



City of Richmond

Report to Committee

To: Community Safety Committee
From: John McGowan
Chief, Richmond Fire-Rescue

Date: December 2, 2009
File:

Re: 911 Dispatch Protocols

Staff Recommendation

That the 911 Dispatch Protocols update report (dated November 30, 2009, from the Fire Chief) be received for information.

John McGowan
Chief, Richmond Fire-Rescue
(604-303-2734)

Att. 2

FOR ORIGINATING DEPARTMENT USE ONLY		
CONCURRENCE OF GENERAL MANAGER 		
REVIEWED BY TAG	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
REVIEWED BY CAO	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

Staff Report

Origin

At the May 25, 2009 Council meeting, the following motion was approved:

That letters under the Mayor's signature be sent to E-Comm's Board of Directors, BC Ambulance Service and the Minister responsible, expressing support for the Greater Vancouver Fire Chiefs' request to change E-Comm's default policy of transferring motor vehicle incident calls only to BC Ambulance Service and add Richmond Fire Rescue to the incident call list.

Findings of Fact

In response to the Mayor's letters, Emergency and Health Services Commission (on behalf of the Minister and the BC Ambulance Service) advised they require formal application to the Commission for any changes to their Resource Allocation Plan which includes First Responders (Attachment 1). However, E-Comm, as the provider of 911 services to the region, requested business cases to support the changes and created a multi-agency 911 Protocol Review Committee to review the business cases and make recommendations to Metro Vancouver which has responsibility for the 911 protocols. The current protocols, for the delivery of 911 services, were created in 1975 and have seen minimal change since then.

Analysis

On November 12, 2009, Deputy Chief Tim Wilkinson presented three business cases to the Greater Vancouver Fire Chiefs Association (GVFCA) to be adopted and delivered to E-Comm to address their request above.

The business cases (Attachment 2) support three initiatives identified by Metro Vancouver fire departments regarding desired changes to 911 Protocols:

1. **Motor Vehicle Incidents**
2. **Aircraft Crashes**
3. **Technical Specialty Response Calls**

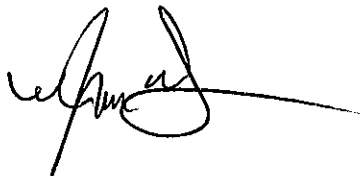
The GVFCA accepted the reports for delivery to E-Comm in December 2009. E-Comm's 911 Protocol Review Committee will commence meetings to review the business cases in the second quarter of 2010. Richmond Fire and the GVFCA will be represented on the Committee by Chief McGowan.

Financial Impact

Nil

Conclusion

This ongoing process has garnered the attention of E-Comm, BC Ambulance Services, GVFC and the Ministry of Health. The analysis of the business cases by the 911 Protocol Review Committee will determine whether this initiative proceeds further in 2010.

A handwritten signature in black ink, appearing to read 'John McGowan', with a long horizontal line extending to the right.

John McGowan
Chief, Richmond Fire-Rescue
604-303-2734

JM:jm

Attachment 1



Emergency and Health
Services Commission

PC: Council
George Duncan
Phyllis Carlyle

October 14, 2009

Chiff: 785187
File: 4040-04/ECOM

Malcolm D. Brodie
Mayor, City of Richmond
6911 No. 3 Road
Richmond BC V6Y 2C1

Dear Mayor Brodie,

Thank you for your letter dated May 27, 2009, to former Minister of Health Services, Honourable George Abbott, supporting the Greater Vancouver Fire Chiefs' request to change E-Comm's default policy of transferring motor vehicle incident calls only to BC Ambulance Service (BCAS) and add Richmond Fire Rescue to the incident call list. While Council's resolution was directed to the E-Comm Board of Directors I have been asked to respond to it since in fact, the dispatch issue under consideration is under the direction of the Emergency and Health Services Commission (EHSC).

The Health Emergency Act gives to the EHSC the power and responsibility to provide emergency health services throughout the province of British Columbia. In fulfilling these responsibilities the EHSC is committed to using both paramedics and first responders in accordance with their training and licensure in emergency health care.

The EHSC is committed to ensuring that the needs of patients requiring pre-hospital emergency care are met through the provision of high quality care by qualified practitioners. As part of this commitment it strives to ensure that the most appropriate practitioners are responding to each call, taking into consideration a number of factors including training and qualifications, frequency of using specific skills, and availability of back up resources.

