Frontenac County Council Meeting
Wednesday, March 15, 2023 – 9:30 a.m.
Township of South Frontenac Council Chamber,
4432 George Street, Sydenham, ON
https://youtube.com/live/ML79WbzQquQ

Agenda

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Call to Order

Roll Call

Closed Session

Approval of Addendum

Disclosure of Pecuniary Interest and General Nature Thereof

Adoption of Minutes

10 - 19

a) Minutes of Meeting held February 15, 2023

Resolved That the minutes of the regular Council meeting held February 15, 2023 be adopted.

Delegations and/or Presentations

Proclamations

Move into Committee of the Whole

a) **That** Council adjourn and meet as Committee of the Whole Council, with the Deputy Warden in the Chair.

Briefings

20 - 43

a) **Mr. Kelly Pender**, Chief Administrative Officer, will provide Council with his monthly CAO briefing.

Unfinished Business

Consent Reports from the Chief Administrative Officer

All items listed on the Consent Reports from the Chief Administrative Officer shall be the subject of one motion. Any member may ask for any item(s) included in the Consent Reports from the Chief Administrative Officer to be separated from that motion, whereupon the Consent Reports from the Chief Administrative Officer without the separated item(s) shall be put and the separated item(s) shall be considered immediately thereafter.

a) **That** Council consent to the approval of Reports a) through d) the are considered routine items

Consent Reports

44 - 47

a) **2023-033**
Corporate Services
Support of Application of staff to AMO Board of Directors – County Caucus

Recommendation:

Be It Resolved That the Council of the Corporation of the County endorses and supports Meredith Staveley-Watson in her application to fill the Association of Municipalities of Ontario (AMO) Board of Directors' County Caucus staff vacancy for the remainder of the 2022-2024 term.

48 - 50

b) **2023-034**
Corporate Services
Support for AMO Submission on Housing and Homelessness

Recommendation:

Whereas AMO is encouraging Municipal councils and DSSABs to support its submission's key messages on housing and homelessness; and,

Whereas the homeless crisis is taking a devastating toll on families and communities, undermining a healthy and prosperous Ontario; and,

Whereas the homelessness crisis is the result of the underinvestment and poor policy choices of successive provincial governments; and,

Whereas homelessness requires a range of housing, social service and health solutions from government; and,

Whereas homelessness is felt most at the level of local government and the residents that they serve; and,

Whereas municipalities and District Social Services Administration Boards are doing their part, but do not have the resources, capacity or tools to address this complex challenge; and,

Whereas leadership and urgent action is needed from the provincial government on an emergency basis to develop, resource, and implement a comprehensive plan to prevent, reduce and ultimately end homelessness in Ontario.

Therefore Be It Resolved That the Council of the Corporation of the County of Frontenac calls on the Provincial Government to urgently:

a. Acknowledge that homelessness in Ontario is a social, economic, and health crisis;
b. Commit to ending homelessness in Ontario;
c. Work with AMO and a broad range of community, health, Indigenous and economic partners to develop, resource, and implement an action plan to achieve this goal.

And Further That a copy of this motion be sent to the Minister of Municipal Affairs and Housing; the Minister of Children, Community and Social Services; the Minister of Health; and to the Association of Municipalities of Ontario.

51 - 53

c) **2023-036**
Corporate Services
Appointment of an Area Weed Inspector for the County of Frontenac

Recommendation:

Be It Resolved Thatthe Council of the County of Frontenac receive the Corporate Services – Appointment of an Area Weed Inspector for the County of Frontenac report for information;

And Further Thatthe Clerk be directed to bring forward a by-law later in the meeting appointing Kelly J. Pender as Area Weed Inspector for the County of Frontenac.

54 - 60

d) **2023-038**
Corporate Services
2022 Year End Report of the County of Frontenac Emergency Management Program Committee

Recommendation:

Be It Resolved That the Council of the County of Frontenac receive the Corporate Services – 2022 Year End Report on the County of Frontenac Emergency Management Program Committee report;

And Further That a copy of the 2022 Year End Report of the County of Frontenac Emergency Management Program Committee be posted to the County of Frontenac Website.

Committee of Management of Fairmount Home

Recommend Reports from the Chief Administrative Officer

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61 - 66 a) **2023-039**
Emergency and Transportation Services
2022 Legislated Response Time Standard Performance Plan - Reporting to the Ministry of Health and Long-Term Care (MOHLTC)

Recommendation:

Resolved That the Council of the County of Frontenac receive the Emergency and Transportation Services - 2022 Legislated Response Time Standard Performance Plan Reporting to Ministry of Health and Long-Term Care (MOHLTC) for information,

And Further Thatthe 2022 Response Time Standard Performance Plan outcomes for the County of Frontenac be reported to the Director, Emergency Health Regulatory and Accountability Branch, Ministry of Health and Long-Term Care as required by legislation.

67 - 80 b) **2023-035**
Corporate Services
Annual Accessibility Status Report

Recommendation:

Be It Resolved That the Frontenac Accessibility Advisory Committee – Annual Accessibility Status Report, attached to this report as Appendix A be received;

And Further That in accordance with Ontario Regulation 91/11: Integrated Accessibility Standards section 4(3), that a copy of this Annual Accessibility Status Report be posted to the County of Frontenac Website;

And Further That in accordance with Ontario Regulation 91/11: Integrated Accessibility Standards section 4(3.1) and (3.2), that a copy of this Annual Accessibility Status Report be forwarded to the Frontenac Lower Tiers for posting on their respective websites.

Information Reports from the Chief Administrative Officer

81 - 85 a) **2023-037**
Corporate Services
2022 Remuneration and Reimbursement of Expenses to Council Members and Non-Council Appointees Report

86 - 88 b) **2023-040**
Emergency and Transportation Services
Canadian Triage Acuity Scale (CTAS) Explanation

Reports from Advisory Committees of County Council

Return to Council

a) **That** Council revert from Committee of the Whole Council, to Council.

Adoption of the Report of the Committee of the Whole Council

a) **That** the report of the Committee of the Whole Council be adopted and that the necessary actions or by-laws be enacted.

Motions, Notice of Which has Been Given

a) **Request to the Ministry of Transportation of Ontario Public Consultation and Reconsideration of 2 Ferry system for Wolfe Island**

Moved by: Councillor Greenwood-Speers
Seconded by: Councillor Saunders

Whereas the new Wolfe Islander IV is anticipated to be in service in the Spring of 2023;

And Whereas when the construction of the new Ferry was first announced, the Minister of Transportation, the Honourable Steven Del Duca advised that the existing Wolfe Island III would be acting in tandem with the Wolfe Islander IV, thereby doubling Ferry capacity to the Island;

And Whereas in designing the new Kingston ferry terminal, the amount of onsite parking was drastically reduced in light of the increased Ferry capacity and a perceived reduced need for walk on parking;

And Whereas the Township of Frontenac Islands Mayor and Council were recently advised that the Ministry of Transportation will not be implementing the plan for a second ferry as contemplated;

And Whereas the decision to eliminate the second ferry was made without consultation with affected citizens, impacted Councils including the Township of Frontenac Islands and the City of Kingston, police, fire and paramedic services;

And Whereas the impact of this decision is far reaching for citizens;

Now Therefore the Council of the County of Frontenac hereby request that the Honourable Caroline Mulroney immediately reconsider the decision to reduce the original plans for a two-ferry service and reinstate the two-ferry plan as contemplated by the Ministry;

And Further That in the absence of a plan for a two-ferry service, or a delay of the two-ferry service, that the Ministry conduct broad consultation with the Community, including the Township and the City regarding the impacts and mitigation strategies for their decision, in particular parking, emergency response and quality of life;

And Further That a copy of this motion be forwarded to the Township of Frontenac Islands, the City of Kingston, and Mr. Ted Hsu, MPP.

Giving Notice of Motion

Communications

That Council consent to the following communications of interest to Council listed below be received and filed:

a) AdvantAge Ontario recording and slide deck of the LTC Webinar for Councillors
[Distributed to Members of County Council February 24, 2023]

b) From OMAFRA regarding the upcoming CED 101 and Teeny Tiny Summit events
[Distributed to Members of County Council February 24, 2023]

c) From the City of Port Colborne regarding a resolution Supporting the County of Huron resolution on Cannabis Act
[Distributed to Members of County Council February 24, 2023]

d) From the County of Huron Regarding a resolution with respect to the Cannabis Act
[Distributed to Members of County Council February 24, 2023]

e) From the Rural Frontenac Transportation Service providing its Q4, 2022 report
[Distributed to Members of County Council February 24, 2023]

f) From the Town of Essex regarding a resolution regarding School Board Elections
[Distributed to Members of County Council February 24, 2023]

g) From the Town of Grimsby regarding a resolution concerning Barriers for Women in Politics
[Distributed to Members of County Council February 24, 2023]

h) From Charlotte Owram regarding concerns about the loss of the paramedic base on Wolfe Island
[Distributed to Members of County Council March 3, 2023]

i) From the Municipality of Trent Lakes regarding a resolution concerning the Oath of Office
[Distributed to Members of County Council, March 3, 2023]

j) From the Town of Grimsby regarding a resolution on Changes to the Municipal Heritage Register
[Distributed to Members of County Council March 3, 2023]

k) From the Township of Dawn-Euphemia regarding a resolution on School Board Election Expenses
[Distributed to Member of County Council March 3, 2023]

l) From the Township of Moonbeam regarding a resolution on Moratorium End Date
[Distributed to Members of County Council March 3, 2023]

m) From the Financial Accountability Office of Ontario regarding its Ontario Health Sector Spending Plan Review
[Distributed to Members of County Council March 10, 2023]

n) From the Municipality of Chatham-Kent regarding a resolution on Reducing Municipal Insurance Costs
[Distributed to Members of County Council March 10, 2023]

o) From the Township of Howick regarding a Resolution on Ontario School Board Elections
[Distributed to Members of County Council March 10, 2023]

p) From AMO offering Land Use Planning Training for Elected Officials
[Distributed to Members of County Council March 10, 2023]

q) From AMO offering Navigating Conflict Relationships as an Elected Official Training
[Distributed to Members of County Council March 10, 2023]

Other Business

By-Laws – General By-laws and Confirmatory By-law

a) First and Second Reading

Resolved That leave be given the mover to introduce by-laws a) and b) that have been circulated to all Members of County Council and that by-laws a) and b) be read a first and second time.

b) Third Reading

Resolved That by-laws a) and b) be read a third time, signed, sealed and finally passed.

By-Laws

218 a) To appoint an Area Weed Inspector for the County of Frontenac
[Proposed By-law No. 2023-015]

219 - 220 b) To confirm all actions and proceedings of County Council on March 15, 2023
[Proposed By-law No. 2023-016]

Adjournment

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Minutes of the Regular Meeting of Council
February 15, 2023

A regular meeting of the Council of the County of Frontenac was held in the Township of South Frontenac Council Chamber, 4432 George Street, Sydenham, on Wednesday, February 15, 2023 at 9:30 am.

Roll Call

Present:		Warden Ron Vandewal, Deputy Warden Fran Smith, Councillors Fred Fowler, Nicki Gowdy, Judy Greenwood-Speers, Ray Leonard, Gerry Lichty and Bill Saunders
Administrative Staff Present:		Jannette Amini, Manager of Legislative Services/Clerk Susan Brant, Administrator, Fairmount Home Gale Chevalier, Chief/Director of Emergency & Transportation Services Rob Dillabough, Manager of Marine Services Joe Gallivan, Director of Planning and Economic Development Alex Lemieux, Director of Corporate Services/Treasurer Barb McCulloch, Director of Human Resources Brieanna McEathron, Executive Assistant Matt Mills, Communications Officer Kelly Pender, Chief Administrative Officer

Closed Session

Approval of Addendum

Disclosure of Pecuniary Interest and General Nature Thereof

There were none.

Adoption of Minutes

a) Minutes of Meeting held January 18, 2023

Motion #: 24-23 Moved By: Deputy Warden Smith
Seconded By: Councillor Fowler

Resolved That the minutes of the regular Council meeting held January 18, 2023 be adopted.

Carried

b) Minutes of Special Meeting held January 26, 2023

Motion #: 25-23 Moved By: Councillor Leonard
Seconded By: Councillor Gowdy

Resolved That the minutes of the special Council meeting held January 26, 2023 be adopted.

Carried

c) Minutes of the Committee of the Whole Meeting held February 8 & 9, 2023

Motion #: 26-23 Moved By: Councillor Fowler
Seconded By: Councillor Lichty

Resolved That the minutes of the Committee of the Whole meeting held February 8 & 9, 2023 be adopted.

Carried

Delegations and/or Presentations

a) Recognition of Fairmount Staff, Samantha Haisell, Colleen Noble, Crystal Hawley, Laurie Bresee, Tammy Bush, Katie Milligan, Chloe Aird-Tousignant, and Olivia Carey, who provided assistance to a community member in cardiac arrest

Proclamations

Move into Committee of the Whole

Motion #: 27-23 Moved By: Councillor Gowdy
Seconded By: Councillor Saunders

That Council adjourn and meet as Committee of the Whole Council, with the Deputy Warden in the Chair.

Carried

Briefings

a) Mr. Kelly Pender, Chief Administrative Officer, provided Council with his monthly CAO briefing.

Unfinished Business

Consent Reports from the Chief Administrative Officer

All items listed on the Consent Reports from the Chief Administrative Officer shall be the subject of one motion. Any member may ask for any item(s) included in the Consent Reports from the Chief Administrative Officer to be separated from that motion, whereupon the Consent Reports from the Chief Administrative Officer without the separated item(s) shall be put and the separated item(s) shall be considered immediately thereafter.

Motion #: 28-23 Moved By: Councillor Lichty
Seconded By: Councillor Gowdy

That Council consent to the approval of Reports a) through e) that are considered routine items.

Carried

Consent Reports

a) 2023-022
Planning and Economic Development
Official Plan Amendment Number 24 to the Township of South Frontenac Official Plan – Proposed Administrative Amendments to Implement Bills 13 and 109

That By-Law Number 2023-001 of the Township of South Frontenac, adopting Official Plan Amendment Number 24 for the administrative amendment to implement provincial Bills 13 and 109, dated January 10, 2023 and included as Attachment 1 to Report Number 2023-022, **be approved**; and

That the Official Plan of the Township of Township of South Frontenac, as amended, be further amended as per Township By-Law Number 2023-001 in Attachment 1 to Report Number 2023-022, being Official Plan Amendment Number 24 for the administrative amendment to implement provincial Bills 13 and 109.

b) 2023-023
Planning and Economic Development
Official Plan Amendment Number 1 to the Township of Central Frontenac Official Plan – Proposed Administrative Amendments to Implement Bills 13 and 109

That By-Law Number 2023-08 of the Township of Central Frontenac, adopting Official Plan Amendment Number 1 for the administrative amendment to implement provincial Bills 13 and 109, dated January 24, 2023 and included as Attachment 1 to Report Number 2023-023, **be approved**; and

That the Official Plan of the Township of Township of Central Frontenac, as amended, be further amended as per Township By-Law Number 2023-08 in Attachment 1 to Report Number 2023-023, being Official Plan Amendment Number 1 for the administrative amendment to implement provincial Bills 13 and 109.

c) 2023-024
Planning and Economic Development
Official Plan Amendment Number 8 to the Township of Frontenac Islands Official Plan – Proposed Administrative Amendments to Implement Bills 13 and 109

That By-Law Number 2023-04 of the Township of Frontenac Islands, adopting Official Plan Amendment Number 8 for the administrative amendment to implement provincial Bills 13 and 109, dated January 9, 2023 and included as Attachment 1 to Report Number 2023-024, **be approved**; and

That the Official Plan of the Township of Township of Frontenac Islands, as amended, be further amended as per Township By-Law Number 2023-04 in Attachment 1 to Report Number 2023-024, being Official Plan Amendment Number 8 for the administrative amendment to implement provincial Bills 13 and 109.

d) 2023-025
Planning and Economic Development
Official Plan Amendment Number 1 to the Township of North Frontenac Official Plan – Proposed Administrative Amendments to Implement Bills 13 and 109

That By-Law Number 01-23 of the Township of North Frontenac, adopting Official Plan Amendment Number 1 for the administrative amendment to implement provincial Bills 13 and 109, dated January 13, 2023 and included as Attachment 1 to Report Number 025, **be approved**; and

That the Official Plan of the Township of Township of North Frontenac, as amended, be further amended as per Township By-Law Number 01-23 in Attachment 1 to Report Number 2023-25, being Official Plan Amendment Number 1 for the administrative amendment to implement provincial Bills 13 and 109.

e) 2023-026
Corporate Services
2022 Frontenac Howe Islander Petition for Subsidy

Resolved That the Council of the County of Frontenac accept the Corporate Services – 2022 Frontenac Howe Islander Ferry Petition for Subsidy report;

And Further That Council authorize the Clerk to petition the Ministry of Transportation for $1,001,160.62.

Committee of Management of Fairmount Home

Motion #: 29-23 Moved By: Councillor Leonard
Seconded By: Councillor Saunders

That Committee of the Whole Council adjourn and meet as Committee of Management of Fairmount Home, with the Deputy Warden in the Chair to receive Information Reports from the Chief Administrative Officer, clause d).

Carried

Motion #: 30-23 Moved By: Councillor Fowler
Seconded By: Councillor Gowdy

That the Committee of Management of Fairmount Home adjourn and revert back to Committee of the Whole Council.

Carried

Recommend Reports from the Chief Administrative Officer

a) 2023-016
Office of the Chief Administrative Officer
Designation of County of Frontenac Representative for the Frontenac Howe Island Ferry

Motion #: 31-23 Moved By: Councillor Greenwood-Speers
Seconded By: Councillor Lichty

Resolved That the Council of the County of Frontenac receive the Office of the Chief Administrative Officer – Designation of County of Frontenac Representative for the Frontenac Howe Island Ferry report;

And Further That the Clerk be directed to introduce a by-law later in the meeting to designate Mr. Robert W. Dillabough and Kelly J. Pender as the Operator's Representative for the Frontenac Howe Island Ferry.

Carried

b) 2023-020
Corporate Services
Public Support of Dr. Brooks' Neighbours Saving Neighbours Volunteer Responder Pilot Program for Cardiac Arrest

Motion #: 32-23 Moved By: Councillor Leonard
Seconded By: Councillor Gowdy

Whereas Approximately 35,000 people across Canada experience out-of-hospital cardiac arrest annually; and,

Whereas Frontenac Paramedics responded to 276 cardiac arrest cases in Frontenac County and Kingston in 2020; and,

Whereas Fewer than 12 percent of patients who experience out-of-hospital cardiac arrest survive but that patients who are treated by properly trained bystanders who are equipped with automatic external defibrillators (AEDs) in the crucial minutes before paramedics arrive may be as much as three times as likely to recover as those who don't; and,

Whereas Dr. Steven Brooks, Associate Professor in the Department of Emergency Medicine, School of Medicine, Queen's University, is leading a funded research study and pilot program to recruit volunteer responders across Frontenac County to be trained in CPR and the use of automatic external defibrillators (AED)s, equipped with AEDs, and coordinated with Paramedics and the Kingston Central Ambulance

Communications Centre to respond to possible cardiac arrest emergencies in Frontenac in the crucial moments before paramedics arrive; and,

Whereas Partners in Dr. Brooks' initiative include Frontenac Paramedics, Kingston Health Sciences Centre, Kingston Central Ambulance Communications Centre, Queen's University, Heart and Stroke Foundation of Canada; with research funding provided to Dr. Brooks through the Ministry of Health Innovation Fund Ontario:

Now Therefore Be It Resolved That the Council of the County of Frontenac receive this report in non-pecuniary public support of Dr. Brooks' Neighbours Saving Neighbours Volunteer Responder Pilot Program for cardiac arrest;

And Further That this report be forwarded to the Townships for their information and support:

And Further That Dr. Brooks be commended for his commitment to ensuring the best chance of survival for residents of Frontenac County who may experience out-of-hospital cardiac arrest and for his contributions to scientific understanding of the best practices for resuscitation.

Carried

c) 2023-027
Corporate Services
2023 Draft Budget Revision

Motion #: 33-23 Moved By: Councillor Fowler
Seconded By: Councillor Leonard

Resolved That the Council of the County of Frontenac receive the Corporate Services - 2023 Draft Budget Revision Report,

And Further That Council amend the budget to reflect the adjustments outlined in the report.

And Finally That the Council of the County of Frontenac pass a by-law later in the meeting approving the 2023 Budget.

Carried

d) 2023-028
Corporate Services
2023 Tax Rate

Motion #: 34-23 Moved By: Councillor Gowdy
Seconded By: Councillor Greenwood-Speers

Resolved That Council of the County of Frontenac accept this Corporate Services - 2023 Tax Rate report;

And Further That Council consider a by-law, introduced later in the meeting, to establish the 2023 tax rates.

Carried

e) 2023-029
Corporate Services
2023 Tax Ratios and Tax Rate Reductions

Motion #: 35-23 Moved By: Councillor Gowdy
Seconded By: Councillor Lichty

Resolved That the Council of the County of Frontenac accept this Corporate Services – 2023 Tax Ratios and Tax Rate Reductions report;

And Further That Council consider a by-law, introduced later in the meeting, to confirm 2023 the tax ratios and tax rate.

Carried

Information Reports from the Chief Administrative Officer

a) 2023-015
Corporate Services
Queen's University Archives Annual Report to the County of Frontenac for 2022

b) 2023-017
Frontenac Paramedics
Violence Against Paramedics Campaign and Research Project

c) 2023-019
Corporate Services
2022 Annual Report on Delegation of Authority

d) 2023-021
Fairmount Home
Quarterly Update Activity Report

Reports from Advisory Committees of County Council

Return to Council

Motion #: 36-23 Moved By: Councillor Lichty
Seconded By: Councillor Leonard

That Council revert from Committee of the Whole Council, to Council.

Carried

Adoption of the Report of the Committee of the Whole Council

Motion #: 37-23 Moved By: Deputy Warden Smith
Seconded By: Councillor Saunders

That the report of the Committee of the Whole Council be adopted and that the necessary actions or by-laws be enacted.

Carried

Motions, Notice of Which has Been Given

Giving Notice of Motion

Communications

That Council consent to the following communications of interest to Council listed below be received and filed:

a) From the Township of Montague regarding a resolution supporting World Thinking Day
[Distributed to Members of County Council January 27, 2023]

b) From the City of Thunder Bay regarding a Resolution on Bill 42 - Gender Affirming Healthcare Act
[Distributed to Members of County Council January 27, 2023]

c) From the Town of Petrolia regarding a resolution on the cost of School Board Election
[Distributed to Members of County Council January 27, 2023]

d) From the Township of Montague regarding a resolution supporting Renfrew Inquest Recommendations
[Distributed to Members of County Council January 27, 2023]

e) From the Township of Montague regarding a resolution supporting World Thinking Day
[Distributed to Members of County Council January 27, 2023]

f) From the City of Brantford regarding a resolution concerning VIA Rail Cancellations
[Distributed to Members of County Council February 3, 2023]

g) From the City of Hamilton regarding a resolution requesting the Province to Repeal Bill 23
[Distributed to Members of County Council February 3, 2023]

h) From the Municipality of Lanark Highlands regarding a resolution concerning Violence Against Women
[Distributed to Members of County Council February 3, 2023]

i) From the Town of Halton Hills regarding a resolution requesting the Province to Repeal Bill 23
[Distributed to Members of County Council February 3, 2023]

Other Business

By-Laws – General By-laws and Confirmatory By-law

a) First and Second Reading

Motion #: 38-23 Moved By: Councillor Gowdy
Seconded By: Councillor Fowler

Resolved That leave be given the mover to introduce by-laws a) through e) that have been circulated to all Members of County Council and that by-laws a) through e) be read a first and second time.

Carried

b) Third Reading

Motion #: 39-23 Moved By: Councillor Leonard
Seconded By: Deputy Warden Smith

Resolved That by-laws a) through e) be read a third time, signed, sealed and finally passed.

Carried

By-Laws

a) To designate Mr. Robert W. Dillabough and Kelly J. Pender as County of Frontenac's (the Operator) Representatives for the Frontenac Howe Island Ferry
[Proposed By-law Number 2023-010]

b) To adopt the estimates for the sums required during the year 2023 for the purposes of the County of Frontenac.
[Proposed By-law No. 2023-011]

c) To set tax ratios and tax rate reductions for prescribed property sub-classes for County of Frontenac purposes and Local Municipal purposes for the taxation year 2023.
[Proposed By-law No. 2023-012]

d) To establish Tax Rates for the year 2023 for the purposes of the County of Frontenac and to establish rates to be levied for same against the Townships of Frontenac Islands, South Frontenac, Central Frontenac and North Frontenac
[Proposed By-law No. 2023-013]

e) To confirm all actions and proceedings of County Council on February 15, 2023
[Proposed By-law Number 2023-014]

Adjournment

Motion #: 40-23 Moved By: Councillor Saunders
Seconded By: Councillor Lichty

That the meeting hereby adjourn at 10:18 a.m.

Carried

Ron Vandewal, Warden

Jannette Amini, Clerk

Administrative Report

March 15, 2023

Report 2023-03

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CAO Schedule – March

- Joint CAO/Treasurer Meeting – March 1
- EOLC Monthly Meeting – March 2
- EOWC Wardens' Caucus Meeting – March 9 & 10
- County of Frontenac New Hire Orientation – February 13
- Bi-Weekly Joint Administrative Facility Meeting – March 14 & 28
- County Council – March 15
- Old House Staff Meeting – March 16
- New Hire Orientation – March 20
- FLA OHT Finance and Resources – March 21
- Leadership Team Meeting – March 22
- EOLC Bi-Weekly – March 7, 17, 24

FRONTENAC

Update – EOWC and EOLC

- EOWC
- County of Lennox and Addington
  - **Wardens' Caucus Meeting**
  - March 9th
  - **CAOs' Planning Meeting**
  - March 10th
- EOLC Board Strategy Session
- Peterborough

  Strategic Planning Meeting

  - March 2nd

FRONTENAC

AMO Communications

- AMO encourages municipalities and DSSABs to consider passing a resolution ahead of the provincial budget (anticipated late March), calling on the province to end homelessness. A resolution template is available.
- The PJ Marshall Award recognizes municipal governments demonstrating excellence in the use of innovative approaches in the areas of capital, service delivery show casing examples where Ontario municipalities have implemented and can point to tangible outcomes from new, more cost-effective ways of providing public services and facilities. For more information click here.

