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## 2026 Issue Paper

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### Additional ERV and 12- hour shift (2 FTE's)

#### Purpose

This Issue Paper is to seek approval to create an additional emergency response vehicle (ERV) to the fleet staffed with a first responder 7 days a week, 12 hours a day. This staffing increase would require two (2) paramedics. The cost of the ERV would be covered 100% by development charges as part of the long -term plan for 2026.

#### Background

The Paramedic department of the Corporation of the County of Northumberland operates Land Ambulance Services in the primary geographic area of the County of Northumberland from six ambulance stations located strategically around the 1,901 square kilometers we service. The station deployment is as follows:

- Cobourg (one 24 HR and one 12 HR vehicle)
- Port Hope (one 24 HR vehicle and one 12 HR vehicle)
- Roseneath ( one 24 HR vehicle and ERV)
- Campbellford (one 24 HR vehicle)
- Colborne (one 24 HR vehicle)
- Brighton (one 24 HR vehicle)

In order to provide land ambulance services in a balanced manner, ensuring that all residents have equal access to paramedic services in the event of a medical emergency, staffing levels must meet the service demands. Call volumes in Northumberland continue to rise. The longest response times usually occur through the rural areas of the county.

An emergency response vehicle (ERV) is staffed with one medic, that can respond to all emergency calls through the county. The ERV medic is capable of treatment and intervention however routinely do not transport patients to hospital, but can assist with improving response times.

#### Benefits of an ERV

- No transportation of patients so no off load delays at hospitals, or extended times outside the catchment area at hospitals



- Efficient response times and potential to “triage” and liaison with CACC with an accurate CTAS severity for transporting ambulance
- Ability to initiate treatment/intervention upon arrival awaiting transporting vehicle
- Provide emergency standby coverage at CMEC 0 level

## Consultation/Options

Apexpro Consulting  
Eastern Ontario Wardens Caucus – Refresh Report  
Ontario Association of Paramedic Chiefs (OAPC)  
Eastern Ontario Paramedic Chiefs

## Financial Impact

The financial impact of this issue paper includes the staffing costs of two (2) full time equivalent paramedics with wages and benefits of a 12- hour shift costing \$270,000.

In Year 1 of the additional staffing, the County will receive no additional funding from the MOHLTC for the new positions. The additional 50% funding for Year 1 will be realized in Year 2 and in subsequent years following.

The cost of the SUV with full conversion to a certified ERV will be covered 100% by development charges through long term planning.

	2024	2025	2026	2027 on
Staffing – 2 FTE’s	N/A	N/A	\$270,000	50/50 funding
SUV conversion	N/A	N/A	Development charges	N/A

There will be a one- time cost to purchase equipment and supplies to stock this ERV to the Provincial Equipment Standards for Ontario Ambulance Services version 3.7, February 1, 2023. The main equipment required is a defibrillator, controlled medication safe, immobilization devices (KEDS’ and Sagars) conveyance equipment, and all medications. This one- time cost to be compliant with the standards is currently priced at \$50,000.



This additional ERV will also have an on-going increased expense to the fuel and maintenance line of the budget in future years in the amount of \$25,000.

	2024	2025	2026	2027
Equipment – Supplies -one time	N/A	N/A	\$50,000	N/A
Fuel /Maintenance/Tires - ongoing	N/A	N/A	\$25,000	50/50

## Risk Considerations

The most significant consideration in terms of risk is ensuring that the County continues to meet or exceed established response time requirements. This includes meeting the public's expectations with respect to level of service.

Other health and safety considerations include the volume of work being performed in the period between 0800 and 2300 hours. Responder fatigue is the leading cause of negative incidents resulting from errors. In addition, fatigued responders have increased risk of health issues leading to increased absences.

By ensuring that staffing is adequate to help more evenly distribute workloads, these risks are minimized.

Ensuring that full-time staff receives their vacation time also helps to prevent responder fatigue (commonly known as burn-out). Part-time staffing must remain at adequate levels to accommodate full-time vacation time.

## Impacts to Member Municipalities/Partners

Assist with the overall targeted response time standards through the county, by assisting with rural response coverage.