BC Ambulance Service (BCAS) Dispatch uses a Resource Allocation Plan (RAP) to determine the type of response to calls. This program, which is based upon the best medical determinant for the skills required to respond to each type of emergency call, is periodically reviewed by the Vice President, Medical Programs at the EHSC with input from both paramedics and first responders. It is the RAP which identifies the type of calls to which first responders should be dispatched as part of the overall pre-hospital emergency program.

When BCAS dispatch receives a potentially life-threatening call, they begin the call taking process while simultaneously dispatching an ambulance to ensure there is no delay. The dispatch process that BCAS uses to notify Richmond Fire Rescue of an incoming call is electronic and occurs in a matter of seconds once the initial triage is complete.

...2/-

Following the medical triage of the call and subsequent transmission of details to First Responders and Paramedics the call taker will stay on the line with the caller and give medically necessary patient treatment information. In the case of MVAs, for example, this will relate to vital first aid advice relevant to any seriously injured patients, for instance, airway management and bleeding control, or in the case of a cardiac arrest provide instructions on performing CPR.

BCAS responds to approximately 11,000 events per year in the Richmond area - 1,100 of which are motor vehicle accidents. The average call triage time for these incidents is 65 seconds from the call being placed to BCAS Dispatch. At this time the automatic alert is sent to the Fire Dispatch. On average, BCAS crews are on scene at these MVA's in under six minutes from the time the call is received in BCAS Dispatch.

With respect to the Greater Vancouver Fire Chiefs' request that E-Comm's default policy be changed to include first responders in the incident call list for MVA calls, this would result in one of two scenarios:

Pass the caller directly to Fire, then have Fire create an event that is automatically passed to BCAS (in essence the opposite of the current situation). BCAS would still need to talk to the caller because Fire doesn't medically triage. BCAS could electronically receive the situation and location information Fire have captured and that could start the call but BCAS would need to confirm that information with the caller and move on to triage. Compared to today's processes the call would take 30-60 seconds longer to get to BCAS.

-or-

E-Comm could capture from the caller the situation and location details of the MVA, pass the caller to BCAS, then call Fire to tell them of the MVA and pass the information they have captured. E-Comm would likely take the same 30-60 seconds to capture that information. BCAS would be 30-60 seconds later to the patient and would have to ask the caller the same questions over again. Fire would receive details of the call from E-Comm at the same time as they presently do from BCAS.

I recognize there has been a long held belief that it takes a long time to triage a caller and until BCAS has completely finished with the caller, Fire doesn't get the call. However, it should be noted that over the last year or so, and especially since E-Comm moved to the same CAD platform as BCAS, BCAS doesn't take more than a few seconds to triage calls and as soon as BCAS has a "First Responder" determinant Fire is advised.

Based on this information and the current RAP assessment, the BHSC does not support a change to the existing emergency medical dispatch procedures for Richmond Fire Rescue.

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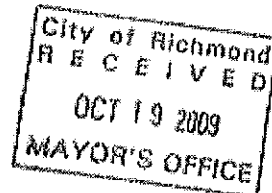
If this request for a change in dispatch procedure also relates to a desire of Richmond Fire Service to be included in dispatches that are not considered to be medically necessary or beneficial, the EHSC is willing to consider this if a written request is received from the municipality. As part of this request, it is necessary for the municipality to indicate its acceptance of any liabilities associated with being involved in these additional calls, since the EHSC liability coverage does not include calls that are not considered to be medically necessary.

If, as indicated in your Council's resolution, Richmond Fire Services wishes to expand the nature of calls to which it is being dispatched, and if Richmond Council is willing to accept any related additional liabilities, I would request that you make formal application to the EHSC, so that we can have our staff work with your Fire Services to determine the calls to which they wish to be dispatched, and to make changes to the dispatch procedures currently in place at BCAS.

Sincerely,


Lee Dorey
Executive Officer

pc: Les Fisher, Acting Chief Operating Officer, BCAS
Michael Sanderson, Executive Director, Lower Mainland, BCAS
Stephen Clinton, Director, Lower Mainland Communications Centre, BCAS
Ken Shymanski, President and CEO, E-Comm
Bert Boyd, Chair, EHSC Joint BCAS/Fire Services Committee



Attachment 2

Submission to the
Greater Vancouver Fire Chiefs Association
November 12, 2009

Topic: Changes to Dispatch Protocols – Motor Vehicle Incidents
Author: John McGowan, Chief, Richmond Fire-Rescue

Background

Current 911 Call Taking protocol for motor vehicle incidents has the 911 call transferred immediately to BCAS dispatch for patient analysis. Upon completion of the patient analysis, which can take several minutes, BCAS dispatch notifies the appropriate dispatch center who then in turn dispatches the corresponding Fire agency. The current protocol delays the receipt of call type and location dispatch information to Fire.

