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Halifax Regional Council
December 10, 2002

February 11, 2003
February 18, 2003

TO: Mayor Peter Kelly and Members of Halifax Regional Council

SUBMITTED BY: *Michael E. Eddy*
Michael E. Eddy, Chief Director, Fire Services

DATE: December 4, 2002

SUBJECT: Emergency Medical Service in the Fire Service

INFORMATION REPORT

ORIGIN

At the Committee of the Whole Council Session on February 12, 2002, Councillor Hetherington asked for a report regarding Fire's role in the delivery of Emergency Medical Service First Response being assumed by our Fire Service.

BACKGROUND

The information requested concerns the Medical First Responders (MFR) Program the Fire Service currently provides to the residents of HRM. The information requested relates to the history on the MFR Service (Rural and Core); who authorized the inclusion of the MFR service as part of the Fire Service; cost to provide the service and expense to residents; possible effects of the proposed 'General Rate Tax Rate'; Provincial contribution to the Municipality; and liabilities to the Fire Service.

DISCUSSION

First, we will look at the history of the medical first responders program:

Rural 1985:

During the mid 1980's, various Rural Fire Departments offered varying degrees of medical service

to their residents and the service varied across the rural Fire Departments, from Departments that did not offer any type of medical service, up to and including Fire Departments who offered an Advanced First Aid service with an Automated External Defibrillator (AED) service.

Rural 1986:

The Chezzetcook Fire Department was the only County Fire Department that operated a full fledged Ambulance Service; they operated under the Nova Scotia Ambulance Operators Association (NSAOA). Under the NSAOA, Chezzetcook provided an Ambulance Service with a standard level of on scene medical care, including transportation to a medical facility, however did not provided AED service.

Rural 1989:

At a Fire Advisory Meeting (April 1989); Warden Lichter of Halifax County suggested that Fire Departments be categorized according to their capabilities and duties in the medical response field.

Rural 1990:

During a 'Special Council Session / Fire Advisory Board' (February 19, 1990), Mr. Greg North, Legal Counsel for the County of Halifax stated that a Fire Department could opt out of providing a medical response service if they feel they could not adequately provide the service. Mr. North also stated; that once the authority was given to the Fire Department (by the respective Department Fire Chief) to commence offering a medical service; they are then accepting the responsibility and are obliged to continue offering that service.

Rural 1991:

At a Fire Advisory Meeting (April 22, 1991); the members confirmed that each County Fire Department was covering the full cost of a medical response service from the Departments budget. The primary expenses were for training and equipment. The Fire Advisory Board agreed that a request be drafted and sent to the Province for financial assistance to supplement first-aid supplies. Also during this meeting, Dr. Michael Murphy introduced the idea of a Medical First Responder Program (currently is in place), this program would provide training and equipment to the Fire Service. (The MFR Program was introduced in Appendix A in a document by Dr. Michael Murphy: "*An Emergency Medical Service System For Nova Scotia Report: Emergency Health Services Nova Scotia EMS Providers*": submitted to the F.A.B. April 1994). Appendix 'A' of this document is Attachment 1.

Rural 1994:

The primary points concerning the Fire Service introduced in Dr. Murphy's Medical Report included:

- 1) Primary source of first responders are Paid and Volunteer Firefighters.
- 2) Fire Service required a clear mandate to provide such a service.
- 3) Obstacles in place included: lack of funded training; standardized equipment; replacement of consumables; civil litigation protection; and medical control (guidance and coverage for the Fire Service while using a medical procedure).

CORE FIRE SERVICE - PRE AMALGAMATION

City of Halifax:

Prior to amalgamation, the Halifax Fire Department responded to 'resuscitator calls' (ex. respiratory arrest and cardiac arrest emergencies). Medical training was provided by the Halifax Fire Training Division with assistance from local ambulance services. The average level of medical certification was the 'Standard First Aid Course' (16hr course). In the early 1990's (prior to '95), the Halifax Fire Department purchased two Automated External Defibrillators (AED) with a limited number of Firefighters qualified on their use. All expenses associated with medical response (equipment and training) were funded through the Halifax Fire Department.

City of Dartmouth:

Prior to amalgamation, the Dartmouth Fire Department responded to medical responses. Medical training was provided through the Dartmouth Fire Training Division, with assistance from various local ambulance services. The level of medical level of certification was the 'Standard First Aid Course' (16hrs). In the early 1990's, Dartmouth Fire utilized one Automated External Defibrillator provided by the Dartmouth Ambulance Service. All medical response costs, (equipment and training) were provided by the Dartmouth Fire Department.

