



Health and Wellness



Santé et Mieux-être

Policy Directive

Formal Submission for Approval

MEDICAL FIRST RESPONDER (MFR): REQUEST FOR REPLACEMENT OF EQUIPMENT AND CONSUMABLES

<b>GROUND AMBULANCE PROGRAM</b>		<b>POLICY DIRECTIVE</b>
<b>Applies To:</b>	Paramedic Services Operator; MFR Participating Agencies	
<b>Monitoring:</b>	Director, Emergency Health Services; Provincial Ambulance Services Director, Emergency Health Services	
<b>Date:</b>	Effective: <b>March 6, 2024</b> Next Review: <b>March 31, 2027</b>	<b>Number: 5101.03</b>

Approving Authority: Kelley Rayner, Acting Assistant Deputy Minister

Authorized Signature:

<b>Record of Decision</b>	Approving Body: Department of Health and Wellness
	Meeting Date:



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<p><b>This is a CONTROLLED document. Any copies of this document appearing in paper form should always be checked against the electronic version prior to use.</b></p>		

**1.0 PURPOSE/SCOPE**

1.1 While each Medical First Responder (MFR) Partnering Agency is ultimately responsible for their own training and equipment costs, Emergency Health Services (EHS) recognizes the importance of ensuring that MFR Partnering Agencies have timely access to the replacement of emergency medical equipment and consumable supplies to deliver the level of service defined by the MFR Partnering Agencies.

## 2.0 DEFINITIONS

<b>Equipment:</b>	Any item that is non-disposable.
<b>MFR Participating Agency:</b>	Any Fire Department registered with the PEI Firefighters Association (PEIFFA) to provide community Medical First Responder (MFR) services.
<b>MFR Program:</b>	An optional program, delivered by local Fire Departments, coordinated by the Prince Edward Island Firefighters Association (PEIFFA).
<b>Consumables:</b>	Any item that is single-use and/or disposable.

## 3.0 APPLICATION

3.1 This policy applies to Island EMS and any MFR Participating Agencies that are registered and approved by the PEI Firefighters Association.

## 4.0 POLICY

4.1 EHS shall reimburse Island EMS for the replacement of equipment and consumables, listed in Appendix A. It should be recognized that had an MFR Partnering Agency not been available to respond, Island EMS consumables would likely have been used.

## 5.0 PROCEDURES

5.1 All requests must be completed by the MFR Partnering Agency on the “MFR Approved Consumables Order Form” and submitted directly to Island EMS.

- a. Completed forms may be emailed to Island EMS at: [MFR@islandems.ca](mailto:MFR@islandems.ca)
- b. Orders shall be filled and sent back to the MFR Partnering Agency within ten (10) business days.
- c. Large items such as backboards may be exchanged on scene if time permits and provided it does not deplete the ambulance’s supply. On-scene exchange of consumables shall not delay transport or compromise care of the patient.
- d. Only equipment and consumables that were used for patient-related care will be approved (i.e., replacement of training-related equipment will not be approved).

5.2 MFR Partnering Agencies shall maintain a complete and accurate record of equipment and consumables used on the Prince Edward Island Medical First Responder Patient Care Report (Appendix B). Records will be made available upon request by EHS.

5.3 EHS, at its sole discretion, reserves the right to request justification be provided by the MFR Partnering Agency for the replacement of equipment and consumables. Failure to provide justification or maintain records on the use of equipment and consumables may lead to the suspension or denial of an MFR Partnering Agency from receiving replacement equipment and consumables under this policy.

The maintenance of the “MFR Request for Replacement of Equipment and Consumables” policy is dependent on available program budget and prioritized need.

- 5.4 On a monthly basis, Island EMS shall submit an invoice to EHS for expenses related to this policy. The invoice must include a copy of each “MFR Approved Consumables Order Form” for the purpose of confirming all related expenses and to maintain statistics on consumables replaced.

## 6.0 MONITORING

- 6.1 The Director and Provincial Ambulance Medical Director of Emergency Health Services is responsible for ensuring this policy is reviewed every three years according to the Department of Health and Wellness policy review cycle and standards.

## 7.0 REFERENCES

### Legislation

Ambulance Services Act, R.S.P.E.I. 1988 Cap. E-6.11. (2018).

Ambulance Services Act General Regulations, R.S.P.E.I. 1988 Cap. E-6.11. (2022).

### Related Documents

Prince Edward Island Ground Ambulance Services Agreement, 2006. (Last extended: 2023)

### References

### Appendices

Appendix A – MFR Approved Consumables Order Form

Appendix B – PEI MFR Patient Care Report

## 8.0 STAKEHOLDER REVIEW

<b>Group/ Committee</b>	<b>Dates of Review</b>
<i>Provincial Ambulance Operations Committee</i>	<b>20-Feb-2024</b>
<i>PEI Firefighters Association</i>	<b>26-Jan-2024</b>

## 9.0 REVIEW HISTORY

Review Dates: 6-MAR-2024 \_\_\_\_\_

Appendix A: MFR Approved Consumables Order Form



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**MFR APPROVED CONSUMABLES ORDER FORM**

<b>Name of MFR Partnering Agency:</b>		
<b>Contact Person:</b>		
<b>Telephone:</b>		
<b>Shipping Address:</b> (Include Postal Code)		
<b>Item Description</b>	<b>Units Of Measurement</b>	<b>Quantity Requested</b>
Adhesive Bandages	100 / Box	
Adhesive Tape	12 / Box	
Alcohol Wipes	200 / Box	
Backboard (Used)	Each	
Bag-Valve-Mask (BVM – Adult)	Each	
Bag-Valve-Mask (BVM – Pediatric)	Each	
Cold Packs	Each	
Defibrillator Pads <b>** Only Zoll X Series stocked</b>	Each	
Hot Packs	Each	
Nasal Cannula (Adult)	Each	
Nasal Cannula (Pediatric)	Each	
Non-Sterile Gloves (Small)	100 / Box	
Non-Sterile Gloves (Medium)	100 / Box	

Non-Sterile Gloves (Large)	100 / Box	
Non-Sterile Gloves (XLarge)	100 / Box	
Non-Sterile Gauze - 4"x4"	20 / Box	
Oropharyngeal Airway (40mm)	Each	
Oropharyngeal Airway (50mm)	Each	
Oropharyngeal Airway (60mm)	Each	
Oropharyngeal Airway (70mm)	Each	
Oropharyngeal Airway (80mm)	Each	
Oropharyngeal Airway (90mm)	Each	
Oropharyngeal Airway (100mm)	Each	
Oxygen Mask (Adult) – Non-Rebreather Mask	Each	
Oxygen Mask (Pediatric) – Non-Rebreather Mask	Each	
Oxygen Tank (D Portable Tanks) ** <b>Only Supplier:</b> Island Oxygen Ltd, account code: ISLEMS	Each	
Stabilization Collar (Adult)	Each	
Stabilization Collar (Pediatric)	Each	
CAT Tourniquet	Each	

**Complete Form and Submit to:**

**Email:** [MFR@islandems.ca](mailto:MFR@islandems.ca)

**Tel:** (902) 892-9995

ISLAND EMS OFFICE USE ONLY			
<b>Date Filled / Sent:</b>		<b>Sent By:</b>	
<b>Date Received:</b>		<b>IEMS Management Approval:</b>	

