

Paramedic Services Update – February 2022

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Prepared by:	Paul Kadwell Community Safety
Recommended by:	General Manager of Community Safety

Report Summary

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

Relationship to the Strategic Plan, Health Impact Assessment and Community Energy & Emissions Plan (CEEP)

This report refers to operational matters and has no direct connection to the Community Energy and Emissions Plan.

Financial Implications

There are no financial implications associated with this report.

Background

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 Services 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.

Paramedic Operations

COVID-19

Paramedic Services staffing levels have seen an impact with approximately seven percent of paramedics off due to being COVID-19 positive, being a close contact, or experiencing emergency childcare issues. The deployment of staff for emergency response to service our community has been maintained so far. On January 5, 2022, the Province returned to the modified version of Step Two of the Roadmap to Reopen for at

least 21 days. This change required staff to reevaluate those still performing work in the office and transition to working from home. Those who can work from home are continuing to do so, including managers and support staff.

Employer Provincial COVID-19 Antigen Screening Program

Greater Sudbury Paramedic Services participated in a voluntary antigen screening pilot led by the Ministry of Health, Public Health Ontario, and Ontario Health. The objective of the pilot was to assess the value of rapid antigen testing utilizing the Abbott Panbio brand antigen test as a screening tool to support employee safety and business continuity in a variety of workplaces. Following the pilot, this initiative has concluded resulting in a Provincial Antigen Screening Program (PASP) being introduced. The objective of the PASP is to provide rapid antigen testing utilizing the Abbott Panbio brand antigen test as a screening tool to support employee safety and business continuity in a variety of workplaces. The PASP is a voluntary long-term project providing employers in priority settings to add an additional safety measure in high-risk and essential workplaces and to help reduce the spread of COVID-19. Paramedic staff are voluntarily tested for COVID-19 prior to shift commencement up to three times per week or when indicated. Results of the antigen tests are provided within fifteen minutes following test completion.

Paramedic Services commenced with PASP on April 6, 2021 and continue with our routine COVID-19 pre-shift screening practice. As of December 15, 2021, 1,211 PASP tests have been conducted on paramedic staff and all have indicated a negative antigen result. This project will continue until March 31, 2022, when the agreement expires with the Ministry of Health.

Screening for COVID

The Ministry of Health (MOH) and Emergency Health Services Branch (EHSB) 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 EHSB has been updating COVID-19 Screening Tools for paramedics and Ambulance Communication Officers (ACO) as new knowledge is discovered about COVID-19. The ACO performs the initial COVID-19 screening of all 911 calls. Paramedics are advised of the outcome from the ACO screening, and with this information, paramedics then don the necessary Personal Protective Equipment (PPE) required to protect themselves. Additional measures have been put in place to protect responding paramedics. These include instructions the ACO provides to the callers to not approach the paramedics when they arrive, instructions for all those present to wear a mask, and to follow responding paramedic's instructions to maintain distance. On arrival, paramedics also complete a second screening. The outcome of this screening further supports the decision of which level of PPE is to be used for patient care. The COVID-19 screening tool was updated on August 26, 2021 to reflect the latest definitions and advice from the Chief Medical Officer of Health of Ontario.

Sudbury Memorial Park Outbreak Support

Public Health Sudbury and District declared an outbreak at the Memorial Park encampment on October 12, 2021. In support of this group, Paramedic Services collaborated with the Sudbury and District Nurse Practitioners Clinic, Public Health Sudbury and District, multiple City agencies, and Reseau Access to help this population.

Paramedic Services conducted surveillance swabs during the months of October, November and December, yielding 162 voluntary swabs. In addition, Paramedic Services staffed a mobile ID Now (point of care test) in which a paramedic walked throughout the area on October 26 performing an additional 14 swabs.

During this time, our Paramedic Services also responded to numerous first response calls and handed out Naloxone kits to those in need. On January 1, 2022, Public Health Sudbury and District declared the outbreak over.

Expanded Ontario Naloxone Program

In December 2020, Sudbury Paramedic Services commenced participation in the Ontario Naloxone Program in collaboration with Public Health Sudbury and Districts (PHSD). This program has paramedics not only administering Naloxone as part of their standard paramedic care, but also distributing Naloxone kits to identified individuals where appropriate in the course of their duties or when requested from the public. This program permits 24/7 access to Naloxone in Sudbury. This important initiative allows paramedics to promote harm reduction for those who misuse drugs with a goal of improving positive health outcomes in the community.

Since the implementation of this program on December 12, 2020, paramedics have distributed 418 Naloxone kits and continue to support those in need. A total of 391 Naloxone kits were distributed in 2021.

Paramedic Services Performance Measures Defined

Paramedic Calls for Service

A measure of calls were 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).

Requests for Service	Jan 1 - Dec 15, 2021	Jan 1 - Dec 15, 2020	Year over Year
EMS Calls for Service	30,656	27,070	+ 3,586 Increase of 13.2%
EMS Unit Response	37,529	32,692	+ 4,837 Increase of 14.8%
EMS Patients Transported	21,463	18,909	+ 2,554 Increase of 13.5%

Table 1. Greater Sudbury Paramedic Services Statistics

Logistics

Personal Protective Equipment

During the COVID-19 pandemic, inventory levels of Personal Protective Equipment (PPE) are being monitored to ensure all staff have the proper equipment to work safely. The Logistics staff continue to coordinate the procurement of supplies to ensure PPE levels are maintained and available to meet current demands.