## Included in 2022 Long Term Plan: YES/NO

Yes, the addition of an ERV in 2026 was included in the long-term plan with the development charges covering the full cost of the ERV.



The required staffing (2 FTE's), additional equipment and supplies, and the on-going costs identified are covered with levy and provincial funding. The cost is 100% to the Levy in Year 1, and then the 50/50 provincial funding begins in year 2 and subsequent years.

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## 2024 Issue Paper

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### 12 Hour Crew and Ambulance Enhancement

#### Purpose

This purpose of this Issue Paper is to seek approval to create an additional 12-shift to enhance our current staffing levels and assist us in obtaining our service commitment. This request will include the purchase of a new ambulance and the additional 4 Full Time Equivalents (FTE's) that are required to staff this enhancement. The addition of this 12-hour shift also necessitates a requirement to provide an ambulance and stock and equip the ambulance as per the Provincial Equipment Standards for Ontario Ambulance Services, version 3.7 February 1, 2023.

Northumberland Paramedics strives to deliver excellent service to all members of our community, including those who reside in rural settings. Our ambulance deployment plan strategically places ambulances throughout the county with the goal of having timely responses to all requests for emergency service from the residents and visitors of Northumberland. These resources are located in the most populated areas of the county, as the majority of our calls are located in those areas.

To this point, we have worked hard to address response times in all parts of the County. There have been many challenges in maintaining response times which include rural and urban geography, increased call volume, off load delays at hospital, and out of county response assignments. These factors have risen year over year to the point that we are at and beyond capacity, affecting our ability to balance emergency coverage and meet regulatory compliance.

#### Background

The Paramedic department of the Corporation of the County of Northumberland operates Land Ambulance Services in the primary geographic area of the County of Northumberland from six ambulance stations located strategically around the 1,901 square kilometers we service. The station deployment is as follows:

- Cobourg (one 24 HR and one 12 HR vehicle)
- Port Hope (one 24 HR vehicle and one 12 HR vehicle)
- Roseneath ( one 24 HR vehicle)
- Campbellford (one 24 HR vehicle)



- Colborne (one 24 HR vehicle)
- Brighton (one 24 HR vehicle)

In order to provide land ambulance services in a balanced manner, ensuring that all residents have equal access to paramedic services in the event of a medical emergency, staffing levels must meet the service demands. Call volumes in Northumberland continue to rise.

Northumberland Paramedics are required to set response time targets based on the severity of a patient's condition, and report annually to the Ministry of Health on those response times based on the Canadian Triage Acuity Scale (CTAS).

Northumberland Paramedics current response time plan targets are:

	Minutes	% of Time
Sudden Cardiac Arrest (SCA)	6 minutes or less	40%
CTAS 1 (resuscitation)	8 minutes or less	55%
CTAS 2 (emergent)	10 minutes or less	65%
CTAS 3 (urgent)	10 minutes or less	65%
CTAS 4 (less urgent)	15 min or less	65%
CTAS 5 (not urgent)	20 min or less	65%

### Scope of Problem

When evaluating ambulance service deployment and optimal staffing levels, many factors must be considered, such as the rural-urban geography of the County, call volumes, demographics, and system challenges and barriers. When a member of the public calls 911 in an emergency, they expect a rapid response. Further, response times remain the most easily measured metric to evaluate system performance.

#### 1.) Increased Call Volumes

Northumberland Paramedic call volumes have increased from 2018-2022 by 19.1% and the response to those calls increased (worsened) by 11.8%.

Further the 90<sup>th</sup> percentile response times to priority 4 (life threatening) calls increased (degraded) by 13.5%; average call duration increased (worsened) by 20.2%; time on task increased (worsened) by 43.1%; and unit utilization, a service workload and performance metric increased (worsened) by 32.9%.