Westphal - Cole Harbour:

The Westphal-Cole Harbour Fire Department traditionally responded to medical responses, prior to amalgamation.

Medical training was provided by the Westphal-Cole Harbour Firefighters, with assistance from the local ambulance service. The level of medical certification was the 'Standard First Aid Course' (16hrs). Eventually, longer on scene medical responses brought into place more in-depth medical training workshops that were certified. The Westphal-Cole Harbour Fire Department was the first to have an ambulance (from the local service) based within the Fire Department facility. Westphal-Cole Harbour Fire purchased two Automated External Defibrillators in the early 1990's; all Staff and Volunteers were qualified to operate the units. All costs associated with the medical response service (equipment and training) were provided by the Fire Department.

Eastern Passage - Cow Bay:

Prior to amalgamation, the Eastern Passage-Cow Bay Fire Department responded to medical responses. Training was provided through the Eastern Passage-Cow Bay Fire Department Training Division, with assistance from the local ambulance service. The 'Standard First Aid Course' (16hrs) was the level of medical training; but this Fire Department completed the Medical First Responders Program, shortly before amalgamation. The Eastern Passage-Cow Bay Fire Department purchased one Automated External Defibrillator (AED) in the late 1980's; all Staff and Volunteers were qualified AED operators. All costs associated with medical response emergencies (equipment and training) were covered by the Fire Department budget. In 1994-95, a Medical First Responders Course was developed with St. John's Ambulance.

Sackville:

The Sackville Fire Department responded to medical responses prior to amalgamation. The medical training was provided by the Sackville Fire Training Division, with assistance from the local ambulance service. The level of medical training was the 'Standard First Aid Course' (16hrs). The Sackville Fire Department was the only 'Core/County' Fire Department to provide and operate their own ambulance service out of the Station (when this unit responded to a medical emergency with a defibrillator, it could only be used if a Medical Doctor was on scene and qualified to operate the defibrillator). Later on the Sackville Fire Department purchased three Automated External Defibrillators (1994), all Staff were trained and permitted to operate the AED's at medical scenes. All costs associated with responding to medical emergencies (equipment and training) were covered through the Fire Department's operating budget. In 1994-95, a Medical First Responders Course was developed with St. John's Ambulance.

Town of Bedford:

Prior to amalgamation, the Bedford Fire Department responded to medical emergencies. The Bedford Fire Department provided (for a period of time) a high level of response to medical calls by the Volunteers who were all Ambulance Staff. Medical training was provided by the Bedford Fire Training Division, with assistance from the local ambulance service. The level of medical training for this Department was the 'Standard First Aid Course' (16hrs). Eventually this training was improved to the 'Advanced First Aid Level' and 'Advanced Life Support' (ALS); completed by the Staff and Volunteers. The Bedford Fire Department purchased one Automated External Defibrillator in the late 1980's. All costs associated with providing an emergency medical response service (equipment and training), were provided by the Bedford Fire Department.

All former County Fire Departments initiated their own fund raising activities for various pieces of much needed medical equipment such as AED's, through Department activities such as selling Christmas Trees, Bingo's, etc. Funding was also provided through donations from community organizations such as Kinsmen, Lions, and Legions

1994 to Present:

In 1994, the possibility of formalizing a province-wide medical first response (MFR) service integrated with EHS and located throughout Rural Nova Scotia was first introduced. It had been demonstrated time and again in several American communities that MFR capability contributed to improve patient outcomes. A decision was made to pilot this service in the eastern region of Halifax County where a large number of volunteer fire agencies were already providing some level of medical response in their communities.

In February of 1996, the QEII Health Sciences Centre's School of Emergency Health Services, in partnership with EHS, hired Mr. Steve Lenihan to further study the requirements of a truly integrated medical first response system. Mr. Lenihan spent the next 10 months traveling the province, holding information sharing sessions with key stakeholder groups, and compiling information on what these stakeholders felt were the requirements of such a service. Mr. Lenihan delivered his report to EHS

in March of 1997. The report contained a series of recommendations on training standards, curriculum, scope of practice, directional and operational support for volunteer services providers.