FRONTENAC

AMO Communications 2

Provincial Matters

- Public Safety Answering Points (PSAPs) will be notified shortly on applications for NG-911 transition funding for 2022-2023. The funding program has been implemented to help support the transition CRTC deadline of March 4, 2025. For more information contact ESTD.NG9-1-1@ontario.ca.
- The Ministry of Labour, Immigration, Training and Skills Development has announced the establishment of a Paramedic Services Committee under the *Occupational Health and Safety Act* (OHSA) to develop resources that address the unique health and safety risks faced by the profession.
- On March 7, The Ministry will host a public webinar on Consolidated Linear Infrastructure Environmental Compliance Approvals. See their Eventbrite page.
- The Normal Farm Practices Protection Board is proposing updates to its Rules of Practice and Procedure. See the ERO posting for details.
- Apply between January 11 - March 6 for Seniors Community Grants to support the delivery of programs and learning opportunities for seniors. Applications will be accepted through the Transfer Payment Ontario site.
- The Ministry of Transportation has published a Transit Technology Toolkit for small and medium sized municipalities, indigenous communities, and transit systems. The kit helps communities to navigate new transit technologies. For more information, contact: mto.smart.mobility@ontario.ca.

FRONTENAC

AMO Communications 3

Eyes on Events

- *Springtime in Paris* is hosted by the County of Brant, April 26 - 28, inviting municipal leaders from small urban municipalities to this important event. Register today for the Ontario Small Urban Municipalities Conference and book your accommodations by March 25 to take advantage of conference rates.
- Information on how vendors can participate in the Ontario Small Urban Municipalities Conference (OSUM) is now available. Please click here for the full package and application form.
- AMO is excited about this year's Conference hosted by the City of London at RBC Place London and DoubleTree by Hilton, August 20 - 23, 2023. Book your accommodations and register now for this important event.
- Don't miss out on the opportunity to exhibit or sponsor at the 2023 AMO Conference - the largest municipal conference in Ontario. Full details on how your organization can participate is located here here.

FRONTENAC

AMO Communications 4

Eyes on Events (2)

- AMO's Foundations in Planning and Deeper Dive training prepares elected officials in understanding planning concepts and requirements as well making strategic decisions on the complex issues you will face over the coming term. Register here and here.
- AMO training examines the realities, responsibilities, challenges and opportunities of municipally elected officials in today's context. Essential information on legislation, policy, roles, responsibilities and managing relationships are only some of the things attendees will gain insight and tools on. Register today for New Councillor training.
- Following on the success of the 2022 AMO-LAS Energy Symposium, this in-person event will once again bring information and insight to all the energy issues on your mind. Information on the location of the Symposium, registration and how to submit a proposal to present is coming soon.
- AMO has designed its training to support members in your leadership roles. Our training offers skills to navigate the many relationships you encounter as an elected official. Navigating Conflict Relationships for Elected Officials is a top-rated course you shouldn't miss. New dates are also available for our Human Rights and Equity training offering insights, understanding and skills to support your role as an employer in these complex areas.
- AMO's Health and Safety Program Management partner, 4S Consulting, is hosting a webinar on March 7 at 8:30am ET on the double rebate offering from WSIB for municipal health and safety programs. Learn more on how to create sustainable health and safety programs. Register today!

FRONTENAC

Administrative Building Redevelopment

Administrative Building Redevelopment update as of February 28, 2022

A bi-weekly progress meeting between County Administration, Cataraqui Regional Conservation Authority, Colbourne & Kembel, Architects Inc., and Emmons & Mitchell Construction limited representatives to discuss the construction progress.

Level 0 – Basement

- Electrical work is proceeding based on revision accepts by the client. Drywall work has commenced.

Main Building

- Concrete slab removal in basement is proceeding.
- Floor parching is complete.
- Floor structure repairs to Level 2 South is complete.

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Administrative Building Redevelopment 2

Additions and Exterior Improvements:

- North addition awaiting CB wall to commence to support structure – delayed due to weather. Abatement work is proceeding.
- Concrete slab removal in basement proceeding.
- Exterior – No further improvement are to proceed until spring.

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Level 0 - Basement

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CRCA/Shared Meeting Room Spaces

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2023-2026 Council Strategic Planning updates

Prelaunch meeting with Explorer Solutions January 13th:

Launch Phase – January 2023

- Background Research
- Documentation Review

Public Consultation

- Beginning mid January
- Conclude by end of February.

Strategic Plan Development

- Draft County Strategic Plan and Presentation by end of May
- Final Report Submission and Presentation by mid July

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Human Resources Update

- **Recruitment**
  - 95 YTD March 13th
  - Includes one posting for up to 30 part-time paramedics
  - Job fair – Feb 28th Invista – successful with 4-5 applicants
- **Labour Relations**
  - All three unions –conciliation; CUPE 109 and OPSEU - April
- **HRIS**
  - Recruitment module rolled out
  - Continue working on other HR modules for roll-out including, orientation and onboarding, performance management and succession management, grievance and mediation tracking, training and development

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Fairmount Home Update

- **Accreditation**

  The management team is preparing for the upcoming CARF Accreditation review scheduled for April 27 & 28. CARF Surveyors will review supporting documentation for compliance with CARF standards and interview Fairmount staff, residents, and families along with staff from Financial Services, Human Resources and Information Systems.

- **Annual Timed Egress Fire Drill**

  Fire Inspectors from Kingston Fire & Rescue were at Fairmount on January 31, 2023, to witness the annual timed egress fire drill of one home area. The timed egress fire drill was a success with the support of the home area's staff, residents and the management team.

- **Recruitment**

  Active recruitment for RPNs, PSWs, Cooks, Dietary Aides, and Maintenance Assistants

Mr. Kelly Pender , Chief Administrative Officer, will provide Council wi...

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Auditor General of Ontario – Long-Term Care Residential Services Audit

Ministry of Long-Term Care

Assistant Deputy Minister
Long-Term Care Operations
8th Floor, 438 University Ave.
Toronto ON M5G 2K8

Ministère des Soins de longue durée

Sous-ministre adjointe
Opérations relatives aux soins de longue durée
438, avenue University, 8e étage
Toronto ON M5G 2K8

Ministry of Long-Term Care

Assistant Deputy Minister
Long-Term Care Policy
6th Floor, 400 University Ave.
Toronto ON M5G 1S7

Ministère des Soins de longue durée

Sous-ministre adjointe
Politique aux soins de longue durée
400, avenue University, 6e étage
Toronto ON M5G 1S7

Ontario

February 22, 2023

MEMORANDUM TO: Long-Term Care Licensees

FROM: Jeff Butler, Assistant Deputy Minister
Long-Term Care Operations

Erin Hannah, Assistant Deputy Minister
Long-Term Care Policy

SUBJECT: Auditor General of Ontario - Long-Term Care Residential Services Audit

---

Each year the Office of the Auditor General of Ontario (OAGO) conducts an audit to hold provincial public sector and broader-public sector organizations accountable for financial responsibility, well-managed programs and transparency in public reporting. To do this they conduct audits of provincial ministries and agencies.

This year, the OAGO has selected *Long-Term Care Residential Services* for a value-for-money audit. A value-for-money audit assesses how well government programs and activities are being managed and, where appropriate, identifies opportunities to improve the economy, efficiency and effectiveness of those programs and activities. The audit will be conducted over the next several months. The OAGO is in the early planning stages of the audit and we will provide additional information as it becomes available.

As part of this audit, the OAGO has informed the Ministry that auditors will be visiting a few long-term care homes between March and September 2023. I would like to take this opportunity to provide you with some information that may be helpful to you, should your home be chosen by the OAGO regarding participation in this audit:

- You will be contacted by the audit team ahead of most visits. Due to the nature of the audit, some visits may be unannounced.

Mr. Kelly Pender , Chief Financial Officer, will provide Council wi...

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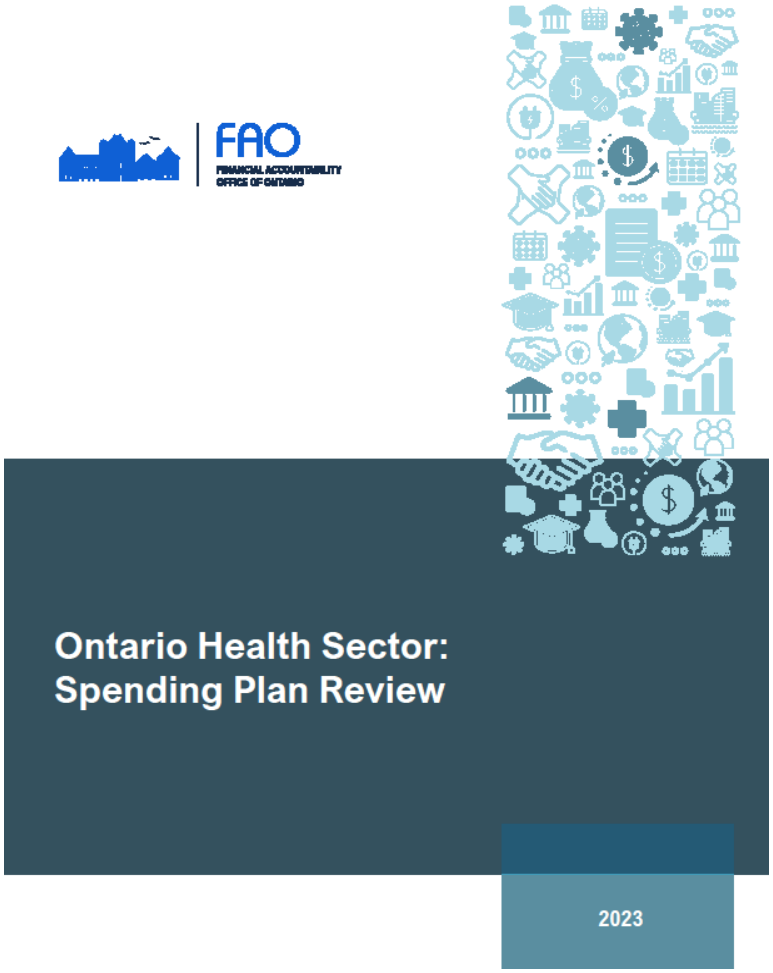
Ontario Health Sector: Spending Plan Review



Frontenac Paramedics Update

Frontenac Paramedics attended the Queen's University Cinq à Sept Research Talk where Dr. Brooks announced the launch of the Neighbours Saving Neighbours Pilot project in the County of Frontenac.

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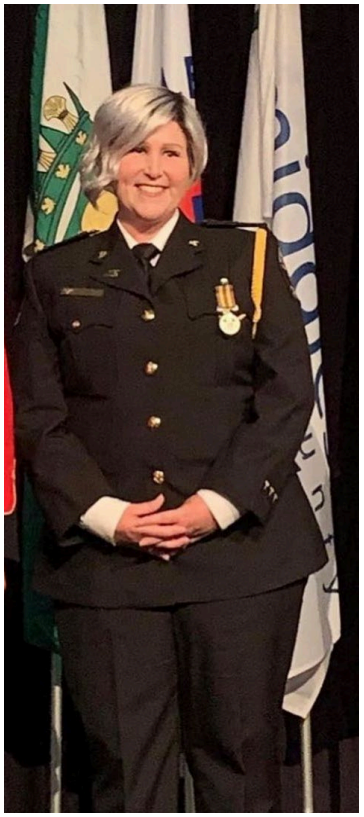
Frontenac Paramedics Update 1

Congratulations and best wishes to Advanced Care Paramedic Percy Vine, retiring on April 11, 2023 after more than 30 years service.

Frontenac Paramedics Update 2



In Memory

Marianne Orsan

1979 – 2023

Advanced Care Paramedic, Frontenac Paramedics

2006 - 2010

Engagement & Communications Update, February 2023

Website Pageviews	
FrontenacCounty.ca	16,849
VisitFrontenac.ca	5,782
FrontenacMaps.ca	6,414
EngageFrontenac.ca	2,800

Social Media Engagement	
County Facebook & Instagram	3,536
County Twitter	367
County Youtube	609
FPS Twitter	237
Visit Frontenac Facebook & Instagram	138
Visit Frontenac Twitter	2
Fairmount Facebook	2,647
K&P Trail Twitter	1
K&P Trail Facebook Group	536
H.I. Ferry Twitter	2,125
Total engagements in February	42,043

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Engagement & Communications Update, February, 2023

Upcoming and ongoing highlights:

- Paramedics and partner support re. St. Patrick's Day this weekend.
- Neighbours Saving Neighbours AED effort ongoing.
- Content production: Internal paramedics training material.

Mr. Kelly Pender , Chief Building Officer, will provide Council wi...

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Planning Department Update

- **Planning and Economic Development Committee**

  The inaugural meeting of the committee will take place on Wednesday, March 29.

- **Implementation of Provincial Legislative Changes**

  On February 15, County Council approved the official plan amendments of the four townships to implement changes related to Bill 13, Supporting Businesses and People Act, 2021, and Bill 109, More Homes for Everyone Act, 2022

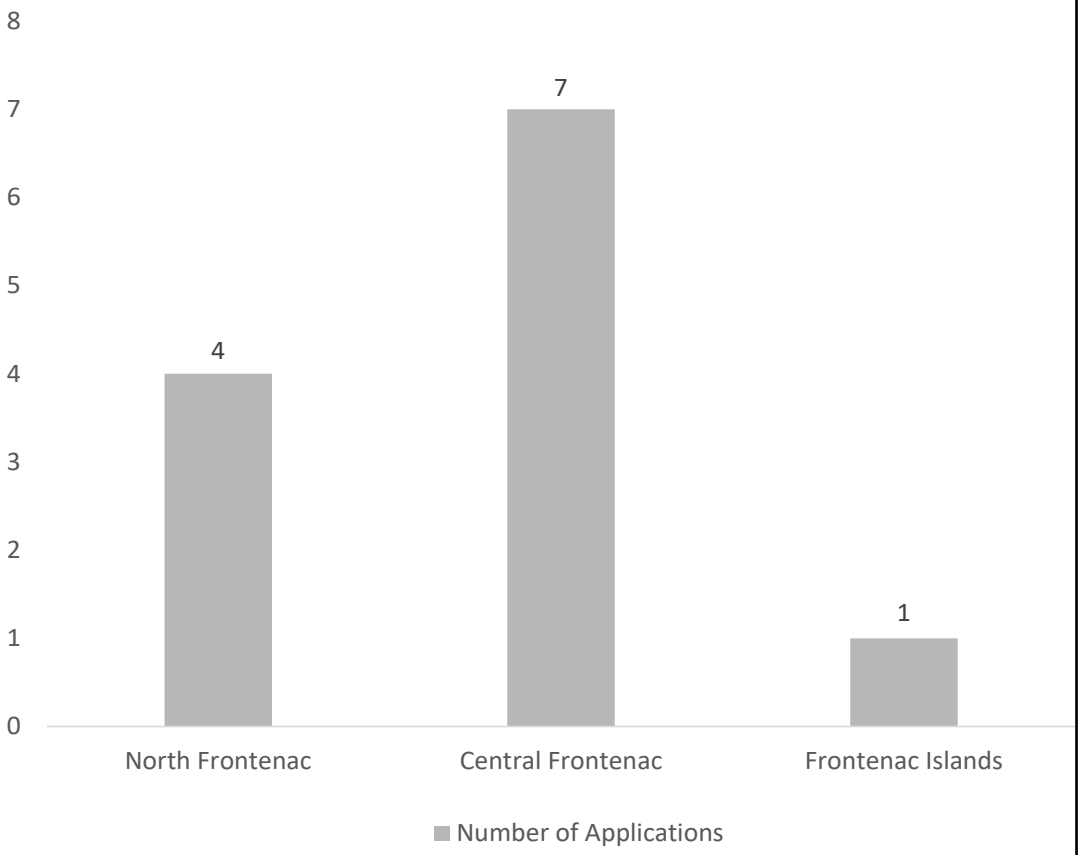
  Next, County planning staff will be working with the townships to draft new pre-application consultation by-laws to respond to changes from Bill 109, which requires the refunding of planning fees for certain types of planning applications when provincial timelines are not met.

- **Planning Application Fees Update**

  The Township of South Frontenac is currently considering updates to their fees by-law for planning applications and services. County planning staff are working with the other three townships this month to update their planning fees and will be presenting revised schedules to the township councils soon. A couple of the existing fee by-laws haven't been updated for some time and there is a need to ensure that the fees reflect the cost of the services being provided.

Planning Application Update - Townships

- Applications over the winter have been slower but steady for both North Frontenac and Central Frontenac.
- Staff have experienced an increase in development inquiries in the last few weeks and anticipate that application numbers will increase as spring approaches.



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Economic Development Update

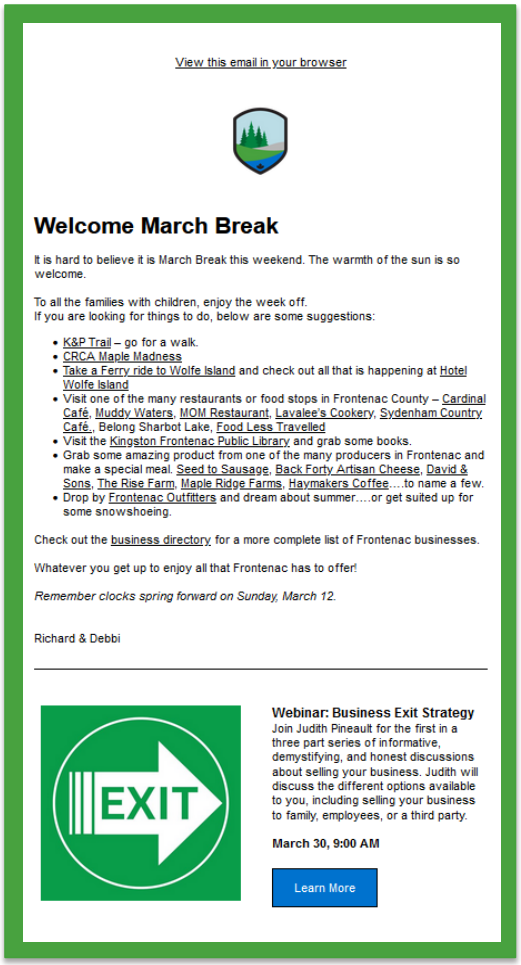
Join our weekly email list

The Economic Development Team sends regular email updates each week to the business community. Stay in touch with the various initiatives and opportunities by joining our email list.

Email ecdev@frontenaccounty.ca to let us know you are interested, or sign up directly by scanning the QR code below.

Upcoming Events:

April 26 – Business Networking Breakfast



View this email in your browser

Welcome March Break

It is hard to believe it is March Break this weekend. The warmth of the sun is so welcome.

To all the families with children, enjoy the week off.
If you are looking for things to do, below are some suggestions:

- K&P Trail – go for a walk.
- CRCA Maple Madness
- Take a Ferry ride to Wolfe Island and check out all that is happening at Hotel Wolfe Island
- Visit one of the many restaurants or food stops in Frontenac County – Cardinal Café, Muddy Waters, MOM Restaurant, Lavalee's Cookery, Sydenham Country Café, Belong Sharbot Lake, Food Less Travelled
- Visit the Kingston Frontenac Public Library and grab some books.
- Grab some amazing product from one of the many producers in Frontenac and make a special meal. Seed to Sausage, Back Forty Artisan Cheese, David & Sons, The Rise Farm, Maple Ridge Farms, Haymakers Coffee….to name a few.
- Drop by Frontenac Outfitters and dream about summer….or get suited up for some snowshoeing.

Check out the business directory for a more complete list of Frontenac businesses.

Whatever you get up to enjoy all that Frontenac has to offer!

Remember clocks spring forward on Sunday, March 12.

Richard & Debbi

EXIT

Webinar: Business Exit Strategy
Join Judith Pineault for the first in a three part series of informative, demystifying, and honest discussions about selling your business. Judith will discuss the different options available to you, including selling your business to family, employees, or a third party.

March 30, 9:00 AM

Learn More

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Report 2023-033

Recommend Report to Council

To: Warden and Members of County Council

From: Kelly Pender, Chief Administrative Officer

Prepared by: Jannette Amini, Manager of Legislative Services/Clerk

Date of meeting: March 15, 2023

Re: Corporate Services – Support of Application of staff to AMO Board of Directors – County Caucus

Recommendation

Be It Resolved That the Council of the Corporation of the County endorses and supports Meredith Staveley-Watson in her application to fill the Association of Municipalities of Ontario (AMO) Board of Directors' County Caucus staff vacancy for the remainder of the 2022-2024 term.

Background

AMO is currently soliciting applications from qualified candidates for the 2022 - 2024 AMO Board of Directors. The vacancies remain following the AMO Board Elections held in August 2022 and the recent municipal elections. The vacant positions are:

- County Caucus: Two (2) vacant municipal elected official positions; One (1) vacant municipal staff position
- Regional & Single Tier Caucus: Two (2) vacant municipal elected official positions
- Rural Caucus: One (1) vacant municipal elected official position
- Small Urban Caucus: One (1) vacant municipal staff position.

Pursuant to AMO By-Law No. 2 Part 3, the qualification for Directors mandates that:

- be an individual of eighteen (18) or more years of age;
- be an elected official of a Member Municipality or an employee of a Member Municipality of the Corporation;
- not be an undischarged bankrupt; and
- not be declared incapable.

Comment

Meredith Staveley-Watson is an employee of the County of Frontenac, on secondment to fulfil a position with the Eastern Ontario Wardens' Caucus (EOWC) as its Manager of Government Relations and Policy.

Ms. Staveley-Watson has submitted an application for the AMO Board of Directors for the County Caucus municipal staff position. Should she be recommended for appointment, a Council or Committee of the Whole resolution of support prior to the appointment of being considered by the AMO Board is required. The AMO Board cannot make an appointment without a supporting resolution.

Ms. Staveley-Watson has nearly six years of direct experience with elected officials, staff and stakeholders working in the municipal sector across Ontario and Canada with Frontenac County, Hastings County, the Association of Municipalities of Ontario, the Federation of Municipalities of Canada, and the Ministry of Municipal Affairs of Housing. Ms. Staveley-Watson has worked on municipal governance, finances, housing, long-term care, paramedic services, youth engagement, Indigenous relations, and conference coordination. She currently holds the position of Manager of Government Relations and Policy supporting the 13 member municipalities of the Eastern Ontario Wardens' Caucus (EOWC).

The EOWC has also provided Ms. Staveley-Watson with a resolution supporting her application, attached to this report as Appendix A.

Strategic Priorities Implications

Priority 3 Champion and coordinate collaborative efforts with partners to resolve complex problems otherwise beyond the reach of individual mandates and jurisdictions.

3.3 Continue to pursue collaborative opportunities to achieve service and cost efficiencies and other economies through cost-sharing and shared services.

Financial Implications

There are no financial implications associated with this report.

Organizations, Departments and Individuals Consulted and/or Affected

Eastern Ontario Wardens' Caucus
Association of Municipalities of Ontario

Eastern Ontario Wardens' Caucus

Eastern Ontario Wardens' Caucus Resolution

Moved by: Warden Bonnie Clark
Seconded by: Warden Nancy Peckford

"**That** the Eastern Ontario Wardens' Caucus endorses and supports Meredith Staveley-Watson, Manager of Government Relations and Policy, in her application to fill the Association of Municipalities of Ontario (AMO) Board of Directors' County Caucus staff vacancy for the remainder of the 2022-2024 term."

CARRIED

Signed by: Peter Emon, EOWC Chair
January 12, 2023

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Report 2023-034

Recommend Report to Council

To: Warden and Members of County Council

From: Kelly Pender, Chief Administrative Officer

Prepared by: Jannette Amini, Manager of Legislative Services/Clerk

Date of meeting: March 15, 2023

Re: Corporate Services – Support for AMO Submission on Housing and Homelessness

Recommendation

Whereas AMO is encouraging Municipal councils and DSSABs to support its submission's key messages on housing and homelessness; and,

Whereas the homeless crisis is taking a devastating toll on families and communities, undermining a healthy and prosperous Ontario; and,

Whereas the homelessness crisis is the result of the underinvestment and poor policy choices of successive provincial governments; and,

Whereas homelessness requires a range of housing, social service and health solutions from government; and,

Whereas homelessness is felt most at the level of local government and the residents that they serve; and,

Whereas municipalities and District Social Services Administration Boards are doing their part, but do not have the resources, capacity or tools to address this complex challenge; and,

Whereas leadership and urgent action is needed from the provincial government on an emergency basis to develop, resource, and implement a comprehensive plan to prevent, reduce and ultimately end homelessness in Ontario.

Therefore Be It Resolved That the Council of the Corporation of the County of Frontenac calls on the Provincial Government to urgently:

a) Acknowledge that homelessness in Ontario is a social, economic, and health crisis;

b) Commit to ending homelessness in Ontario;

c) Work with AMO and a broad range of community, health, Indigenous and economic partners to develop, resource, and implement an action plan to achieve this goal.

And Further That a copy of this motion be sent to the Minister of Municipal Affairs and Housing; the Minister of Children, Community and Social Services; the Minister of Health; and to the Association of Municipalities of Ontario.

Background

On November 28, 2022, Bill 23, More Homes Built Faster Act, 2022 received Royal Assent. The bill made sweeping changes to environmental protections to build housing across the province to facilitate the construction of 1.5 million homes in Ontario over the next 10 years by freezing, reducing, or removing fees from the Planning Act, the Development Charges Act, and the Conservation Authorities Act. This impacts municipalities across Ontario by reducing the amount of development charges that can be collected.

Conservation and environment experts, local governments and public servants have been urging the government to be “cautious” and reconsider their approach as the risk is irreversible damage to the environment that will exacerbate the impacts of severe climate events like heat and flooding.