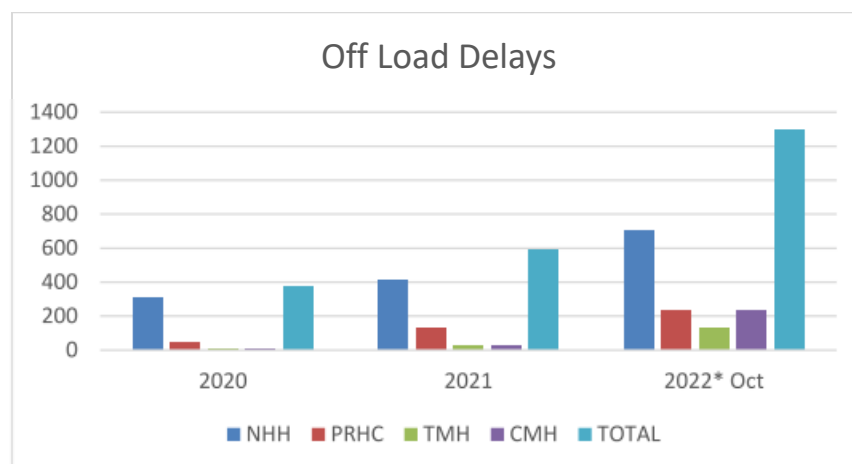


Year	Call Volume
2018	21,427
2019	19,994
2020	19,577
2021	25,060
2022	25,450
2023 (Q3)	*18,254

## 2) Off Load Delays (OLD's)

Further to population growth is the continuing increases in ambulance offload delays experienced at local hospitals. With the increasing age of the population as well as the lack of primary care physicians available, the volume of patients seen at local area hospitals continues to increase. The increase in hospital admissions often causes a backlog in the emergency room as admitted patients wait for hospital beds to become available in the wards. This means that when ambulances bring patients into the hospital, there is physically no space to accommodate the patient. This leads to significant delays for ambulances and directly affects the service deployment.

Northumberland Paramedic service have been significantly impacted by OLD's. From 2018 - 2022 there has been a five times increase in OLDs. It is important to note that the offload "timer" does not start until the ambulance and crew have been at the hospital for 30 minutes. This time represents the industry standard "acceptable" time it takes to transfer care of the patient, clean restock and document the call.





The EOWC refresh data confirmed our analytics and reported NCPS had experienced a 113% increase in our offload delay events, which calculates out to a 180.5% in hours at a cost of \$1.1M to the budget. \$1.1M represents the approximate cost of an ambulance and staffing for 12 hours. (See off load delay chart below).

	OLD Delay Events	OLD Hours	Avg OLD Time (hrs.)	Additional 12 hr. shift for OLD	Unit Utilization (24)
2018	1,543	558	0.86	0.5	27%
2022	3,298	1,565	0.97	1.0	36%
Increase 2018-2022	113%	180.5%	13.1%	111.0%	32.9%

### 3) Specialized Bypass Protocols and calls in neighboring services

As paramedics travel to more distant hospitals to access specialized care services (for example, bypassing the local hospital to take a patient suffering a stroke to a regional stroke center or a patient suffering a heart-attack to a CATH lab) there are fewer ambulances remaining in the County to maintain emergency coverage for those potentially in need. This requires a re-deployment of ambulances such that the same population and the same 2,000 km<sup>2</sup> must be covered by fewer ambulances, directly impacting response times.

Additionally, paramedics will potentially be transporting trauma patients to specialized trauma centers and other patients (mental health, maternity, and orthopedics) in accordance with locally developed patient destination agreements to hospitals that have specialized services available. This is of great benefit to improving patient access to necessary care. However, this will increase the amount of time Northumberland County ambulances spend outside of Northumberland County. Once our vehicles clear these centers, they become available and can be dispatched to respond to Code 4 (life threatening), and some Code 3 (urgent) calls in these areas, outside our catchment area. These situations can lead to a 2–4-hour loss of local coverage per incident.