Mr. Derek LeBlanc was appointed by EHS to coordinate the medical first response program, reporting to the Director of Clinical Operations for EHS, Mr. Mike McKeage. Mr. LeBlanc's major task was to establish a provincial advisory committee, guiding EHS to develop a provincial program.

The first training providers were accredited by EHS in May, 1998. The training to the new MFR Standards commenced in June 1998. The first agencies to receive sponsorship were shipped equipment and supplies in September 1998.

The Province presently has a budget of \$106,000 for the Medical First Responders program for the entire province. Any subsidies that a department can receive is based on predetermined criteria as explained in Attachment #2.

Currently most of the Rural HRF&ES Departments do offer emergency medical response service to their residents, however the level of emergency response service does vary throughout the Rural Region. The medical service levels being offered depends upon a variety of factors such as the number of Volunteers, Department budget, and the local Fire Chief's determination on the level of service their Department will provide - see attachment #2).

As part of the Medical First Responders Program, EHS has included a process where Fire Departments can apply for 'sponsorship' by filling out an application (see attachment #3). The sponsorship program is designed to assist Fire Departments, who without this assistance, may not have the financial resources to provide a Medical First Responders Program. The Core Stations (2-18) are not sponsored by this program, however, most of the Rural Departments (Stations 19-63) are enrolled either fully or partially in the program with the exception of Station 33, Three Harbours Volunteer Fire Department who does not offer a Medical Response Services, according to the EHS-Fire Response Database. (See attached #2).

The level of emergency medical response offered in the Core Stations 2-18, is standard and as recently as October, 2002 has been revised by both the Medical and Fire Service Managers. This new response standard is intended to reduce approximately 50% of the current emergency responses for the Core Stations (2-18) with the exception of Station 16 Eastern Passage-Cow Bay Fire Station, as requested by EHS because they would keep it on the same response category as the Rural Fire Service due to the length of time for an ambulance to respond. The purpose of these revisions was to reduce the number of times that Fire Apparatus were responding to emergencies and were being canceled prior to arrival and/or being canceled upon arrival.

During a six month period during 2002, Core Fire Stations (2 - 18) were dispatched to approximately 3,600 medical related incidents. The Fire Services were utilized on approximately 50% of these calls. The other 50%, they were either sent back once on scene or canceled en route. The new medical response protocol will initiate a Fire Response to 71 predetermined medical determinates,

verses the previously 171 determinates.

Rural Stations (19-63) respond to approximately 700 medical responses per year. Currently, not all the rural stations are dispatched from the Bedford Fire 911 Dispatch Center, however, once the new TRM radio system is in place this will change. At that time, registering and logging of their calls will be possible to ensure more accurate call reports.

The HRF&ES goal is to train all Career and Volunteer Firefighters (40 hour course) to the MFR Standard. To date, approximately 60% of all firefighters, core and rural, have been trained to the MFR Level. The intention after amalgamation was to have one AED on every first out Engine/Medical Response Unit (Core and Rural) and with the exception of a very few Departments, this will soon be achieved

Because of the success of the AED Program, the Fire Service has recorded a number of 'saves'; whereby citizens have been successfully resuscitated after a cardiac arrest both in the Core and Rural stations, prior to the arrival of an ambulance.

The Municipal Government Act and HRM's Administrative Order Number 24 Respecting Fire and Emergency Service in Halifax Regional Municipality has established the role of the Fire Service where provision of emergency medical service is concerned, for both Rural and Core areas.

Present - Expenses:

As we have stated in the history, each of the areas prior to amalgamation included in their budgets for the provision of this service. This service or costs related to providing this service has never been charged back to the residents. In regards to the possible effects of the proposed "General Tax Rate" on this program, it is not anticipated that this new rate, if accepted by Council, will have an impact on our budget.

The costs that the Fire & Emergency Services incur in providing Emergency Medical First Response Service are included in the annual operating budget for Stations 2-18. The Rural Departments also include the operating costs of providing a MFR Service in their operating budgets over and above the sponsorship funds. In both cases, the Provincial Health Department does not provide any funding to the Fire Services outside of the sponsorship program.

The ideal MFR class is comprised of 12 students and training for the MFR Program has been determined to be \$59.00 per student, plus a \$300.00 instructor fee for a 40 hour course. The HRF&ES Training Division has since the commencement of the MFR Program completed 27 programs and has qualified 322 students. Based on this current fiscal year, the budgeted amount the Training Division allocates to provide the MFR Training Program which includes consumables, training, and equipment is \$14,000. The anticipated cost to continue with future training, once the majority of Firefighters have been qualified is \$15,000. and this includes training of Firefighter Recruits.