Comment

On February 13, 2022, AMO presented its Pre-Budget Submission to the Standing Committee on Finance and Economic Affairs.

The submission focused on increasing the supply of housing and tackling the homelessness crisis in Ontario. The following excerpts are comments taken from AMO’s submission:

- Inadequate investment in the health and mental health systems, and outdated approaches to addictions have failed people and families. Provincial policies on financial assistance contribute substantially to growing income disparity and poverty. Failures in provincial child welfare, social services, justice and corrections systems compound barriers to economic participation and contribute directly to homelessness.

- The downloading of social housing and homelessness to municipalities in the 1990s hides the fact that the homelessness crisis is a product of provincial choices and policy levers entirely within the provincial sphere of authority, financial responsibility and accountability. Ontario’s homelessness crisis harms people and families. It undermines the social fabric and economic prospects of communities. It imposes unnecessary costs on institutions, community agencies and government. The Government of Ontario has the tools and resources to end the homelessness crisis it has created over decades. It must surely possess the

leadership, capability and political will to get the job done. AMO is calling on the Government of Ontario to take integrated and collaborative action to end homelessness in Ontario. Municipalities and partners in all social and economic sectors stand ready to assist with the task.

- AMO continues to call on the province for a commitment to work with municipalities on the implementation of legislative changes; clarity about the province's commitment to fully offset financial losses associated with Bill 23; and openness to reversing legislative changes that have unintended consequences.

- Increased housing supply is a top priority for municipalities in every part of Ontario. Despite recent legislative changes, municipalities are working with the industry to find ways of getting more homes built as quickly as possible. At the same time that COVID-19 created an unanticipated spike in demand for houses in Ontario, it laid bare the failure of Ontario's public policy approach to homelessness.

- Municipal councils and District Social Services Administration Boards (DSSABs) are being encouraged to support the Submission's key messages on housing and homelessness.

AMO is encouraging municipalities and DSSABs to consider passing a resolution ahead of the provincial budget (anticipated late March), calling on the province to end homelessness. A resolution template was provided by AMO which is what Council is being asked to consider passing today.

Strategic Priorities Implications

Priority 3 Champion and coordinate collaborative efforts with partners to resolve complex problems otherwise beyond the reach of individual mandates and jurisdictions.

3.1 Work with the townships, other municipalities and levels of government **on broad infrastructure issues** — ranging from environmental concerns to regional transportation strategies for residential, social and economic purposes, and access to funding

3.3 Continue to pursue collaborative opportunities to achieve service and cost efficiencies and other economies through cost-sharing and shared services.

Financial Implications

There are no financial implications associated with this report.

Organizations, Departments and Individuals Consulted and/or Affected

Joe Gallivan, Director of Planning and Economic Development
Association of Municipalities of Ontario

Report 2023-036

Recommend Report to Council

To: Warden and Members of County Council

From: Kelly Pender, Chief Administrative Officer

Prepared by: Jannette Amini, Manager of Legislative Services/Clerk

Date of meeting: March 15, 2023

Re: Corporate Services – Appointment of an Area Weed Inspector for the County of Frontenac

Recommendation

Be It Resolved That the Council of the County of Frontenac receive the Corporate Services – Appointment of an Area Weed Inspector for the County of Frontenac report for information;

And Further That the Clerk be directed to bring forward a by-law later in the meeting appointing Kelly J. Pender as Area Weed Inspector for the County of Frontenac.

Background

The *Weed Control Act, 1990* states the following:

> **Appointment of inspectors**
>
> **6** (1) The council of every upper-tier and single-tier municipality shall by by-law appoint one or more persons as area weed inspectors to enforce this Act in the area within the council's jurisdiction and fix their remuneration or other compensation.
>
> **Division into areas**
>
> (2) The council may divide the upper-tier or single-tier municipality into areas and appoint one or more area weed inspectors for each area.
>
> **Failure to appoint inspectors**
>
> (3) If a council fails to appoint an area weed inspector, the Minister may appoint the area weed inspector and fix his or her remuneration or other compensation.

Minister to notify council of appointment

(4) The Minister shall notify the council of the appointment in writing and the treasurer of the municipality shall pay the remuneration or other compensation so fixed to the area weed inspector.

In May of 1998, the County of Frontenac appointed Ken Gilpin as the County's Weed Inspector and entered into an Agreement with Mr. Gilpin for the provision of those services. Mr. Gilpin held this position until his retirement earlier this year.

Upon his retirement, Mr. Gilpin turned his Frontenac Municipal Law Enforcement (FMLE) Business over to Lianne Ruttan. Staff reached out to Ms. Ruttan regarding the contract that the County held with Mr. Gilpin to solicit her interest in continuing on as the County's weed inspector, however she had informed staff that currently FMLE has no one on staff that has the training to carry out weed inspections and unfortunately during the pandemic has not been able to do so.

As a result, at its regular meeting held September 16, 2020, Council passed the following resolution, being Recommend Reports from the Chief Administrative Officer, clause a):

Recommend Reports from the Chief Administrative Officer

a) 2020-078
Corporate Services
Appointment of an Area Weed Inspector for the County of Frontenac

Motion #: 120-20 Moved By: Councillor Higgs
Seconded By: Councillor MacDonald

Be It Resolved That the Council of the County of Frontenac receive the Corporate Services – Appointment of an Area Weed Inspector for the County of Frontenac report for information;

And Further That the Clerk be directed to bring forward a by-law later in the meeting appointing Kelly J. Pender as Area Weed Inspector for the County of Frontenac.

Carried

Comment

As communicated to previous Councils since Mr. Pender's appointment as the Area Weed Inspector, there was a commitment from the County to participate in any agreement regarding by-law enforcement that the municipalities arrived at through the Joint Service Delivery Review being carried out by Strategy Corp. in 2020. Following the SDR in 2020, Township staff had begun the investigation process to develop a regional approach to by-law enforcement and the County had asked that Weed Inspection form part of the RFP process. To date no significant progress has been made on this initiative; however the Frontenac Clerk's group continues to explore some level of shared By-law enforcement.

Staff have also followed up again this year with Ms. Ruttan regarding if the FMLE team would be in a position to take on Weed Inspector in the future within the next five years in order for the County to make a more permanent appointment. Staff were advised that once the pandemic begins to ease and FMLE can receive training, that this would be a possibility in the future.

As such, staff are recommending that Kelly Pender, Chief Administrative Officer for the County of Frontenac, be re-appointed on an interim basis for 2023 as the County of Frontenac's Weed Inspector. Mr. Pender holds a degree in Landscape Architecture and is qualified to carry out this role.

Strategic Priorities Implications

Priority 3 Champion and coordinate collaborative efforts with partners to resolve complex problems otherwise beyond the reach of individual mandates and jurisdictions.

3.3 Continue to pursue collaborative opportunities to achieve service and cost efficiencies and other economies through cost-sharing and shared services.

Financial Implications

Staff were unable to find any invoices over the past 12 years, which would point to no complaints being made regarding weeds in the County. As such, the County does not anticipate any costs associated with this appointment.

Organizations, Departments and Individuals Consulted and/or Affected

Alex Lemieux, Director of Corporate Services/Treasurer
Lianne Ruttan, Frontenac Municipal Law Enforcement
Member Municipalities

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Report 2023-032

Council Recommend Report

To:	Warden and Council
From:	Kelly Pender, Chief Administrative Officer
Prepared by:	Jannette Amini, Manager of Legislative Services/Clerk
Date of meeting:	March 15, 2023
Re:	**Corporate Services – 2022 Year End Report of the County of Frontenac Emergency Management Program Committee**

Recommendation

Be It Resolved That the Council of the County of Frontenac receive the Corporate Services – 2022 Year End Report on the County of Frontenac Emergency Management Program Committee report;

And Further That a copy of the 2022 Year End Report of the County of Frontenac Emergency Management Program Committee be posted to the County of Frontenac Website.

Background

Ontario Regulation 380/04 of the *Emergency Management and Civil Protection Act* sets out the Standards for requirements under the said Act. Part II of the Regulation sets out the Municipal Standards under the Act, with Section 10 (4) mandating that the emergency management program co-ordinator shall report to the municipality's emergency management program committee on his or her work under subsection (3).

Subsection (3) states: The emergency management program co-ordinator shall co-ordinate the development and implementation of the municipality's emergency management program within the municipality and shall co-ordinate the municipality's emergency management program in so far as possible with the emergency management programs of other municipalities, of ministries of the Ontario government and of organizations outside government that are involved in emergency management.

Section 11 of the Regulation also requires that:

(5) The committee shall advise the council on the development and implementation of the municipality's emergency management program. O. Reg. 380/04, s. 11 (5).

(6) The committee shall conduct an annual review of the municipality's emergency management program and shall make recommendations to the council for its revision if necessary.

Comment

The purpose of this report is to provide County Council with the annual 2022 Year End Report of the Emergency Management Program Committee, attached to this report as Appendix A, pursuant to Ontario Regulation 380/04 of the Emergency Management and Civil Protection Act.

Strategic Priorities Implications

Other Important and Continuing County Priorities:

- Continually improve **customer and financial services**.

Financial Implications

There are no financial implications associated with this report.

Organizations, Departments and Individuals Consulted and/or Affected

Alex Lemieux, Director of Corporate Services/Treasurer
Susan Brant, Administrator, Fairmount Home
All Departments

2022 Year End Report
Emergency Management Program Committee

The following report to the Emergency Management Program Committee (EMPC) outlines the successes, deficits, and deferrals for 2022.

Key Emergency Management Personnel

By-law 2022-0048, being a by-law to adopt an Emergency Management Program and Emergency Response Plan and to meet other requirements under the Emergency Management and Civil Protection Act assigned County personnel to the following roles:

Emergency Management Program Coordinator – Manager of Legislative Services/Clerk
Community Emergency Management Coordinator (CEMC) – Manager of Legislative Services/Clerk
Alternate CEMC – Chief Paramedic/Director, Deputy Chief of Operations, and Mark Podgers
Head of Council – Warden
Emergency Operations Centre Director – Chief Administrative Officer
Emergency Information Officer – Communications Officer
Liaison Officer – Manager of Legislative Services/Clerk
Scribes – CAO's Executive Assistant
Community Emergency Management Coordinator
Operations Section Chief – Chief Paramedic/Director
Planning Section Chief – Director of Planning and Economic Development
Logistics Section Chief – Director of Human Resources
Finance and Administration Section Chief – Director of Corporate Services/Treasurer

Emergency Management Program Committee (EMPC)

By-law 2022-0048, which includes a Terms of Reference, established the following positions as members of the EMPC:

a. County Warden
b. Emergency & Transportation Council Liaison
c. Chief Administrative Officer
d. Director of Planning and Economic Development
e. Director of Corporate Services/Treasurer
f. Chief Paramedic/Director of Paramedic Services/Transportation Services
g. Manager of Legislative Services/Clerk
h. Manager of Information Services
i. Manager of Human Resources
j. Communications Officer
k. Administrator of Fairmount Home
l. Manager of Continuous Improvement
m. Frontenac County Emergency Communications Coordinator
n. Ontario Provincial Police Detachment
o. Community Emergency Management Coordinator
p. County Fire Coordinator

q. Kingston, Frontenac, Lennox & Addington Public Health
r. Alternate Community Emergency Management Coordinator(s)
s. Administrative Assistant/Scribes

The program committee and call-out lists were updated in 2022.

Hazard Identification Risk Assessment (HIRA)

The HIRA information was updated 2022. The proposed updates have been initially discussed with the EMPC early this year to obtain their input into the revision process.

The list of the 20 identified HIRA for the County are as follows:

1. Human Health Emergency
2. Structure Fires
3. Floods
4. Tornado
5. Transportation – Hazardous Materials
6. Transportation
7. Fires
8. Snowstorms
9. Hazardous Materials fixed
10. Earthquake
11. Terrorism
12. Extreme Heat
13. Energy
14. Special Events
15. Water
16. Drought
17. Radiological
18. Dams
19. Infrastructure
20. Agriculture

Critical Infrastructure (CI)

The Critical Infrastructure list for the County was updated in 2022 based on review by the EMPC, specifically a review of the priority of each sectors infrastructure [Critical (1), Important (2) and Secondary (3)].

The sectors included in the CI are

1. **Continuity of Government**
2. **Energy and Utilities** – includes Hydro, home heating/oil distribution
3. **Water** – includes municipal water systems (water treatment in village of Sydenham)
4. **Food** – includes grocery stores within the County
5. **Financial Institutions** – includes Banks and Inter-Institution computer systems

6. **Public Safety and Security** – includes the Emergency Operations Centre, Fire and Police Services
7. **Health** – includes EMS/Ambulance, Long Term Care facilities, Retirement Homes and Day Cares
8. **Manufacturing** – none are identified in the County
9. **Information and Communication Technologies** – includes 911 Communications, landline telephones, wireless phones/pagers, internet, Police/Fire/PS ratio systems and media towers
10. **Transportation** – includes Roads, Ferries and International Ferry
11. **School Board** – identifies schools within the County

Municipal Emergency Plan

The Emergency Management Plan for the County of Frontenac was reviewed and updated in 2022 and adopted as a part of By-law 2022-0048.

A copy of the most current publicly available Emergency Management Plan is attached.

Staff received a brief training/overview of Continuity of Operations Plans or COOP's. Although COOP's are not mandatory under the Emergency Management and Civil Protection Act for municipalities, a COOP will direct the municipality when actioning disruptions to administrative procedures, facilities, staff and computer systems.

Municipal Emergency Control Group (MECG)

Although many municipalities remained in a declared emergency for the most part of 2022, the Province did not provide municipalities with the same exemptions in 2022 as were provided in 2021 regarding the waiving of the requirement to conduct a training exercise. The 2022 exercise, was carried out in September in person. The scenario was based on a critical infrastructure failure at Fairmount Home resulting from a collapsed septic tank which resulted from the construction and renovations of the County Administration Office which flooded the Home and impacted the water pumps/heating system/kitchen/laundry and servers resulting in its inability to provide service to its residents.

OFMEM has maintained a standard for the level of knowledge required by MECG members. The information required by the members was previously conveyed to them via documentation. Each member has or will be providing verification documentation with respect to this material.

Emergency Operations Centres (EOC)

County of Frontenac primary and alternate EOCs remain as defined in the plan (exact locations are not public records). Each centre also has a Media Relations Centre assigned in close proximity.

Both EOCs are equipped with appropriate technology to allow the MECG to effectively deal with an emergency. The primary EOC is equipped with an automatic generator that

requires no intervention to work and is tested monthly. The alternate EOC location is also equipped with an automatic generator. A municipal facility functions as the Media Relations Centre.

Public Education and Incidents of Note

The municipality's Emergency Management web page includes the addition of links to the County's local municipalities, provincial, federal and NGO websites for pertinent emergency preparedness information, including 72-hour preparedness, preparedness for hazards, etc. This information was reviewed and updated in 2016 as part of the County's website redevelopment and will be reviewed in 2022 to ensure its relevance.

The County's social media channels also promote information related to various emergency situations affecting or potentially affecting the municipality, including delivery of appropriate messaging to residents at different times during flood season.

During the Covid health emergency crisis, the County website directed residents to the KFL&A Public website for up-to-date information.

Emergency Preparedness Week

The County provided Emergency Management tweets during Emergency Preparedness week. All the documentation that was put out on the website and COVID related is public education and awareness material.

County Council, at its regular meeting held on April 20, 20212 also made a Proclamation, Proclaiming the week of May 1 to May 7, 2022, to be Emergency Preparedness Week throughout the County of Frontenac with the theme of " **Emergency Preparedness: Be Ready for Anything**", and encouraged all citizens to make a plan, build a kit, stay informed, and to participate in educational activities on emergency preparedness

Pandemic – COVID 19

The MECG and support staff continued to meet in 2022 as necessary as a result of the County being in a declared emergency.

The municipality terminated its declared state of emergency effective July 5, 2022.

The municipal offices re-opened to the public in March 2022; however closed in June 2022 as a result of the building being closed for renovations.

Fairmount Home Long-Term Care home was open to the public in 2022 however visitors may have been required to delay their visits if a home area was on outbreak restrictions as directed by Kingston, Frontenac, Lennox & Addington Public Health.

It should be noted that the County municipal offices are required to meet more stringent requirements in terms of Covid restrictions/safety measures given that it is attached to a

long-term care facility and a number of staff regularly flow in and out of the home. As such, the County offices have been closed for much of the Covid crises in comparison to other Municipal offices, including those of the County's member municipalities.

Fairmount Home

In 2022 as mandated by the Ministry of Long-Term Care (MLTC), all residents, caregivers, and staff were offered the opportunity to receive booster doses of a Health Canada approved COVID vaccine at intervals guided Kingston, Frontenac, Lennox and Addington Public Health. Fairmount Home continued to request proof of COVID vaccination, screen for symptoms of illness and mandated daily COVID-19 rapid antigen testing for all staff, caregivers, visitors, and contractors to identify asymptomatic transmission of the virus. Residents received rapid antigen testing if they exhibited symptoms of COVID-19. In addition, polymerase chain reaction (PCR) testing is required for all staff and residents who test positive for COVID-19 on a rapid antigen test.

As directed by the MLTC, all staff and visitors were required to wear respiratory masks in the home to reduce the risk of transmission. Residents were also encouraged to wear respiratory masks and ensure physical distancing, especially during group activities. An email platform called Constant Contact was used to communicate outbreak status as well as screening and testing requirements to resident families/POAs.

FRONTENAC

Report 2023-039

Recommend Report to Council

To:	Warden and Council of the County of Frontenac
From:	Kelly J. Pender, Chief Administrative Officer
Prepared By:	Gale Chevalier, Chief of Paramedic Services/Director Emergency & Transportation Services
Date of Meeting:	March 15, 2023
Re:	**Emergency and Transportation Services - 2022 Legislated Response Time Standard Performance Plan - Reporting to the Ministry of Health and Long-Term Care (MOHLTC)**

Recommendation

Resolved That the Council of the County of Frontenac receive the Emergency and Transportation Services - 2022 Legislated Response Time Standard Performance Plan Reporting to Ministry of Health and Long-Term Care (MOHLTC) for information,

And Further That the 2022 Response Time Standard Performance Plan outcomes for the County of Frontenac be reported to the Director, Emergency Health Regulatory and Accountability Branch, Ministry of Health and Long-Term Care as required by legislation.

Background

The Legislated Response Time Standard (RTS) Performance Plan is set by Council annually for the upcoming year and reported to the Ministry of Health and Long-Term Care (MOHLTC) by October 31 each year. The results for the previous year must be reported to MOHLTC by March 31 annually.

At its meeting held September 15, 2021, County Council passed a resolution setting the Response Time Standard for 2022 as follows:

> For the calendar year of **2022**, from January 1 to December 31,
>
> i. Designated Delivery Agent (DDA) - **Sudden Cardiac Arrest**
> **48%** percent of the time, within 6 minutes from the time ambulance dispatch conveys the call information to the paramedic, the **County of Frontenac** will endeavor to have a person equipped and ready to use an AED at the location of a patient determined to be in sudden cardiac arrest.

ii. EMS Designated Delivery Agent - CTAS 1
70% percent of the time, within 8 minutes from the time ambulance dispatch conveys the call information to the paramedic, the **County of Frontenac** will endeavor to have a PARAMEDIC as defined by the *Ambulance Act* and duly equipped at the location of a patient determined to be CTAS 1.

iii. EMS Designated Delivery Agent - CTAS 2, 3, 4, 5
The **County of Frontenac** will endeavor to have a **Paramedic** as defined by the *Ambulance Act* and duly equipped at the location of a patient determined to be CTAS 2, 3, 4, 5 within a period of time determined appropriate by the DDA and noted below in Table 1, or as resources permit (level of effort):

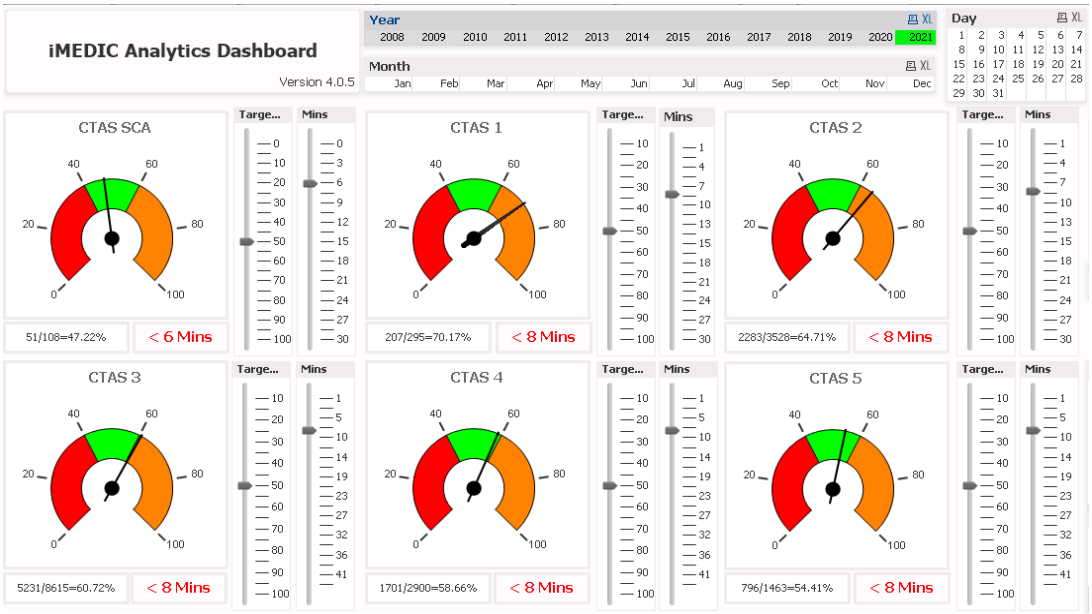
Table 1, CTAS 2, 3, 4, 5 EMS Delivery Agent Commitment

CTAS	Target Time from Paramedic Received Until on Scene	% Target
2	10 minutes	75%
3	10 minutes	75%
4	10 minutes	75%
5	10 minutes	75%

Comment

Prior to 2022, Frontenac Paramedics (FP) utilized an electronic Patient Care Record (ePCR) from Interdev Technologies, before transitioning to a new ePCR system through Prehos Inc in December 2021.

The Interdev iMEDIC software program included a tool called the CTAS Dashboard which was utilized to track FP's RTS since 2013 (see example below for 2021).

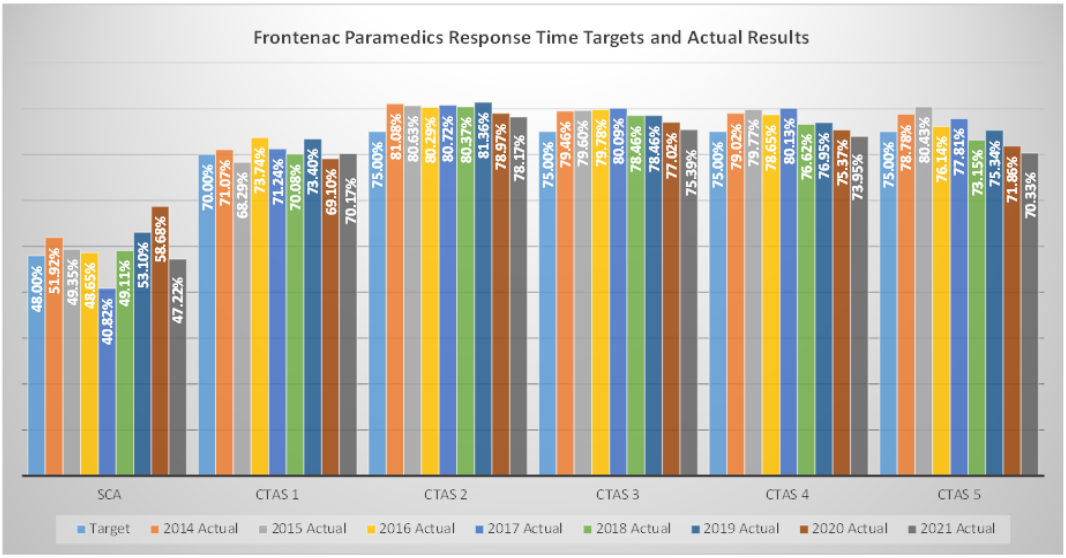


The new Prehos software program does not currently have this dashboard feature.

In preparing to report Frontenac Paramedics' 2022 RTS results, a Ministry of Health program known as the Ambulance Dispatch Reporting System (ADRS) was utilized.

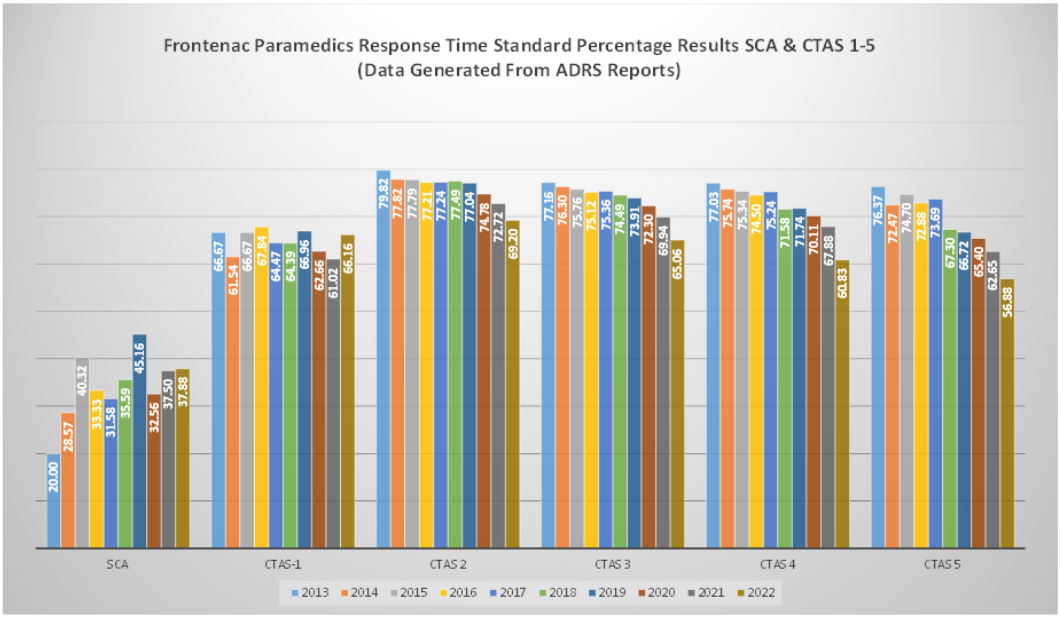
It was discovered that the results from the ADRS data differed significantly from the data that was reported through iMedic. The difference in results since 2014 is shown in the charts below.

