



## Paramedic Services Section 21 Committee Meeting Minutes

@ 675 Cochrane Drive, Toronto

Date: September 10 & 11, 2025

Time: 1:00pm – 4:30pm & 9:00am – 12:00pm

### Attendance:

(Members)	Ian Nash (co-chair) Colin Heise (co-chair) Dave Doran Shane Muir Harri Hamalainen Mike Nunn	CUPE Ontario Association of Paramedic Chiefs OPSEU Ontario Association of Paramedic Chiefs Ontario Association of Paramedic Chiefs Unifor
(Observers)	Dawn Clinch Nancy Bradshaw Loretta Michaud	Public Services Health and Safety Association Strategy Advisor, Prevention Division, MLITSD Workers Health and Safety Centre (WHSC)
(Facilitator)	Julie Jeaurond	Provincial Specialist, MLITSD
(Guests)	Richard Chung	Workers Health and Safety Centre (WHSC)
(Regrets)	Marc Goudie Stephen Adlington Don Pierce Natasha D'Angelo Aparna Sen-Hobbins	Ontario Association of Paramedic Chiefs SEIU Senior Field Manager, Ministry of Health Workers Health and Safety Centre (WHSC) Manager, Ministry of Health

### 1.0 Welcome and Introductions

The Paramedic Section 21 meeting was held at 675 Cochrane Drive, Toronto. The meeting is co-chaired by I. Nash and Colin Heise.

### 2.0 April 2025 Minutes and Action Items

The minutes from the April 2025 meeting were prepared and distributed to the members for comment then provided to the co-chairs for approval. The minutes were finalized, approved and provided to PSHSA for posting to their website.

### 3.0 PSHSA Prevention Plans – Update

An update was provided by Jackie Sam, Program Manager at PSHSA.



PSHSA Updates -  
Prevention Plan Project



PSHSA Updates -

Anti-Stigma Campaign

In response to a question about average claim duration, please see below.

Average days lost from work across all PSPs was 422 days (~14 months) between 2017-2021.  
With firefighters losing the most days off work at 523 days (~17 months).  
With paramedics losing the fewest days off work at 270 days (~9 months).  
Communicators losing an average of 512 days off work (~16 months).  
Correctional workers losing an average of 478 days off work (~15 months).  
Police losing an average of 467 days off work (~15 months).

Source: Edgelow M, Brar S, Fecica A. Worker's compensation usage and return to work outcomes for Ontario public safety personnel with mental stress injury claims: 2017–2021. *Frontiers in Organizational Psychology*. 2023;1. doi:10.3389/forgp.2023.1284650

#### **4.0 Workers Health and Safety Centre Update**

An update was provided by Loretta Michaud, Director, Policy and Programs

Link to newly created webpage for Paramedics:

<https://www.whsc.on.ca/Resources/Publications/Sector-Committees/Paramedic-Section-21>



Whats New at  
WHSC\_Sept2025.pdf

#### **5.0 MLITSD FSHWD (Fair, Safe and Healthy Workplaces Division) Update**



2025 MLITSD Activity  
in the Paramedic Sect

SUI Report resulting from the shooting that occurred on October 27, 2017 at the Northumberland Hills Hospital in Coburg.

[SIU Director's Report - Case # 17-OFD-313 | ontario.ca](#)

#### **6.0 Roundtable and New Business**

H. Hamalainen

- Medics are tired, some are working at multiple services.
- Hard to get updates on medics that are out on leave, makes it hard to post for work more than a month at a time.
- Getting a new truck (Demers) at the end of October 22, 2025.

C. Heise

- Acute calls can be more volatile – requires situational awareness.
- ACR (Ambulance Call Report) platform for documentation (new).

S. Muir

- Very busy in the north – lots of violence against medics. Trying to work with police but they are understaffed as well. Staging policies, situational awareness and de-escalation

training done but still does not changes medics face. Trying to counteract that by putting together a STAR (Specialized Treatment and Response) Team. Bringing together a crisis intervention worker, paramedic and indigenous liaison that responds to mental health condition calls. Operational but still waiting to see results. Working with municipality trying to find housing and social supports.

- Updated our PTSD plan and we have a team of clinical psychologist embedded with us.

#### M. Nunn

- Building on paramedic numbers including international medics.
- We do have asset shortages – helicopters all needing maintenance at the same time.
- Concerns about rescues in rough terrain.

#### D. Doran

- OPSEU Ambulance Division had booth at AMO. Talked about cancer presumptive legislation.
- One jurisdiction having an issue with fire not staying on scene and blocking for them on the roadway.
- Lennox/Addington stations having air quality testing done for mould.
- Touch pads installed in trucks are hard to see with polarized glasses – suggest going back to toggle switches.
- Training health and safety members including alternates – psychosocial training/ investigations and workplace inspections.
- Recently applied for a multi-site for the JHSC.
- Copenhagen Mental Health assessment for the workplace – looking at results.
- Concerning news from CSA - CSA paramedic documents will now go to a technical committee instead of a full CSA Committee leading to paramedics no longer having voting privileges.

