## **BUDGET COMMITTEE JANUARY 31<sup>ST</sup>, 2005**

#### PUBLIC ACCESS DEFIBRILLATION PROGRAM

#### Recommendation

The Fire Chief recommends:

- 1. That the report of the Fire Chief be received; and
- 2. That direction be provided on the accelerated implementation of the Public Access Defibrillation program.

#### **Purpose**

The purpose of the report is to provide an update on the existing multi-year phased-implementation of the Public Access Defibrillation program and to seek direction on an accelerated implementation as suggested in the conclusion to this report.

#### **Background - Analysis and Options**

Upon adjournment of the Committee of the Whole (Budget) Meeting January 18, 2005, there was a request that staff provide an update on the Public Access Defibrillation program and further asking that staff also bring forward an estimate of costs associated with installing defibrillators at every community centre/public building, to the next Budget Committee Meeting.

York Region Health Services announced the launch of the Heart Alive Public Access Defibrillation program in Fall-2002, for first phase implementation in Regional facilities in 2003, while seeking commitments from local Municipalities to join-in also—which the City of Vaughan committed \$40,000 in the 2003 budget, for Vaughan's initial phase (which amount has been carried forward through 2004 and 2005 budgets and later phases deferred to 2006 and beyond). However, program support to Vaughan has only recently become available to allow Vaughan's start in the program with the original limited funding level.

York Region acquired the necessary equipment late in 2003 and commenced training selected Regional employees as 'Target Responders' in 28 Regional facilities throughout 2004. Following staff's inquiry on January 19, 2005, the YR-EMS Program Manager has indicated EMS is now ready to provide Heart Alive program support and Target Responder training by YR-EMS Paramedics, to the local Municipalities.

Subject to an assessment of every site to determine the exact number of defib installations required in each facility to meet the immediacy requirements, it is estimated that about 27 defibrillator units would be required at a Capital cost of about \$108,000 and direct program implementation operating costs, such as service agreements, recapitalization funding and training fees for the first year of about \$41,000 for a program total of about \$149,000 less the \$40,000 already available in the 2005 budget, for a net-cost increase of \$109,000. These costs do not include indirect costs associated with regular hours or overtime costs for staff time while training or replacement workers to cover staff away attending training courses.

Fortunately, the cost of defib equipment has come down substantially since the concept of Public Access Defibrillation programs several years ago. Defib units that were originally budgeted at more than \$5,000 each are now available for less than \$4,000 each including special wall-display storage cabinets and incidental costs to install them.

Training costs for Paramedic Instructors, program materials and incidental expenses are estimated to be about \$175 per Targeted Responder, of which the Heart Alive program

recommends a minimum of three employees who work in close proximity to each installed defib unit, be trained as Targeted Responders. In subsequent years, additional Target Responders will need training and all Target Responders will need to be re-certified each year at a cost estimated to be about \$100 each. At this time, Heart Alive program administrators will not recognize or allow VFRS first-aid/defib instructors to deliver the Heart Alive training programs.

In the absence of trained Targeted Responders, the defibrillators are mounted in display cabinets, fully accessible to any member of the public, who are encouraged to use the equipment by following the posted instructions—in the same manner as defibrillators now installed in airport terminals.

The Heart Alive Target Responder 2-day training program consists of three components: Standard First Aid, CPR and Defibrillation. Staff believes that current first aid and CPR training programs that City of Vaughan Health & Wellness staff provide to employees as part of the Workplace Safety Program, could be expanded in the future to include the defibrillation component to demonstrate compliance with Workplace Safety and Heart Alive program requirements. Operating budget funding for future-year Heart Alive training programs may be considered for allocation to the Human Resource Services Health & Safety function.

Other operating budget cost impacts will be 24-month service maintenance agreements at a cost of \$570 per unit and an annual contribution to a reserve fund for future replacement, at an amount of one-sixth the purchase value (estimating a minimum life cycle of six years). Modification of the service agreement or deferral of the re-capitalization to commence in year-2 of the program and revision of the life-cycle replacement could defer some of the operating cost impacts for 2005. It is understood the equipment leasing may be an option that reduces start-up year costs, but would likely be more costly over future years—although quicker turn over of defib units would provide current technology improvements sooner. Leasing options have not been fully explored.

Operating budget funding for future-year Heart Alive equipment, service agreements and recapitalization, may be considered for allocation to the Property & Facilities function, as the asset is allocated City-wide and becomes a facility fixture—much like the provision of fire extinguishers for emergency use.

Further to the original request to Staff, the Budget Committee Chair has asked that the 2005 Fire Station 7-6 Capital Budget project for expansion of the building be modified to allow the funding of the accelerated implementation of the Public Access Defibrillation program.