The first chart illustrates the results that have been reported to Council and Ministry of Health and Long-Term Care utilizing the iMEDIC dashboard:



U:\FPS\PC\Response Time Standards\Response Time Standards Reported for 2013 to 2021.xlsx

The second chart shows the results obtained using the ADRS data system. Note this chart includes 2022 data not included in the chart above.



U:\FPS\PC\Response Time Standards\Frontenac Paramedics Response Time Standard SCA & CTAS 1-5 2013 to 2022.xlsx

Reasons for this discrepancy were investigated. Both the iMEDIC software and the ADRS software utilize the same raw data provided by the MOH; however, it was determined that the iMEDIC software applied filters to this data before it was calculated in the Dashboard. Examples of these filters include:

- When multiple vehicles respond, only the CTAS on contact and response time of the first vehicle to arrive is recorded
- Calls that were incorrectly prioritized by dispatch are excluded (SCA, CTAS 1 and CTAS 2 dispatched code 3)
- Obviously dead and Do-not-resuscitate (DNR) patients were excluded for SCA and CTAS 1
- Calls outside of a Service's catchment area were excluded
- Calls where pickup location is a hospital were excluded

Utilizing the ADRS data, Frontenac Paramedics has not been meeting the RTS targets for a number of CTAS levels for several years.

2022 Results:

The County of Frontenac set the following criteria under Regulation 257/00, as amended, for its response time targets for 2022:

Sudden Cardiac Arrest:

Goal: 48% of the time, within 6 minutes.

Performance 2022: 38%

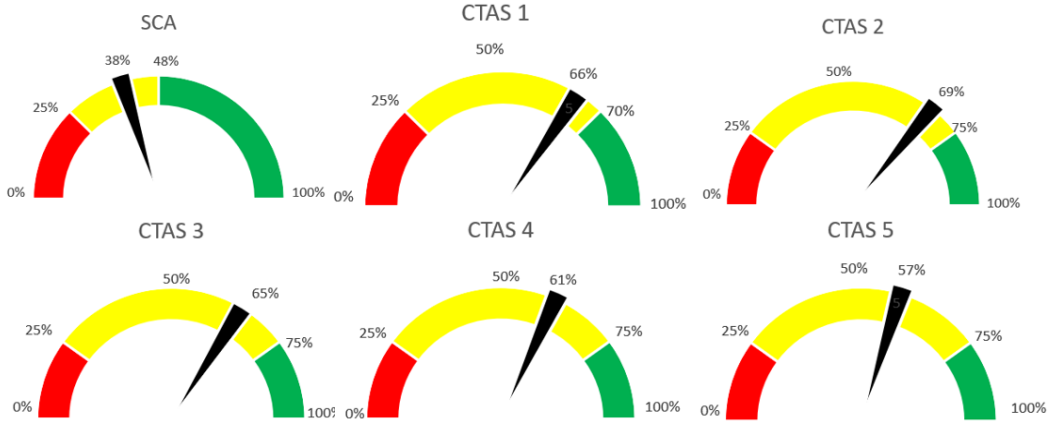
CTAS 1:

Goal: 70 percent of the time, within 8 minutes

Performance 2022: 66%

CTAS 2, 3, 4, 5:

CTAS	Target time from paramedic received until on scene	% Target/Actual
2	10 minutes	75%/**69%**
3	10 minutes	75%/**65%**
4	10 minutes	75%/**61%**
5	10 minutes	75%/**57%**



The County of Frontenac Paramedics did not meet any of the response time standards set for 2022, noting that a different data source was used compared to previous years.

At the present time, there is no penalty assigned for failure to meet this standard. The Ambulance Service Ministry Review conducted every three years reports on this metric. It is unknown if there will be any financial implications in the future.

Regardless of which method of calculation was utilized, response times have deteriorated since 2013. The ORH Study recommendations were intended to maintain the 2018 RTS. County Council approved the addition of two additional 12-hour Paramedic resources to be implemented in the 2023 reporting year. The RTS goals for 2023 were not changed from 2022.

A further report will be provided to Council prior to setting the 2024 Response Time Standard in September 2023.

Strategic Priorities Implications

To Provide High Quality Patient Care

To Ensure Effective Operations and Continued Leadership

Financial Implications

None at this time.

Organizations, Departments and Individuals Consulted and/or Affected

Marc Goudie, Deputy Chief Frontenac Paramedics

Carolyn Whitworth, Performance Standards Assistant, Frontenac Paramedics

Ontario Ministry of Health, Ambulance Dispatch Reporting System

Report 2023-035

Recommend Report to Council

To: Warden and Members of County Council

From: Kelly Pender, Chief Administrative Officer

Prepared by: Jannette Amini, Manager of Legislative Services/Clerk

Date of meeting: March 15, 2023

Re: Corporate Services – Annual Accessibility Status Report

Recommendation

Be It Resolved That the Frontenac Accessibility Advisory Committee – Annual Accessibility Status Report, attached to this report as Appendix A be received;

And Further That in accordance with Ontario Regulation 91/11: Integrated Accessibility Standards section 4(3), that a copy of this Annual Accessibility Status Report be posted to the County of Frontenac Website;

And Further That in accordance with Ontario Regulation 91/11: Integrated Accessibility Standards section 4(3.1) and (3.2), that a copy of this Annual Accessibility Status Report be forwarded to the Frontenac Lower Tiers for posting on their respective websites.

Background

Ontario Regulation 191/11: Integrated Accessibility Standards Section 4(1) requires designated public sector organizations to establish, implement, maintain and document a multi-year accessibility plan, which outlines the organization's strategy to prevent and remove barriers and meet its requirements under this Regulation.

In addition, Section 4(3) requires those same designated public sector organizations to prepare an annual status report on the progress of measures taken to implement the strategies of the multi-year accessibility plan and to post the status report on their website.

An upper-tier municipality and any lower-tier municipalities that form part of it for municipal purposes may prepare a joint accessibility plan and a joint annual status report. A joint accessibility plan and a joint annual status report prepared in accordance with subsection (3.1) are deemed to be the accessibility plan and annual status report of each municipality to which they apply.

Comment

This report provides an annual update on the progress made and work completed by the County and Townships in 2022 to improve accessibility and implement the Accessibility for Ontarians with Disabilities Act, 2005 (AODA) and the Integrated Accessibility Standards Regulation (IASR), Ontario Regulation 191/11.

In 2017, the Frontenac Accessibility Advisory Committee recommended to Council the approval of the 2018-2022 Multi-Year Accessibility Plan. The Plan included a number of significant changes, including introductions to all member municipalities, the addition of two Appendices, Appendix A identifying accomplishments to date and Appendix B Accessibility Strategic Action Plan for each of the member municipalities. The inclusion of these Appendices helped to create a Multi-year plan that is a living document, which moving forward, were to be reported on and updated annually to track the status of projects as well as add new projects as they are identified.

Significant achievements have been seen in 2022 by all of the Frontenacs in part by the significant work and direction of the Joint Frontenac Accessibility Advisory Committee, including input and guidance on the following:

- Accessibility Updates to the K&P Trail
- The Re-Development of the County Administration Building
- North Frontenac Snow Road Community Hall
- Central Frontenac Matthew Street Project, Public Works building and offices and the Piccadilly Community Hall.

A copy of the Annual Accessibility Status Report is attached as Appendix A.

This report was originally intended to come to Council through the Accessibility Advisory Committee from its meeting held March 8; however that meeting was inadvertently held without quorum. Those present were provided with an overview of the Annual Report and endorsed the recommendation.

Strategic Priorities Implications

Priority 1: **Get behind plans that build community vitality and resilience in times of growth and change.**

This priority responds to high interest as well as concern shared broadly across the County that communities in the Frontenacs be well supported with infrastructure and services essential to vitality and sustainability in today's world.

Financial Implications

There are no direct financial implications associated with this report.

Organizations, Departments and Individuals Consulted and/or Affected

Eric Korhonen, Township of North Frontenac
Jody Legue, Township of Central Frontenac
James Thompson, Township of South Frontenac
Scott Kerr, Township of Frontenac Islands

The Corporation of the County of Frontenac

Annual Accessibility Status Report 2022

ACCESSIBILITY IN FRONTENAC

This document is available in alternate formats or with communication supports upon request. Please visit the County of Frontenac at www.frontenaccounty.ca or call 613-548-9400, ext 302, or email jamini@frontenaccounty.ca

Contents

Welcome to the Frontenac's Annual Accessibility Status Update

This report provides an annual update on the progress made and work completed by the County and Townships in 2022 to improve accessibility and implement the Accessibility for Ontarians with Disabilities Act, 2005 (AODA) and the Integrated Accessibility Standards Regulation (IASR), Ontario Regulation 191/11.

In 2017, the Frontenac Accessibility Advisory Committee recommended to Council the approval of the 2018-2022 Multi-Year Accessibility Plan. The Plan included a number of significant changes, including introductions to all member municipalities, the addition of two Appendices, Appendix A identifying accomplishments to date and Appendix B Accessibility Strategic Action Plan for each of the member municipalities. The inclusion of these Appendices helped to create a multi-year plan that is a living document, which moving forward, were to be reported on and updated annually to track the status of projects as well as add new projects as they were identified.

Significant achievements have been seen in 2022 by all the Frontenacs in part by the significant work and direction of the Joint Frontenac Accessibility Advisory Committee.

Statement of Commitment

Through accessibility planning and with the advice of the Frontenac Joint Accessibility Advisory Committee, the Frontenacs (County of Frontenac and the Townships within the County) will strategically identify, remove, and prevent as many barriers to persons with disabilities as possible.

The Frontenacs are committed to treating all people in a way that allows them to maintain their dignity and independence. We believe in integration and equal opportunity. We are committed to meeting the needs of people with disabilities in a timely manner and will do so by preventing and removing barriers to accessibility and meeting the accessibility requirements under the Accessibility for Ontarians with Disabilities Act.

Joint Frontenac Joint Accessibility Advisory Committee

The Joint Frontenac Accessibility Advisory Committee (JFAAC) worked hard in 2022, despite setbacks due to the continued health crises and Covid-19! Providing input and recommendations on several municipal projects and initiatives, the JFAAC accomplished its goal towards improving accessibility in our community through the continual removal of barriers, including:

- Awarding of the Celebrating Accessibility Award.
- Provided input and guidance into the redevelopment of the County Administration Building
- Developed and recommended to Council the approval of the 2023-2028 Multi-Year Accessibility Plan
- Provided comments and guidance on Accessible upgrades at the Harlowe Community Hall in the Township of North Frontenac.
- Provided comments and guidance on the creation of an accessible sidewalk to the rear of the public works building which leads to the shared conference room.
- Received quarterly updates on the County's K&P Trail, including providing input to staff on accessibility requirements/enhancements of the trail.
- Aided and guided local businesses, specifically around barrier free access to older buildings.

Accessibility Achievements in 2022

Accessibility Updates to the K&P Trail

With the completion of core infrastructure on the Frontenac K&P Trail between the City of Kingston and Sharbot Lake in 2019, and with subsequent trail development to Clarendon Station in 2020 the County now actively manages 70 kilometers of multi-use trail daily. As a result of this work, and with the influence of the 2020 COVID-19 Pandemic on recreational behaviour, the Frontenac K&P Trail has seen a significant increase of use by walkers, cyclists, and ATV users.

The Committee continued to guide staff and make recommendations for the accessibility of the K&P trail in 2022 in 3 key areas: Benches; Gate Improvements; Edge Protection

Re-Development of the County Administration Building

At the June 15, 2022 regular Council Meeting, Council approved the awarding of the RFP for the redevelopment of the Administrative Building to Emmons & Mitchell Construction (2000) Ltd for the Renovations & Additions for the Joint Admin Facility for the County of Frontenac and Cataraqui Regional Conservation Authority. This is a $4.5M project.

Construction began in July of 2022. Submission of pertinent documents to the City of Kingston included a site plan application along with a completed Accessibility Checklist required by the City of Kingston. Significant accessibility inclusions in the construction include 2 new fully accessible washrooms, accessible entrances and accessible shared common areas. Construction is anticipated to be completed by end of 2023.

Site Plans and Building/Renovation drawings and upgrades

North Frontenac Snow Road Community Hall

Updates include

- Corridor Access to the Bathroom was widened to meet Accessible Standards,
- Access door to washroom meets Accessible Standards,
- Accessible sink and commode,
- Automatic door openers
- Audible visual assistance alarm installed.

North Frontenac Snow Road Community Hall

This project included ramp replacement and washroom updates to improve accessibility with a focus on creating accessible entry such as:

- Installing larger front door with automatic door opener;
- Replacing wheel chair ramp and transition to ramp landing.

Central Frontenac Initiatives included:

- safer pedestrian access to the Matthew Street Project
- Creating an accessible sidewalk to the back of the building that leads to the shared conference room at the public works office
- Power door operator and accessible Bathroom at the Administration/Public Works offices
- Power door opener at Piccadilly Community Hall

Celebration of Accessibility Award

The joint Frontenac Accessibility Advisory Committee works all year to make sure that Frontenac County is as accessible as possible for people living with disabilities. Each year since 2013 the committee has bestowed the Frontenac Access Award on groups or individuals who have worked to those ends during the year.

“Access” can include designing new or renovated buildings, an employment program; a transportation system, a recreational or leisure program; or anything that contributes significantly to persons with disabilities living independently.

For the 2022 Award, the Committee chose the following two recipients.

Fargo’s General Store and Graham’s Pharmacy Jointly Working

Fargo’s General Store and Graham’s Pharmacy, effectively as a team, have implemented a free prescription delivery service for the residents of Wolfe Island. Prescriptions are delivered twice weekly from Graham’s Pharmacy to Fargo’s, where they can be easily picked up by the patient or their caregiver.

Their willingness to work together to provide this service has simplified life for disabled islanders, seniors, and their care givers. At a time when the ferry service has been unpredictable due to staffing shortages, this service can save an islander more than half a day of time spent sitting in a vehicle - something that can be physically distressing and harmful for people managing disabilities. It also eliminates the need to negotiate downtown Kingston, where accessible parking is limited.

For persons with medical insurance that only allows one month of medication at a time to be dispensed, this service saves disabled people and seniors at least fifty hours of waiting time per year each - a very precious gift for which Steve and Dave and their store teams receive no monetary compensation.

Wolfe Island Medical Clinic and The Frontenac Doctors Jointly

The Wolfe Island Medical Clinic and The Frontenac Doctors provide primary health care on the island, have delivered and continue to deliver vaccination clinics in a drive through format, supplemented by home visits, that make it extremely easy for people with disabilities, seniors, and families to access Covid and influenza vaccines.

Their willingness to bring the program to the island, and right to the doorstep of a home, if necessary, has ensured high levels of barrier free and extremely accessible immunization.

The Wolfe Island clinic saves time for anyone seeking a vaccination, and provides a barrier free service that is less onerous for persons with disabilities and the people who support them. The convenience of these clinics has led to a very high uptake of all vaccines offered.

In 2021 - 2022, more than 2700 Covid vaccines and 600 influenza vaccines were administered on Wolfe Island through this barrier-free program. By comparison, a vaccination off island for a mobility impaired person requires ferry queuing and travel

time of at least three hours, access to a disabled parking space in Kingston, and time to transfer to and from a vehicle, before confronting other barriers, depending on location.

For persons who are neurodivergent, the ability to remain in the familiar confines of the family car and the considerable reduction in travel and wait time lessens stress considerably.

The uniform delivery, where persons with disabilities follow the same route and process as the able-bodied patients, eliminates the stigma of “otherness” we sometimes feel when being directed to use a different entrance or route for accommodation.

Hunters Creek Golf Club

The Hunters Creek Golf Club modified a golf cart to enable a local resident with prosthetic legs to be able to get out and golf again as this resident can now get out and enjoy this game he truly loves.

The Standards

Information and Communications

Topic	Barrier or Goals Identified	Accessibility Updates
Websites	• Remove barriers that may be preventing the County website from being fully compatible with assistive technology and ensure web content meets W.C.A.G.2.0 level AA compliance requirements	✓ All PDFs are remediated to ensure all web content on the County of Frontenac website is accessible.
Information and Communication Standard	• Increase training and awareness and clarify expectations for creating or procuring accessible information and communications	✓ Adobe Acrobrat Pro DC used to ensure all PDFs are in an accessible format ✓ Staff trained on how to create accessible documents including Word and PDF

Transportation

The County of Frontenac and its member municipalities do not provide a conventional transit system and the Howe Island Ferry and the Township Ferry do not meet the minimum tonnage under the Standard; however the County of Frontenac provides annual funding in the amount of $96,000 to ensure seniors and those with accessibility needs receive rides to appointments.

Design of Public Spaces

Topic	Barrier or Goals Identified	Accessibility Updates
Trails	• Continue to make accessible improvements to the K&P Trail • Continue to work jointly with the JFAAC on ensuring the development of the K&P Trail, as it continues to move north, meets the standards set out in the AODA	✓ Staff procured benches that were installed during the summer along the K&P Trail as part of the ICIP Improving Accessibility on the K&P Trail program. ✓ Edge protection has been installed along several areas with high risk of dangerous falls. Information and photos can be found at www.engagefrontenac.ca/kp-trail ✓ Paving of the Verona Trailhead with addition of curbs and improved, safe, level access to the K&P Trail will be completed in May. It is anticipated that we will have a ribbon cutting to celebrate the opening of the site and launch of the trail season in at the same time. Photos and a description of the work to date can be found at www.engagefrontenac.ca/kp-trail
Parking	• The increased use of the K&P Trail in 2020 created additional pressures on infrastructure and access points.	✓ Improved parking facilities have been added off-road and adjacent to the trail at Hinchinbrooke station (near white lake road and 38) and Goodfellow Road to allow for safer and improved access to these sections of the K&P. The surface is hardpacked stone dust. Updates forthcoming to www.engagefrontenac.ca/kp-trail

Customer Service

Topic	Barrier or Goals Identified	Accessibility Updates
Feedback	• Promote public engagement and use of accessible feedback channels • Solicit and respond to community feedback to help direct accessibility planning efforts	✓ With the implementation in 2021 of the County's new Engage Frontenac community engagement tool, the site features a "Help promote accessibility in Frontenac County" project. In addition, the County continues to encourage members of the public to submit their comments or concerns through one of our feedback channels: online "accessibility feedback" forms, speaking with a County staff member, or reaching out through all of its social media channels. ✓ The County will continue to ensure feedback channels are in accessible formats and will respond to feedback, upon request, in a manner that considers individual preferences and abilities.
Staff training	• Support training initiatives to equip staff with knowledge and skills to deliver high quality customer service to all residents and visitors.	✓ All new staff receive training on the AODA and the Human Rights Code through the County's New Hire Orientation, delivered once a month.

Employment

Topic	Barrier or Goals Identified	Accessibility Updates
Commitment to accessible employment practices	• Ongoing efforts to encourage a diverse work force by identifying and removing any barriers to employment	✓ Continue to promote and support a diverse work group through our hiring processes and our accommodation plans.

The Frontenacs, The Employer

In addition to the County's municipal goods, services, programs, and facilities, it is important to remember that we are also an employer with over 400 full and part-time employees. The County is committed to maintaining a barrier-free recruitment and hiring process and recognizes the strength of a diverse workforce. In keeping with our Multiyear Accessibility Plan, the County will make continuous upgrades to our policies, procedures, and workplaces to foster a safer, more accessible, and inclusive work environment. Some highlights from 2022 include:

- Continue to advertise on all employment opportunities that, upon request, accommodations and alternate formats are available throughout the recruitment, assessment, and selection processes
- Continue to use Individualized Work Modification Plan's and Individualized Emergency Response Plan worksheets
- 2069 Battersea Road: Accessible parking, accessible sidewalk from the parking lot, and installation of power door operator → parking and entrance are fully accessible for staff and visitors, with accessible washrooms on site.
- The County of Frontenac Human Resources now provides Equity, Diversity and Inclusion training for the Management Team to address aspects of equity, diversity and inclusion for the County of Frontenac.

Training

- Trained all County administrative staff on the use of Adobe Acrobat Pro, the County's remediation tool for creating accessible PDF content posted to the County's website.

What's up for 2023

- Continue to make accessible improvements to the K&P Trail
- Continue to work jointly with the JFAAC on ensuring the development of the K&P Trail, as it continues to move north, meets the standards set out in the AODA

- As construction is set to be complete by the end of 2023 for the re-development of the County Administration Building, the opening of the new building will involve the JFAAC and accessibility will play a key focus
- Completion of a Care and Use of Trails by-law, including accessibility and inclusive use to ensure no barriers are created on the trail
- Completion of Trails Master Plan. Plan will include to increase accessible features and inclusive use of the Trail

FRONTENAC

Report 2023-037

Council Information Report

To:	Warden and Council Members of the County of Frontenac
From:	Kelly J. Pender, Chief Administrative Officer
Prepared by:	Kathie Shaw, Senior Financial Analyst Brieanna McEathron, Executive Assistant, Corporate Services
Date of meeting:	March 15, 2023

Re: Corporate Services – 2022 Remuneration and Reimbursement of Expenses to Council Members and Non-Council Appointees Report

Recommendation

This report is for information purposes only.

Background

Section 284 (1) of the *Municipal Act, 2001 S.O. 2001, Chapter 25,* states:

> The treasurer of a municipality shall in each year on or before March 31 provide to the Council of the municipality an itemized statement on remuneration and expenses paid in the previous year to:
>
> (a) each member of Council in respect of his or her services as a member of the Council or any other body, including a local board, to which the member has been appointed by Council or on which the member holds office by virtue of being a member of Council;
>
> (b) each member of Council in respect of his or her services as an officer or employee of the municipality or other body described in clause (a); and
>
> (c) each person, other than a member of Council, appointed by the municipality to serve as a member of any body, including a local board, in respect of his or her services as a member of the body. 2001, c. 25, s. 284 (1).

Comment

By-law No. 2022-0052, and its predecessor By-law No. 2015-0042 outlines the remuneration to be paid to Councillors and Non-Council Appointees of the County as well as attendance at conferences and training opportunities.

The following charts provide an itemized statement on remuneration and expenses paid in 2022 to members of Council and persons appointed by Council to serve on Boards and Committees.

Council Members	Compensation as Council Member or Appointee	Per Diems	Conference/Training Travel and Other Related Expenses	Total *
Ron Vandewal [1]	15,270.18	300.00	1,719.52	$ 17,289.70
Denis Doyle [2]	26,180.28	2,350.00	7,519.35	$ 36,049.63
Frances Smith [3]	13,228.16	0.00	1,315.94	$ 14,544.10
Ron Higgins [4]	12,936.11	0.00	1,182.68	$ 14,118.79
Fred Fowler	2,040.02	0.00	41.00	$ 2,081.02
Nicki Gowdy	2,040.02	0.00	41.00	$ 2,081.02
Judith Anne Greenwood-Speers	2,040.02	0.00	0.00	$ 2,040.02
Bruce Higgs	10,780.14	900.00	294.63	$ 11,974.77
Ray Leonard	2,040.02	0.00	0.00	$ 2,040.02
Gerry Lichty	2,040.02	0.00	0.00	$ 2,040.02
Bill MacDonald	10,780.14	0.00	545.34	$ 11,325.48
Gerry Martin	10,780.14	0.00	1,933.61	$ 12,713.75
Alan Revill	10,780.14	1,950.00	1,907.48	$ 14,637.62
Bill Saunders	2,040.02	0.00	0.00	$ 2,040.02

*Expense reporting is based on when the expense reimbursement was paid to the member of Council. 2022 totals may include expenses that were incurred in 2021 that were submitted and reimbursed in 2022.

[1]Ron Vandewal – Warden, December 1, 2022 – December 31, 2022
[2]Denis Doyle – Warden, January 1, 2022 - November 30, 2022
[3]Frances Smith - Deputy Warden, December 1, 2022 – December 31, 2022
[4]Ron Higgins - Deputy Warden January 1, 2022 - November 30, 2022

Council remuneration includes representation on the following Boards and Committees:

Alan Revill	Kingston Frontenac Public Library Board Community Development Advisory Committee Procedural By-Law Review Committee Staff Liaison Meetings
Bill MacDonald	Frontenac Accessibility Advisory Committee (FAAC) Administrative Building Design Task Force Procedural By-Law Review Committee Staff Liaison Meetings
Bruce Higgs	Food Policy Council of Kingston, Frontenac, Lennox and Addington Procedural By-Law Review Committee Staff Liaison Meetings
Denis Doyle	Planning Advisory Committee Community Development Advisory Committee KFL&A Public Health Board Administrative Building Design Task Force CAO Performance Appraisal Review Panel
Frances Smith	Planning Advisory Committee City of Kingston Housing and Homelessness Advisory Committee Seniors Housing Task Force, no meetings CAO Performance Appraisal Review Panel
Gerry Martin	Frontenac Accessibility Advisory Committee (FAAC) Administrative Building Design Task Force Seniors Housing Task Force, no meetings Procedural By-Law Review Committee Staff Liaison Meetings
Ron Higgins	Planning Advisory Committee CAO Performance Appraisal Review Panel Seniors Housing Task Force, no meetings
Ron Vandewal	Administrative Building Design Task Force Planning Advisory Committee CAO Performance Appraisal Review Panel

There were no meetings in 2022 held of the CAO Performance Appraisal Review Panel or Seniors Housing Task Force.

Person, other than a member of Council, appointed by the County to serve as a member of any body, including a local board:

***Community Development Advisory Committee**	**Mileage HST Included** $	**Per Diem** $	**Total** $
Betty Hunter	0	0	0
Lisa Henderson	0	0	0
Marlene Spruyt	0	0	0
Greg Rodgers	0	0	0
Robert Schock	0	0	0

Ella Vanderburgt	0	0	0

*Community Development Advisory Committee meetings held virtually in 2022. No mileage paid.