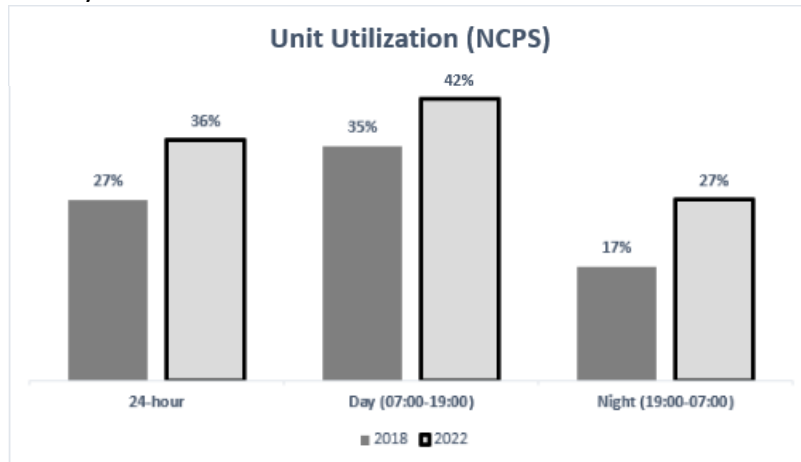
### 4.)Unit Utilization

Unit utilization is one tool used to measure workload. A general acceptable unit utilization is a threshold of 40%, where an ambulance is available for the next call in a reasonable amount of time, and where deployment for a service is manageable. We are experiencing an increase unit utilization (workload measure) from 2018 to 2022.





In 2018 our unit utilization was 24% (24 hour), 35% (day shifts), and 17% (night shifts) in 2022 we surpassed the 40% threshold of 42% on day shifts, very close to a 24 hour of 36% and nights have also increased to 27%. The unit utilization data supports the 5-year predictive assessment of adding a 12-hour day shift and vehicle in 2023-2024.



The unit utilizations and costs per call are all increasing due to an increased call volume, time on OLD's, as well time out-of-area. As mentioned previously Northumberland Paramedics have a substantial call volume of transports to tertiary health centers (Regional Centers of Health) outside of our catchment area; Peterborough Regional Health Center (PRHC), and Quinte Health care (QHC) are the bypass sites (bypass our local hospitals) for definitive care for our acute STEMI bypass (acute Heart attacks), acute strokes, and major trauma. Northumberland Paramedics are also dispatched for urgent transfers from local hospitals for consult and advance diagnostics/care to these centers. Upon arrival at these hospitals off load delays are experienced and once cleared at the regional hospital they are deployable to the dispatch center to any code 4 call they happen to be the closest to. These instances can pull our county resources for 3-5 hours plus and thereby decreasing our local resources, increasing our response times, time on task and cost per call.

#### 5.) Demographics

Northumberland County demographics show that in 2018 seniors (65+) represented 27% of the population and accounted for 59% of the call volume; whereas in 2022 seniors represent 30% of the population and accounted for 61% of our patients. As this demographic trend continues to increase, theoretically the Community Paramedic program will/ and has assisted in minimizing the other variables such as repeat hospital admissions, associated healthcare system costs, and call volume.

#### 6.) Other Factors



Many other factors also affect response times. For example, increases in vehicular traffic and poor weather conditions both contribute to increases in response times. These are factors that cannot be controlled; however, increasing the ambulance resources available helps to strategically spread-out ambulance coverage such that these issues can be addressed.

The surge capacity in southern Northumberland County also has a direct consequence on rural equity. As our vehicle count is at Critical Emergency Coverage (CMEC) daily, ambulances in the northern and eastern stations are dispatched and assigned to emergency calls causing increased response time in rural Northumberland.

## Consultations

Apexpro Consulting  
Eastern Ontario Wardens Caucus – Refresh Report  
Ontario Association of Paramedic Chiefs (OAPC)  
Eastern Paramedic Chiefs

## Financial Impact

An additional twelve (12) hour shift requires the creation of four (4) new full-time positions. In Year 1 of the additional staffing, the County will receive no additional funding from the MOHLTC for the new positions. The additional 50% funding for Year 1 will be realized in Year 2 and each year following. Starting this enhancement in Q3 will lessen the year 1 levy impact.

	2024	2025	2026	Funding
12 Hour staffing (wages)	\$270,00	\$540,00	\$540,000	2024-\$270,00 Levy 2025 on 50/50 Funding



The additional ambulance for this 12- hour shift will be covered 100% through the long- term plan and funded by development charges. The estimated cost for an ambulance in 2024 is \$260,000.

