145.25	\$ 160,297.91	\$ 162,022.52	\$ 8,038.30	\$ 593,133.20
	12	Dowling	\$ 105,915.07	\$ 26,684.48	\$ 67,866.07	\$ 102,347.08	\$ 4,193.90	\$ 307,006.60
	13	Vermillion Lake	\$ 5,405.39	\$ -	\$ 3,366.42	\$ 36,689.80	\$ -	\$ 45,461.61
	14	Levack	\$ 86,975.59	\$ 22,237.07	\$ 45,807.94	\$ 75,370.24	\$ 3,494.91	\$ 233,885.75
4	15	Val Caron	\$ 92,410.21	\$ 24,460.77	\$ 44,878.33	\$ 74,062.76	\$ 3,844.41	\$ 239,656.48
	16	Val Therese	\$ 426,026.00	\$ 81,670.68	\$ 1,289,214.52	\$ 202,260.57	\$ 20,700.20	\$ 2,019,871.97
	17	Hanmer	\$ 133,063.86	\$ 35,579.31	\$ 72,779.08	\$ 64,232.55	\$ 5,591.86	\$ 311,246.66
	18	Capreol	\$ 104,471.23	\$ 26,684.48	\$ 65,607.56	\$ 94,975.55	\$ 4,193.90	\$ 295,932.71
5	20	Garson	\$ 166,384.37	\$ 42,250.43	\$ 105,460.55	\$ 105,105.09	\$ 6,640.34	\$ 425,840.78
	21	Falconbridge	\$ 47,709.27	\$ 11,118.53	\$ 28,506.17	\$ 38,368.83	\$ 1,747.46	\$ 127,450.26
	22	Skead	\$ 29,353.37	\$ 6,671.12	\$ 8,520.43	\$ 72,299.89	\$ 1,048.47	\$ 117,893.29
	23	Coniston	\$ 117,170.46	\$ 31,131.89	\$ 62,178.93	\$ 47,918.70	\$ 4,892.88	\$ 263,292.86
	24	Wahnapitae	\$ 127,403.22	\$ 33,355.60	\$ 63,237.11	\$ 63,500.24	\$ 5,242.37	\$ 292,738.54
TOTAL			\$ 5,062,665.75	\$ 1,062,931.80	\$ 17,818,077.30	\$ 2,500,410.58	\$ 253,564.53	\$ 26,697,649.96

Appendix B: Cost Category Definitions

The five main cost categories used in the report are defined as follows.

Administrative & Overhead:

These expenses include an allocation of costs to manage all fire personnel, costs to manage, maintain and operate the current fire fleet of vehicles and apparatus, dispatch, communication and software costs. The majority of these costs are fixed in nature.

Training Expenses:

Include the cost to provide training to all fire suppression personnel. This includes salaries, wages & benefits of the training officers, purchase of training materials and services, along with operating costs of the fire tower located at the Lionel E. Lalonde Centre. These costs are tied to service levels as outlined in the Establishing and Regulating Bylaw (2020-58); training standards outlined by the National Fire Protection Association standards and the Ontario Fire Marshal's Office Section 21 requirements.

Direct Staffing:

Consist of the salaries, wages & benefits of fire personnel to provide fire suppression services for the City of Greater Sudbury allocated by station. These costs include all salaries & wages paid to firefighters, such as regular wages, overtime, training pay, statutory holiday pay, retention & recruitment pay. Direct staffing costs for career stations are driven by service level as outlined in the Establishing & Regulating Bylaw and minimum staffing levels as set out in the Sudbury Professional Fire Fighters Association Collective Bargaining Agreement. Direct staffing costs for volunteer stations are driven by call volumes, training and other standards outlined by the National Fire Protection Association, the Ontario Fire Marshal's Office Section 21 requirements, and terms and conditions under the Christian Labour Association of Canada Local 920 Collective Bargaining Agreement.

Station Expenses:

This category includes expenses that are directly attributed to operating the station. These include energy costs, insurance, building repairs & maintenance, garbage collection, janitorial, snow & ice control and amortization. These costs are variable in nature and are driven by the number of stations.

Firefighter Expenses:

Firefighter expenses are costs that can be directly attributed to the number of firefighters, both career & volunteer. These expenses include uniforms, firefighting supplies and protective clothing. Should firefighters be redistributed to another fire station, these costs would also be redistributed. These costs are variable in nature and are driven by the number of firefighters employed by the City.