### Conclusion

Staff will undertake to revise the Fire Station 7-6 expansion project by an approximate reduction of 20% floor-space/estimated costs, to provide sufficient additional funding to allow significant implementation of the Heart Alive program in 2005.

Staff is confident that public access defibrillation units can be acquired and increasing numbers of trained Target Responders can become available during most of the normal operating hours in most Community Centres or public buildings late in 2005 or early 2006; however, some locations may require additional units and training based on finalized site assessments and indirect staffing-hours impact, which would be brought forward as a 2006 funding request.

Should Council concur, Staff suggests the following recommendations:

1. That Staff be authorized to implement the Heart Alive Public Access Defibrillation program in up to 15 City of Vaughan facilities (Community Centres, Civic Centre, Annex and JOC), including the acquisition of up to 27 automatic defibrillators and

- direct training costs for up to 81 employees as Targeted Responders, who can be approved for training time within their normal work schedules;
- 2. That funding required in excess of the existing \$40,000 for defibrillators be reallocated from the 2005 Capital Budget Fire Station 7-6 expansion project at the determination of the Fire Chief following site assessment, vendor negotiations and finalization of current year direct program operating costs;
- 3. That staff further report on the indirect cost impact of the training requirements that creates back-filling situations, overtime obligations or additional un-budgeted hourly rated program staff time, as may be required for additional Targeted Responders;
- 4. That staff further report on the cost impact of ensuring that all future City-provided mandatory or volunteer First Aid & CPR training courses for employees include the provision of automatic defibrillator training and recertification; and
- 5. That Council be kept informed of the implementation progress.

The VFRS is pleased to take the lead during the Heart Alive Public Access Defibrillation program implementation and will consult extensively with York Region Health Services Staff and City of Vaughan Health & Wellness Staff, Property & Facilities Staff, Recreation Staff and Finance Staff, during the implementation and future year program development and funding allocations.

#### **Attachments**

- 1. York Region Health Services Heart Alive Program
- 2. City of Vaughan Heart Alive Program Cost Estimates

#### Report prepared by:

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Respectfully submitted,

John B. Sutton Fire Chief



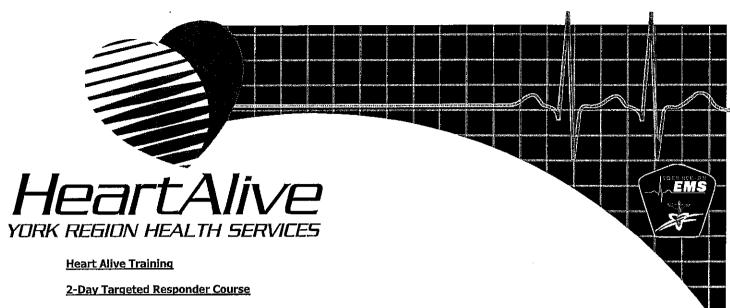
## **ROLES & RESPONSIBILITIES**

REGION	MUNICIPALITIES	COOPERATIVE
PROVIDE TARGETED	PROVIDE PARTICIPANT	DETERMINE SITES AND
RESPONDER COURSE	LIST FOR PLANNING	EQUIPMENT NEEDS
AND LOCATION	PURPOSES	
PROVIDE COURSE MATERIALS	PURCHASE/LEASE AEDs	DEVELOP LOCAL
AND TRAINING EQUIPMENT	AND ALL ASSOCIATED	NESPONSE TO MEDICAL
	EQUIPMENT	EMERGENCY"
POTENTIAL TRAINING DATES	INSTALL CABINETS	DETERMINE NUMBER OF
	(USING HA GUIDELINES)	STAFF TO BE TRAINED
COLLECT SITE MONITOR DATA	PROVIDE EQUIPMENT	APPOINT SITE
	SERIAL NUMBERS AND	MONITOR* (TARGETED
	EXPIRY DATES	RESPONDER)
COLLECT EVENT DATA	PROVIDE EVENT DATA	CRITICAL INCIDENT
		STRESS (CIS) RESPONSE
REFRESHER/RECERTIFICATION	INSTALL HEART ALIVE	
	SIGNAGE	
PROVIDE HEART ALIVE		
SIGNAGE		

#### \*SITE MONITOR ROLE:

- Complete Weekly visual inspection, including documentation. (Site Monitor Checklist - provided)
- Notify Heart Alive of any problems related to weekly checks immediately
- Contact equipment manufacturer (if maintenance plan in place) for AED problems
- Forward completed Site Monitor Checklist to Heart Alive at the end of each month
- Recruit an alternate Site Monitor to perform duties in your absence. (illness or on vacation)
- Notify Heart Alive immediately if you are no longer able to continue your role as Site Monitor
- Notify Heart Alive if Targeted Responders leave/relocate workplace
- Ensure all staff are familiar with "Response to Medical Emergency" plan and Targeted Responders are identified





A minimum number of hours must be spent on specific portions to meet the guidelines set out by the Heart & Stroke Foundation and the Workplace Safety Insurance Board.

