

MEMORANDUM

TO: Community & Corporate Affairs Committee

FROM: John deHooe, Commissioner & Fire Chief

DATE: March 27, 2018

MEMORANDUM NO.: MEM-FIRE-2018-0008

RE: Comments on Ministry of Health and Long Term Care (MOHLTC) Firefighter – Paramedic Pilot Projects

PURPOSE OF THE MEMORANDUM:

To provide the Community and Corporate Affairs Committee with an overview of Bill 160, Strengthening Quality and Accountability for Patients Act, 2017, and potential implications to Ontario's fire services.

That the Community and Corporate Affairs Committee are advised there is no immediate or anticipated future impact to the Town of Halton Hills Fire Department.

BACKGROUND:

The Ministry of Health and Long Term Care's 2015 Patients First Action Plan for Health Care outlines strategies to improve Ontario's health system that looks to modernize first responder service delivery in a way that is sustainable and responsive to patient care. Specific to fire services, the Action Plan proposes a pilot project that determines whether firefighters certified as paramedics can play a role in enhancing the level of patient care.

This strategy supported by amendments to the Ambulance Act, were introduced as part of Bill 160, Strengthening Quality and Accountability for Patients Act. Bill 160 received Royal Assent on December 12, 2017. The legislation enables two pilot projects hosted by willing municipalities that would allow firefighters certified as paramedics to treat low acuity patients.

COMMENTS:

There is no dispute that modernization of the Act is overdue and welcome; there are however, a number of stakeholder groups that have expressed concern relative to the unknown implications stemming from the enhancements to the Act.

Over the past several months, many stakeholder groups were participants in the consultation process. The Association of Municipalities Ontario (AMO), the Ontario Association of Fire Chiefs (O AFC), the Ontario Association of Paramedic Chiefs (O APC), the Ontario Professional Firefighters Association (OPFFA), the Emergency Services Steering Committee (ESSC), the Emergency Services Advisory Committee (ESAC), the Canadian Union of Public Employees (CUPE), and the Ontario Base Hospital Group (OBHG) brought to light some key themes described below.

1. There is general support for the enhancements to patient care models
2. Due consideration be given to the diverse needs of patients and provider such as; available resources, safety, liability, geography and local capacity
3. Protect public interest by ensuring that only individuals who are prescribed in legislation as paramedics can hold themselves as such
4. Within the circle of care, information should be shared with paramedics
5. Significant concern with implementing a firefighter-paramedic pilot in the absence of program design features
6. Costs associated with the new patient care models must be adequately funded

Specific to AMO for example, a resolution was recently brought forward on behalf of municipalities expressing concern and asking the Government to protect “unwilling municipalities from being forced by arbitrators to have a fire medic pilot or program.” AMO feels there is precedence to justify their concern because fire service 24 hour shifts were imposed onto unwilling municipalities by arbitrators. They further expressed concern with the “glacial speed” at which the Government was moving in modernizing Central Ambulance Communication Centres (CACC) across the province. Such as technology that could provide Simultaneous Notification (SN) to Tiered Response (fire/police) partners.

Note: CACC is solely operated and funded by the province while land ambulance is co-funded 50/50 by the province and the service provider.

The O AFC advised members “that participation in the MOHLTC’s consultation series for this work does not equate to endorsement for the firefighter-paramedic model. O AFC does not have a position in support or opposition to the pilot projects, either.” The O AFC goes on to state they will remain actively engaged in the consultation process until a comprehensive pilot model is designed and shared, which will ultimately enable them to share a position.

The O AFC has remained adamant that Simultaneous Notification must be a feature of the proposed pilot model. Where SN pilots are being conducted, data shows that fire response times have improved resulting in direct benefits to critical patients in need of rapid intervention.

What has become clear throughout the consultation process is there isn't a cookie cutter solution that will fit the needs of all municipalities. Should the firefighter-paramedic pilot prove beneficial, it is anticipated that a select number of larger Ontario municipalities may seize the opportunity to entrench a firefighter-paramedic program. Decisions to participate would be data driven showing tangible patient and economic benefits. Implementation for smaller municipalities operating for example within a two tier system would be highly unlikely.

While the consultation process will continue, there is little doubt that implementation of Simultaneous Notification across the province is a relatively inexpensive solution that would enhance Tiered Response and will save lives.

CONCLUSION:

There are no firefighters currently certified as paramedics within the ranks of the Halton Hills Fire Department. Fire Leadership will continue to follow this discussion closely and advise the Corporate and Community Affairs Committee of any developments that may peak our interest or potentially suggest there will be an opportunity or impact to the Town and/or the Department as a result of regulations derived from Bill 160.

Reviewed and Approved by,

A handwritten signature in black ink that reads "Brent Marshall". The signature is written in a cursive, flowing style.

Brent Marshall, CAO