There will be a one- time cost to purchase equipment and supplies to stock this ambulance to the Provincial Equipment Standards for Ontario Ambulance Services version 3.7, February 1, 2023. The main equipment required is a defibrillator, power stretcher and power load system, controlled medication safe, immobilization devices and splints conveyance equipment, and all medications. This one- time cost to be compliant with the standards is currently priced at \$114,951.

This additional ambulance will also have an on-going increased expense to the fuel and maintenance line of the budget in future years in the amount of \$33,500.

	2024	2025	2026
Equipment – Supplies	\$114,951	-----	-----
Fuel /Maintenance/Tires	\$33,500	\$33,500	\$33,500

## Risk Considerations

The most significant consideration in terms of risk is ensuring that the County continues to meet or exceed established response time requirements. This includes meeting the public's expectations with respect to level of service.

Other health and safety considerations include the volume of work being performed in the period between 0800 and 2300 hours. Responder fatigue is the leading cause of negative incidents resulting from errors. In addition, fatigued responders have increased risk of health issues leading to increased absences.

By ensuring that staffing is adequate to help more evenly distribute workloads, these risks are minimized.

Ensuring that full-time staff receives their vacation time also helps to prevent responder fatigue (commonly known as burn-out). Part-time staffing must remain at adequate levels to accommodate full-time vacation time.



## **Impacts to Member Municipalities/Partners**

It is anticipated that there will be a reduction in response times within the county. As surge continues throughout Northumberland our capacity to maintain response times diminishes. Rural equity is directly impacted as vehicles are moved to assist with emergency calls. An additional 12-hour day shift will improve capacity in Northumberland both in urban and rural vehicle deployment.

## **Included in 2022 Long Term Plan: YES/NO**

Yes, the addition of an ambulance in 2024 was included in the long-term plan with the development charges covering the full replacement of an ambulance.

The required staffing (4 FTE's), additional equipment and supplies, and the on-going costs identified are covered with levy and provincial funding. The cost is 100% to the Levy in Year 1, and then the 50/50 provincial funding begins in year 2 and subsequent years.

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## 2024-2026 Issue Paper

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### Peer Support Funding

#### **Purpose**

This Issue Paper is to seek budgetary assistance to maintain, support and further develop our peer support team. The peer support team is an important internal measure to assist proactively with the mental health of the paramedic team, recognize if a peer needs assistance, and be a liaison to assist with resources that may be available to help their peer.

#### **Background**

First responders are people with specialized training and are among the first to arrive and provide assistance or incident resolution at the scene of an emergency. First responders must be trained to deal with a wide array of potential medical and traumatic emergencies. There is a high level of stress and uncertainty associated with the first responder position.

Paramedics are a unique hybrid of first responder and health-care provider- two rigorous and demanding professions represent an integral portion of first responders for the County. Paramedicine is rewarding, yet the demanding nature of their work can lead to higher incidences of mental health problems and operational stress injuries. Paramedics can face particular challenges and occupational health and safety issues everyday including but not limited to: psychological trauma and stress; physical challenges like shift work and extended work periods; and exposure to harsh work environments.

Peer support programs for responders, provides support for one another. Support may include reflective listening, and other types of emotional support, as well as helping with response after a critical incident. Peer support can help responders cope, lower stigma, and build team cohesion. Responders understand stressors their peers face as others may not. Peers can model healthy behaviors and share information about sources of support. Strengthening protective measures can help to mitigate the impact of the hazards where and when they occur and can promote psychological health and safety on many levels.

It is important to understand and recognize that peer support is not intended to replace the professional assistance, and potential diagnosis of a trained mental health professional. Peer support team members are there to listen, support and recognize when a peer needs assistance



and provide information on the resources that are available to their peer- encouragement and decrease the stigma of mental health.

The Northumberland Paramedic Peer support team was established in 2019 through both the Labour Management Committee (LMC) and the Joint Health and Safety Committee (JHSC). With the assistance of TEMA, the peer support team was introduced and formed.

The following steps were used to develop the Peer Support Team:

- Peer selection and nomination process confidential through TEMA
- Personality Assessment Inventory (PAI)
- Interview with TEMA and clinical psychologist
- Training – R2MR, MANERS -Psychological First Aid, and ASIST – Suicide Intervention First Aid
- Coaching Mentoring Phase – post training via Zoom.