*Frontenac Accessibility Advisory Committee meetings were also held virtually in 2022.

Planning Advisory Committee	**Mileage HST Included** $	**Per Diem** $	**Total*** $
Lisa Henderson	0	0	0
Phil Leonard	0	0	0
Barbara Sproule	0	0	0

Frontenac Accessibility Advisory Committee	**Mileage HST Included** $	**Per Diem** $	**Total** $
Neil Allen (Chair)	0	150.00	150.00
Kurt Halliday	0	150.00	150.00
Janet MacDonald	0	150.00	150.00
Ed Schlievert	0	0	0
David Yerxa	45.75	150	195.75

Kingston Frontenac Public Library Board	Mileage HST Included $	Per Diem $	Total $
*Natalie Nossal	No Payment By Request		
*Louise Moody	No Payment By Request		

*These members were appointed to committees but did not receive any compensation in 2022.

Strategic Priorities

Good governance and legislative compliance falls under Other Important and Continuing County Priorities, specifically:

- Respect the taxpayer and keep tax increases close to the rate of inflation
- Continually improve customer and financial services

Financial Implications

Amounts paid to County Council and other Board and Committee members were within budget.

Organizations, Departments and Individuals Consulted and/or Affected

Alex Lemieux, Director of Corporate Services/ Treasurer
Jannette Amini, Manager of Legislative Services/Clerk

FRONTENAC

Report 2023-040

Council Information Report

To:	Warden and Council
From:	Kelly Pender, Chief Administrative Officer
Prepared by:	Gale Chevalier, Paramedic Chief/Director Emergency and Transportation Services
Date of meeting:	March 15, 2023
Re:	**Frontenac Paramedics – Canadian Triage Acuity Scale (CTAS) Explanation**

Recommendation

This report is for information only.

Background

The Legislated Response Time Standard (RTS) Performance Plan is set by Council annually for the upcoming year and reported to the Ministry of Health and Long-Term Care (MOHLTC) by October 31 each year. The results for the previous year must be reported to MOHLTC by March 31 annually.

This plan requires a response time target to be set for each Canadian Triage Acuity Scale (CTAS) level. An explanation of CTAS had been requested by Council for information.

Comment

The Canadian Triage Acuity Scale (CTAS) was introduced in 1999 in Canadian hospitals as a method of triaging an increasing number of patients presenting to emergency departments. A CTAS level would be assigned to patients based on their acuity, presenting complaint, and severity of their signs and symptoms. The methods in which CTAS is assigned have changed over time; however, it provides a common language between Paramedics and Emergency Department staff when communicating the severity of a patient's condition.

Patients are assigned a CTAS level between 1 and 5, with CTAS 1 patients being the most acute or critically ill. Below is a brief description of the five CTAS levels.

CTAS 1 (Resuscitation) – Conditions that are considered threats to life or limb or have an imminent risk of deterioration requiring immediate aggressive interventions. These patients are actively receiving resuscitative care or are pre or post-resuscitative care.

CTAS 2 (Emergent) – Conditions that are a potential threat to life, limb, or function requiring rapid medical interventions. These patients have a serious illness or injury and have the potential for deterioration.

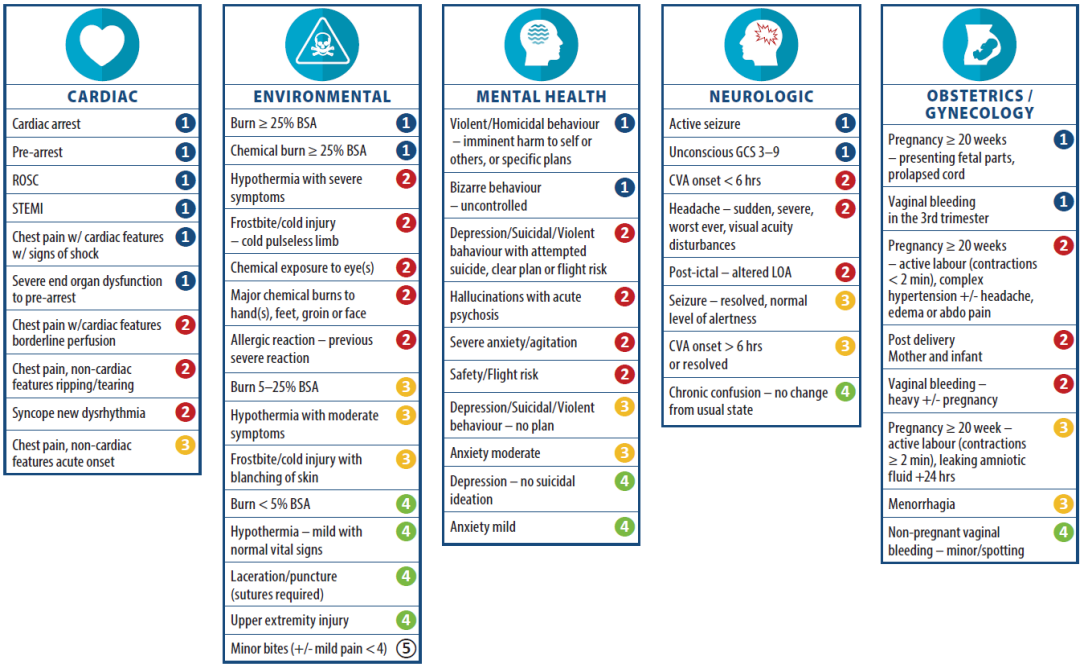
CTAS 3 (Urgent) – Conditions that could potentially progress to a serious problem requiring emergency interventions. May be associated with significant discomfort or affect ability to function at work or daily activities.

CTAS 4 (Less Urgent) – Conditions that relate to patient age or chronic conditions without an acute exacerbation. These patients have normal vital signs and low pain scales. Not in acute distress.

CTAS 5 (Non-Urgent) – Minor complaints that do not pose any immediate risk to the patient. Investigation of interventions could be delayed without harm to the patient.

Below are some infographics from the Ontario Base Hospital Group that will help illustrate conditions and their associated CTAS scores.

Level 1	**Resuscitation**	**Threats to life or limb or imminent risk of deterioration**
Level 2	**Emergency**	**Potential threat to life, limb or function**
Level 3	**Urgent**	**Potentially progress to a serious problem**
Level 4	**Less Urgent**	**Relates to patient age, distress, potential for deterioration or complications**
Level 5	**Non-Urgent**	**Minor complaints with risk or potential for deterioration**
Level 0	**Obviously Dead**	**Used for Termination of Resuscitation or Code 5**



CARDIAC	
Cardiac arrest	1
Pre-arrest	1
ROSC	1
STEMI	1
Chest pain w/ cardiac features w/ signs of shock	1
Severe end organ dysfunction to pre-arrest	1
Chest pain w/cardiac features borderline perfusion	2
Chest pain, non-cardiac features ripping/tearing	2
Syncope new dysrhythmia	2
Chest pain, non-cardiac features acute onset	3

ENVIRONMENTAL	
Burn ≥ 25% BSA	1
Chemical burn ≥ 25% BSA	1
Hypothermia with severe symptoms	2
Frostbite/cold injury – cold pulseless limb	2
Chemical exposure to eye(s)	2
Major chemical burns to hand(s), feet, groin or face	2
Allergic reaction – previous severe reaction	2
Burn 5–25% BSA	3
Hypothermia with moderate symptoms	3
Frostbite/cold injury with blanching of skin	3
Burn < 5% BSA	4
Hypothermia – mild with normal vital signs	4
Laceration/puncture (sutures required)	4
Upper extremity injury	4
Minor bites (+/- mild pain < 4)	5

MENTAL HEALTH	
Violent/Homicidal behaviour – imminent harm to self or others, or specific plans	1
Bizarre behaviour – uncontrolled	1
Depression/Suicidal/Violent bahaviour with attempted suicide, clear plan or flight risk	2
Hallucinations with acute psychosis	2
Severe anxiety/agitation	2
Safety/Flight risk	2
Depression/Suicidal/Violent behaviour – no plan	3
Anxiety moderate	3
Depression – no suicidal ideation	4
Anxiety mild	4

NEUROLOGIC	
Active seizure	1
Unconscious GCS 3–9	1
CVA onset < 6 hrs	2
Headache – sudden, severe, worst ever, visual acuity disturbances	2
Post-ictal – altered LOA	2
Seizure – resolved, normal level of alertness	3
CVA onset > 6 hrs or resolved	3
Chronic confusion – no change from usual state	4

OBSTETRICS / GYNECOLOGY	
Pregnancy ≥ 20 weeks – presenting fetal parts, prolapsed cord	1
Vaginal bleeding in the 3rd trimester	1
Pregnancy ≥ 20 weeks – active labour (contractions < 2 min), complex hypertension +/- headache, edema or abdo pain	2
Post delivery Mother and infant	2
Vaginal bleeding – heavy +/- pregnancy	2
Pregnancy ≥ 20 week – active labour (contractions ≥ 2 min), leaking amniotic fluid +24 hrs	3
Menorrhagia	3
Non-pregnant vaginal bleeding – minor/spotting	4

Paramedics assign a CTAS priority on arrival at the patient's side. This is the CTAS level utilized for the RTS. A second CTAS level is provided at the time of patient transport, and a third on arrival at destination.

Strategic Priorities Implications

To Provide High Quality Patient Care
To Ensure Effective Operations and Continued Leadership

Financial Implications

None at this time.

Organizations, Departments and Individuals Consulted and/or affected.

Revisions to the Canadian Emergency Department Triage and Acuity Scale (CTAS) Guidelines 2016. Canadian Journal of Emergency Medicine.

Revisions to the Canadian Triage and Acuity Scale Paediatric Guidelines (PaedCTAS). Canadian Journal of Emergency Medicine.

Emergency Health Services Branch, Ministry of Health, Prehospital Canadian Triage & Acuity Scale: Prehospital Paramedic Guide, Version 2.0.

Ontario Base Hospital Group CTAS infographic.

FRONTENAC

Report 2023-041

Council Information Report

To:	Warden and Council
From:	Kelly Pender, Chief Administrative Officer
Prepared by:	Brieanna McEathron, Executive Assistant
Date of meeting:	March 15, 2022
Re:	**Corporate Services – Quarterly Joint Administrative Facility Update**

Recommendation

This report is for information purposes only.

Background

A Request for Tender was issued and closed on June 1, 2022; Emmons & Mitchell (2000) Ltd was awarded the contract. As directed by County Council, staff were instructed to enter into an agreement with Emmons & Mitchell (2000) Ltd for the Renovations & Additions for the Joint Admin Facility for the County of Frontenac and Cataraqui Conservation Authority:

b) **2022-058**
Office of the Chief Administrative Officer
Review and Award of the RFP for the Renovations & Additions for Joint Admin Facility for the County of Frontenac and Cataraqui Regional Conservation Authority

Moved By: Deputy Warden Doyle
Seconded By: Councillor Martin

Be It Resolved That the Office of the Chief Administrative Officer – Review and Award of the RFP for the redevelopment of the Administrative Building report be received;

And Further That the Council of the County of Frontenac authorize the Warden and Clerk to enter into an agreement with Emmons & Mitchell Construction (2000) Ltd for the Renovations & Additions for Joint Admin Facility for the County of Frontenac and

Cataraqui Region Conservation Authority in the amount of Four Million, Four Hundred and Ninety Thousand ($4,490,000.00), subject to the approval by the Cataraqui Region Conservation Authority (CRCA).

Comment

County staff vacated the building on July 15th, and the Construction for the Joint Admin Facility began on July 18, 2022.

A bi-weekly progress meeting between County Administration, Cataraqui Regional Conservation Authority, Colbourne & Kembel, Architects Inc., and Emmons & Mitchell Construction limited representatives to discuss the construction progress.

As of February 28, 2023, the following has been completed or is about to commence:

Level 0 – Basement

- Electrical work is proceeding based on revision accepts by the client
- Drywall work has commenced

Main Building

- Concrete slab removal in basement is proceeding
- Floor patching is complete
- Floor structure repairs to Level 2 South is complete.

Additions and Exterior Improvements:

- North addition awaiting CB wall to commence to support structure – delayed due to weather. Abatement work is proceeding
- Concrete slab removal in basement proceeding

Strategic Priority Implications

Priority 2 Explore new funding sources and invest wisely in critical long-term infrastructure.

2.1 To meet the needs of future capital projects, explore new sources of funding support (current and future programs), cost-sharing options and other potential economies.

2.4 Finalize plans and financing to replace/construct/renovate aging County buildings now used for administration services (through a shared admin facility if possible).

Priority 3 Champion and coordinate collaborative efforts with partners to resolve complex problems otherwise beyond the reach of individual mandates and jurisdictions.

3.1 Work with the townships, other municipalities and levels of government on broad infrastructure issues — ranging from environmental concerns to regional transportation strategies for residential, social and economic purposes, and access to funding.

3.3 Continue to pursue collaborative opportunities to achieve service and cost efficiencies and other economies through cost-sharing and shared services.

Financial Implications

The following change orders have been authorized as issues which have been uncovered during the renovation have required changes to the original plans. A summary of those items and costs as of March 15, 2023 can be found below. Note that as previously reported, asbestos removal will be funded through reserves. (See report 2022-104 on the September 21, 2022 Council agenda).

Number	Description	Cost
CCO2	Changes in ductwork to lower level of east addition	$4,355
CO-08	Relocation of generator and propane tank	$9,524
CCN4	Move electrical, phone, internet entry point from addition to be demolished	$48,017
CO-05	Asbestos removal in Bud Clayton Room	$23,010
CD-02	Asbestos-containing plaster removal on first/second floor	$116,987
CO-06	Refinishing ceilings after removal of asbestos-containing plaster	$15,373
CO-07	Asbestos removal in basement	$47,887
CO-10	Additional Excavation – North Addition	$4,184
CO-11	Investigate Basement Slab	$4,869
CO-12	CRCA Area Bulkheads – Framing/Drywall, CRCA Area	$10,329

	Bulkheads – Glass Credit - $1,813	
CO-13	Excavation for Biofiltration system, 3 additional trees	$33,526
CO-14	Asbestos Removal in Bud Clayton Room	$48,375
CO-15	Site Works to extend Fibre location to new demark	$8,037
CO-16	Revised North Addition Credits	-$8,640
CO-17	All revisions to the CRCA office layout	$2,066
CO-19	Level 0 – Electrical and drywall revisions, Drywall and additional patching, labourers for demolition and cutting of drywall	$12,541
CO-21	Asbestos Abatement on duct insulation in attic, duct fireproofing in corridor 113 and textured plaster finish in the lobby area	$4,381
CO-22	CD-04: Additional excavation required at North Addition CD-05: Additional excavation and removal of existing subgrade electrical to the existing parking lot light fixtures	$15,020
CO-23	Revised Site Lighting	$38,182
CO-24	Fireproofing patching in level 0 of Fairmount	$8,140
Total	**As of March 15, 2023**	**$446,163.00**

Other items which have been uncovered which will need to be addressed but for which cost estimates have not yet been provided include:

- The planned hallway/stairwell into the Cataraqui Conservation will need to be moved to accommodate existing electrical and mechanical work resulting from the location of the elevator. The entry to the Cataraqui Conservation office will be through the existing stairwell shaft at the south of the building.

Organizations, Departments and Individuals Consulted and/or Affected

County Administration
Cataraqui Region Conservation Authority (CRCA)
Colbourne & Kembel, Architects Inc.
Emmons & Mitchell Construction Limited.

FRONTENAC

Report 2023 -

Council Information Report

To: Warden and Council

From: Kelly Pender, Chief Administrative Officer

Prepared by: Gale Chevalier, Paramedic Chief/Director Emergency and Transportation Services

Date of meeting: March 15, 2023

Re: **Frontenac Paramedics – Ambulance Remounts**

Recommendation

This report is for information only.

Background

Frontenac Paramedics (FP) participates in an ambulance remount program through our supplier Crestline. At the end of an ambulance chassis' lifespan, the ambulance "box" is removed from the old chassis and remounted on a new chassis. This process provides significant cost savings compared to the purchase of entirely new vehicles. The cost for a remount in 2022 was approximately $126,000 compared with the cost of a new vehicles at $215,000. Each box can only be remounted once.

The Covid-19 pandemic created significant supply chain challenges and price increases for ambulance vehicles. Frontenac Paramedics were scheduled to receive remounted vehicles in 2022 and 2023. In the Fall of 2022, Crestline provided notification that the vehicle remount program had been put on hold until 2025. This was subsequently updated and FP will be receiving these remounts in April and July 2023. These remounts will be completed at the Demers plant in Quebec, rather than being sent to Crestline in Saskatoon.

Comment

Frontenac Paramedics investigated alternate options for remounting vehicles due to ongoing challenges.

The Ontario Provincial Land Ambulance and Emergency Response Vehicle Standard outlines the requirements for ambulance vehicles and remounts:

https://www.health.gov.on.ca/en/pro/programs/emergency_health/edu/docs/ontario_provincial_land_ambulance_ERV_standard.pdf

Documentation was provided by the Ministry of Health confirming the only contractors currently certified to provide ambulances in Ontario are Crestline Coach Ltd from Saskatoon, SK and Demers Ambulances from Beloeil, QC. In 2018 Crestline joined Demers-Braun under one parent company.

Discussions were held with the Crestline Sales Representative for Ontario regarding options. FP currently has two new vehicles scheduled for completion in 2023 and two more in 2024. In addition, there are the two remounts which are now scheduled for 2023.

Both Crestline and Demers are fully booked for the fiscal year 2024. Cancelling the order with Crestline to move to Demers would result in delay of production until 2025, as well as a price increase. Demers vehicles are currently $3,000 more expensive than Crestline vehicles. As well, the Demers vehicle is larger and wider which would likely result in increased cost to operate.

As reported above, Crestline will now do Ontario remounts at the Demers plant in Quebec, resulting in quicker turnaround time and lower transportation costs.

At this time there is no advantage to switching ambulance suppliers.

Strategic Priorities Implications

To Provide High Quality Patient Care

To Ensure Effective Operations and Continued Leadership

Financial Implications

None at this time.

Organizations, Departments and Individuals Consulted and/or affected.

Dean Popov, Deputy Chief of Operations, Frontenac Paramedics

Gary Masson, Ontario Ambulance Sales, Crestline

MINISTRY OF HEALTH

Ontario Provincial Land Ambulance and Emergency Response Vehicle Standard

VERSION 6.0 Emergency Health Regulatory and Accountability Branch

Comes into force November 1, 2023

Ontario

ONTARIO PROVINCIAL LAND AMBULANCE and EMERGENCY RESPONSE VEHICLE STANDARD

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Published by Ministry of Health, Version 6.0 – May 1, 2022

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ONTARIO PROVINCIAL LAND AMBULANCE AND EMERGENCY RESPONSE VEHICLE STANDARD

1. SCOPE OF THE STANDARD

1.1 This Ontario Provincial Land Ambulance and Emergency Vehicle Standard (hereinafter the "*Standard*") describes the minimum mandatory requirements for land ambulances for use by an Operator of a land ambulance service.

1.2 Annex A of this *Standard* describes the minimum mandatory requirements for Emergency Response Vehicles intended for use in ambulance services in the Province of Ontario.

1.3 Annex B of this *Standard* describes the minimum mandatory requirements for the transfer of a Patient Compartment Module to another chassis intended for use in ambulance services in the Province of Ontario.

1.4 Annex C of this *Standard* is the Compliance Checklist for a new ambulance.

1.5 Annex D of this *Standard* is the Compliance Checklist for a remounted ambulance.

1.6 Annex E of this *Standard* is the Compliance Checklist for a new ERV.

1.7 Every Operator of a land ambulance service shall be responsible for fully complying, or ensuring full compliance, with every provision of this *Standard.*

2. DEFINITIONS

2.1 In this *Standard*:
"ambulance" has the same meaning as in the *Ambulance Act*;

Ambulances under this *Standard* shall include the following category of vehicles:

(1) "Type 1 Ambulance" means a conventional truck cab and chassis with a remountable modular body that contains the patient compartment;

(2) "Type 2 Ambulance" means a standard van with integral cab and body, the patient compartment contained within the body, and a raised roof over the patient compartment;

(3) "Type 3 Ambulance" means a cutaway van cab and chassis with a remountable modular body that contains the patient compartment; and

(4) "Special Purpose Ambulance" means an ambulance that is built and equipped for a specific non-standard application, and for which the design, construction, accommodation, safety and certification requirements have been approved by the Director;

2.2 "CCHS" means the Canadian Community Health Survey;

2.3 "CMVSS" means the Canadian Motor Vehicles Safety Standards;

2.4 "Contractor" means the entity or person undertaking the work of a new or remounted ambulance or ERV conversion.;

2.5 "CSA" means the Canadian Standards Association;

2.6 "C-UL" means the Underwriters Laboratories of Canada;

2.7 "Director" means the Director, Emergency Health Regulatory and Accountability Branch;

2.8 "Emergency Response Vehicle" (ERV) has the same meaning as in Ontario Regulation 257/00;

2.9 "EV" means electric vehicle;

2.10 "Heavy-duty" means in excess of the usual quality or capacity that is normally supplied as standard production material and represents the most durable item that is commercially available;

2.11 "HTA" means the Ontario *Highway Traffic Act;*

2.12 "Main Cot" means a cot of a wheeled design, adjustable to multi-levels and fully contoured for head and/or lower limb elevation as per the PES;

2.13 "Main Cot Retention System" means a mechanical system which provides means for securing a Main Cot to the floor and/or sidewall of an ambulance;

2.14 "OH&S" means the Ontario *Occupational Health and Safety Act* and its regulation for Industrial Establishments;

2.15 "Operator" means an operator of a land ambulance service, as certified by the Ministry of Health and Long-Term Care pursuant to the *Ambulance Act*;

2.16 "Original Equipment Manufacturer" (OEM) means the manufacturer of the vehicle chassis used in the ambulance or ERV conversion;

2.17 "PES" means the version of the 'Provincial Equipment Standards for Ontario Ambulance Services' which is in effect at the time of conversion of the ambulance or ERV;

2.18 "Purchaser" means the person, entity, company, organisation, or body purchasing the new or remounted ambulance or ERV;

2.19 "Remount" means an ambulance assembled using an existing patient compartment module on another chassis;

2.20 "SAE" means SAE International;

2.21 "Wig Wags" means the operation of the alternating white grille lights;

3. GENERAL REQUIREMENTS OF THE AMBULANCE

3.1 Each ambulance shall comply with the following documents. In the event of a conflict or inconsistency in any of the provisions found in the following documents, the conflict or inconsistency shall be resolved in favour of the following priority of the documents:

(1) the Canadian Motor Vehicle Safety Standards (CMVSS);

(2) Applicable sections of the HTA;

(3) This Standard;

(4) any criteria established by the OEM for the conversion of chassis to ambulances or emergency vehicles; and

(5) all relevant Standards and Recommended Practices of technical agencies and bodies referred to in this *Standard*.

3.2 Each ambulance shall comply with the version of the documents listed in section 3.1 that were in effect at the time that the manufacturing of the ambulance was completed.

3.3 Each ambulance shall be constructed with the operating accessories as required herein; furnished with such modifications and attachments as may be necessary to enable the vehicle to function reliably and efficiently in its intended operating environment.

3.4 All modifications or additions to the OEM chassis shall be completed using approved OEM practices.

3.4.1 All modified equipment shall meet or exceed OEM performance characteristics.

3.5 Each ambulance shall be constructed in accordance with the best standards of current industry practice with regard to workmanship and quality.

3.6 Any attached drawings, annexes and appendices are incorporated into, and form a part of, this *Standard*.

3.7 When an ambulance is equipped with 110v electrical power,

(1) each outlet shall have an indication that power to the outlet(s) is present;

(2) Such installations shall be completed in accordance with relevant Ontario law governing 110v installations in vehicles; and

(3) All electrical installations shall be inspected and approved by an inspector certified under relevant Ontario law, an approved seal or certificate of approval shall be affixed adjacent to the installation.

4. AMBULANCE OWNER'S MANUAL

4.1 Each ambulance shall be equipped with an ambulance owner's manual that,

(1) shall contain instructions on the operation, maintenance and repair of the ambulance and all installed equipment; and

(2) shall contain any relevant safety precautions for the ambulance or installed equipment.

4.2 Each ambulance shall be equipped with a copy of all literature supplied with the chassis by the OEM chassis manufacture, including the OEM owner's manual.

5. MATERIALS

5.1 General

5.1.1 No materials shall be used in the conversion of the ambulance that could result in an exposure to biological or chemical agents as referred to in the Ontario *Occupational Health and Safety Act* or its regulations and the Canada *Hazardous Products Act* or its regulations.

5.1.2 No asbestos or product using or containing asbestos shall be used in the conversion of ambulances.

5.2 Insulation

5.2.1 All insulation shall be non-toxic, non-settling type, vermin proof, mildew proof, fire retardant and non-hygroscopic.

5.2.2 All insulation shall be secured so as to prevent movement and to prevent retention of moisture leading to corrosion of surrounding materials.

5.3 Fastenings

5.3.1 All fasteners and other means of attachment used in the construction or modification of the ambulance or ERV shall be designed so as to provide a minimum restraining force of 10 times the weight of the component, fasteners and/or object being secured.

5.3.2 All attachments shall be fastened in a manner that precludes unintentional loosening.

5.3.3 All cabinets, benches, partitions, and rails shall be securely attached to metal tapping plates and/or framing welded to the body structure.

5.4 Plywood

All plywood shall be industry standard solid core, with no voids for structural elements, and with waterproof glue construction.

5.5 Interior Finishes

5.5.1 The finish of all interior surfaces, other than OEM, shall be impervious to soap and water, disinfectants and mildew.

5.5.2 All surfaces, edges, corners and joints that can be exposed to any fluid shall be sealed by a waterproof bonding material.

6. EXTERIOR IDENTIFICATION

6.1 Each ambulance shall display reflective signage stating "AMBULANCE" on both sides, the rear and the hood of the ambulance, in a contrasting colour to the background.

