

P.E.I. FIREFIGHTER'S ASSOCIATION

ANNUAL MEETING OCTOBER 22, 2000

HOSTED BY ST. PETERS FIRE DEPARTMENT

Welcome from President Bill Hogan followed by a minute of silence in respect of the fire fighters around the world who have lost their lives in the past year.

Dave Rossiter from the host department welcomed everyone to St. Peters, this is their first time hosting such an event and they felt it important to focus the presentations on the medical field because of the number of first responder type calls they receive in a year.

Dave Rossiter introduced the first guest, Doug Hamer Chief of Riverview N.B. where they receive about 1000 calls per year including medical/ambulance calls. Doug spoke on the Challenges in EMS and Fire Service.

Some of the key points from Doug's presentation were: the number of fire incidents were down, it is difficult to maintain a public focus, there is an increasing cost vs justification of service, even in fire services there are EMS issues with first aid, oxygen (for the public as well as our own members). Accident and medical calls are starting to pick up, technical rescue are also up (cold water, confined space, snow, ATV, etc.). MVAs now represent the largest category of incidents in some departments, NB has a check box with 911 dispatchers indicating if they go to accidents involving injury.

Is there a need for fire based EMS? Look at availability of existing ambulance service, will the department accept it, is funding available? Firefighting culture is one of teamwork, male dominated, low public contact; EMS culture is one of wide diversification of members, strong continuing education, increasing number of calls, stronger public contact. We can either do nothing, respond to MVAs only, or first responder (with or without local EMS). EMS does not need a sledgehammer approach.

Tools of the trade are medical direction, accredited training agency, and equipment. Medical direction should include experience in emergency medicine, proactive in training, policy development, testing and protocol, retrospective (post incident critique). Tools also include defibrillator, Oxygen, Epi-pens, and materials for stopping bleeding. Challenges for Fire/EMS integration is those who want to fight fires vs those who do not want to fight fires.

Dave Rossiter thanked Doug for his presentation and left him with a gift in appreciation.

Following break Bill Hogan introduced Sandy MacQuarrie, paramedic Level III, Critical Care paramedic, and paramedic instructor at Holland College. Sandy spoke on portable defibrillator equipment and how approximately 35,000 Canadians each year suffer sudden cardiac arrest which is treatable with early defibrillation. This can happen at any age, male or female, without the risk factors and without family history. The most likely victim that we would be treating would be one of our own. Automatic External Defibrillator (AED) are easier than CPR, and are safe and easy to use. They prompt the user through the process, interprets the heart rhythm and advises if shocking is needed.

Survival is decreased by 10% each minute defibrillation is delayed. It is used to save hearts that are too good to die but will not fix a heart that is too sick to live. The goal for CPR is to start within 4 minutes, this gives more time when defibrillation will be effective. AED will not make things worse and with basic common sense will not cause any harm to the user and you are still covered under the good samaritan laws. They run on DC, the medical advisor does not have to be located in the town, usually one out of hospital cardiac arrest per 1000 people is shockable. The cost is \$3000 to \$7000 and decreasing. They will not save all kinds of lives but if you can get to the patient before the ambulance, their chances of survival are increased if you have an AED.

Before breaking for lunch, Bill Hogan thanked Sandy and presented him with a gift of our appreciation.

Following door prize draws, Brian Savaria from Cutler Hammer spoke on the new Arc Fault Circuit Interrupters. In North American 40,000 residential fires out of 415,000 were electrical. Electrical fires account for 50% of the losses in residential fires. Until recently the technology did not exist to distinguish between "good" arcs and "bad" arcs. The building code for 2002 will have the new type of AFCI required for circuits in bedrooms. The video "firegard" is available to any department, as well information can be obtained from [www.arcfault.com](http://www.arcfault.com), Brian Savaria at 905-631-4148. As well CHC may be able to provide some assistance in changing these over.

Bill Hogan thanked Brian for his presentation and introduced Grant Cannon from the message centre. The message centre currently dispatches for 25 Island departments, 4 ambulances, 2 police forces, EMO, and Red Cross. They want to work together with the departments and 911 and would be interested in becoming a 4<sup>th</sup> PSAP.

Bill thanked Grant and introduced Amand Arsenault with his 911 enhanced call transfer system update. Since May 29 there have been 14,700 calls to 911, 50% of these are non-emergency or hangup and non-emergency are decreasing. Still signing and naming private roads and by October 30<sup>th</sup> should have a mapping package available for every emergency service provider. 911 stakeholders advisory committee was established to look at various issues: need to review fire and ambulance dispatch, mutual aid, more visible signage, and a hard copy of a map showing the location. The Fire Marshall's Office and EMO put out the computers, the province is looking toward internet map access rather than getting a new CD monthly. Cell phones are still a problem everywhere and some phone companies will be coming soon to compete with Island Tel for local phone service.

Bill thanked Amand and introduced Ken Campbell from the Fire Marshall's office. Ken spoke on the importance of completing the forms in a timely manner as they help with research into such things as Brian Savaria discussed earlier. Ken is hopeful that through cooperation, 911 on PEI will become the envy of the nation. His office is still looking for information on equipment in all the departments and Barry Folland was recently hired on to assist in this matter. Ken thanked the minister for the recent pin presentation and mentioned how the premier felt we are important enough to visit during our recent pin presentation. Ken introduced Minister Gail Shea.

Minister Shea presented the school with its last installment of \$30,000, thanked us for our service, encouraged us to continue our training and involvement in medical responses.

Bill thanked Minister Shea and mentioned how it was appreciated by the members at the pin presentation that the premier stopped in on his way back from a funeral.