For Information Only

Emergency Management Update

Presented To:	Emergency Services Committee
Presented:	Thursday, Oct 15, 2020
Report Date	Monday, Sep 21, 2020
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 information report provides the Emergency Services Committee with an overview of recent business activities, relevant statistics and good news stories in the Emergency Management Section, Community Safety Department.

Financial Implications

There are no financial implications associated with this report.

Signed By

Report Prepared By

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Digitally Signed Sep 21, 20

Manager Review

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Digitally Signed Sep 21, 20

Financial Implications

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Manager of Financial Planning & Budgeting
Digitally Signed Sep 21, 20

Recommended by the Department

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General Manager of Community Safety
Digitally Signed Sep 21, 20

Recommended by the C.A.O.

Ed Archer
Chief Administrative Officer
Digitally Signed Sep 21, 20

Executive Summary

This report aims to provide The City of Greater Sudbury Emergency Services Committee with an update on information as it relates to 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 safety of residents in community emergencies. The Emergency Management and Civil Protection Act (EMCPA) govern this Section. The Office of the Fire Marshal and Emergency Management (OFMEM) and the Greater Sudbury Emergency Management Advisory Panel provide further direction and advice to the Emergency Management Section. This Section offers 24/7 support with a primary focus on the safety of our citizens through the effective management of community risks and emergencies.

Emergency Management

Emergency Response

COVID-19

In early January 2020, Public Health Sudbury & Districts (PHSD) alerted the Infectious Disease Planning and Response Committee (IDPRC) of a viral pneumonia outbreak in Wuhan, China. The IDPRC met on January 24th to discuss the recent developments of the novel coronavirus as well as preparation and response in the event Greater Sudbury was impacted.

On January 27, 2020, City of Greater Sudbury entered Situational Awareness, in support of PHSD through a special convening of the Community Control Group (CCG).

On March 13th 2020, an internal committee was established “CGS COVID -19 Planning and Advisory Committee”, for enhanced monitoring and support to the CCG in response to COVID-19. The Emergency Operations Centre (EOC) was activated on March 16th and transitioned shortly after to virtual meetings to comply with social and physical distancing measures.

Mayor Bigger declared a State of Emergency on April 6, 2020, as the outbreak of COVID-19 constituted a significant danger that could result in serious harm or death.

The Emergency Management section has been engaged in discussions with the Provincial Emergency Operations Centre (PEOC) since the onset of the pandemic. Discussions continue weekly with the PEOC where a Municipalities and Ministries update is provided in order for CGS to maintain a situational awareness at the Provincial level.

To ensure community engagement throughout the pandemic the Greater Sudbury Emergency Management Advisory Panel (GSEMAP) has gathered weekly to discuss local challenges, impacts and changes due to COVID. Continued engagement remains a focus to ensure local educational institutions, healthcare agencies, first responders, and leaders from the private sector remain connected and can have their concerns and questions addressed or escalated by CGS Director of Communications, Ian Wood.

The Community Control Group which includes the CAO from Health Sciences North and the Medical Officer of Health from PHSD continue to meet weekly to maintain situational awareness. The focus of our discussions have been on the CGS response to COVID-19 including lessons learned to improve the planning and response for resurgence in the coming months.

Emergency Management is participating in the COVID resurgence planning working group lead

by the General Manager of Corporate Services. Work is underway to review lessons learned, identify gaps, address needs of CGS Services and plan the next steps in the response to COVID. This group includes members from the Community Control Group, the healthcare sector, Economic Development, Social Services, Community Safety, Long Term Care, and Police Services.

Host Community Planning

Annually, the Office of the Fire Marshal and Emergency Management (OFMEM) seeks host communities' assistance to plan for the health, safety and well-being of First Nations community residents in the event there is a need for evacuation due to the threat of flooding or forest fires.

As a result of COVID-19, many traditional host communities were unable to act as host to evacuees due to the risk of illness and spread of COVID-19 in their communities.

In light of COVID-19, OFMEM developed a new framework that would help First Nations residents stay in their communities. The decision to evacuate a community during this time would only be made in exceptional circumstances (i.e., potential threat to life and limb) and only if all other options to keep members in their community have been exhausted or unsuitable.