6.2 For the sides and rear, the “AMBULANCE” legend shall be a minimum of 170 mm high, capitalized and proportional in width with bold font lettering, and in a contrasting colour to the background.

6.3 For the hood, the "AMBULANCE" legend shall be;

(1) a minimum of 120 mm high,

(2) capitalized,

(3) proportional in width with bold font lettering,

(4) in a contrasting colour to the background, and.

(5) permitted to be a mirror image

7. CONSTRUCTION AND DESIGN DETAILS

7.1 Safety by Design

7.1.1 The interior of the patient and driver compartments shall be free of all sharp projections.

7.1.2 All hangers or supports for equipment, lighting, controls and other devices shall be mounted as flush as possible with the surrounding surface.

7.1.3 Padding (bolsters) shall be placed at all head areas and on all obstructions that may be dangerous to persons moving about in the ambulance.

7.1.4 All exposed edges and corners that are not padded or protected by "T" moulding shall be cut with the largest possible radius or chamfer, at minimum a 3 mm chamfer or a 15 mm radius.

7.1.5 The interior of the patient compartment shall be designed and constructed to minimize containment areas for the incubation of viruses..

7.1.6 All stepping surfaces (*e.g.* front cab and patient compartment step wells) shall be covered with heavy-duty ribbed rubber matting or other anti-skid material for skid protection.

7.1.7 All securing straps, cargo nets and other restraints shall be capable of restraining at least 10 times the total weight of the equipment or material they are designed to contain.

7.1.8 All doors, hatches and covers shall be designed to contain at least 10 times the weight of the items stored loose behind the door, hatch or cover.

7.1.9 All equipment installed in the cab shall be located and mounted in such a way that it shall not interfere with the operation of the driver side and/or passenger side air bag(s) if the vehicle is so equipped.

7.2 General Construction Methods

All panels shall be installed in a manner that prevents sagging, deflection, warping or vibration.

7. 3 Cab Headliner

If a cab headliner other than the OEM supplied headliner is installed, then the resulting headroom clearance shall not be lower than that of the original OEM cab headliner.

7.4 Patient Compartment Flooring

7.4.1 The floor of the patient compartment shall be at the lowest level permitted by the chassis or body that does not exceed any limits expressed elsewhere in this *Standard*.

7.4.2 All floor areas shall withstand a distributed load of at least 735 kg/sq. m.

7.4.2.1 All floors shall be reinforced to eliminate “stress wrinkling ".

7.4.3 The floor covering shall,

(1) be fireproof, no wax type, mark resistant and scuff-proof safety flooring;

(2) provide a static friction coefficient equal to or greater than 0.8 under dry conditions; and

(3) be warranted by the flooring manufacturer to maintain that factor for at least seven (7) years of use in an ambulance.

7.4.4 All floor level mouldings, edging and trim shall be sealed to prevent fluids from seeping under cabinets, walls, etc.

7.5 Bulkhead Partition

7.5.1 A full height and width bulkhead partition shall,

(1) be placed between the driver and patient compartments;

(2) be located behind the driver and passenger seats; and

(3) be secured by being welded or bolted to tapping plates.

7.5.2 The bulkhead shall,

(1) contain a communication window; and

(2) be positioned such that the driver may view the patient compartment by means of the interior rear view mirror.

7.5.3 In the construction of the bulkhead, the horizontal seat movement of both the driver and passenger seats shall not be reduced from that provided by the OEM.

7.5.4 For a Type 1 ambulance, the communicating window shall be in the front wall of the ambulance body and accessible to the cab.

7.6 Patient Compartment Reinforcing Bar

In Type 2 ambulances, a mild steel reinforcing bar of minimum 100 mm width and 5 mm thickness, or the equivalent, shall,

(1) run around the total perimeter of the patient compartment, including the doors; and

(2) be welded to body ribs, bulk head reinforcement, door posts, and framework of doors.

7.7 Patient Compartment Side Door Step

7.7.1 The side entrance to the patient compartment shall,

(1) provide ease of access for an ambulatory patient, and

(2) include stepping surfaces that are minimum 200 mm wide (from edge to riser) and no more than 560 mm above the ground.

7.7.2 Where a permanently fixed exterior step has been installed, it shall be capable of supporting a test weight of at least 225 kg.

7.7.3 For Type 2 ambulances, when allowed by OEM practices, the present patient compartment side entrance step-well shall,

(1) be widened as necessary to comply, or

(2) be replaced by a permanently fixed exterior step (running board) capable of supporting a test weight of at least 225 kg.

7.8 Rear Step Bumper

7.8.1 Each ambulance shall be equipped with a step bumper at the rear capable of supporting a test weight of at least 225 kg.

7.8.2 The safety grating step shall run the length of the rear door opening, be 240 mm wide and hinge or pivot to permit ambulance attendants to move closer for loading and unloading of cot.

7.8.3 The rear step bumper shall,

(1) be positioned so that the stepping surface is approximately mid-way between the ground and the finished floor of the ambulance; and

(2) meet the angle of departure as measured in accordance with section 7.9 of this *Standard*.

7.8.4 Where a power lift is installed to lift cots into the ambulance, the rear step shall be exempt from the hinge or pivoting requirements of section 7.8.2 of this *Standard*.

7.9 Curb Clearance

With the exception of the OEM's furnished and installed components, the ambulance shall meet or exceed the following clearances as measured in accordance with SAE Standard J1100, as follows:

(1) Approach angle 20°

(2) Ramp breakover 10°

(3) Departure angle 10°

8. HEATING, VENTILATION AND AIR CONDITIONING

8.1 The heating ventilation and air conditioning ("HVAC") system shall maintain a comfortable temperature level in the patient compartment.

8.2 The HVAC system shall achieve all criteria and performance testing standards as detailed in Section 20 of this *Standard*.

8.3 The HVAC system shall be designed to operate using recirculated and/or ambient air.

8.4 The HVAC system shall provide a positive pressure within the patient compartment.

8.5 The HVAC system provided in the patient compartment shall be installed in a manner that allows for the independent control of the environment in the patient compartment from that of the driver compartment.

8.6 If modifications or additions are made to the OEM heater system, then the Contractor shall certify that the windshield defrosting and defogging system continue to comply with CMVSS #103.

8.7 The motors used to exhaust air for the air exchange shall comply with C-UL requirements for spark protection (marine).

8.8 A thermostat system shall automatically control the heating and cooling functions so that the temperature in the patient compartment is constant within +/- 2°C.

8.9 Where supplied as part of the OEM chassis, the connection points provided by the auxiliary HVAC - connector package shall be used.

8.10 In chassis that do not provide an OEM connection point for the heater lines, heavy-duty unions shall be used where the heater hoses connect.

8.11 The total air conditioning system shall be connected and charged in accordance with the OEM manufacturer's specifications regarding gas, lubricant and pressure.

9. LOW VOLTAGE (12V DC) CONVERSION ELECTRICAL SYSTEM

9.1 General

9.1.1 The battery(s) that is/are used to operate OEM vehicle functions shall be protected from all other electrical demands.

9.1.2 The Contractor shall test each ambulance prior to delivery and provide the Purchaser with certification of compliance with the performance criteria in Section 20 of this *Standard*.

9.2 Electrical Load Isolation

OEM chassis battery(s) (high volage battery in the case of EV) shall be protected from all Ambulance conversion electrical system loads.

9.3 Conversion Battery

9.3.1 The ambulance conversion electrical system shall include a dedicated battery(s) (e.g. the conversion battery(s)) electrically separated from the OEM battery(s).

9.3.2 The conversion battery(s) shall be;

(1) Located in a compartment sealed off from occupant compartments.
(2) In the case of vented batteries this compartment shall be ventilated

9.4 Uninterruptible Conversion Power Circuits

The following circuits shall be powered at all times: Incubator Receptacles, Two-Way Radio Power Supply, the Emergency Battery Boost System (if so equipped), and a light in the patient's compartment.

9.5 Fuses and Circuit Breakers

All circuits shall be protected by properly sized fuses or circuit breakers.

9.6 Driver's Switch Panel

9.6.1 Switches to control the emergency warning lights, siren, scene lights and other ambulance functions shall be mounted in a switch panel located at the driver's console.

9.6.2 Design and location of console and switch placement shall favour the driver as primary user but allow access to control functions from the passenger seat.

9.7 Patient Compartment Switch Panel

Switches to control the patient compartment lights, heating, air conditioning, and other patient compartment functions shall be mounted on a switch panel at the attendant's control console at the action wall.

9.8 Door Activated Switches

9.8.1 Patient compartment side entrance door(s) shall be fitted with switch(es) which shall operate interior patient compartment lights for general illumination when the door(s) is/are open.

9.8.2 Patient compartment rear entrance door(s) shall be fitted with switches that operate,
(1) interior patient compartment lights for general illumination; and
(2) the rear scene lights for loading lights when the door(s) is open.

9.9 Door Ajar Light

A flashing red warning light shall be installed on the driver console to indicate when any of the patient compartment or the exterior storage doors is ajar.

9.10 Two-Way Radio Power Supply

9.10.1 A terminal block shall be installed in the area provided for the mounting of radio equipment to accommodate the two-way radio power connections.

9.10.2 Two terminals shall,

(1) be included on the Radio Terminal Block; and

(2) be labelled, one as POSITIVE and one as GROUND.

9.10.3 The positive wire shall,

(1) be #4 gauge wire

(2) be connected from the POSITIVE terminal of the block;

(3) be connected in series with a 40 amp breaker (isolated from all other breakers); and

(4) be connected to the positive post of the conversion battery.

9.10.4 The negative wire shall,

(1) be #4 gauge wire

(2) be connected from the GROUND terminal block

(3) be connected to the metal frame of the chassis, and

(4) be separate from all other grounds connections on frame.

9.10.5 An insulated cover or terminal protectors shall be installed on the terminal block to prevent accidental contact with the terminals.

9.11 Patient Compartment Lighting

The intensity of the illumination in the patient compartment shall comply with the performance criteria in Section 20 of this *Standard*.

9.12 Incubator Receptacles

9.12.1 Two (2) 12-volt polarised outlets shall,

(1) be installed in each ambulance; and

(2) be powered at all times and protected to 20 amps

9.12.1.1 One outlet shall be located near the head end of the primary cot, but not in the action wall.

9.12.2 All outlets shall be Cinch Jones Series 2400 (6 contacts) or proven equivalent.

9.12.3 All connections shall be soldered to terminals.

9.12.3.1 Terminal #11 to negative (ground).

9.12.3.2 Terminal #12 to positive.

9.12.4 All terminals shall be covered to protect any metal contact from causing short circuits.

9.13 Cabinetry Lighting

9.13.1 Each interior storage cabinet shall have at least one cabinet light for interior illumination.

9.13.1.1 A switch shall be located in the attendant control panel that controls lights.

9.13.2 All exterior compartments shall,
(1) be provided with lighting; and
(2) have two (2) function door switches to activate lights.

9.14 Relays

Any device subject to a load of 25 amps or greater shall be remotely switched by relays or proven equivalent device.

9.15 Electrical Load Rating

All wiring, electrical devices, switches, outlets, etc., except circuit breakers and fuses, shall be rated to carry at least 125 percent of the maximum ampere load for which the circuit is protected.

9.16 Wiring

9.16.1 All wiring shall,
(1) be copper; and
(2) be SAE J1128 compliant.

9.16.2 No wiring unless protected within a solid channel made of corrosion resistant material shall pass,

(1) across the floor of the driver compartment;

(2) under the floor mats; or

(3) across metal trim strips;

9.16.3 No wiring shall pass or terminate within 200 mm of the oxygen connectors or fittings.,

9.17 Backup Warning Alarm

9.17.1 A heavy-duty reverse warning signal shall,

(1) be installed in each ambulance; and

(2) operate when the gear selector is in "REVERSE".

9.17.2 Where a disable switch is installed for silent backing, the disable switch shall be programmed to reset automatically prior to the lapse of 60 seconds from the time the switch is disabled.

10. EMERGENCY WARNING SYSTEM

10.1 Design Parameters

10.1.1 The emergency lighting system shall utilise flashing lights.

10.1.2 The emergency lighting system design shall be implemented and used in the following manner:

(1) white (clear) or blue light will be used to gain the viewer's attention;

(2) red light will convey the "emergency" message;

(3) amber light will convey the "caution" message;

(4) no colours other than red, white, blue and amber shall be used;

(5) all flashing lights of the same light type (e.g. incandescent, halogen strobe or Neobe®) and colour shall flash simultaneously, and then alternate to the other colour along the same side.

(6) amber light(s) shall not flash at the same time as any other emergency lights facing in the same direction.

10.1.3 The emergency lighting system shall be comprised of components and devices that comply with requirements of SAE J576, J578, J591, J595, J1318 and J1889, as applicable to the ambulance.

10.1.4 Lighting that is not required to meet the emergency lighting system design requirements in section 10.1.2 are,

(1) Wig Wags;
(2) traffic directional devices;
(3) red or amber stop turn signalling devices required under the HTA; and
(4) inside exterior door warning lights.

10.1.4.1 All lighting referred to in section 10.1.4 shall be capable of independently switching from emergency lights.

10.1.5 The primary emergency lighting system shall meet all criteria and performance testing standards as detailed in Section 20 of this Standard.

10.1.5.1 The primary emergency lights required to meet the minimum output shall remain visible when doors and compartments are in use.

10.1.5.2 The primary emergency lighting system shall,

(1) be wired to operate independently of the other warning lights; and
(2) be controlled by a separate switch on the driver's console.

10.1.5.3 The primary emergency lighting flash pattern shall include;

(1) forward roof warning lights;
(2) side roof level warning lights;
(3) rear roof level warning lights;
(4) grille lights; and
(5) intersection lights.

10.2 Forward Roof Warning Lights

10.2.1 Each ambulance shall have an array of red and either white or blue flashing lights installed on the forward vertical plane of the raised roof or the modular ambulance body.

10.2.2 This array shall include a minimum of two (2) red lights and one (1) white or blue light.

10.2.3 The red light(s) shall be in the extreme upper outer corner(s).

10.3 Side and Rear Roof Level Warning Lights

10.3.1 Each ambulance shall have an array of red and either white or blue flashing lights visible on each side.

(1) The red light(s) shall be in the extreme upper outer corner(s).

(2) This array shall include a minimum of two (2) red lights and one (1) white or blue light.

10.3.2 Each ambulance shall have an array of red and either white or blue flashing lights visible on the rear.

(1) The red light(s) shall be in the extreme upper outer corner(s).

(2) This array shall include a minimum of two (2) red lights and one (1) white or blue light.

10.4 Scene Lights

10.4.1 Five (5) white (i.e. clear) scene lights shall be installed on the vertical plane of the outer roof skin.

10.4.1.1 Of these five (5) white (i.e. clear) scene lights,

(1) one spotlight shall be located forward on each side;

(2) one floodlight shall be located to the rear on each side; and

(3) one floodlight shall be located on the rear.

10.4.1.2 The floodlights shall be angled downward 12 to 15 degrees by means of mounting or lens and installed with minimum protrusion beyond the outer skin of the body.

10.4.2 Switches at the driver control console shall control the left, right and rear facing scene lights.

10.4.3 At least one adjacent floodlight shall illuminate automatically when the rear doors of the patient compartment are opened.

10.4.4 The rear facing scene light(s) shall also operate automatically when the vehicle transmission is placed in reverse.

10.4.5 If scene lights are used to fulfil the requirement for white lights in the side and rear roof level warning lights, they shall be wired to flash as part of the primary emergency warning system.

10.5 Grille Lights

10.5.1 Each ambulance shall have grille lights installed on the vertical plane of the grille such that:

(1) the location is in compliance with OEM considerations regarding air flow through the grille; and

(2) the lights are visible in the rear view mirror(s) of a passenger car preceding the ambulance.

10.5.1.2 The grille lights shall contain:

(1) Two (2) red lights; and

(2) Two (2) white lights (Wig Wags)

10.5.1.3 Wig Wags shall;

(1) flash in an alternating or random sequence. (which may be the high beam of the OEM headlights when permitted by the OEM)

(2) be wired to operate independently of the other warning lights

(3) be controlled by a separate switch on the driver's console.

(4) when an alternating pattern is selected of the same type light as the red emergency grille lights, the flash rate shall be faster

10.6 Intersection Lights

Each ambulance shall have a red light and either a white or blue intersection light(s) installed at each of the front lower corners of the vehicle.

10.7 Siren - Public Address System

10.7.1 Each ambulance shall have a combination siren and public address system.

10.7.1.1 The combination siren and public address system shall,

(1) be capable of producing high/low horn tones and other warning sounds;

(2) contain a microphone and two speakers; and

(3) achieve criteria as detailed in section 20 of this *Standard*.

10.7.2 The siren shall:

(1) be capable of amplifying the two-way radio audio;

(2) be independent of the radio system;

(3) have remote control capability; and

(4) be able to be activated by the vehicle horn ring when the siren/horn switch is on.

11. 2-WAY RADIO INSTALLATIONS

11.1 General

11.1.1 Each ambulance design shall provide for the installation of radio equipment.

11.1.2 The term "radio equipment" means all peripheral equipment associated with the radio, including:

(1) mobile radio units that consist of the mobile radio transceiver and the mobile radio repeater package;

(2) front control heads, microphones and speakers;

(3) all associated antennas

(4) cables between the control head, speaker, mobile radio unit, battery and antenna;

(5) rear control head, handset and speakers; and

(6) two portable radios.

11.2 Radio Equipment Mounting

11.2.1 Each ambulance shall have a compartment for mounting radio equipment which:

(1) provides adequate access for installation or removal and periodic maintenance;

(2) provides protection from physical damage; and

(3) is ventilated.

11.2.2 A mounting position shall be provided for the radio control head and microphone clip in the cab that allows equal access for either the driver or passenger.

11.2.3 A mounting position shall be provided for Two remote speakers to be mounted in the following locations:

(1) In the cab between the driver and passenger; and

(2) near the rear facing attendant seat.

11.2.4 The mounting of radio equipment shall not:

(1) interfere with other control functions;

(2) block vents;

(3) block the line of sight for gauges or instruments;

(4) interfere with air bag type passenger restraint systems; or

(5) encroach into the paramedic seating area.

11.3 Antennae Access

11.3.1 Access shall be provided to enable the installation and maintenance of antennae and antenna cables without having to remove the headliners or cabinets.

11.3.2 Openings to pass antenna cables through walls etc. shall:

(1) be at least 25 mm in diameter.

(2) protected to prevent wear or damage to cables

11.4 Antenna Ground Plane

11.4.1 Each ambulance equipped with a non-metallic roof shall have an antenna ground plane that is at least 1 square metre shall be moulded into the roof.

11.4.2 The ground plane shall,

(1) be grounded to the vehicle frame; and

(2) meet ground plane test as detailed in section 20 of this *Standard*.

11.4.3 The total thickness of the roof and ground plane shall not exceed 10 mm for a 75 mm diameter circle at each mount point.

11.4.4 With respect to MOH trunked radios,

(1) There shall be a minimum separation of 915mm at each antenna mount point; and

(2) The lower surface of the ground plane shall be exposed to enable contact with the antenna mount.

11.5 Cable Routing

11.5.1 Cables between the radio compartment and the radio control head, the remote speakers and the remote handset shall be protected from wear and damage by means such as:

(1) passages between sections of cabinetry;

(2) fixed conduits with a minimum inside dimension of 75x50 mm; or

(3) removable channels with a minimum inside dimension of 60x35 mm.

11.6 Installation of Radio Equipment

11.6.1 All fasteners and other means of attachment used to install radio equipment in ambulances shall provide a minimum restraining force of at least 10 times the weight of the component or object being secured.

11.6.2 All attachments shall be fastened in a manner that prevents unintentional loosening.

11.6.3 No mounting of radio equipment shall,
(1) interfere with other control functions;
(2) block vents or instruments;
(3) interfere with air bag passenger restraint systems; or
(4) encroach into the paramedic seating area.

12. OXYGEN SYSTEM

12.1 General

12.1.1 Each ambulance shall have a hospital type oxygen system that,
(1) is capable of storing and supplying medical oxygen as specified by the PES; and
(2) complies with all requirements as detailed in section 20 of this *Standard*.

12.1.2 All threaded fittings shall be gas specific (CSA) and cleaned for oxygen service.

12.1.3 All devices shall be colour coded to indicate oxygen.

12.1.4 All apparatus shall be permanently identified with the manufacturer's name, calibrated conditions and specific markings including warning information.

12.1.5 All oxygen lines running between the storage tank regulator and the wall outlets shall be low pressure hose assemblies.

12.2 Oxygen Outlet(s)

12.2.1 All oxygen outlets shall;
(a) be compatible with oxygen delivery equipment specified by the PES; and
(b) be located so as not to pose a hazard to occupants.

12.3 Oxygen Cylinder Storage

All oxygen cylinder storage cradles shall be designed and mounted so as to comply with the criteria for oxygen tank retention as detailed in section 20 of this *Standard*.

13. SUCTION ASPIRATION SYSTEM

13.1 Each ambulance shall have a complete electrically powered suction aspiration system installed as specified by the PES.

13.2 All suction outlets and associated equipment shall be located so that they do not pose a hazard to the patient on the cot, whether the head of the cot is reclined or in any elevated position, or to the attendant.

14. ACCOMMODATION AND STORAGE

14.1 General

14.1.1 As a minimum, each ambulance shall be designed to accommodate:

(1) one patient on a Main Cot, incubator or other mobile patient transporter;

(2) seating for one paramedic and one other passenger in patient compartment in addition to the patient; and

(3) the driver and one other passenger in the cab.

14.1.2 Where the Director has approved different design and accommodation requirements for special purpose ambulances from those set out in section 14.1.1, each special purpose ambulance shall comply with the approved requirements

14.2 Main Cot Mounting

14.2.1 Each ambulance shall conduct testing on Main Cot retention systems in accordance with the performance criteria as detailed in section 20 of this *Standard* .

14.2.2 All Main Cots shall be positioned so that there is a minimum of 150 mm of clearance between the rearmost part of the cot and the nearest obstruction.

14.3 Action Wall

14.3.1 Each ambulance shall provide an action area for the attendant seated in the primary attendant seat.

14.3.2 All action areas shall contain:

(1) the main oxygen outlet and controls;

(2) the suction outlet and controls;

(3) the attendant control console (patient compartment switch panel);

(4) a thermostat for HVAC system(s);

(5) a reading light; and

(6) mounting space for the two-way radio handset and speaker.

14.3.3 All switches on the action wall shall be recessed or otherwise protected from accidental operation.

14.4 Auxiliary Seating (Dual Main Cot Ambulance)

14.4.1 Each dual Main Cot ambulance shall have a rear facing seat securely mounted at the front right of the patient compartment to enable the occupant to observe a patient on the second cot.

14.4.2 The auxiliary seat shall be equipped with a permanently mounted seat, back, headrest cushions and a seat belt that meets the criteria of section 20 of this *Standard*

14.5 Storage Requirements and Design

14.5.1 Each ambulance shall be designed with adequate storage for all minimum mandatory equipment as specified by the PES.

14.5.2 All storage cabinets shall be fastened in a way that allows them to be easily opened, while ensuring they do not come open in transit or as a result of a vehicle collision.

14.5.3 All doors, hatches and covers shall be designed to contain at least 10 times the total weight of the items stored loose behind the door, hatch or cover.

14.5.4 All open shelves or compartments shall be provided with easily removable belts or cargo nets designed to contain at least 10 times the total weight of the items stored loose on the shelf or in the compartment.

14.5.5 All glazing in cabinet doors shall bear a permanent identifying mark certifying compliance with current Transport Canada Regulations for motor vehicle glazing.

14.6 Waste Receptacles

Each ambulance shall have individual receptacles provided for trash, hazardous waste and sharps.

15. SAFETY EQUIPMENT

15.1 Bolsters

15.1.1 Bolsters (padded cushions) shall be installed at all openings, projections and obstructions inside the ambulance that may cause danger to persons moving, seated or entering and leaving the ambulance.

15.1.2 At a minimum, bolsters shall be installed:

(1) across the full width of the interior top sill of each door opening in the patient compartment; and

(2) adjacent to each seating position.

15.2 Grab Handles/Grab Rails

15.2.1 Each ambulance shall have grab handles and grab rails installed to assist persons who are moving or seated inside the ambulance or entering and exiting the ambulance.

15.2.2 All grab rails and handles shall be installed in compliance with the criteria set out in section 20 of this *Standard*.

15.3 Exterior door safety indicator

Each ambulance shall have one or more of the following installed on the outer edge of all exterior doors to enhance visibility of these doors when open:

(1) Reflective safety stripes;
(2) Reflective lenses; and
(3) Flashing warning lights.

15.4 Fire Extinguishers

15.4.1 Each ambulance shall have two (2) fire extinguishers which meet the following requirements:

(1) 5lb;

(2) C-UL approved;

(3) rating 3-A, 10 BC; and

(4) rechargeable type with pressure gauge and service inspection tag.

15.4.1.1 The fire extinguishers shall be installed in the following locations:

(1) One in the cab; and

(2) One in the patient compartment.

15.4.2 All fire extinguishers shall be secured by a quick release bracket or in a container that,

(1) does not require adjustment each time the fire extinguisher is secured; and

(2) complies with the retention criteria in section 20 of this *Standard.*

15.5 Passenger Restraint

15.5.1 All seating positions in each ambulance shall have seat belts that comply with CMVSS standards.

15.5.1.1 Where there is no regulation under CMVSS, the installation, materials and design of the seat belts shall meet the spirit of CMVSS regulations for passenger restraint.

15.5.1.2 All seat belt installations shall comply with criteria in section 20 of this *Standard.*

15.5.2 All seat belts shall provide pelvic restraint designed to remain on the pelvis of the occupant.

15.5.3 All side facing seats shall have a net, shoulder belt or a vertical bolster located at the forward edge of the seat area that,

(1) meets the requirements set out in section 20 of this *Standard*; and

(2) restrains the occupant(s) along the side of their body and head to prevent extensive flexing of the spine or neck.