The estimated cost to the Operations Division is approximately \$16,000 for equipment and supplies to deliver the MFR service in Stations 2 - 18. This amount was incurred because an agreement with EHS was cancelled and as a result we had to absorb the expense of replacing the supplies within our operating budget.

The estimated cost to the Logistics Division in relation to wear and tear on the apparatus approximately \$196,134 annually for the core (Stations 2 - 18). The cost of the service based on the emergency response numbers submitted to the Rural Fire Service (Stations 19 -63) is approximately \$34,415 annually for a combined estimated total cost of \$230,549.

However, if we were to cancel the MFR Program, these costs would not actually be seen as a savings as the firefighters would spend the time previously dedicated to MFR by increasing other programs activities such as Residential Inspections, Fire Prevention, Public Education, and Training.

As of October 01 / 2002, the Core MFR response protocols have been revised. Prior to the revision, there were approximately 171 medical emergencies (determinants) that were used to determine if a Medical Dispatcher would contact Fire Dispatch to activate a Fire Service response to the medical emergency. The Fire Service Managers met with EHS Managers, discussing issues which would improve the medical service offered to the public and to reduce the unnecessary occurrences of dispatching a Fire Apparatus to an emergency scene, and not being used. A review of the medical call protocols determined that they could be significantly reduced. Starting on October 01 / 2002 the Core Stations now operate using 71 medical response determinants with the exception of Station 16 Eastern Passage/Cow Bay. It should be noted that it was EHS request to exclude Station 16 from the new determinants due to their location and they continue to operate as before. Over a 43 day period compared to last year (operating under the previous guidelines) this revision has reduced the call volume by 483 calls.

BUDGET IMPLICATIONS

The budget funding for Logistics \$230,549 both Core and Rural for apparatus maintenance and operating costs to respond to MFR incidents. The Training and Operations Division has a budget of \$14,000 and \$16,000 respectively to provide training and equipment to support the Medical First Responder (MFR) Program.

Should the Fire Service discontinue to offer the MFR Program, the current budget amounts will be required by both the Logistics, Training, and Operations Divisions to offset the cost of increasing Residential Inspection, Fire Prevention, Public Education and Training Programs.

FINANCIAL MANAGEMENT POLICIES/BUSINESS PLAN

This report complies with the Municipality's Multi-Year Financial Strategy, the approved Operating and Capital budgets, policies and procedures.

ALTERNATIVES

- 1) The Fire Service could discontinue the MFR Program to the Municipality.
- 2) The Fire Service continue to offer this program and work with Emergency Health Services (EHS) to monitor and revise the MFR protocols when and as required, to provide an efficient, effective medical response to the residents of HRM.

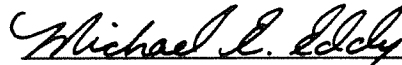
ATTACHMENTS

- Attachment #1 - Report of Emergency Health Services NS EMS Providers, April, 1994
Attachment #2 - Medical First Responders
Attachment #3 - EHS Sponsorship Application

Additional copies of this report, and information on its status, can be obtained by contacting the Office of the Municipal Clerk at 490-4210, or Fax 490-4208.

Report Prepared by: Roy Hollett, District Chief, 490-5309

Report Approved by:


Michael E. Eddy, Chief Director, 490-4238

Attachment #1

FIRE DEPARTMENTS	MEMBERS: Volunteers / Career
Rural Fire Station # 19 - Lawrencetown Beach Vol Fire Dept, Station #1 2385 Lawrencetown Road, Lawrencetown, NS - District 1	Volunteer Firefighters: 44 Career Firefighters: 02 Total: 46
Rural Fire Station # 20 - Lawrencetown Beach Vol Fire Dept, Station #2 2931 Lawrencetown Road, Lawrencetown, NS - District 1	Provide MFR Service: YES - Level 3 Sponsored: YES
Rural Fire Station # 21 - Lake Echo Vol Fire Dept, Station #1 3035 #7 Highway, Lake Echo, NS - District 1	Volunteer Firefighters: 42 Career Firefighters: 03 Total: 45
Rural Fire Station # 22 - Lake Echo Vol Fire Dept, Station #2 8 Kane Street, North Preston, NS - District 1	Provide MFR Service: YES - Level 4 Sponsored: YES
Rural Fire Station # 23 - Chezzetcook Vol Fire Dep RR # 1, Head Chezzetcook, NS - District 1	Volunteer Firefighters: 20 Career Firefighters: 02 Total: 22 Provide MFR Service: YES - Level 3 Sponsored: YES
Rural Fire Station # 24 - Musquodoboit Harbour Vol Fire Dept General Delivery, Musquodoboit Harbour, NS - District 1	Volunteer Firefighters: 26 Career Firefighters: 00 Total: 26 Provide MFR Service: YES - Level 4 Sponsored: YES
Rural Fire Station # 25 - Ostrea Lake / Pleasant Point Vol Fire Dept 1765 Ostrea Lake Road, NS - District 1	Volunteer Firefighters: 18 Career Firefighters: 00 Total: 18 Provide MFR Service: YES - Level 4 Sponsored: YES
Rural Fire Station # 26 - Oyster Pond Vol Fire Dept, Station #1 Oyster Pond, Jeddore, NS - District 1	Volunteer Firefighters: 18 Career Firefighters: 00 Total: 18
Rural Fire Station # 27 - Oyster Pond Vol Fire Dept, Station #2 Owl's Harbour, NS - District 1	Provide MFR Service: YES - Level 4 Sponsored: YES
Total Firefighters District 1: Career - 7+1 Zone Captain = 8 / Volunteers - 168: Total Complement of District Firefighters = 176	
FIRE DEPARTMENTS	MEMBERS: Volunteers / Career
Rural Fire Station # 29 - Moser River & District Vol Fire Dept Highway # 7, Moser River, NS - District 2	Volunteer Firefighters: 35 Career Firefighters: 00 Total: 35 Provide MFR Service: YES - Level 3 Sponsored: YES
Rural Fire Station # 30 - Tangier & Area Vol Fire Dept, Station #1 17559 Highway # 7, Tangier, NS - District 2	Volunteer Firefighters: 15 Career Firefighters: 00 Total: 15
Rural Fire Station # 31 - Tangier Vol Fire Dept, Substation #2 Highway # 7, East Ship Harbour, NS - District 2	Provide MFR Service: Yes - Level 4 Sponsored: YES
Rural Fire Station # 32 - Mooseland Vol Fire Dept Mooseland, NS - District 2	Volunteer Firefighters: 04 Career Firefighters: 00 Total: 04 Provide MFR Service: Yes - Level 4 Sponsored: NO

FIRE DEPARTMENTS	MEMBERS: Volunteers / Career
Rural Fire Station # 33 - Three Harbours Vol Fire Dept RR# 1, Port Dufferin, NS - District 2	Volunteer Firefighters: 25 Career Firefighters: 00 Total: 25 Provide MFR Service: NO Sponsored: NO
Rural Fire Station # 34 - Mushaboom Vol Fire Dept RR# 1, Tangier, NS - District 2	Volunteer Firefighters: 15 Career Firefighters: 00 Total: 15 Provide MFR Service: YES - Level 4 Sponsored: YES

Total Firefighters District 2: Career - 00 / Volunteers - 94 : Total Complement of District Firefighters = 94

FIRE DEPARTMENTS	MEMBERS: Volunteers / Career
Rural Fire Station # 35 - Cooks Brook & District Vol Fire Dept RR# 2, Shubenacadie, Hants County, NS - District 3	Volunteer Firefighters: 12 Career Firefighters: 00 Total: 12 Provide MFR Service: YES - Level 4 Sponsored: YES
Rural Fire Station # 36 - Meaghers Grant Vol Fire Dept, Station #1 Meaghers Grant, NS - District 3	Volunteer Firefighters: 37 Career Firefighters: 00 Total: 37
Rural Fire Station # 37 - Meaghers Grant Vol Fire Dept, Station #2 Elderbank, NS - District 3	Provide MFR Service: YES - Level 4 Sponsored: YES
Rural Fire Station # 38 - Middle Musquodoboit Vol Fire Dept Middle Musquodoboit, NS - District 3	Volunteer Firefighters: 27 Career Firefighters: 00 Total: 27 Provide MFR Service: YES - Level 4 Sponsored: YES
Rural Fire Station # 39 -Upper Musquodoboit Vol Fire Dept Middle Musquodoboit, NS - District 3	Volunteer Firefighters: 42 Career Firefighters: 00 Total: 42 Provide MFR Service: YES - Level 4 Sponsored: YES
Rural Fire Station # 40 -Dutch Settlement & Area Vol Fire Dept Lantz, NS - District 3	Volunteer Firefighters: 18 Career Firefighters: 00 Total: 18 Provide MFR Service: YES - Level 4 Sponsored: YES