The City of Greater Sudbury agreed to serve as a host community if a need to relocate members of a First Nation community were to occur in Northwestern Ontario. Emergency Management conducted planning sessions with multiple stakeholders including; Indigenous Services Canada, Shkagamik-Kwe Health Centre, CGS Paramedic Services, Ontario Health, Health Sciences North, CGS Leisure Services, Greater Sudbury Police Service, and Public Health Sudbury & Districts. The objective of this group was to ensure CGS would be prepared to host evacuees and the safety and well-being of both CGS residents and any visitors would be achieved while hosting through a pandemic. Although the flood risk was very high in the northwest this spring we did not host any visitors from affected communities as they were accommodated by other communities that were, typically, closer to their homes.

Hot Weather Response

The City of Greater Sudbury (CGS) and Public Health Sudbury & Districts (PHSD) have collaborated to develop a Hot Weather Response Plan (HWRP) for Greater Sudbury.

Every day between May 15 and October 15, PHSD monitors weather data from Environment and Climate Change Canada, including temperature and humidex for the City of Greater Sudbury. Additionally, PHSD receives notification from Environment and Climate Change Canada when Heat Warnings will be issued based on forecasted temperatures.

The objectives of the HWRP are:

- To ensure that all agencies working with vulnerable groups are provided with information on what precautions to take when temperatures reach extreme levels
- To coordinate a community response when temperatures reach extreme levels
- To ensure that high-risk populations are cared for when temperatures reach extreme levels
- To provide cooling centres when appropriate
- To activate the City's Emergency Response Plan when appropriate

In response to COVID-19, provincial emergency orders closed facilities that were traditionally available to provide relief for residents during extended heat conditions. These include malls, pools, beaches, libraries and recreational facilities. The closure of municipal facilities added additional challenges as we attempted to meet the needs of the City's most vulnerable throughout extended heat alerts.

For this reason, the City modified the Hot Weather Response Plan to align with available CGS resources and the provincial emergency orders that were in place at that time.

To ensure emergency heat relief assistance is available and accessible to residents in need, the City in consultation with PHSD made the following modifications:

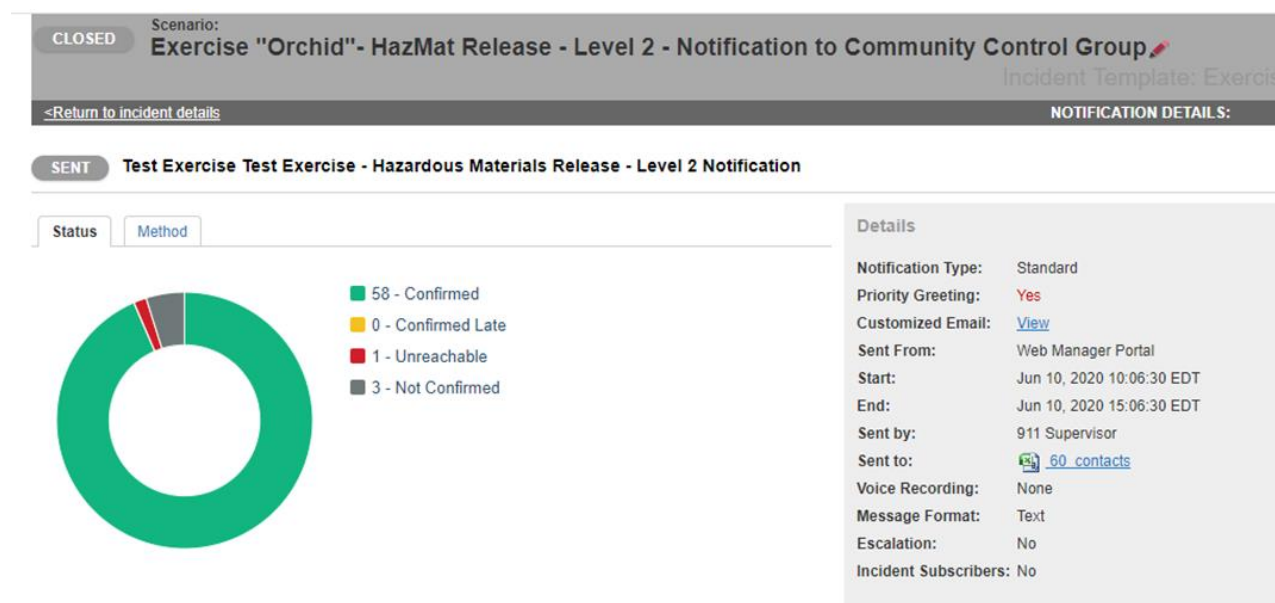
- Extended the hours of operation for the Sudbury Arena which was used to support the downtown vulnerable population for meal services and to act as a shelter from the elements
- Enhanced and provided support to the YMCA for its use as a shelter from the heat, which also included extending their hours from 12:00 p.m. to 5:00 p.m. daily
- Red Cross Personal Disaster Assistance was offered when needed for the distribution of bottled water and completion of wellness checks of vulnerable residents
- Use of transit buses as cooling stations throughout the community
- Focused public education and awareness campaign was launched which saw enhanced communication to the public on ways to stay cool at home and while outdoors aligned with Public Health Sudbury and Districts