(3) for multiple occupant bench seat, 15.5.3 (1 and 2) only applies to the forward most seating position

16. INTERIOR SIGNS AND LABELS

Each ambulance shall have the following labels;

(1) instructions beside each egress door of the patient compartment to indicate how to open door(s);
(2) a label on each pressure vessel holder indicating the type, size of tank(s) and maximum weight of tank(s) it is intended to restrain;
(3) labels on all accessory receptacles and other electrical outlets indicating intended use (e.g.12V, 20amp or 110VAC 15amp);
(4) a decal in the patient compartment view of the attendant(s) stating 'all storage area, securing strap, bracket and/or cargo net has a maximum rating of 14kg/30lbs unless otherwise labelled;
(5) a label on each storage area, securing strap, bracket and/or cargo net rated to secure above 14kg/30lbs;
(6) labels on all switches and temperature controls;
(7) a label on each waste receptacle indicating their intended use;
(8) a decal in clear view of the driver indicating the overall height of the vehicle both in metres and feet, including an allowance of 250 mm (10 inches) for the roof mounted antenna; and
(9) Weight decal displayed in clear view of the driver indicating at minimum;
- (i) The payload in kilograms and pounds
- (ii) The maximum number of occupants x 90% Male, in accordance with the current Canadian Community Heath Survey (CCHS)
- (iii) The equipment weight – if supplied by Operator
- (iv) The Cargo Carrying Capacity (C.C.C) in kilograms and pounds

Sample Decal:
Maximum Payload = ____kg/____ lbs
Equipment =____kg/_____ lbs
C.C.C. = ____kg/_____ lbs
Equivalent Maximum Occupants @ 90% male = _____ @ 231 lbs each

17. MODULAR AMBULANCE BODY- TYPE 1 AND TYPE 3

17.1 General

Each modular ambulance body shall comply with the Ambulance Performance Standards set out in section 20 of this *Standard*.

17.2 Body Mounting

Each modular ambulance body shall be mounted to the chassis with high strength fasteners and vibration isolating rubber body mounts designed and installed in accordance with the chassis manufacturer's guidelines.

17.2.1 Modular ambulance bodies shall not be welded to the frame.

17.3 Doors

17.3.1 Each ambulance shall have door openings to the patient compartment provided at the rear of the body and on the curbside ahead of the right rear wheel.

17.3.2 Each door shall have,
(1) hold open devices appropriate for the type and size of door; and
(2) door stops to prevent damage to body.

17.3.3 The rear door(s) shall provide;
(1) a minimum opening of 1120 mm wide x 1270 mm high.
(2) doors with vertical hinges shall open to a minimum door angle of 150 degrees.

17.3.4 The curbside door opening shall provide a minimum opening of 700mm x 1270mm to accommodate the emergency removal of patients.

17.4 Windows

Each ambulance shall have fixed windows mounted in the rear doors.

17.5 Door Latches

17.5.1 All door latches shall be;

(1) automotive style;

(2) Transport Canada approved; and

(3) equipped with a two (2) stage catch mechanism.

17.5.2 All egress doors shall have lock and release handles permitting the doors to be locked or unlocked from inside the patient compartment without using a key.

18. AMBULANCE CHASSIS SPECIFICATION

18.1 Payload Allowance

18.1.1 Each ambulance shall have a minimum payload allowance of 770 kg (1700 lbs) over and above the converted curb weight of the unit as measured per sub-section 20.6.3.3.

18.1.2 The total weight of the occupants and cargo shall not exceed the payload allowance.

19. CERTIFICATION OF AN AMBULANCE MODEL

19.1 General

19.1.1 Prior to being in service, every new and remounted ambulance model of ambulances intended to be used in the Province shall be certified in accordance with this *Standard* by the Director.

19.1.2 The process for Ministry certification of an ambulance model may include site visits to the Contractor's production and testing facilities at times when the Director determines that manufacturing or performance standard testing of ambulances intended for use in Ontario is occurring.

19.1.3 To facilitate the site visits described in section 19.1.2, the Contractor shall:

(1) provide the Director with a minimum of 60 calendar days notice prior to commencing testing of ambulances;

(2) provide the Director with a copy of the "Ministerial Authorization" for the use of the National Safety Mark issued by Transport Canada relevant to the ambulance model for Canadian Contractors; and

(3) if the Contractor is American, ensure that the models proposed the Contractor are included in the current edition of the Transport Canada 'List of Vehicles Admissible from the United States'.

19.1.4 The Contractor shall apply for certification of an ambulance model by submitting the following documentation:

(1) a letter signed by the Contractor stating that the ambulance model as offered for use in the Province of Ontario is in compliance with all provisions of this *Standard*;

(2) a copy of all test certificates and technical reports required for the Performance Standards set out in section 20 of this *Standard*;

(3) a copy of the Owner's Manual required under Section 4;

(4) a copy of the "Ministerial Authorization" for the use of the National Safety Mark issued by Transport Canada relevant to the ambulance model for Canadian Contractors;

(5) if the Contractor is American, a copy of the current edition of the Transport Canada 'List of Vehicles Admissible from the United States';

(6) an electrical schematic drawing which clearly explains how the isolation of loads required under section 9 has been accomplished.

(7) a completed copy of Annex C (New Ambulance) or Annex D (Remounted Ambulance) noting compliance with specified sections of the *Standard*, signed by an officer of the Contractor, dated and notarised; and

(8) the test submission, which shall include a model or part numbers of products tested and a pictorial record of the tests.

19.1.5 Each ambulance model certification shall be,
(1) granted solely at the discretion of the Director; and
(2) in writing.

19.1.6.1 Ambulance model certification and individual test certificates shall remain valid for a maximum of three (3) years.

19.1.6.1.1 After the expiry of the three (3) year period, and subject to sub-section 19.1.7, the ambulance model shall be recertified.

19.1.6.2 The start date for the three (3) year period of ambulance model certification shall be determined based on the date that the oldest test was completed, as submitted under sub-section 19.1.4 (2).

19.1.7 In lieu of recertification, a Contractor may make an application to the Director of the Emergency Health Regulatory and Accountability Branch to have the term of an ambulance model certification or of an individual test certificate extended for an additional period of two years from the original test date.

19.1.7.1 The application shall,
(1) be completed prior to the expiry of the original certificate; and
(2) include a detailed argument, based on sound engineering principles, explaining why the extension should be granted.

19.1.8 All extensions shall be,
(1) granted solely at the discretion of the Director; and
(2) in writing.

19.1.8.1 A maximum of one extension shall be allowed for any individual certification.

19.1.9 Each ambulance certified for use in Ontario under previous versions of this *Standard* shall be deemed to continue to be certified under the current version until sold, remounted, refurbished, or modified in any fashion which contravenes the version in effect at the time of change.

19.2 Certificates and Reports

19.2.1 The Contractor shall,

(1) retain on file the original copy of all valid test certificates required under the Performance Standards set out in section 20; and

(2) complete technical reports in support of those certificates.

19.2.2 Each individual test certificate shall clearly state:

(1) the number, title and date of revision of the Performance Standard;
(2) the date and location when the test was performed;
(3) the name of the company or organization which completed the test;
(4) the name and title of the person who has verified the test results complete with a signature (and proof of licence for an engineer);
(5) that the test requirements were passed;
(6) the chassis type(s) and ambulance type(s) for which the certificate is valid;
(7) the make, model, year and Vehicle Identification Number of the tested chassis;
(8) the make, model, type and year of the tested ambulance conversion;
(9) the make, model, and other identifying marks on any components being tested or that make up systems which are being tested;
(10) the make, model, and other identifying marks on any components being tested or that make up systems which are being tested, including photographs or diagrams that clearly distinguish the components or systems for future reference; and
(11) an individualized test certificate reference number.

19.2.3 Each technical report held in support of a test certificate shall contain at minimum:

(1) all information required on the test certificate;

(2) all data collected in performance of the test including any descriptive or explanatory notes, pictures, and videos;

(3) a description of the equipment and facilities used to perform the tests ; and

(4) the next calibration due date.

19.2.4 The following tests shall be completed by a Licenced Professional Engineer in Ontario and certified as conforming to the following Performance Standards:

(1) Main Cot Retention;

(2) Static Load Test for Ambulance Body Structures;

(3) HVAC Performance Tests;

(4) Pressure Vessel Retention;

(5) Interior Sound Level Test;

(6) Centre of Gravity Location;

(7) Interior Lighting Test;

(8) Body Door Components Test;

(9) Emergency Lighting Requirements;

(10) Carbon Monoxide Levels;

(11) Load Test for Grab Rail/Handles;

(12) Siren/Public Address System Sound Levels;

(13) Passenger and Patient Safety Restraints Load Tests;

(14) 10G Restraint Test; and

(15) Occupant Restraint Load Test.

19.2.5 The following tests shall be completed by the Contractor and certified as conforming to the following Performance Standards:

(1) Vehicle Weight Distribution;

(2) 12 Volt dc Electrical System Performance;

(3) Antenna System Test;

(4) Oxygen System Pressure Test; and

(5) Occupant Head Protection Zone.

19.2.6 Certification from the OEM chassis manufacturer and individual equipment manufacturers shall be accepted if they:

(1) are not part of a system(s) ;

(2) are not altered; and

(3) are in accordance with sub-section 19.2.2 of this *Standard*.

19.2.7 Testing results of single components produced by the OEM chassis manufacturer and individual equipment manufacturers shall be accepted if:

(1) the component tested is not incorporated or utilized as part of a larger system or entity;

(2) the component tested is not altered; and

(3) the results are in accordance with sub-section 19.2.2 of this *Standard.*

19.3 Certificate Distribution

At the time of delivery of each ambulance, the Contractor shall provide a copy of;

(1) the ambulance model certificate signed by the Director of the Emergency Health Regulatory and Accountability Services Branch that accompanies each ambulance sold for use in Ontario, and

(2) a completed Compliance Checklist (Annex C or Annex D as appropriate for the individual ambulance being sold).

19.4 Non-Compliant Vehicles

19.4.1 Each ambulance supplied as a non-compliant ambulance at the request of the Purchaser shall have a certificate that,

(1) is annotated as "Non-Compliant Vehicle– See Attached", and

(2) specifically sets out the areas of non-compliance in Part II.

19.4.2 Where an ambulance is non-compliant, the Operator prior to being placed into service shall ensure that:

(1) the areas of non-compliance are rectified; and

(2) all documentation and testing information is retained on file.

19.5 Continued Compliance

19.5.1 The Operator shall ensure that the ambulance maintains its compliance with the applicable version of the *Standard.*

19.5.2 Any subsequent modifications or changes made to the ambulance shall be in accordance with the version of the *Standard* in effect at the time of the modification or change.

Where modifications or changes occur to components or materials that require testing under the Performance Standards the Operator shall;

(1) ensure that new testing is undertaken and completed, and

(2) maintain on file all documentation related to the new testing information and confirmation of compliance with respect to the modified or changed ambulance.

19.5.3 The documentation described in section 19.5.2(2) shall be made available for inspection by the Ministry.

19.6 Compliance Review Program

19.6.1 The Ministry shall maintain a program for the purpose of monitoring the Contractor's compliance with the requirements under this *Standard*.

19.6.2 The program shall include site visits to the Contractor's production facilities at times while manufacturing and/or performance standard testing of ambulances intended for use in Ontario is occurring or at such other reasonable times as determined by the Director.

19.6.3 To aid in scheduling Ministry compliance reviews, the Contractor shall regularly provide the Director with a minimum of 60 calendar days notice prior to commencing conversion or testing of ambulances being produced for use in Ontario.

19.6.4 The Contractor shall make available to designated Ministry personnel, for inspection and review, all documentation relating to the production and certification testing of ambulances being produced for use in Ontario.

19.6.5 Where the Contractor employs sub-contractors, testing agencies or consultants to provide goods or services, the process described in sub-sections 19.6.2 and 19.6.3 shall apply.

19.6.6 The Contractor shall arrange access for Ministry personnel to the facilities of its sub-contractors, testing agencies or consultants to observe activities relating to the manufacturing and/or performance standard testing of ambulances intended for use in Ontario.

19.7 Revocation and Suspension of an Ambulance Certification

19.7.1 The Director may revoke or suspend an ambulance model certification where:

(1) a revision to, or a new version of, the *Standard* requires new testing certification of any Performance Standards listed in sub-sections 19.2.4 or 19.2.5;

(2) the Contractor fails to provide required notification, documentation and/or access to production and testing facilities as described in sub-section 19.6; or

(3) the Director is of the view that the Contractor has contravened any requirement under this *Standard*.

19.7.2 The Director may revoke or suspend an individual ambulance certification where:

(1) a revision to, or a new version of, the *Standard* requires new testing certification of any Performance Standards listed in sub-sections 19.2.4 or 19.2.5;

(2) the Operator fails to provide required documentation and/or testing information and/or access to production and testing facilities as described in sub-section 19.5.3; or

(3) the Director is of the view that the Operator has contravened any requirement under this *Standard*.

19.8 Fees

The Director may establish fee schedules relating to the recovery of travel expenses from the Contractor, and any other costs associated with the provision of ambulance model certification and compliance monitoring.

20. AMBULANCE PERFORMANCE STANDARDS

20.1 Main Cot Retention

20.1.1 Scope:

This performance standard establishes MOH minimum requirements and permits Vendors to set maximum load tolerances for the Main Cot retention systems as installed in single and dual Main Cot ambulances.

20.2 Requirements:

20.2.1 The Main Cot retention system, anchorages and stretcher fastener(s) shall not fail or release when subjected to a minimum load application of 10x (the weight of the cot hardware, intended cot + a 90% male per the current CCHS data) applied in a horizontal plane in a longitudinal, lateral and vertical direction. (Note: these are three individual tests).

20.2,2 Each Main Cot retention system shall be labelled,
(1) in clear view of the attending paramedic; and
(2) label shall refer to ambulance certification documentation for permitted weight rating.

20.1.2.4 Testing shall be certified by a Licenced Professional Engineer in Ontario.

20.1.3 Test Conditions:

20.1.3.1 The ambulance floor shall be in a horizontal plane.

20.1.3.2 If the ambulance is designed to transport multiple Main Cots, the Main Cot retention system shall be tested in each location.

20.1.3.3 If adjustable, the Main Cot retention system shall be adjusted to its most forward position.

20.1.4 Test Procedure:

20.1.4.1 Testing shall be conducted in accordance with the following procedures:

(1) apply the specified force through the hook(s) (or other cot securing means) used in locking onto the cot using the test device;

(2) install the test device in the Main Cot retention system in a manner that will preclude contact friction with the floor or other surfaces;

(3) apply an initial vertical upward load to the test device pivot;

(4) as rapidly as possible, apply the fully specified force to the device;

(5) record the applied force, start and finish times and any deformation of the floor, cabinetry or retention mechanism;

(6) release the applied load. If any deformation has occurred in the Main Cot retention system, replace the damaged parts. Note: rotation or deformation of retention mechanism does not constitute failure;

(7) reinstall test fixture and repeat above steps in the longitudinal and again in the lateral direction; and

(8) record all resultant data.

20.1.5 Test Equipment:

20.1.5.1 The test shall be conducted using a testing device,

(1) with a structure of appropriate design to represent the attachment points of a Main Cot; and

(2) used for locking onto the hook(s) (or other cot securing means) of the Main Cot retention system.

20.1.5.2 The force shall be applied through a pivot located 380 mm above the floor, at a point representing the centre of the Main Cot.

20.2 Static Load Test for Ambulance Body Structures

20.2.1 Scope:

This performance standard establishes performance requirements for ambulance body structural integrity and is applicable to all ambulances where: a) modifications are made to OEM roofs, and/or; b) the body is manufactured by the Contractor.

20.2.2 Definitions:

"Converted Curb Weight" means the actual weight of the vehicle with all standard OEM equipment; carrying its maximum capacity of fuel, oil and coolant and including the weight of the conversion and all equipment as supplied by the Contractor in accordance with the terms of this *Standard*.

20.2.3 Requirements:

20.2.3.1 Where for Type II ambulances a force equal to 1.5 times the Converted Curb Weight of the vehicle, and for Types I and III ambulances a force equal to 2.5 times the Converted Curb Weight of the vehicle is applied to the roof of the vehicle's body structure through a force application plate, the downward vertical movement at any point on the application plate shall not exceed 100 mm.

20.2.3.2 Each exterior exit door of the vehicle shall be capable of opening during the full application of the force and after the release of the force.

20.2.3.3 No structural or component damage, such as torn or broken material, broken welds, popped or sheared rivets, bolts or fasteners shall be evident during the application of the force and after the release of the force.

20.2.4 Where for Types I and III ambulances a force equal to 2.5 times the Converted Curb Weight of the vehicle is applied to the left or right side of the body structure through a force application plate, the downward vertical movement at any point on the application plate shall not exceed 100 mm.

20.2.4.1 The rear exit doors of the vehicle shall be capable of opening during the full application of the force and after the release of the force.

20.2.4.2 No structural or component damage, e.g., torn or broken material, broken welds, popped or sheared rivets, bolts or fasteners shall be evident during the application of the force and after the release of the force.

20.2.4.3 Testing shall be certified by a Licenced Professional Engineer in Ontario.

20.2.5 The test procedure designed for 20.2.3 shall be conducted in the following manner:

(1) place the vehicle on a rigid horizontal surface so that the vehicle is entirely supported by means of the vehicle frame without any support from the suspension system. If the vehicle is constructed without a frame, place the vehicle on its body sill;

(2) remove any components which extend upwards from the vehicle roof;

(3) A modular body may be tested off of the chassis it's intended for, in which case the following applies:

(a) the module shall be placed on I beams to simulate the chassis frame; and

(b) the total weight applied shall still include 2.5 times the total Converted Curb Weight of the finished ambulance;

(4) Apply a rigid, rectangular force application plate fitted as near as possible to the contour of the ambulance roof;

(5) Position the force application plate on the vehicle roof so that its rigid surface is perpendicular to a vertical longitudinal plane and so that in the top projected view, its longitudinal centreline coincides with the longitudinal centreline of the vehicle, and it is centred on the roof of the vehicle;

(6) with all doors fully closed, apply an evenly distributed vertical force in the downward direction to the force application plate at any rate not more than 13 mm per second, until a force of 225 kg has been applied;

(7) record the elevation readings of all four (4) corners of the force application plate;

(8) apply additional vertical force in the downwards direction to the force application plate at a rate not more than 13 mm per second until 50% of the specified force has been applied and record the elevation readings of all four (4) corners;

(9) continue to apply a vertical force to the application plate until the total force specified is applied and record elevation readings of all four (4) corners;

(10) with the total load applied, test all doors for compliance with paragraph 20.2.3.2 and record the results;

(11) remove the applied load from the application plate and record elevation readings at all four (4) corners of the roof;

(12) compare results with the original readings to determine permanent deformation of the roof;

(13) test all doors for compliance with paragraph 20.2.3.2; and

(14) record the results.

20.2.6 The test procedure designed for 20.2.4 shall be conducted as follows:

(1) place the body on either side, on a rigid horizontal surface so that the entire body is supported;

(2) apply a rigid, rectangular force application plate fitted as near as possible to the contour of the ambulance side;

(3) position the force application plate on the side of the vehicle so that its rigid surface is perpendicular to a vertical longitudinal plane and so that in the top projected view, its longitudinal centreline coincides with the longitudinal centreline of the vehicle, and it is centred on the side of the vehicle;

(4) with all doors fully closed, apply an evenly distributed vertical force in the downward direction to the force application plate at any rate not more than 13 mm per second, until a force of 225 kg has been applied;

(5) record elevation readings of all four (4) corners of the force application plate;

(6) apply additional vertical force in the downwards direction to the force application plate at a rate not more than 13 mm per second until 50% of the specified force has been applied and record the elevation readings of all four (4) corners;

(7) continue to apply a vertical force to the application plate until the total force specified is applied and record elevation readings of all four (4) corners;

(8) with the total load applied, test rear doors for compliance with paragraph 20.2.4.1 and record the results;

(9) remove the applied load from the application plate and record the elevation readings at all four (4) corners of the roof;

(10) Compare the results with the original readings to determine permanent deformation of the side;

(11) test the rear doors for compliance with paragraph 20.2.4.1; and

(12) Record the results.

20.2.7 Test Equipment:

The test shall be conducted using a flat, rigid rectangular force application plate that is,

(1) measured with respect to the vehicle'**s** roof or side longitudinal and lateral centrelines; and

(2) a minimum of 130 mm longer and 130 mm wider than the ambulance roof /side.

For the purposes of these measurements, the ambulance roof/side is that structure, seen in the top projected view that coincides with the patient compartment of the ambulance or storage area of the support vehicle.

20.3 HVAC Performance Tests

20.3.1 Scope:

This performance standard establishes three (3) separate performance requirements for the Heating, Ventilation and Air conditioning (HVAC) Systems of ambulances.

20.3.2 HVAC Requirements:

20.3.2.1 Each ambulance shall be equipped with HVAC systems that,
(1) can be made to collectively operate using recirculated air and ambient air; and
(2) are capable of maintaining interior temperature within the established comfort zone of 20°C to 25°C when operating between minus (-) 30°C to plus (+) 35°C ambient.

20.3.2.2 Vehicles shall be supplied as tested.

20.3.3 Heating System Requirements:

20.3.3.1 The heating system(s) shall have sufficient capacity to simultaneously raise the temperature in the vehicle cab and patient compartment to a minimum dry bulb temperature of 20°C, at all 10 test points (9 in patient compartment and one in cab), within 30 minutes of the powertrain reaching operating temperatures.

20.3.3.2 The temperature gradient within the nine thermocouples in the patient compartment shall not exceed 5°C at completion of the test.

20.3.4 Heating System Test Procedure:

20.3.4.1 In the patient compartment the nine (9) thermocouples, in stacks of three, shall be positioned as follows:

(a) The horizontal axis shall be located at the centreline of the vehicle chassis and one stack each of three thermocouples shall be located at the one quarter, mid and three quarter point distances between the rear doors and bulkhead; and

(b) In the vertical plane, one thermocouple shall be located at the one quarter, mid and three quarter point distances between the finished floor and the underside of the ceiling in each stack.

20.3.4.2 Heating equipment may be in (air) recirculation mode and all compartment openings, including partition door/windows and exhaust vents shall be closed.

20.3.4.3 The vehicle (with doors open) shall be cold soaked for a sufficient period so as to obtain a temperature reading of -30°C +2.5°C, in both compartments and that temperature held to the commencement of the time measurement (i.e. EV start or powertrain at operating temperature). Ambient temperature must be maintained as close to -30°C +2.5°C as practical.

20.3.4.3.1 If the vehicle is powered by an internal combustion engine, start engine with transmission in park or neutral, allow engine to come up to operating temperature range as specified by the OEM, then run at the high idle setting, as permitted by the OEM, and commence time measurement.

20.3.4.4 Time and temperatures shall be recorded from nine (9) equally spaced test thermocouples in the patient compartment and a single test thermocouple located at the horizontal and vertical planes in the vehicle. At a minimum, verification readings shall be recorded at each noted time interval until the test is successfully completed or failure is declared after a 30-minute mark:

(1) at vehicle start time;

(2) powertrain at operating temperature range or when the reading at one or more thermocouples raises to -27.5ºC (start of test time measurement);

(3) 15-minute mark (or pass); and

(4) 30-minute mark (or pass).

20.3.5 Testing shall be certified by a Licenced Professional Engineer in Ontario.

20.3.6 Air Conditioning System Requirements:

20.3.6.1 The air conditioning system(s) shall have sufficient capacity to simultaneously lower the temperature at midpoints of the driver and patient compartments to a maximum dry bulb temperature of 23°C within 30 minutes of the vehicle being started.

20.3.6.2 The temperature gradient within the patient compartment shall not exceed 5°C at completion of the test.

20.3.7 Air Conditioning Test Procedure:

20.3.7.1 The vehicle (with doors open) shall be heat soaked for a sufficient period so as to obtain a temperature of +35°C / -2.5°C in both compartments and that temperature held to commencement of the time measurement (i.e. EV or engine start).

20.3.7.1.1 If the vehicle is powered by an internal combustion engine, the engine is started, and allowed to run at high idle setting while the transmission is in park or neutral and commence time measurements.

20.3.7.2 A minimum of two verification readings of time and temperature shall be recorded (vehicle start time, 15-minute mark (or pass), and final time) at thermocouple placement as specified in paragraph 20.3.4.1.

20.3.7.3 Air conditioning equipment may be in air recirculation mode and all compartment openings, including partition doors/windows shall be closed.

20.3.7.4 The test shall be conducted with a coolant system charge that does not exceed pressures recommended by the OEM.

20.3.7.4.1 If the OEM coolant system has been added to or modified, then the system pressure at start and finish of the test shall be recorded.

20.3.7.5 Testing shall be certified by a Licenced Professional Engineer in Ontario.

20.3.8 Ventilation System Requirement:

20.3.8.1 Ventilation system(s) shall be,
(1) capable of providing a complete change of ambient air within the vehicle every 2.5 minutes with the vehicle static; and
(2) separately controlled within each compartment.

20.3.8.2 Testing shall be certified by a Licenced Professional Engineer in Ontario.

20.4 Pressure Vessel Retention:

20.4.1 Scope:

This performance standard specifies requirements for mounts and brackets that restrain pressure vessels including all oxygen tank holders, fire extinguisher brackets and mounts for tanks containing pressurized gases installed in ambulances or support vehicles. This is a two-part procedure: (a) tests that the bracket designed to hold the pressure vessel can withstand a 25G force and (b) the bracket mounting can withstand 10 times the weight of the bracket + 25 times the weight of a fully loaded tank(s) which the tank holder was designed to restrain. These tests can be performed together or separately and shall be documented as such with specific details of mounting hardware and locations.

20.4.2 Definitions:

"Tank Holder" means the retention system, including all hardware provided for holding the pressure vessel (tank) in the ambulance or support vehicle.

20.4.3 Requirements:

20.4.3.1 When a force equal to 25 times the weight of a fully loaded tank(s) which the tank holder was designed to restrain, plus the weight of the tank holder is applied to the tank holder, as specified in section 20.4.4,

(1) the tank holder components shall not fail and/or separate along attachment points;

(2) the tank holder or any component thereof shall not separate from the vehicle at any attachment point; and

(3) the force application cylinder shall not disengage from the tank holder.