It is our desire to present a thorough, holistic approach to training that is refreshing and challenging to those who have experienced First Aid and CPR training before, and comprehensible to those participating for the first time.

The goal of the course is to arm Targeted Responders with the knowledge and skills necessary to respond in a medical emergency, but perhaps more importantly, to inspire the confidence needed to take action.

The	2-day course includes Certification in: Standard First Aid (approved by WSIB-Workplace Safety Insurance Board) Heart & Stroke Foundation BLS-B Heart Saver Plus CPR Heart & Stroke Foundation Automated External Defibrillator Provider
<u>The</u>	course is comprised of both practical and didactic components:  Chain of Survival"  Role of Targeted Responder
	<ul> <li>□ Priority Approach – systematic approach to medical emergency</li> <li>□ Airway and Breathing</li> </ul>
	☐ Cardiopulmonary Resuscitation (CPR)  • Adult/Child/Infant  ☐ Automated External Defibrillation (AED) Provider
	<ul> <li>□ Bleed Control/Spinal Control</li> <li>□ Shock</li> <li>□ Information Gathering</li> </ul>
	☐ Heart Health ☐ Medical Emergencies  • Medical
1-D	Trauma     Trauma     Trauma     Trauma     Trauma     Trauma     Trauma     Trauma     Trauma
A mi	inimum number of hours must be spent on specific portions to meet the guidelines set out by the Heart & Stroke Indation
<u>The</u> □ □	1-day course includes Certification in: Heart & Stroke Foundation BLS-A Heart Saver CPR Automated External Defibrillator Awareness
<u>The</u>	course is comprised of both practical and didactic components:  Claim "Chain of Survival"  Airway and Breathing



□ Cardiopulmonary Resuscitation (CPR)

 Adult

 □ Automated External Defibrillation (AED) Awareness



## REGIONAL MUNICIPALITY OF YORK HEART ALIVE TRAINING FEE STRUCTURE

# 2 - Day Targeted Responder Training

Fees are based on a minimum/maximum 6 participants per 1 instructor

	1-6 Participants	7-12 Participants	13-18 Participants
Instructor(s)	\$660.00	\$1,320.00	\$1,980.00
Administrative Costs	\$75.00	\$75.00	\$75.00
Equipment Maintenance and Incidental Costs	\$120.00	\$120.00	\$120.00
Manual, Completion Cards and other Materials	\$150.00	\$300.00	\$450.00
Total Cost	\$1,005.00	\$1,815.00	\$2,625.00

# 1 - Day Recertification of Targeted Responder Course

Fees are based on a minimum/maximum 6 participants per 1 instructor

	1-6 Participants	7-12 Participants	13-18 Participants
Instructor(s)	\$330.00	\$660.00	\$990.00
Administrative Costs	\$75.00	\$75.00	\$75.00
Equipment Maintenance and Incidental Costs	\$120.00	\$120.00	\$120.00
Manual, Completion Cards and other Materials	\$150.00	\$300.00	\$450.00
Total Cost	\$675.00	\$1,155.00	\$1,635.00



YearCost 2005 2005 2005 \$10,953 \$10,95	
Total Maintenance, Training & Re-Cap \$2,145 \$2,953 \$1,762 \$2,953	\$ 148,725
Farget Responder Recertification (Fee + Misc)	
Target Responder Target Responder Training costs (Fee Recertification (Fee + Misc)   \$175   \$0   \$1,575   \$0   \$1,050   \$0  \$0	\$ 14,175
Annual Recapitalize per unit @ 1/6th \$667 \$667 \$1,333 \$1,333 \$1,333 \$1,333 \$1,333 \$1,333 \$1,333 \$1,333 \$1,333 \$1,333 \$1,333 \$2,000 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$ 18,000
Bi-annual (24 months) Maintenance /Unit @ \$570 \$570 \$570 \$570 \$570 \$570 \$570 \$570	\$ 8,550
Capital Budget Budget Purchase @ \$4,000 \$8,0	\$ 108,000
# AEDs Centre Centre 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
# Target Responders for each Centre/AED 3 6 6 0 0 0 0 0 0 0 0 0 0	
Facility  2005 Civic Centre 2005 MNR Offices 2005 MNR Offices 2005 Maple CC 2005 Maple CC 2005 Maple CC 2005 Al Pallidini CC 2005 Fr. Bulfon CC 2005 Chancellor CC 2005 Chancellor CC 2005 Thornhill Pool 2005 Chancellor CC 2007 Cools 2007 2007 2007 2007 2007 2007 2007 200	* Defer to start in 2006?