Training

In light of COVID-19, the first test of the Public Alerting System for 2020 scheduled for March 25th “Exercise Mauve” was cancelled. The second hazardous material quarterly testing for 2020, “Exercise Orchid”, was held on June 10th. Communication process were tested between emergency response and partner agencies who would be involved in a hazardous material release event.

First responders including Emergency Management, Public Health and Vale staff also assembled via the emergency teleconference line, which tested communication systems and processes.

The assessment of the CCG notification process was positive with 94% of CCG members confirming receipt of the notification within 5 minutes.



This exercise provided a training opportunity and ongoing awareness for the Community Control Group and staff. Activities such as this assist in continuously improving our Standard Operating Procedure (SOPs) by identifying gaps and assists responding and partner agencies in improving their response procedures.

For Information Only

Paramedic Services Update

Presented To: Emergency Services Committee

Presented: Thursday, Oct 15, 2020

Report Date: Sunday, Sep 20, 2020

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 information report provides the Emergency Services Committee with an overview of recent business activities, relevant statistics and good news stories in the Paramedic Division, Community Safety Department.

Financial Implications

There are no financial implications associated with this report.

Signed By

Report Prepared By

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Digitally Signed Sep 20, 20

Financial Implications

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Recommended by the Department

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General Manager of Community Safety
Digitally Signed Sep 20, 20

Recommended by the C.A.O.

Ed Archer
Chief Administrative Officer
Digitally Signed Sep 21, 20

EXECUTIVE SUMMARY

This report aims to provide the City of Greater Sudbury Emergency Services Committee with an update on activities, relevant statistics, and recent performance measures within the Paramedic Service Division of the Community Safety Department.

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

COVID-19

During the COVID-19 pandemic, Paramedic Services continues to deliver emergency services in the same quality and form as outlined in our 2020 work plan.

Paramedic Services staffing levels have been minimally impacted and the deployment of emergency resources to service our community has not changed. During the early stages of the pandemic, call volume had decreased by approximately 20%, however, call volume has slowly returned to normal volumes.

Paramedic Services continues to provide additional support to external stakeholders to address the changing demands created by this pandemic.

At the start of the pandemic, Health Sciences North (HSN) prepared to open a COVID-19 Assessment Centre. On March 9, 2020, Paramedic Services met with the North East Local Health Integration Network (NELHIN) and HSN representatives to evaluate the opportunity for Community Paramedicine to work with HSN to operationalize a team to complete mobile in home COVID-19 testing for select individuals unable to make it to the Assessment Centre for testing as part of their application. With the support of the CAO and the General Manager of Community Safety, Community Paramedics assisted with the opening of the HSN Assessment Centre and on March 15, the first in home COVID-19 test was performed by a Community Paramedic. Since early March, we have staffed a team of two specially trained Paramedics 12 hours a day, 7 days a week to test residents in their home. Over the past five months, larger teams of Paramedics completed surveillance COVID-19 testing in Long-Term Care (LTC) facilities, retirement homes, Emergency Child Care Centres, Correctional facilities, First Nations communities, and in the City supported isolation center. Currently, Paramedic staff have tested over 2400 members within our community and continue to operate the CGS Paramedic Services mobile COVID-19 Assessment Centre.

Paramedic Operations

Screening for COVID

The Ministry of Health (MOH), Emergency Health Services (EHS), is responsible under the Ambulance Act for publishing standards for patient care, documentation, safety, equipment requirements and transportation. These requirements are outlined in various paramedic practice documents: Standards, Training Bulletins, Manuals and Guides. During this pandemic, the EHS has been updating COVID-19 Screening Tools for Paramedics and Ambulance Communication Officers (ACO). The ACO performs the initial COVID-19 screening of all 911 calls. Paramedics are advised of the outcome from the ACO screening, which dictates the level of Personal Protective Equipment (PPE) to be used. The ACO advises the callers not to approach the Paramedics when they arrive and to follow their directions to maintain distancing. On arrival,

Paramedics complete an additional screening. The outcome again further supports the decision of which level of PPE to be used for patient care.