Total Firefighters District 3: Career - 00 / Volunteers - 136: Total Complement of District Firefighters = 136

FIRE DEPARTMENTS	MEMBERS: Volunteers / Career
Rural Fire Station # 41 - Waverley Vol Fire Dept, Station #1 Lake Thomas Drive, Waverley, NS - District 4, Canal District	Volunteer Firefighters: 30 Career Firefighters: 00 Total: 30 Provide MFR Service: YES - Level 3 Sponsored: YES
Rural Fire Station # 42 - Wellington-Fletchers Lake Vol Fire Dept 4132 #2 Highway, Wellington, NS - District 4, Canal District	Volunteer Firefighters: 25 Career Firefighters: 00 Total: 25 Provide MFR Service: YES - Level 4 Sponsored: YES

FIRE DEPARTMENTS	MEMBERS: Volunteers / Career
Rural Fire Station # 43 - Grand Lake/Oakfield Vol Fire Dept 22 Lakeside Drive, Grand Lake, NS - District 4, Canal District	Volunteer Firefighters: 06 Career Firefighters: 00 Total: 06 Provide MFR Service: YES - Level 3 Sponsored: YES
Rural Fire Station # 44 - LWF Vol Fire Dept, Station #1 843 Fall River Road, Fall River, NS - District 4, Canal District	Volunteer Firefighters: 29 Career Firefighters: 05 Total: 34 Provide MFR Service: Yes - Level 3 Sponsored: YES
Rural Fire Station # 45 - Fall River Fire Dept, Station #2 3214 Highway #2, Fall River, NS - District 4, Canal District	Provide MFR Service: Yes - Level 3 Sponsored: YES
Rural Fire Station # 46 - Building no longer a Fire Dept; turned over to Ground Search & Rescue	
Rural Fire Station # 47 - Goffs Volunteer Fire Dept, Station #2 (Waverley Sub Station) 2040 Old Guysborough Road, NS - District 4, Canal District	Volunteer Firefighters: 05 Career Firefighters: 02 Total: 07 Provide MFR Service: YES - Level 3 Sponsored: YES
Total Firefighters District 4: Career - 07 / Volunteers - 95: Total Complement of District Firefighters = 102	
Rural Fire Station # 48 - Beaverbank - Kinsac Vol Fire Dept, Station #1 119 Scotia Terrace, Beaver Bank Villa, NS - District 4, Beaverbank	Volunteer Firefighters: 32 Career Firefighters: 00 Total: 32 Provide MFR Service: YES - Level 4 Sponsored: YES
Rural Fire Station # 49 - Beaverbank - Kinsac Vol Fire Dept, Station #2 1581 Beaverbank Road, Corner of Kinsac Road, NS - District 4, Beaverbank	Provide MFR Service: YES - Level 4 Sponsored: YES
Total Firefighters District # 4 (Beaverbank) : Career - 00 / Volunteers - 32 : Total Complement of District Firefighters = 32	
FIRE DEPARTMENTS	MEMBERS: Volunteers / Career
Rural Fire Station # 50 - Hammonds Plains Vol Fire Dept 2050 Hammonds Plains Road, Hammonds Plains, NS - District 5, Western Region	Volunteer Firefighters: 38 Career Firefighters: 02 Total: 40 Provide MFR Service: YES - Level 3 Sponsored: NO
Rural Fire Station # 51 - Upper Hammonds Plains Vol Fire Dept 2050 Hammonds Plains Road, Hammonds Plains, NS - District 5, Western Region	Volunteer Firefighters: 08 Career Firefighters: 00 Total: 08 Provide MFR Service: YES - Level 3 Sponsored: NO
Rural Fire Station # 52 - Prospect Road & District Vol Fire Dept, Station #2 2101 Prospect Road, Hatchet Lake, NS - District 5, Western Region	Volunteer Firefighters: 23 Career Firefighters: 06 Total: 29 Provide MFR Service: YES - Level 4 Sponsored: YES
Rural Fire Station # 53 - Prospect Road & District Vol Fire Dept, Station #1 80 Sandy Cove Road, Terrence Bay, NS - District 5, Western Region	Provide MFR Service: YES - Level 4 Sponsored: YES
Rural Fire Station # 54 - Prospect Road & District Vol Fire Dept, Main Station 3610 Prospect Road, Shad Bay, NS - District 5, Western Region	Provide MFR Service: YES - Level 4 Sponsored: YES
Rural Fire Station # 55 - Seabright Vol Fire Dept Tantallon, NS - District 5, Western Region	Volunteer Firefighters: 24 Career Firefighters: 00 Total: 24 Provide MFR Service: YES - Level 4 Sponsored: YES

