

Hunter Rainwater

Subject: FW: ALC Exclusion Applications
Attachments: FCABC First repsonder Statement of Principles.pdf

From: Al Richmond <arichmond@cariboord.ca>

Sent: Tuesday, October 20, 2020 9:37 AM

To: Crystal Brown <Crystal.Brown@prrd.bc.ca>

CAUTION: This email originated from outside of the organization.

Hi Crystal: Attached is a statement of principles passed the Fire Chiefs Association of BC regarding First Responder training and the changes to licensing. You may want to make your board aware of this and let them determine if they agree with the principles the Association has submitted on this issue. I don't know if your board is aware of the proposed changes to the Licensing of First Responders. This was a discussion item at the EA online form earlier this month.

Al Richmond



FIRE CHIEFS' ASSOCIATION OF BRITISH COLUMBIA

Pre-Hospital Care Statement of Principles

Challenge

Approximately 280¹ BC fire departments are involved in the First Responder (FR) program, providing critical pre-hospital medical care to BC communities and residents. The FCABC's mandate is to assist in addressing challenges identified by our members, and as a result we advocate to support Fire First Responder contributions as an integral part of the pre-hospital care system.

The FCABC represents members from diverse communities on the issue of the First Responder program. A "one model fits all" approach does not provide a realistic acknowledgement of this diversity or option for all of these varied communities.

Local governments and other stakeholders need to be afforded a larger role in the integrated pre-hospital care discussion. This has been reaffirmed within the recommendations in the Auditor General of BC's report dated February 2019 titled "Access to Emergency Health Services". Our members tell us that the FR program does not currently satisfy the needs of all local governments in terms of providing them with the opportunity to select their fire department's level of pre-hospital care service, or in some cases the ability to use their fire department resources more effectively and at a higher level within the pre-hospital care system. There are also other jurisdictions and departments that feel that they are already involved at or near their capacity and are challenged by the workload and/or costs involved.

Background

Developed in 1989, the FR Program is based upon dispatching the emergency resources closest to the patient and considerations of scene safety. FR personnel who arrive prior to BC Ambulance Service (BCAS) paramedics provide initial patient care. The FR program is designed to supplement the provincial ambulance model with rapid response from local trained resources such as fire services. Fire stations are normally positioned for fast response; therefore, fire departments are well suited to the program. There are over 8000 first responders licensed in BC, the overwhelming majority are firefighters.

It is important to note that there is no legal requirement for local jurisdictions to participate in the FR program; it is entirely voluntary.

Not all fire services or communities have chosen to participate in the FR program for various reasons including cost for training and equipment, staffing demands, the challenge of extra workload in smaller communities, and/or a perception that participation is a form of provincial downloading of responsibility. Other fire services and communities strongly believe that continued participation in pre-hospital care enhances local public safety and service to the taxpayer. Several examples of pre-hospital care best practice exist, as near as Seattle (King County) for example.

¹ Data supplied by EHSC 2013

FCABC Position

The FCABC supports the development of local solutions to local challenges in the FR program. Specifically, the FCABC encourages the identification of cross-agency efficiencies at the local level. The FCABC continues to work with BC Emergency Health Services (BCEHS) on these localized solutions, through active involvement in provincial committees and working groups.

1. The FCABC supports the right of each local government to determine the services they wish to provide to their community. Key principles in that right include:
 - Local governments have the right to choose whether or not their fire departments are involved in the provision of pre-hospital care services to address the needs of residents and local business.
 - Fire Departments involved in the delivery of pre-hospital care services should function as one component of an integrated pre-hospital care deployment system, determined in collaboration with BCEHS, as regulated by the Province of BC.
 - The Province of BC and BCEHS should respect that fire department involvement in pre-hospital care is, from a local government perspective, a delivery of service similar to road rescue, fire suppression, fire inspections and others.
 - Local governments determine services, and service levels, provided by that local government, this should include pre-hospital care. To that end, The FCABC supports and advocates for the right of each local government to be involved in this decision process.
 - Agreements for pre-hospital care, between the Province of BC and any local government should reflect local government's decision, in collaboration with BCEHS, on the level of pre-hospital care services provided locally.
 - The FCABC recognizes that lead agencies and stakeholders in this discussion should also include Union of BC Municipalities (UBCM), Local Government Management Association (LGMA), Regional Administrators Advisory Committee (RAAC) and the Mayors' Caucus. The FCABC supports that all lead agencies and stakeholders be identified as valuable and necessary stakeholders to the Province on this issue with voice and valued input.

2. The FCABC supports coordination of Fire and Ambulance dispatch systems as a means to achieve:
 - Timely response of appropriate resources to medical emergencies
 - Sharing data effectively to support the continuum of care
 - Workload efficiency
 - Cost effectiveness
 - Ensuring the most efficient notification and dispatch of trained and equipped personnel to incidents requiring technical knowledge and skills e.g. motor vehicle incidents, HAZMAT and calls for technical rescue

3. The FCABC supports and will advocate for a model where the Province of BC provides cost recovery funding to local governments involved in provision of pre-hospital care services.

In summary the FCABC appreciates the diversity of resources and communities across our province, as well as the ability and desire of how communities may want to contribute to patient care within the pre-hospital care system. Local governments and fire first responders understand local characteristics and are positioned to provide input to patient comfort and care delivery models. The FCABC position is that communities should be determining how their respective resources will be utilized regarding the delivery of First Responder services as they do with all other services provided by their fire department. Ultimately, that the level of First Responder service should be decided by the local authority.