Mental Health Support

Paramedic Services recognizes the impact to all front-line workers during COVID-19 pandemic. Support mechanisms, such as information and strategies on managing their mental wellness have been and will continue to be provided. Staff are routinely reminded to reach out to any member of the Peer Support Network (PSN) if they need additional supports. Our PSN team continues to participate in professional development sessions with a local clinical psychologist. These sessions are instrumental in advancing the development of our PSN team, ensuring they are well prepared to assist their colleagues in times of need. The latest session covered how COVID-19 affects first responders.

In May, a Psychology First Aid Toolkit for Frontline Providers was released to all Paramedic Services staff. This resource was developed by a Clinical and Health Psychologist and is specific for frontline responders. The tool kit contained many mental health techniques and resources for staff and served as a one-stop shop to access more comprehensive resources if needed. Our goal has remained to keep our frontline providers safe mentally and physically throughout the pandemic.

Hiring

Paramedic Services have reviewed staffing levels, and as a result, have commenced a part time job competition. This hire is to ensure staffing levels are maintained to support frontline operations.

During the pandemic, College programs were impacted and many Paramedic Services across the province anticipated potential staffing challenges. To help mitigate this issue, the Ministry of Health Emergency Health Regulatory and Accountability Branch (MOH-EHRAB) amended the regulations to allow the hiring of Emergency Medical Attendants. The MOH-EHRAB has postponed the Advanced Emergency Medical Care Assistant (A-EMCA) examination for recent College graduates and will be posting dates for the exam in the near future. The A-EMCA is a requirement for Primary Care Paramedics to practice in Ontario.

In the meantime, Sudbury Paramedic Services conducted the hiring of qualified part-time staff as outlined by the MOH-EHRAB, but amended the orientation and base hospital certification to allow for physical distancing.

Paramedic Services Performance Measures Defined

Paramedic Calls for Service

A measure of calls **received** by Greater Sudbury Paramedic Services by the Central Ambulance Communications Centre (CACC) to respond to emergencies. In simpler terms, the number of calls to 911 for Paramedic Services that resulted in Paramedics being dispatched.

Paramedic Unit Responses

A measure of units **dispatched** by the CACC to Paramedics to service emergencies. This number will typically be higher than calls for service as some calls necessitate the use of multiple ambulances, Paramedic Response Units, or Platoon Superintendent Units.

Paramedic Patients Transported

A measure of patients being transported on both an emergency and non-emergency basis (Table 1).

EMS Calls for Service	15,275
EMS Unit Response	18,235
EMS Patients Transported	10,685

Table 1 - Greater Sudbury Paramedic Services Statistics Jan1-July 27, 2020

Logistics

Personal Protective Equipment

During the pandemic, inventory levels of Personal Protective Equipment (PPE) are being monitored to ensure all staff have the proper equipment to work safely. The availability on specific types of PPE have been challenging and the Logistics staff continue to coordinate the procurement of supplies to ensure PPE levels are maintained and available to meet current and potential increased demands.

Donning the proper PPE for the call type is important to manage PPE levels. We continue to communicate with staff, providing the most current information regarding the proper selection of PPE based on circumstances and most current available information from Public Health Sudbury and Districts.

Hybrid Vehicles

Paramedic Services have purchased three new ambulances outfitted with hybrid electric drive systems. These systems work seamlessly in the background to save fuel and reduce greenhouse gas emissions through a process called regenerative braking. Regenerative braking uses an electric motor to aid in slowing the vehicle down during braking to charge a hybrid battery. Then when the driver accelerates, the hybrid battery releases the stored energy to the electric motor to propel the vehicle. Hybrid electric up fit is reported to improve fuel efficiency by 25% and significantly decreases CO2 emissions. This initiative should reduce greenhouse gas emissions from fuel consumption and lessens our impact on climate change.

Paramedic Services investment in hybrid was to work towards the City's goal of achieving a net-zero emissions target by the year 2050 as outlined in the Council approved Community Energy and Emissions Plan (CEEP). Our goal is to present a report to the Emergency Services Committee in 2021 presenting the results of how the hybrid ambulances are performing and the analysis of fuel costs savings the impact hybrid has in reducing our greenhouse gas emissions.

