

## **Permissive legislation must not allow the introduction of “fire-medics”**

### **A message for Ontario municipalities**

The Ontario Professional Fire Fighters Association (OPFFA) has proposed to expand the role of firefighters into emergency medical care.

CUPE, as the representative of the majority of paramedics in Ontario, has consistently opposed firefighter proposals to dilute the paramedic status as this raises serious issues of quality and cost of care.

In the latter part of 2016, the Ontario Ministry of Health and Long-Term Care (MOHLTC) responded by holding highly structured consultations on a modified proposal. Firefighters who are trained and who also work as paramedics at an ambulance service could provide paramedic services when working as a firefighter. While the government declined to share the specific results of its consultations, it did confirm that there was no support for this proposal outside of the OPFFA.

Despite the lack of support for the proposal, the government announced in June that it would allow the introduction of firefighter paramedics (“fire-medics”). Currently, the *Ambulance Act* specifies that only those with the necessary qualifications who work at an ambulance service can call themselves paramedics.

CUPE has raised with the government a wide variety of quality and cost issues regarding an expanded role of fire departments emergency medicine. These are set out in our [March 2017 fact sheet](#) on fire’s proposed role in emergency medical services. We invite municipalities to review these detailed concerns carefully.

The government, however, has indicated that it intends to proceed by introducing “permissive” legislation in the early fall on a range of reforms affecting emergency medical response. After this, it will consult on implementation and then, after these consultations, try limited pilot projects on the “fire-medical” issue.

### **Our Immediate Concern:**

CUPE however would like to highlight for municipalities a concern we have with this method of introduction. Currently, fire departments already attend many thousands of medical emergencies, duplicating the work of ambulance services. Once, permissive legislation is passed, however, it is possible that firefighters trained and working as paramedics elsewhere will simply begin to act as paramedics when they show up at a call.

Notably, since the government announce its plan, the firefighter association in Ottawa has begun a lobby to take over at least some of the 13,000 “PRU” calls in Ottawa currently performed by the Ottawa Paramedic Service (calls where a single paramedic responds in a special vehicle to emergency medical calls). Moreover, the OPFFA has continued to call for an even larger role of fire in emergency medicine than currently proposed by the government. They continue to aggressively pursue their goals.

### **Extensive Oversight Needed:**

Land ambulance paramedic services have extensive legislative, regulatory, policy, and management oversight and control from [1] the Ministry of Health and Long-Term Care, [2] Base Hospitals, and [3] highly experienced paramedic management. None of these exist in fire departments, opening significant dangers for any patients that might be treated by “fire-medics” and liability issues for the “fire-medical”, fire departments, municipalities and government.

We have raised this concern with government but to date have received no indication of how (or even if) they will take steps to stop this *fait accompli* from occurring.

CUPE, along with many municipalities, will continue to oppose the dilution of emergency medical response.

### **Important Municipal Action Needed Now:**

But, as an important first step, we urge municipalities to direct their fire departments to prevent any firefighters from acting as paramedics while working as a firefighter. We also urge municipalities to join us in urging government to ensure that provincial legislation, regulation, and policy prevent any precipitous step by fire departments into emergency medical response.