FIRE DEPARTMENTS	MEMBERS: Volunteers / Career
Rural Fire Station # 56 -Blackpoint & District Vol Fire Dept, Station #1 (Main) 8579 Highway #3, Blackpoint , NS - District 5, Western Region	Volunteer Firefighters: 22 Career Firefighters: 04 Total: 26 Provide MFR Service: YES - Level 3 Sponsored: YES
Rural Fire Station # 57 -Blackpoint & District Vol Fire Dept, Station #2 5680 Highway #3, Head of St. Margaret's Bay , NS - District 5, Western Region	Volunteer Firefighters: 34 Career Firefighters: 06 Total: 40 Provide MFR Service: YES - Level 4 Sponsored: YES
Rural Fire Station # 58 - Lakeside Vol Fire Dept 26 Myra Road, Timberlea, NS - District 5, Western Region	Volunteer Firefighters: 25 Career Firefighters: 00 Total: 25 Provide MFR Service: YES - Level 4 Sponsored: NO
Rural Fire Station # 59 - Bay Road Vol Fire Dept 4408 St. Margaret's Bay Road, Lewis Lake, NS - District 5, Western Region	Volunteer Firefighters: 10 Career Firefighters: 02 Total: 12 Provide MFR Service: YES - Level 3 Sponsored: YES
Rural Fire Station # 60 - Herring Cove & District Vol Fire Dept, Station #1 57 Ketch Harbour Road, Herring Cove, NS - District 5, Western Region	Volunteer Firefighters: 28 Career Firefighters: 03 Total: 31 Provide MFR Service: YES - Level 4 Sponsored: YES
Rural Fire Station # 61 - Herring Cove & District Vol Fire Dept, Station #2 964 Ketch Harbour Road, Herring Cove, NS - District 5, Western Region	Volunteer Firefighters: 28 Career Firefighters: 03 Total: 31 Provide MFR Service: YES - Level 4 Sponsored: YES
Rural Fire Station # 62 - Harrietsfield-Sambro Vol Fire Dept, Station #1 1070 Old Sambro Road, Harrietsfield, NS - District 5, Western Region	Volunteer Firefighters: 28 Career Firefighters: 03 Total: 31 Provide MFR Service: YES - Level 4 Sponsored: YES
Rural Fire Station # 62 - Harrietsfield-Sambro Vol Fire Dept, Station #2 West Pennant Road, Sambro, NS - District 5, Western Region	Volunteer Firefighters: 28 Career Firefighters: 03 Total: 31 Provide MFR Service: YES - Level 4 Sponsored: YES
Total Firefighters District #5 (Western Region) : Career - 23 / Volunteers - 212 : Total Complement of District Firefighters = 235	
Total Rural Firefighters: Career - 38 / Volunteers - 737 : Total Complement = 775 Firefighters	

Attachment #2

Firefighters and other emergency personnel who are trained to provide emergency medical care are called Medical First Responders. In many areas of Nova Scotia, volunteer or professional firefighters can respond more quickly to medical emergencies than an ambulance - simply because there are many more fire departments in the Province than there are ambulances staffed and ready to respond. When properly trained, firefighters provide vital emergency health care prior to the arrival of paramedics. The EHS Communications Centre has a staff member dedicated to the dispatch of first responders.

In this section, you will find information on how to apply for EHS sponsorship that may help your agency or department to provide medical first response service in your community. The program has been designed with input from representatives from many areas of emergency services:

- **Volunteer and career fire fighters**
- **Community-based medical first response agencies**
- **Paramedics**
- **Communications/Dispatch staff**
- **Professional associations**
- **The QEII School of Emergency Health Services**
- **Emergency Health Services Nova Scotia**

The importance of Medical First Response in improving the quality of care for Nova Scotians has been understood for many years. Currently, there are **155 agencies** who provide some form of medical first response service in their communities.