Enhanced Ambulance cleaning with fogging

The Service is actively working to control and prevent the spread of disease pathogens to employees, patients and the community. We have purchased a disinfection system specifically for vehicle cleaning to help maintain a high level of infection prevention and control for staff and patients.

The Nocospray System disinfection system is a patented dispersion technology that disinfects all hard surfaces. A combination of a portable, propulsion machine (fogger) and the hydrogen peroxide-based disinfectant created to act synergistically with it disinfects all hard surfaces in an enclosed area. Nocospray assists with our normal cleaning processes to clean those hard to reach spots consistently and completely. This system works automatically by itself within the sealed interior of an ambulance. Nocospray's efficacy and practicality has been demonstrated in Canadian hospitals. The Nocospray Disinfection System has been validated and approved by Health Canada. Procedures have been reviewed and approved by CGS Health & Safety and our Joint Health & Safety Committee. This system has been permanently integrated into our regular deep clean process.

Professional Standards

Professional Standards is responsible for the delivery of quality assurance programming consisting of clinical and service delivery auditing to improve patient safety and ensure high-quality clinical care, thereby reducing risks. Professional Standards manages our electronic patient care record system, including quality assurance oversight. Clinical events are monitored and evaluated to identify training and education opportunities for the Paramedics.

Reported number of clinical events: Date range is January 1 – July 31, 2020

Cardiac	Number of calls with at least 1, 12 Lead Acquired	2,018
	Total Cardiac Ischemia related	681
	Number of STEMI	62
	A STEMI is a specific type of heart attack, which can be diagnosed by Paramedics in the pre-hospital setting.	

Neurological	Total Neuro-related	1,130
	Number of Acute Stroke (FAST positive, timeline criteria met)	98
	Average Age in years	71
	An Acute Stroke patient qualifies for specific time-sensitive treatments from the hospital to reduce and reverse damage caused by stroke.	

Sepsis	Number of identified Sepsis cases	86
	Average age in years	70
	A suspected Sepsis patient meets a specific criteria (qSOFA) used to identify patients at risk of death due to systemic infection.	

Cardiac Arrest Medical and Trauma	Total Cardiac Arrest, Medical and Traumatic	246
	Total treated Cardiac Arrest Medical and Traumatic	116
	Number of Medical Arrest with Return of Spontaneous Circulation at any time while in Paramedic Care.	33

Training

Enhanced Training Sessions

During the pandemic, Paramedic Training Officers schedules have been adjusted to provide additional training time with staff. Training staff addresses training needs 16 hours a day, Monday to Friday, to help deliver real time training and support to staff where needed and with a focus on infection prevention and control. Paramedic Training Officers modified the delivery of training by conducting one-on-one sessions with Paramedics. Topics of training included mask fit testing and reviewing all COVID-19 related practices and processes. Throughout the summer, the training officers have continued to review COVID-19 safe work practices with all staff.

Throughout the pandemic, training officers continuously collaborated with HSN and developed new procedures and training material for staff as the pandemic evolved to ensure seamless prehospital care and patient transfer. This collaboration ensured both hospital staff and Paramedics followed same practices as it related to patients who were suspected of having COVID-19.

Community Paramedicine

The Community Paramedicine Section utilizes Paramedics in non-traditional roles providing home visits, clinical interventions, and preventative health initiatives to reduce demand for Emergency Department visits, hospital admissions and to keep our at-risk aged population healthy and at home. We attempt to aid our vulnerable populations by directing them to suitable community resources. Paramedic Services operates a Health Promotion and a Care Transitions Community Paramedic program.

Care Transitions Community Paramedicine Program (CTCP)

The Care Transitions Community Paramedicine Program partners with Health Sciences North to utilize trained Community Paramedics to provide home visits and approved interventions under medical oversight to complex, high-risk patients to assist them in transitioning from acute care to community and/or self-supported in-home care.

Goal: To decrease Emergency Department visits and readmissions for identified high-risk patients with chronic disease (CHF, COPD, and diabetes) compared to their past utilization. Paramedics assigned to the CTCP continue to deliver services as outlined in the 2020 work plan during the pandemic.

From January 1, 2020 until June 30, 2020, there were 266 active patients enrolled within the program and only three patients reported the need to utilize our 911 service for the treatment of their chronic health condition. There were 29 referrals to either primary care and/or community service, thus improving the quality of life for these patients.