Peer Support Team support may include:

- Annual Training and meeting date of peer support team and backfill -
- Wellness Wednesday – 6 times per year – backfill and engagement opportunity.
- Peer Support App- request help or recommend someone for intervention.
- Peer Support networking – travel and conference attendance
- Incremental recruitment when required (3-5 years)

	2020 (May -Dec)	2021	2022 (Jan-July)
-Self referral	0	7	1
-Recommended by peer/sup	136	46	16
-Proactive	25	116	61
Follow ups	12	71	26
Check in		56	26
Total Connections	173	277	130

Average time from request help to contact with Peer support is 6 min (2021/22)

Average time from recommendation to contact with peer support is 4 hours (2021/22)

## Consultation/Options

Psychological health and safety in the paramedic service organization  
CIPSERT – Canadian Institute for Public Safety Research and Treatment



PSPNet – Public Safety Personnel Network  
Mental Health Commission of Canada  
Occupational Health and Safety

## Financial Impact

	2024	2025	2026
Peer Support	\$10,000	\$25,000	\$25,000

## Risk Considerations

Proactive and immediate mental health supports, assistance and early recognition will promote a healthy work environment and foster a team support approach amongst peers. In the absence of a peer support team and further support systems there is a risk to an increase length and severity of mental health injuries that can lead to an increase in WSIB, long term disability, and PTSD.

## Impacts to Member Municipalities/Partners

N/A

## Included in 2022 Long Term Plan: YES/NO

No

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## 2024-2026 Issue Paper

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### Paramedic Administrative Summer Students (2)

#### Purpose

The purpose of this Issue Paper is to seek approval to create two (2) annual summer student positions for the Paramedic Department, beginning in 2024. These positions will support the mandate of the Paramedic Department: to provide emergency land ambulance service and community paramedicine to the county effectively and efficiently. These students will assist in the supportive back-end requirements of these programs such as assisting with the completion of documentation and compliance requirements, and supply and logistical, inventory compliance.

#### Background

The Paramedic Department is extremely busy during the summer months. The summer months are especially challenging for the department due to capacity limitations resulting from standard holiday scheduling and an increased workload. Due to completion of College Paramedic Programs in late spring, recruitment and hiring take place in late spring/early summer. With the new hires, there is an increase in administrative duties which could be supported by having a student in the department. This would create a more balanced approach to duties while continuing to ensure all regular duties are maintained and are compliant for Ministry standards.

For this reason, the department is seeking to build this annual temporary resource into long-term plans. Dedicated summer student(s) would support the department on both the 911 side and the Community Paramedicine side. There would be an opportunity for office environment support, public relations and event planning and training, as well the logistics supply, vehicle readiness and inventory.

Duties may include:

- reconciling gas receipts for the department vehicles
- planning for upcoming events such as career fairs at Colleges
- assisting with preparations for the annual Survivor Night Event
- preparing equipment for Community Paramedicine patients
- creating profiles and administration assistance





- assisting in preparing Ministry of Health documentation for new recruits
- assisting in uniform ordering and distribution
- reviewing documents to ensure compliance is being maintained
- public relations and community engagement current and future preparation
- asset inventory and management of supplies
- transportation of supplies and movement of vehicles for maintenance and repair
- public relations and community engagement support and preparation

The summer student position(s) would be available to those students currently enrolled in the paramedic program between year 1 and 2 and/or in office administration, inventory supply. This is an important opportunity to assist in long term recruitment by identifying those students who will graduate within the next year and provide an opportunity and mentorship into paramedicine and/or municipal career opportunities upon graduation.

## Financial Impact

The summer student employment period would run from the beginning of May to the end of August each year – a period of approximately 17 weeks. Staff consulted with Human Resources to estimate the budgetary requirements for this position and recommends an annual allotment of \$14,000 be allocated in the Paramedics Budget for the retention of an Administrative Summer Student.

Funding will be sought from the Canada Summer Jobs program to further offset student employment costs. This program offers a subsidy to employers hiring summer students age 15 to 30.