There are a number of benefits in having the 911 dispatch protocol changed to transfer the call to Fire prior to down streaming the call to BCAS dispatch. The initial dispatch of resources is more efficient with Fire's primary dispatch requirements being call type and location. Benefits include:

- ✓ ***Expedient on-scene arrival and delivery of First Responder services.***
Fire given their numerous locations, have greater capacity to arrive on scene faster and deliver First Responder services, which benefits injured person(s).
- ✓ ***Determination of need for on-scene resources.***
Fire can assess the scene and identify if additional resources, such as police, are required or alternately if dispatched resources, such as BCAS, are not required. This allows emergency resources to be used effectively.
- ✓ ***Delivery of scene safety and traffic control services.***
Fire can assess the scene and provide safety and traffic control services. This protects the patient from further harm, prevents further motor vehicle incidents; and provides a safe and protected environment for emergency response personnel to do their work.

Issue

The existing 911 motor vehicle incident dispatch protocols are inefficient.

Request

The City of Richmond is asking that the Greater Vancouver Fire Chiefs Association support the proposed changes to 911's motor vehicle incident call taking and processing and forward a Regional change request to E-Comm.

**Submission to the
Greater Vancouver Fire Chiefs Association
November 12, 2009**

Topic: Changes to Dispatch Protocols – Aircraft Crashes
Author: John McGowan, Chief, Richmond Fire-Rescue

Background

Current 911 Call taking protocol for aircraft crashes can see any combination of police, fire, or ambulance dispatched to the scene depending on how the caller has described the incident scene. It is proposed that the call taking protocol be changed to have the 911 call transferred to the fire service of jurisdiction.

There are a number of benefits in having the 911 call taking and processing protocol changed to always dispatch Fire as the primary and lead agency. Benefits include:

✓ ***Expedient on-scene arrival and assessment.***

Fire given their numerous locations, have greater capacity to:

- Arrive on scene faster
- Assess the scene and identify the need for additional emergency resources
- Assess the risks

Quick response benefits those who are already injured and prevents others, including the public and emergency responders, from being harmed.

✓ ***Delivery of emergency services.***

Fire is the only emergency response agency that is equipped to manage aircraft crashes with their ability to: extinguish fires (structural and jet fuel); evacuate and rescue victims, and contain hazardous fuel spills.

Issue

The existing 911 aircraft crash call taking protocols are ineffective.

Request

The City of Richmond is asking that the Greater Vancouver Fire Chiefs Association support the proposed changes to 911's aircraft crash call taking and processing protocols and forward a Regional change request to E-Comm.

**Submission to the
Greater Vancouver Fire Chiefs Association
November 12, 2009**

Topic: Changes to Dispatch Protocols – Technical Specialty Response Calls
Author: John McGowan, Chief, Richmond Fire-Rescue

Background

Many regional Fire Services deliver technical speciality response services including: hazardous materials response; high angle rope and confined space rescue.

Current 911 call taking and processing protocol for these types of calls, where persons are injured and/or trapped, has the emergency call transferred immediately to BCAS dispatch for patient analysis. Upon completion of the patient analysis, which can take several minutes, BCAS dispatch notifies the appropriate dispatch center who then in turn dispatches the corresponding Fire agency. The current protocol delays the receipt of call type and location dispatch information to Fire.

There are a number of benefits in having the 911 call taking and processing protocol changed to dispatch the call type and location to Fire prior to switching the call to BCAS dispatch. Benefits include:

✓ ***Delivery of emergency services and scene control.***

Fire is the only emergency response agency that is equipped and qualified to assess and rescue individuals found in these often-precarious emergency situations. The environmental circumstances and potential impact to others must be assessed to avoid risk of injury or death to others including emergency responders. Specialized equipment is often needed to analyze substances and/or stabilize and extract individuals from these potentially dangerous circumstances.

✓ ***Determination of need for on-scene resources.***

Fire needs to be on scene quickly to identify if additional resources, such as police, are required or alternately if dispatched resources, such as BCAS, are not required. This allows emergency resources to be used effectively.

Issue

The existing 911 technical specialty response dispatch protocols are inefficient.

Request

The City of Richmond is asking that the Greater Vancouver Fire Chiefs Association support the proposed changes to 911's technical specialty response call taking and processing and forward a Regional change request to E-Comm.