

Assistant Clerk Committees
Department of the Legislative Council
Fire Services Bill Select Committee
Parliament House, Spring Street
EAST MELBOURNE VIC 3002

Dear Committee Members,

I am writing to express my support of the proposed Firefighters' Presumptive Rights Compensation and Fire Services Legislation Amendment (Reform) Bill 2017.

I have served the community as a career firefighter with the Metropolitan Fire Brigade (MFB), Melbourne for over 32 years, I hold the rank of Senior Station Officer and I am currently the Officer in Charge of one of the largest and busiest fire stations in metropolitan Melbourne, Footscray fire station B platoon.

On Australia Day 2012, I was awarded the Australian Fire Service Medal (AFSM) for services to the Victorian community in the development and implementation of the MFB's Emergency Medical Responder (EMR) program across all 47 fire stations within the Metropolitan Fire District, Melbourne.

The Emergency Medical Responder (EMR) program has been an established core function of the MFB since 2001. As such, the MFB through the emergency medical response program has been part of the metropolitan Melbourne health care continuum for the past sixteen years in providing a safe and efficient Emergency Medical Responder program, with impressive response times that supports Ambulance (AV) in certain time-critical medical incidents (i.e. heart attack, drug overdose, drowning, trauma, suicide, etc).

Since the introduction of EMR, MFB firefighters responding to time critical medical emergencies have directly saved over 200 lives. They have also assisted Ambulance Victoria paramedics in thousands of medical emergencies, improving the clinical outcome of many of these patient in their time of need. As you would be aware, rapid intervention is one of the key elements in the success of the EMR program with many studies showing a cardiac arrest survival rate drop of 10% per minute where no intervention occurs.

In 2010, the Monash University Department of Community Health of Paramedic Practice published a study into the first seven years of the MFB's EMR program. Some of the key findings of this seven year study were as follows:

- Average response time 6.1 minutes (Receipt of 000 call to on scene)
- Median response time 5.6 minutes (Receipt of 000 call to on scene)
- Firefighters provided "initial care" in 57% of the incidents. (Prior to ambulance arrival)
- Firefighters assisted paramedics in 26% of the incidents
- Firefighters spent on average 4.8 minutes with the patient before handing over to paramedics
- Firefighters spent on average 20 minutes total time on-scene

These study findings confirm the success of the MFB's EMR program in providing a rapid response of medically trained firefighters to assist members of the Victorian community who are the victims of cardiac

arrest and other life threatening illness/injury prior to ambulance arrival. The study also showed that the EMR program has minimal impact on the MFB's other emergency response functions and responsibilities.

The CFA are currently rolling-out an EMR response training program to all CFA career fighters at its 35 Integrated fire stations throughout Victoria. I have been involved in the development and implementation of this program in concert with the MFB, Ambulance Victoria and Emergency Management Victoria. I believe the introduction of the EMR program into CFA stations across regional Victoria will be of life saving benefit to those communities serviced by CFA integrated stations, as has been the experience across metropolitan Melbourne.

Unfortunately, due to antiquated fire service response boundaries not all Victorians benefit from this life saving program. As it is currently only approved to be implemented in those response areas serviced by MFB and CFA career staff across Victoria. The reality is that even if volunteer firefighters were trained and equipped to provide an EMR response, they simply in most areas do not have the ability to respond reliably or quickly enough to provide a positive outcome in cases of time-critical medical emergencies, one of the key findings of the Monash University study on the MFB EMR program. This is not a criticism of volunteers per se, but a statement of fact based on response data regarding the delays in their availability to respond 24 hours a day, 365 day per year in many areas of the Victoria.

As such, I believe some of the key considerations for the select committee are:

- The ability of many volunteer brigades in urban and/or industrial growth areas to provide a safe, effective, reliable and timely emergency response function to the community in light of Victoria's rapid urban growth beyond current historical fire agency boundaries.
- That identified densely populated urban growth and/or significant industrial risk areas currently serviced only by volunteer firefighters should transition into integrated (volunteer and career) response models to ensure a rapid, reliable emergency response in line with community and corporate expectation.
- That an agreed standardised trigger or criteria should be adopted to determine the transition of an
 area from volunteer to an integrated response model (i.e. population density, infrastructure risk and
 response demand). This will remove the issues, politics and personalities we have historically
 witnessed over many years to the detriment of the safety of the Victorian community.

Thank-you for the opportunity to communicate my support of the proposed Firefighters' Presumptive Rights Compensation and Fire Services Legislation Amendment (Reform) Bill 2017 in this submission.



Allan J Morton AFSM