	2024	2025	2026
Summer Students	\$28,000	\$28,000	\$28,000

## Risk Considerations

N/A



## **Impacts to Member Municipalities/Partners**

Benefit to the Paramedic Service, County and member municipalities by assisting with the effective and efficient delivery of care.

## **Included in 2022 Long Term Plan: YES/NO**

The Paramedic Department has not previously included a summer student in long-term plans.

In order to maintain service levels during the summer months where the department experiences reduced capacity, staff is seeking to build this annual temporary resource into future long-term planning.

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## 2024-2026 Issue Paper

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### Contingency Up-Staffing Hours - Budget

#### Purpose

This Issue Paper is to seek approval to create a contingency fund for upstaffing requirements that are necessary throughout periods of the year. These include but are not limited to inclement weather and effects on travel conditions and response times, Statutory holidays, and the increase traffic through our region- major highway, and influx of visitors to the area and the ability to proactively increase coverage, and our critical management of emergency coverage (CMEC) within our collective agreement.

#### Background

There are situations when it is imperative to temporarily up-staff a vehicle beyond the normal service level commitment to protect the health and safety of the crew and community, to meet the approved response time standards, proactive strategize for influxes of visitors to the community and compliance with our Collective Agreement.

During the months of December through to April Northumberland can experience inclement weather conditions such as freezing rain, snow, sleet, and high winds all conditions that create hazardous conditions as paramedics respond to serious and emergency life threatening calls. In these situations, response times increase especially to the more rural areas of the County, there can be road closures and re-routing creating further distances to travel, and these conditions cause hazards to the community resulting in car accidents, slips, trips, and falls. In these situations, it is best to proactively minimize these events by up staffing a vehicle thereby increasing the resources available.

Similarly, during the summer months, we see an influx of visitors through the rural area of cottagers, lakes and beaches, and roadways throughout Northumberland County resulting in an increase call volume demand for emergency services. The statutory holidays May (Victoria Day), July (Canada Day), August ( Civic Holiday) and September (Labour Day) see increase traffic on the major 401 series highway, and other county roads. Once again being proactive and adding an ambulance to the normal staffing levels can assist in the increased call volumes and maintain safer response times.

As an emergency service the requests for an ambulance are mainly unpredictable which at times can create surges in call volumes resulting in not having enough ambulances available to



respond to all the emergency requests. In these instances, calls are triaged through dispatch and in theory ambulances are dispatched to the most severe and highest acuity while other calls are placed in que and delayed either until we have an available ambulance (Code 3-urgent) and or a neighboring service is available to respond (Code 4- Life Threatening). These instances and surges can continue from 4-8 hours up to 12 hours -a full shift. Instances where there are no available ambulances within the County are referred to as CMEC 0 (Code red). The Collective Agreement speaks to the requirement of up-staffing an ambulance upon a sustained and continued CMEC-0.

## Consultation/Options

Ambulance Act Regulation 257/00

Response Time Standards

Service Commitment

## Financial Impact

It is recommended to implement four hundred and eight (408) hours of potential contingent up staffing coverage hours for the incidents identified. In each of these situations an additional ambulance would require two (2) paramedics so that would draw twice the hours per incident . These up-staffing events can range from a minimum of 4 hours, up to 12- hour shift with monitoring of call volume demands.

	2024	2025	2026
Hours of upstaffing	408 total hours	408 total hours	408 total hours
Costs	\$25,218.54	\$25,218.54	\$25,218.54

## Risk Considerations

The risks of not implementing the contingency up-staffing budget fund are the potential for over expenditures. In the instances where it is imperative to up-staff these costs are not specifically budgeted for. Also, if strategic and proactive up-staffing doesn't occur this can lead to increased response times and potential catastrophic outcomes, health and safety concerns of the crews and community, and potential grievances.



## **Impacts to Member Municipalities/Partners**

Impact to all member municipalities, with the largest impact to the rural areas of the County where longer travel times and increased response times.

## **Included in 2022 Long Term Plan: YES/NO**

This was not included in the Long -Term Plan. However, to maintain service levels during inclement weather, the large influx of visitors and cottagers during summer months, periods of constant and steady call volume pressures resulting in CMEC 0, staff is seeking to build this annual temporary resource into future long-term planning.