In an effort to reduce in person contacts during COVID-19, the CTCP increased the number of patient contacts over the phone. Home visits continue to be conducted to those that are deemed necessary or Just in Time (JIT). These JIT visits are for those situations of chronic illness

exacerbation to allow CTCP Paramedics to intervene prior to activation of 911 or an Emergency Department visit.

Visits completed / JIT	311 / 120
Working Days	161
Active Patients	266
911 Calls Related to CTCP	3

Health Promotion Community Paramedicine (HPCP)

The objective of this program is to maintain and expand health promotion, education and injury prevention. This program will also assist citizens in chronic disease recognition and prevention, injury awareness/prevention strategies, referrals and health system navigation assistance. The primary goals of this program are to mitigate emergency calls and hospital visits, keep our “at-risk” aged population healthy and at home. This is an attempt to aid our vulnerable populations and redirect them to more suitable community resources other than the Emergency Department.

During the pandemic, the HPCP program collaborated with various community agencies in our provision of COVID-19 mobile testing to ensure our patients are tested and may remain safely in their place of residence. These include:

- Assisting HSN COVID-19 Assessment Centre in screening phone calls from citizens to evaluate if COVID testing should be conducted, scheduling in-home testing by the Community Paramedic Mobile Testing Group for those in our community who are unable to physically attend the HSN COVID-19 Assessment Centre, and are members of the mobile testing group who provide the in-home COVID-19 testing.
- Establishing a priority referral process to HPCP from NELHIN / Maison McCulloch Hospice for those who are in the community who require COVID-19 testing for admission to either facility.
- When our CPs provide COVID-19 testing for an older adult, the North East Specialized Geriatric Centre can be utilized where CPs may video conference with a Geriatrician MD and the older adult during the CP physical assessment portion of the COVID test. The Geriatrician will work with the CP with the patient to offer enhanced patient assessments and follow-up.
- A group of Primary Care Physicians may be reached by phone to function as CP medical oversight physicians. They have the ability to offer guidance / follow-up to patients seen by the CP if required.
- Sudbury and District Nurse Practitioner Clinic (SDNPC) with Dr. Alex Anawati and Canadian Mental Health Association (CMHA) have collaborated with the Health Promotion Community Paramedic Program which sees CP's providing on demand COVID-19 testing every morning at the established Temporary Emergency Shelter (TES) at 1500 Regent Street and Withdrawal Management at 336 Pine St. Health Promotion Community Paramedics are providing clinics to the homeless population to meet low acuity health needs and provide referrals.

Our Community Paramedics are supporting our community by providing community COVID-19 testing. We have completed over 2,500 community swabs to date. We have resumed our Paramedic referral and Community Mobilization Sudbury-Rapid Mobilization Table (CMS-RMT) work and will soon be re-establishing our CP@Clinic Programs utilizing some virtual technology and remote patient monitoring.

For Information Only

Paramedic Services - 2019 Response Time Standards Report

Presented To: Emergency Services Committee

Presented: Thursday, Oct 15, 2020

Report Date: Thursday, Sep 17, 2020

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 information report provides the Emergency Services Committee with the Response Time Standards actuals reported by Paramedic Services for 2019 in March of 2020 as per legislation.

Financial Implications

This report has no financial implications.

Signed By

Report Prepared By

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Deputy Chief of Paramedic Services
Digitally Signed Sep 17, 20

Financial Implications

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Purpose

The purpose of this report is to update the Emergency Services Committee on Paramedic Services Response Time actuals for 2019 that were submitted in March of 2020 to the Ministry of Health and Long Term Care, as per legislation. Our current Response Time Standards (RTS) plan was established in 2013 and approved by Council as required under the Ontario Ambulance Act. The RTS plan provides the Level of Service by establishing and maintaining response time performance targets to meet the needs of the community.

Background

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 for municipal input when creating 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.

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 (SCA) 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 (CTAS)

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 most critically ill 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 (SCA)	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

Timelines for submission and reporting:

- October 1st of each year report to the MOHLTC the Response Time Standards, as approved by Council, for the upcoming year;
- By March 31st 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.

Response Times 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 is to determine and report on only the percentile of time either a defibrillator (*EMS, 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 responsible to set both the response time target and the percentile these response times are achieved. Paramedic Services has not changed the RTS plan since the MOHLTC implemented legislative changes in 2013. It is important to note Sudbury has one of the more aggressive RTS plans within the Province compared to other comparable services RTS plan (Figure 1). Paramedic Services continuously seeks opportunities to improve response time performance.