The Program

This program allows rural, volunteer agencies to apply for assistance to provide medical first response service in their communities. By applying to EHS, these agencies may qualify for things like equipment, partial tuition repayment, etc. There is more information on how to apply, and what sponsored agencies receive later in this section.

To date, **63 agencies** have been approved for sponsorship from EHS, and over **400 medical first responders** are provincially registered.

Applying for Sponsorship:

Why should we apply for sponsorship?

EHS has asked for any volunteer agency that wishes to apply for sponsorship to send in a completed application form. This program is 100% voluntary, meaning that you do not need to be sponsored by EHS to provide this service in your community. The focus of the program is to assist small, isolated volunteer groups or organizations who would find it hard to provide this service without assistance. The applications are reviewed every 3 months by a committee, who rank them based on:

- population
- average ambulance response time
- risk / hazard characteristics

What do we need to do to qualify for sponsorship?

Any volunteer agency that wishes to provide medical first response service is eligible to apply, and can apply **before** taking any training. The review committee will score and rank your application, and you will be notified of the results. Once you're notified, you can then decide if you want to go forward and take training. To receive sponsorship, you will have to:

Attachment #3:

FAX

To: EHS Medical First Response Program Manager

Fax #: (902) 424-0155

EHS Sponsorship Application

Agency Profile	
Name of Agency:	
Total # of Members:	
Service Area: (Please enclose a copy of a map of your service area if available)	
Areas of Risk: (Ski hill, Highway Major Industry etc.)	
Approx. Population: _____	
Fire Chief:	#:
Training Officer/Secretary	#:

Communications/Dispatch	
(If Applicable) Dispatch Agency:	
Contact Name:	#:

Training
Number of member who will be taking medical first response training:

... or mail to: EHS Medical First Response Program Manager
1496 Bedford Highway, Suite 401, Bedford, NS
B4A 1E5

- take training from a recognized training provider,
- and have those trained members challenge the provincial registry exam.

We talk more about training and the exam later on in this section.

What does sponsorship mean?

If your agency becomes sponsored by EHS, you will receive:

- **Medical first response equipment** : including an A-1000 Trauma Bag with an oxygen regulator, 2 "D" Oxygen cylinders, 2 Backboards with head immobilizing devices, a KED, airway and OB kits, disposables etc. A full list is supplied at the end of this section.
- **Medical Liability Coverage**: for all registered medical first responders in your agency.
- **Partial Tuition Repayment**: \$95. per registered medical first responder.
- **Disposable Replacement**: at no cost to your agency.
- **Vaccination**: Hep. B. Vaccines will be offered to the members of your agency at no cost.
- **Continuing Medical Education**: a recommended alternative to re-certification Which allows you to maintain your registration as a medical first responder at no cost.

[EHS Sponsorship Application Form - Corel Word Perfect](#)

[EHS Sponsorship Application Form - Microsoft Word](#)

[EHS Sponsorship Application Form - HTML](#)

Training and Registration

Who offers medical first response training?

The first thing that you need to do if your department is looking for training is get a list of the companies who are approved to provide this training. You can hear this list, including contact numbers, by calling the QE11 School of Emergency Health Services at:

In Halifax	Long Distance Toll free:
473-7869	1-800-354-5063

What if we've already taken training?

You will need to have your skills reviewed and signed off by a trainer from one of the recognized training providers. You should contact the agency that you took your training from to see if you need any up-date training, and how much this will cost.

What do we have to do after we are trained?

After taking your training, you may wish to challenge the registry exam. This is not necessary unless you wish to qualify for sponsorship, and is offered to all who take training from a recognized training provider. This exam will be brought to your department, and will be given to you at no cost. The exam can be given orally or in French by special arrangement. To arrange for this exam, or to find out more information about it, please call the Recognition Coordinator at the QEII School of EHS at (902) 473-7763 or 1-800-345-5063.

Contacts

Sponsorship Application & Provincial Advisory Committee

**Mail:
Emergency Health Services
Nova Scotia
1496 Bedford Tower, =
Suite 401
Bedford NS
B4A 1E5**

Registry Examination and Training Provider Accreditation

Steve Lenihan

QEII School of E.H.S. - Medical First Response Recognition Coordinator

Phone: 1 (902) 473-7763