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Subject AMO Policy Update - Government to Consult on Expanding Medical Responses through Fire Services

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Government to Consult on Expanding Medical Responses through Fire Services

We were told in recent meetings with the Minister of Health and Long-Term Care and the Premier that the government wanted to consult on "how and whether" a permissive voluntary approach that would enable municipal governments, if they chose, to allow full-time firefighters, who are also certified and employed as paramedics, to provide patient care as paramedics in tier response conditions. The Premier shared this yesterday with the OPFFA at its annual conference.

This is a different approach from the OPFFA's initial proposal of expanding the ability of any full-time firefighter to provide enhanced symptom relief after additional training. Fire services can currently administer epi pens, CPR, and defibrillation. The latest proposal raises a number of issues from an employer's perspective that demand careful, full review and consideration. We have been assured that the interest is to have a fully informed policy analysis. The Minister has promised AMO that it will receive any current provincial analysis that has already been worked up. The timing and consultation process has not been confirmed as yet.

Some of the initial areas of concern:

- **Labour related matters:** such as impact on collective bargaining as fire fighters and paramedics are represented by different associations/unions; wage parity matters; how to prevent interest arbitration from making decisions that would rest with the employer; do pension related impacts arise (NRA 65 and NRA 60); who has the disciplinary role/representation.
- **Capacity of the workforce:** how many full time firefighters are currently qualified, trained paramedics; what risks arise in a 24/7 fire services model; staying certified and training requirements; managing the 'culture' of fire and paramedics.
- **Public safety:** treatment of personal health information; patient care standards; communicable disease; certification; adherence to standards.
- Liability and insurance implications.
- **Base hospital physicians:** how is medical oversight provided to a fire fighter who is also wearing a paramedic services hat.
- **Governance:** land ambulance/paramedic services and fire services have different employers and governance accountability, which also means different budgeting along with revenue and expenditure requirements and other reporting requirements.
- Costs will be impacted by all of the above and likely by more factors and will add to fiscal pressures.

OPFFA cites a quicker response time than ambulance. However, fire service response doesn't start until the truck has left the station whereas ambulance response begins when the 911 call is actioned. Understanding what this really means for service and the expectation for better patient outcomes is important to this policy decision. The problem of dispatch and offload at hospital emergency rooms, and the constraints they place on ambulance services, have been well documented and action has been promised. However, the solutions are not proceeding quickly. Improvements to dispatch, triage tools, and emergency room transfers would have a positive impact and improve ambulance services without attracting the type of issues that the OPFFA proposal raises.

AMO will be working with experts in all the areas of concern as we look at the technical, practical, financial, and governing concerns. We will keep you informed as this provincial consultation is undertaken.

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