CGS Paramedic Services RTS Comparison to Other Services

Level of Acuity	Type of Call	Sudbury Approved RTS	Ottawa Approved RTS (2019)	York Approved RTS (2019)	Waterloo Approved RTS (2019)
Sudden Cardiac Arrest (SCA)	Patient has no vital signs (6 minutes)	70%	65%	60%	50%
CTAS 1	Critically ill or have potential for rapid deterioration (8 minutes)	80%	75%	75%	70%
CTAS 2	Potential to life, limb or function, requiring rapid medical intervention, controlled acts (10 minutes)	85%	75%	80%	80%
CTAS 3	May progress to serious problem. Associated with significant discomfort or affecting ability to function	85% 15 minutes	75% 15 minutes	90% 15 minutes	80% 11 minutes
CTAS 4	Conditions that would benefit from intervention or reassurance	85% 15 minutes	75% 20 minutes	90% 20 minutes	80% 12 minutes
CTAS 5	Non urgent, chronic, without evidence of deterioration	85% 15 minutes	75% 25 minutes	90% 25 minutes	80% 12 minutes

Figure 2

In March of 2020, the RTS actuals for 2019 were submitted to the MOHLTC, these are found below, (Figure 3). A comparison of RTS actuals from previous years are identified, (Figure 3). Paramedic Services analyses call volume trends, response times and the deployment of paramedic resources to achieve our council approved response time performance plan.

Level of Acuity	Type of Call	Approved RTS %	RTS% (2017)	RTS% (2018)	RTS% (2019)
Sudden Cardiac Arrest (SCA)	Patient has no vital signs (6 minutes)	70%	73%	70%	61%
CTAS 1	Critically ill or have potential for rapid deterioration (8 minutes)	80%	80%	79%	81%
CTAS 2	Potential to life, limb or function, requiring rapid medical intervention, controlled acts (10 minutes)	85%	88%	86%	88%

CTAS 3	May progress to serious problem. Associated with significant discomfort or affecting ability to function (15 minutes)	85%	97%	97%	97%
CTAS 4	Conditions that would benefit from intervention or reassurance (15 minutes)	85%	98%	98%	97%
CTAS 5	Non urgent, chronic, without evidence of deterioration (15 minutes)	85%	97%	98%	98%

Figure 3

Analysis

During 2019, Paramedic Services did not make our response time target for Sudden Cardiac Arrest (SCA). To meet the SCA Response Time Standard (RTS) of 70%, a defibrillator had to arrive on scene within 6 minutes for 102 of the 145 SCA's. A defibrillator arrived on scene for 88 of the 145 SCA's missing the target by 14 calls for a RTS of 61%.

Of the 57 calls where a defibrillator did not arrive on scene within 6 minutes, 20 calls, or 34%, were geographically located beyond the total response time of 6 minutes. In addition, it is worth noting, of the 57 calls that did not achieve the target, 17 missed by sixty seconds or less.

Many aspects of service delivery, including response times, have been impacted due to COVID. Some of the factors include the decrease in ambulance availability due to extended time to transfer patients to hospital staff, enhanced cleaning of ambulances and delays in initial patient contact due to enhanced personal protective equipment for the delivery of clinical care. Based on the continued impacts of COVID we will not be making any recommendations to Emergency Services Committee to alter the current plan until the operational environment has normalized.

Evaluating Response Times

A top priority of Paramedic Services is to provide the best possible prehospital clinical care to the residents and visitors of City of Greater Sudbury in the most effective and efficient method possible. Paramedic Services continues to evaluate items that effect response times, these include:

- Reviewing call volume trends.
- Reviewing and making adjustments to deployment strategies to meet evolving demands.
- Reviewing medical tiered response protocol with Fire Services.
- Evaluating the local public access defibrillation program.
- Reviewing CACC's performance and ensure they are utilizing the most appropriate resource.
- Reviewing paramedic response performance.

Sudbury Paramedic Services remains committed to the continual analysis of performance and seeks system improvement opportunities.

Conclusion

Paramedic Services submitted our RTS 2019 actuals in March 2020, as per legislation. Due to the current environment surrounding COVID, Paramedic Services does not recommend changes to the RTS Plan for 2021. However, in 2021, a RTS update will be provided to the Emergency Services Committee along with any recommended changes needed to ensure the delivery of services meets the needs of the community.