Powered Air Purifying Respirator (PAPR)

The Powered Air Purifying Respirator (PAPR) is a battery-powered respirator device that filters the surrounding air with a HEPA filter. The protective hood provides full protection of the head and face and has a clear face cover allowing the patient to see facial expressions and emotion of the paramedic and also allows the patient to hear the paramedic more clearly when being asked questions. The PAPR provides a continuous positive air flow over the entire face area, making it comfortable to wear for extended periods of time.

During the early stage of COVID-19 Paramedic Services purchased 20 PAPR units in October 2020 that were utilized by paramedics during mass swabbing outbreaks and long-distance transfers of COVID-19 positive patients from areas outside of our region. With the highly transmissible Omicron variant and the increased number of COVID-19 positive cases within our region, an additional 5 PAPR units and 160 hoods were purchased in December 2021. The PAPR provides an additional face mask option to the N95 or the P-100 half mask that are currently available for all our paramedics. Over the next few weeks, the PAPR hoods will be arriving and provided to all paramedics once they have completed their training on the proper use, cleaning, and storage of the PAPR.

20 PAPRs were purchased in 2020 at a cost of \$23,170, which was reimbursed by the Ministry of Health through the COVID-19 cost reporting process. The total cost of the PAPR units and hoods purchased in 2021 was \$119,021. This additional purchase in 2021 will be submitted to the Ministry in future COVID-19 cost reporting for reimbursement.

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 also manages the electronic patient care record system and quality assurance. Clinical events are monitored and evaluated to identify training and education opportunities for paramedics.

Reported number of clinical events:

Cardiac	Jan 1 - Dec 31, 2021	Jan 1 – Dec 31, 2020	Year over Year
Number of calls with at least 1-12 Lead Acquired	4,690	3,733	+957 Increase of 25.6%
Total Cardiac related	1,418	1,227	+191 Increase of 15.6%
Number of STEMI**	104	106	-2 Decrease of 1.9%

**** A STEMI is a specific type of heart attack, which can be diagnosed by paramedics in the pre-hospital setting.**

Neurological	Jan 1 – Dec 31, 2021	Jan 1 – Dec 31, 2020	Year over Year
Total Neuro-related	2,548	2,073	+475 Increase of 22.9%
Number of Acute Stroke ** (FAST positive, timeline criteria met)	235	198	+37 Increase of 18.7%

**** An Acute Stroke Patient qualifies for specific time-sensitive treatments from the hospital to reduce and reverse damage caused by stroke.**

Sepsis	Jan 1 – Dec 31, 2021	Jan 1 – Dec 31, 2020	Year over Year
Number of Identified Sepsis cases **	182	167	+15 Increase of 9.0%

***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	Jan 1 – Dec 31, 2021	Jan 1 – Dec 31, 2020	Year over Year
Total Cardiac Arrest, Medical and Traumatic	411	421	-10 Decrease of 2.4%
Total Treated Cardiac Arrest Medical and Traumatic	191	199	-8 Decrease of 4%
Number of Medical Arrest with Return of Spontaneous Circulation at any time while in Paramedic Care	40	52	-12 Decrease of 23.1%

Training

Paramedic Training Officers (PTOs) continue to address training needs and deliver real-time training and support to staff where needed with a specific focus on infection, prevention, and control. The PTOs also continue to complete the fit testing for all paramedics and EVT's for N95 masks ensuring the upmost protection is provided to all staff and community members.

The Training Section will be assisting with the 2022 spring hiring and will be delivering orientation for the successful candidates in early May. The PTOs will be continuing with the mentorship program with these new hires.

The PTOs are also preparing for the delivery of the spring training sessions with front line paramedics. Some of the topics to be covered include: service updates, wound care for geriatric patients, Basic Life Support (BLS) Patient Care Standards General Standard of care section review on Violence/Aggressive patients and the introduction of safe and effective use of spit hoods and soft restraints. Paramedic Services across the Province are reporting an increase in the number of incidents of External Violence Against Paramedics (EVAP) over the past few years. In 2021 our Paramedic Joint Health and Safety Committee conducted a survey with our paramedics to evaluate EVAP. Based on a 20% response by our paramedics, physical assault was the leading cause of EVAP. The review of the BLS and introduction of the spit hood and soft restraints is one step to mitigate the risks of EVAP towards our paramedics.

PTOs are also working with the Community Paramedic (CP) Program to help train paramedics in their new relief position. They will be trained on a variety of topics to assist them in their new role

PTOs have assigned local paramedic students to our paramedic preceptors. College Boreal has five students and Cambrian has a total of 12. CTS will have six new students starting their preceptorship in early spring. Training has also assisted with placement of first year Northern School of Medicine (NOSM) students with some of our Community Paramedic programs.