#### I. Nash

- More senior stall getting burnt out.
- End of shift issues – MPDS may help, has made a huge difference in Harri's area. Better system overall.
- Discussion about off-load delays.
- Driving standards are subpar. Suggest development of a guidance note.

#### R. Chung

- Cancer Care Ontario doing fit testing study – looking for Sikh men to participate. The fit testing study methodology is tailored to healthcare workers.
- In the process of registering for a multi-site agreement with MLITSD.

## Day 2

### 7.0 Ministry of Health Update

#### D. Pierce

- EHRAB-Health – accountability branch
  - Ontario Ambulance Documentation Standard v. 4.0 released Sept. 2 – few changes, available on MOH website.
  - Life Supports Standard currently under review.

- Patient Care Standard 3.5 is being reviewed. DNR standard being reviewed.
- Advanced Life Support Patient Care Standard being reviewed – will be v. 5.5.
- Work being done on Provincial Equipment Standard, includes OAPC.
- Patient Care and Transportation Standard – going to be small changes – winter 2026 for feedback.
- Emergency Health Services Division
  - MPDS – across eastern ON, in June went through to Timmins then Hamilton and Cambridge. 2026 – SW, North incl. Sudbury, Sault Ste. Marie. Mississauga have been on for 3 years.
    - Niagara using a nurse program, other regions using other programs.
    - Ottawa looking at secondary triage.
    - Meeting with different services incl. other provinces.
  - PSRN – SE region – slight pause for network capability.
    - Not sure when it goes to eastern region.
  - NG911 – rolled out in 18 of 21 CACC's.
    - Next phase – go, no go meeting this week for Lindsey CACC. Analog to digital – full digital possibility of load levelling. CACC's will be able to take call for each other.
    - Mississauga CACC has sewage issue. Now working out of Hamilton (day 4 today). 3-4 week project to complete.
  - Staffing – increased management presence, plus supervision and ACO's.
  - Discussions:
    - Any protocols for limiting smoking around medics?
      - Could be brought to local JHSCs, local process for submitting concerns.
    - Can we get info ahead of time related to involvement of lithium ion batteries?
      - If the info is known it will be provided but not part of protocol.
    - Concern over having only 1 tablet available and only being available to the driver. There is no silent dispatch, everything should be done verbally. MCAD gets ported into EPCR. If medics need more info should be requesting it from ACO.
    - MPDS requires 2 base pages for each call – in Nov. it will change to one page only going through at a time to the base.
    - ACO's won't be identifying the ambulance, but identifying the base instead.

## 7.0 MLITSD Prevention Division Presentation

Request for feedback on the development of the next 5-year OHS strategy.

- Nancy Bradshaw presented the framework for the next OHS strategy and the committee provided feedback.
- As a follow-up, Nancy shared a feedback form with the committee to provide further written feedback.
- The information will be used to help inform the next OHS strategy (April 2026 to March 2031)



v06 - OHS strategy  
2026-2031 - external.

## 8.0 Guidance Notes

The following GNs continue to be in approvals:

- 1) Working On or Around Water
- 2) Limiting Exposure to Gases
- 3) Heat Stress

GNs ready for legal review:

- Improving Air Quality in Paramedic Services Building (Dave and Stephen)(this GN replaces/updates GN #3 - Reducing Diesel Exhaust in EMS Stations)
- Cold Stress (Dave and Marc)

Other GNs in development or under review:

- GN #6 - Motor Vehicle Advanced Technology Hazards (being updated) (Colin, Dave and Harri)
- GN #9 - Workplace Violence and Harassment (being updated) (Ian and Colin) – requires formatting work – but should be ready for review shortly.
- GN #2 - EMS Vehicle Occupant Safety – review of this existing GN (Stephen, Mike and Shane)
- GN #4 – EMS Worker Exposure to Hazardous Drugs (Marc and Dave)

Potential New Topics for GNs:

- Electric Shock Discharge
- JHSCs and the IRS
- Rapid Response
- Tactical Response
- Single Responder
- Driving Standards

Posting of Guidance Notes

- The committee had a discussion about the posting of guidance notes, which are currently posted on PSHSA and WHSC websites..
- Nancy asked the committee if they are open to the guidance notes also being posted on the ontario.ca website.
- The committee expressed concerns about changes to the content to comply with AODA guidelines.
- Nancy will investigate posting options for the next meeting.

## 9.0 Meeting Adjourned. Upcoming 2025 meeting dates:

- November 19 & 20