20.4.3.2 When a force equal to 25 times the weight of a fully loaded tank(s) which the tank holder was designed to restrain, plus 10 times the weight of the tank holder is applied to the tank holder, as specified in section 20.4.4,

(1) the tank holder or any component thereof shall not separate from the vehicle at any attachment point; and

(2) the part of the vehicle to which the tank holder is attached shall not fail and/or separate at any attachment point.

20.4.3.3 Testing shall be certified by a Licenced Professional Engineer in Ontario.

20.4.4 Test Procedure:

20.4.4.1 Each tank holder shall be capable of meeting the specified requirements when tested in accordance with the following procedures:

(1) Using the installed tank holder, insert the force application cylinder and apply the forces specified below (the forces do not need to be applied simultaneously):

(a) the 25 G force to either end of the cylinder so that the action of the force coincides with the longitudinal centreline of the cylinder, in each plane; and

(b) the 25 G force to the cylinder in any direction, in a plane perpendicular to the longitudinal centreline of the cylinder and which passes through the location which corresponds to the location of the centre of gravity of a full tank, for which the holder is designed to restrain.

(2) Using the installed tank holder, apply the forces specified below (the forces do not need to be applied simultaneously):

(a) a force equal to 25 times the weight of a fully loaded tank(s) which the tank holder was designed to restrain, plus 10 times the weight of the tank holder so that the action of the force coincides with the longitudinal centreline of the cylinder, in each plane; and

(b) a force equal to 25 times the weight of a fully loaded tank(s) which the tank holder was designed to restrain, plus 10 times the weight of the tank holder in a plane perpendicular to the longitudinal centreline of the cylinder and which passes through the location which corresponds to the location of the centre of gravity of a full tank, for which the holder is designed to restrain.

20.4.4.2 The ambient temperature shall be between 0°C and 35°C.

20.4.5 Test Equipment:
The test shall be conducted using a force application cylinder that has,
(1) a rigid structure; and
(2) the same physical dimensions as the cylinder that the tank holder was designed to restrain.

20.5 Interior Sound Level Test

20.5.1 Scope:
This performance standard establishes maximum interior sound levels for the patient compartment and the cab of ambulances.

20.5.2 Requirements:

20.5.2.1 The interior sound level in the patient compartment shall not exceed 80 decibels (dB) when measured in accordance with this test performance standard.

20.5.2.2 The interior sound level in the driver compartment shall not exceed 84 decibels (dB) with the cab windows closed or 90 decibels (dB) with the cab windows open 150 mm when measured in accordance with this test performance standard.

20.5.2.3 Testing shall be certified by a Licenced Professional Engineer in Ontario.

20.5.3 Test Conditions:

20.5.3.1 Vehicle doors, windows and vents shall be in the closed position.

20.5.3.2 Air conditioner/heater blower switch in patient and/or driver compartments shall be placed at the highest speed.

20.5.3.3 If the vehicle is powered by an internal combustion engine, the motor vehicle's engine radiator fan drive is equipped with a clutch or similar device that automatically either reduces the rotational speed of the fan or completely disengages the fan from its power source in response to reduced engine cooling loads, the vehicle may be parked before testing with its engine running at high idle or any other speed that the Operator chooses for sufficient time, but not more than 10 minutes, to permit the engine radiator fan to automatically disengage.

20.5.3.4 Siren and all warning lights shall be turned on for full duration of each test, with the siren sounding in the loudest mode of operation.

20.5.3.5 The driver shall be in his/her normal seated driving position.

20.5.3.5.1 The person conducting the test shall be the only other person in the vehicle.

20.5.3.6 This test shall be performed during the following weather conditions:

(1) ambient temperature shall be within a range of 0°C - 30°C;

(2) Wind velocity shall not exceed 18 km/hr;

(3) Other meteorological conditions shall be such that they do not influence the measurements; and

(4) Ambient temperatures, speed and direction of wind related to the vehicle's positioning shall be recorded, including the date, start and finish time of testing.

20.5.4 Test Procedure:

Testing shall be conducted in accordance with the following procedures:

(1) suspend the microphone vertically 150 mm above the normal position of the patient's head on the primary Main Cot;

(2) park the vehicle at a location so that no large reflecting surfaces, such as other vehicles, signboards, buildings or hills are within 15 metres of the vehicle being tested;

(3) if the vehicle is powered by an internal combustion engine, set the vehicle transmission in neutral gear and accelerate engine to 50 to 60 percent of the engine manufacturer's RPM rating. Stabilize the engine at that speed and measure the highest sound level;

(4) If the vehicle is powered by an internal combustion engine, return engine speed to idle and repeat the process as specified above.

(5) two maximum sound levels within 2 decibels (dB) of each other is recorded. Numerically average these two maximum sound level readings. A 2 dB tolerance over the specified sound level limits is permitted to allow for variations in test conditions and capabilities of meters.

(6) repeat the above requirements in the driver compartment by suspending the microphone at a point 150 mm below the interior headliner mid-way between the seated positions of the driver and passenger; and

(7) repeat the above requirements in the driver compartment with both the driver and passenger side windows open 150 mm.

(8) Record results

20.5.5 Test Equipment:

The test shall be conducted using a sound level meter that meets the OH&S requirements of a type 2 meter operating on the A-weighting network with a slow meter response.

20.6 <u>Vehicle Weight Distribution</u>

20.6.1 Scope:

This performance standard establishes requirements for distribution of the weight of an ambulance.

20.6.2 Definitions:

20.6.2.1 "gross vehicle weight rating" or "GVWR" means GVWR as defined in the Canadian Motor Vehicle Act and Regulations;

20.6.2.2 "curb weight" means curb weight as defined in the Canadian Motor Vehicle Act and Regulations;

20.6.2.3 "gross axle weight rating" or "GAWR" means GAWR as defined in the Canadian Motor Vehicle Act and Regulations;

20.6.2.4 "Converted Curb Weight" means the actual weight of the vehicle with all standard OEM equipment; carrying its maximum capacity of fuel, oil and coolant and including the weight of the conversion and all equipment as supplied by the Contractor in accordance with the terms of this *Standard*; and

20.6.2.5 "Payload Allowance" means the actual weight difference determined by the subtraction of the 'Converted Curb Weight' from the 'Gross Vehicle Weight Rating'. The minimum required 'Payload Allowances' for each ambulance configuration is set out in sub-section 18.1 of this *Standard*.

20.6.3 Requirements:

20.6.3.1 The Converted Curb Weight distribution of a properly loaded ambulance, on a level surface, shall be such that not less than thirty percent, and not more than fifty percent of the vehicle's weight is on the front suspension.

20.6.3.1.1 Where the OEM specifies a weight distribution that differs from the above,
(1) the conversion shall conform to that requirement; and
(2) the Contractor shall retain a copy of the OEM specification with the test results.

20.6.3.2 The Converted Curb Weight on the right and left wheel of each axle of the completed vehicle shall be weighed to determine weight distribution.

20.6.3.2.1 The weight between each side shall be,

(1) within five percentage points; and

(2) calculated as follows:

(a) obtain the converted curb weight of each wheel on a given axle;

(b) divide the weight of each wheel by the total converted curb weight of the axle, times (x) 100 = percentage of weight on each side;

(c) subtract the smaller percentage from the larger result; and

(d) if the difference is five percentage points or less, the vehicle has complied with the required weight distribution.

20.6.3.3 The vendor shall complete the following information and submit it with the test certificate:

(1) Gross Vehicle Weight Rating _____ kg

(2) Chassis Curb Weight Distribution:

(a) Chassis Curb Weight _____ kg

(b) Front Axle

Gross Axle Weight Rating _____ kg

Chassis Curb Axle Weight _____ kg

Chassis Curb Left Side Wt. _____ kg

Chassis Curb Right Side Wt. _____ kg

(c) Rear Axle

Gross Axle Weight Rating _____ kg

Chassis Curb Axle Weight _____ kg

Chassis Curb Left Side Wt. _____ kg

Chassis Curb Right Side Wt. _____ kg

(3) Converted Curb Weight Distribution:

(a) Front Axle

Converted Curb Axle Weight _____ kg

Converted Curb Left Side Wt _____ kg

Converted Curb Right Side Wt _____ kg

(b) Rear Axle

Converted Curb Axle Weight _____ kg

Converted Curb Left Side Wt _____ kg

Converted Curb Right Side Wt _____ kg

(c) Converted Curb Weight _____ kg

(d) Payload (GVWR - Converted Curb Wt.) _____ kg

(4) Calculations:

(a) Front/Rear weight distribution calculated as per paragraph 20.6.3.1
Percent weight on front axle = _____%

(b) Front axle left/right weight distribution per paragraph 20.6.3.2
Percent difference side to side =_____%

(c) Rear axle left/right weight distribution per paragraph 20.6.3.2
Percent difference side to side =____ %

20.6.3.4 Ballast shall not be used to achieve proper weight distribution.

20.6.3.5 The ambient temperature shall be between 0°C and 35°C.

20.6.3.6 Testing shall be certified by the Contractor.

20.7 Centre of Gravity Location:

20.7.1 Scope:
This performance standard establishes requirements for the location of the Actual Centre of Gravity (ACG) of an ambulance.

20.7.2 Requirements:

20.7.2.1 The Contractor shall calculate the location of the ACG of the fully converted ambulance.

20.7.2.2 The Contractor shall certify that the ACG is,
(1) at or below the maximum height as set out by the chassis manufacturer; and
(2) in compliance with the longitudinal and lateral limits set by the chassis manufacturer.

20.7.2.3 Ballast shall not be used to achieve proper location of the ACG.

20.7.2.4 The ambient temperature shall be between 0°C and 35°C.

20.7.2.5 Testing shall be certified by a Licenced Professional Engineer in Ontario.

20.8 12 Volt dc Electrical System Performance

20.8.1 Scope:

This performance standard establishes performance requirements and certification criteria for the 12 Volt dc electrical systems of ambulances.

20.8.2 Application:

To meet this performance standard,

(1) Each ambulance shall be tested; and

(2) a certificate explaining the results shall be presented to the Purchaser at the time of delivery.

20.8.3 Requirements:

20.8.3.1 The generating system shall produce the maximum required output at the regulated voltage.

20.8.3.1.1 If powered by an internal combustion engine, the engine RPM shall not exceed the OEM recommended high idle speed.

20.8.3.2 The test certificate that is presented to the Purchaser shall confirm that,

(1) the ambulance was tested as delivered; and

(2) the generating system is capable of supporting the mandatory continuous current loads as per the requirements of this performance standard.

20.8.3.3 If the ambulance is equipped with a 12V dc load management system, then the ambulance shall be tested in the condition which imposes the maximum electrical current load while the load management system is operating.

20.8.3.4 The certificate in paragraph 20.8.3.2 shall clearly state:

(1) the maximum load was restricted by a load management system; and

(2) which electrical functions listed in paragraph 20.8.4.1 were turned off or altered by the load management system in order to restrict the load.

20.8.3.5 Testing shall be certified by the Contractor.

20.8.4 Test Procedures:

20.8.4.1 For the purpose of this test, the following systems (loads), turned on simultaneously, shall constitute the maximum required output referred to in paragraph 20.8.3.1:

(1) ignition system;
(2) headlights (low beam) and all CMVSS running lights;
(3) windshield wipers (low speed);
(4) cab air conditioning (at coldest setting with highest blower speed);
(5) 2-way radio in receive mode (or 5 amp load if radio not installed);
(6) patient compartment ceiling lighting (on high setting);
(7) patient compartment air conditioning (at coldest setting with highest blower speed);
(8) emergency warning light system on primary mode and wig-wags on;
(9) 10 amp medical load or equal;
(10) left and right scene lights; and
(11) rear scene light.

20.8.4.2 Ammeters shall be installed to measure the maximum load imposed on the generating system.

20.8.4.3 Voltmeters shall be installed to separately monitor the voltage of each battery (or bank of batteries)

20.8.4.4 The vehicle shall be started and set in a condition (in compliance with paragraph 20.8.3.1.1) which will maintain the voltage at all batteries between 12.5 and 15 volts for the duration of the test.

20.8.4.5 If the vehicle is powered by an internal combustion engine, The vehicle shall be run for fifteen minutes prior to start of test period.

20.8.4.5.1 All the loads listed in paragraph 20.8.4.1 shall be turned on and the test period shall begin.

20.8.4.5.2 The test period shall be fifteen minutes.

20.8.4.6 The ammeter reading(s) (in amps) shall be recorded at the following intervals:

(1) the start of the test;

(2) the 7 minute mark; and

(3) the 15 minute mark.

20.8.4.7 The voltage at each battery or battery bank shall be monitored for the duration of the test.

20.8.4.7.1 The highest and lowest voltage reading of each battery or battery bank shall be recorded.

20.8.4.7.2 At minimum the readings shall be conducted at the following intervals:

(1) the start of the test;

(2) the 7 minute mark; and

(3) the 15 minutes mark.

20.8.4.8 Subsequent to 12 Volt DC Electrical System Performance test, all added optional components shall be identified by their amperage load with a “not to exceed” caution label indicating the maximum amperage to maintain battery reserve.

20.8.5 Test Conditions:

20.8.5.1 The ambulance shall be complete and ready for delivery including all equipment as specified by the Purchaser.

20.8.5.2 All batteries shall be fully charged.

20.8.5.3 Ambient temperature shall be a minimum of 17°C.

20.8.5.3.1 Actual ambient temperature shall be recorded.

20.8.5.4 If the vehicle is powered by an internal combustion engine, the under hood maximum temperature reached shall be recorded.

20.10 Antennae Ground Plane Test:

20.10.1 Antenna Ground Plane:

20.10.1.1 The antenna ground planes shall be checked by the Contractor to ensure that they are properly grounded to the chassis of the vehicle.

20.10.2 The resistance between the ground plane and the chassis frame shall not exceed one ohm.

20.10.3 The resistance between the ground plane and the negative battery shall not exceed 0.5 ohms.

20.10.4 Testing shall be certified by the Contractor.

20.11 Interior Lighting Test

20.11.1 Scope:

This performance standard establishes the minimum interior illumination level for the patient compartment of ambulances.

20.11.2 Requirements:

Normal illumination within the patient compartment shall not be less than:

(1) 160 Lux (lx) measured along the centreline of the clear walking path at floor level located in the area between the rear and side doors; and

(2) 376 lx on at least 90% of the surface area of the Main Cot(s).

20.11.2.1 These limits shall be achieved without outside ambient light and with the Patient Compartment lights operating at the "high" setting.

20.11.2.2 The ambient temperature shall be between 0°C and 35°C.

20.11.2.3 Testing shall be certified by a Licenced Professional Engineer in Ontario.

20.11.3 Test Procedures

20.11.3.1 Testing shall be conducted using the following procedures:

(1) with the cot installed and top of the cot marked into squares not larger than 150mm x 150mm, record readings from the centre of each square (see dia. 1);.

(2) with the cot installed measure along centreline of the walking path between rear and side door openings, at minimum, there shall be 10 readings along the path evenly spaced (see dia. 1), record the readings.

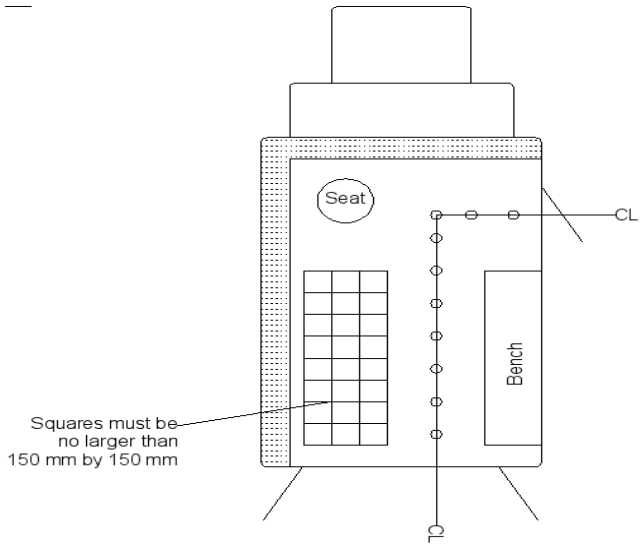

Diagram 1

20.12 Oxygen System Pressure Test

20.12.1 Scope:

This performance standard establishes the test requirements for the on board oxygen system.

20.12.2 Requirements:

20.12.2.1 Each ambulance shall be tested.

20.12.2.1.1 A certificate shall be presented to the Purchaser at the time of delivery.

20.12.2.2 Testing shall be certified by the Contractor.

20.12.3 Test Procedure:

20.12.3.1 Testing shall be conducted in accordance with the following procedures:

(1) When system is completed, a cylinder of medical air, nitrogen gas or equal with pressure regulator set to delivery 1034 kPa will be connected to the oxygen system inlet. Turn the cylinder on to pressurise the system and inspect all joints for leaks. Correct any leaks noted.

(2) Attach a pressure gauge (0-1380 kPa) securely to the oxygen outlet at the action wall

(3) Pressurise the system to 1034 kPa and turn off the cylinder leaving it attached to the inlet connector for a minimum of thirty minutes. No drop in system pressure is allowed.

(4) After successful completion of testing, the system shall be capped with plastic end caps and tagged with a certificate tag showing the:

(a) start time;
(b) initial pressure;
(c) end time;
(d) final pressure;
(e) date; and
(f) signature of tester.

20.15 <u>Body Door Components Test</u>

20.15.1 Scope:

This performance standard establishes requirements for the testing of all body door retention components on the side entry door and rear door(s) as installed.

20.15.2 Application:
This performance standard shall apply to all ambulances when the side entry and/or rear doors are supplied and installed by someone other than the OEM.

20.15.3 Requirements:

20.15.3.1 Each door shall be tested and certified for compliance to CMVSS 206 and all other relevant CMVSS Regulations.

20.15.3.2 The ambient temperature shall be between 0°C and 35°C.

20.15.3.3 Testing shall be certified by a Licenced Professional Engineer in Ontario.

20.16 Emergency Lighting Requirements

20.16.1 Scope:
This performance standard establishes minimum performance of an individual emergency warning light and the primary emergency lighting system.

20.16.2 Requirements:

20.16.2.1 Each individual emergency light utilized as part of the primary emergency lighting system shall meet or exceed SAE J845 ‘Optical Warning Devices for Authorized Emergency, Maintenance, and Service Vehicles’.

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20.16.2.2 The primary emergency light system shall be measured and certified to meet or exceed per requirement set as set in,
(1) this Standard document;
(2) SAE J2498 sections 1 to 5 inclusive; and

(3) SAE J2498 sections 6.2 and 7 of 'Minimum Performance of the Warning Light System used on Emergency Vehicles.'

20.16.2.3 The minimum optical requirements for any size of vehicle shall be as stated in the table below;

Minimal Optical Power Requirement for Emergency Vehicles

Zones	Level	Zone Total at H	Min. Value at Any H Point	Min. Value at Any +/-5º Point
A	Upper	1,000,000	10,000	3,500
B	Upper	400,000	10,000	3,500
C	Upper	800,000	10,000	3,500
D	Upper	400,000	10,000	3,500
A	Lower	150,000	3,750	1,300

NOTE: All values are in candela-seconds/minute.
H = Horizontal plane passing through the centre of the light source.

20.16.2.4 The following shall be the Permissible Colours by zone while primary emergency lights are in operation:

Colour	Zones
Red	Any Zone
White	Any Zone
Blue	A Upper, B, C and D
Yellow	Not Permitted
Green	Not Permitted

20.16.2.5 Testing shall be certified by a Licenced Professional Engineer in Ontario.

20.16.3 Test Reports:

At minimum, the test reports shall include:

(1) a detailed layout of light locations on the vehicle;

(2) details of each light that is part of the primary circuit including make, part number and colour;

(3) detailed flash rate and pattern;

(4) detailed switching parameters;

(5) a separate list of equivalent substitutions by location; and

(6) a clear statement of compliance to SAE J845, relevant sections of J2498 and this Standard.

20.17 Carbon Monoxide Levels

20.17.1 Scope:

This performance standard establishes performance requirements for maximum levels of concentration of carbon monoxide (CO).

20.17.2 Requirements:

20.17.2.1 The CO content in the ambient air and the vehicle shall be determined through a series of operating performance test periods.

20.17.2.2 The resultant difference between the highest readings in each of the three (3) operating states and the average ambient condition shall not exceed 10 ppm of CO.

20.17.2.3 Testing shall be certified by a Licenced Professional Engineer in Ontario.

20.17.3 The following shall be the Test Conditions:

(1) Calibrate equipment at the start of test.

(2) Open vehicle doors and auxiliary windows and ventilate with fresh air for 10 minutes with the engine off.

(3) Do not conduct testing during high wind periods (above 25 kph) or during any type of precipitation.

20.17.4 Test Procedure:

20.17.4.1 The test shall be conducted in accordance with the following procedures:

20.17.4.1.1 Detail how meter was calibrated at start of test and confirm at end.

20.17.4.1.2 Sample and record the ambient air around the vehicle;

20.17.4.1.3 If the vehicle has an internal combustion engine, start and idle the engine in parked position for 10 minutes of 20.17.4.1.4 measurements.

20.17.4.1.4 Close the windows and doors, perform following measurements:

(a) monitor and record the CO in the driver compartment, around the doors, windows, floor, engine cowling and openings from engine compartment for the first 5 minutes;

(b) monitor and record the CO in patient compartment, at head of Main Cot for the remaining 5 minutes .

20.17.4.1.5 Drive the vehicle for 10 minutes on traffic laden city streets (urban speeds of 30 to 60 kph);

(a) repeat sampling during drive time as stated in paragraphs 20.17.4.1.4 (a and b) and;

(b) record the results.

20.17.4.1.5 Drive the vehicle for 10 minutes at highway speeds of 80 to 100 kph,

(a) repeat sampling during drive time as stated in paragraphs 20.17.4.1.4 (a and b) and;

(b) record the results.

20.17.4.1.6 Stop the vehicle and repeat paragraph 20.17.4.1.2.

20.17.4.1.7 Confirm calibration of meter at end of test, record results

20.17.5 Test Equipment:

20.17.5.1 The test shall be conducted using a MSA Model I or Model II CO monitor or equivalent instrument with an accuracy of +/- 4%.

20.18 Load Test for Grab Rail/Handles

20.18.1 Scope:

This performance standard establishes the minimum static load requirements for all grab rails and grab handles.

20.18.2 Requirement:

20.18.2.1 A grab rail and grab handle shall not detach or loosen during the load application of 227 kg in noted directions.

20.18.2.2 The ambient temperature shall be between 0°C and 35°C.

20.18.2.3 Testing shall be certified by a Licenced Professional Engineer in Ontario.

20.18.3 Test Procedure - Grab Rail:

20.18.3.1 The test shall be conducted in accordance with the following procedures:

(1) with the vehicle parked on a flat surface, measure the grab rail for straightness and the space between top sides of rail and headliner or supporting cabinetry;

(2) attach a force application device to the grab rail at a midpoint between two securing points and incrementally apply the required load in a plane parallel to the fasteners for the rail;

(3) hold the load for two (2) minutes and release;

(4) repeat paragraph 20.18.3.1(2 and 3) at least one other midpoint between two securing points;

(5) repeat the above test procedures applying the load perpendicular to the initial plane; and;

(6) examine and measure the grab rail for loosening or bending and record the results.

20.18.4 Test Procedure - Grab Handles:

20.18.4.1 The test shall be conducted in accordance with the following procedures:

(1) attach a force application device to the midpoint of the grab handle and incrementally apply the required load in a plane parallel to the fasteners for the handle;

(2) hold the load for two (2) minutes and release;

(3) repeat the test procedures applying the load perpendicular to the initial plane;

(4) examine the grab handle for loosening and record the results.

20.18.4.2 The above test procedures shall be completed for each different material the grab handles are secured to.

20.19 Siren/Public Address System Sound Levels

20.19.1 Scope:

This performance standard establishes the minimum sound level output for the siren / public address system.

20.19.2 Requirements:

20.19.2.1 The siren shall be capable of producing a continuous warning sound that is,

(1) at a minimum level of 123 dBA in “wail” mode,

(2) A-weighted,

(3) at 3 meters,

(4) on axis,

(5) capable of producing a continuous warning sound at a minimum level of 122 dBA in “yelp” mode, and

(6) at a frequency in the range of 500 to 2000 Hz maximum.

20.19.2.2 If the vehicle is powered by an internal combustion engine, record RPM used during test (RPM shall not exceed 60% of the OEM recommended high idle speed).

20.19.2.3 Testing shall be certified by a Licenced Professional Engineer in Ontario.

20.19.3 Test Conditions:

20.19.3.1 Vehicle doors, windows and vents shall be in the closed position.

20.19.3.2 The siren shall be sounded in its loudest mode of operation.

20.19.3.3 This test shall be performed during the following meteorological conditions:

(1) ambient temperature shall be within range of 0ºC to 30ºC;

(2) wind velocity shall not exceed 18 km/hr;

(3) other meteorological conditions, e.g. rain, fog, etc shall be such that they do not influence the measurements; and

20.19.4 Test Procedure:

20.19.4.1 The test shall be conducted in accordance with the following procedures:

(1) position the meter on a horizontal plane three (3) meters forward of the centreline of the vehicle's hood and one meter above ground level;

(2) park the vehicle at a location so that no large reflecting surfaces, such as other vehicles, signboards, buildings or hills are within 15 metres of the vehicle being tested;

(3) two maximum sound levels within 2 decibels (dB) of each other is recorded. Numerically average these two maximum sound level readings.

(4) if the vehicle is powered by an internal combustion engine, it is permitted to set the vehicle transmission in neutral gear and accelerate engine to 50 to 60 percent of the engine manufacturer's RPM rating;

(5) turn on the siren and measure the highest sound level;

(6) if the vehicle is powered by an internal combustion engine, return the engine speed to idle and repeat the process as specified above until two maximum sound levels within 2 decibels (dB) of each other are recorded; and

(7) numerically average these two maximum sound level readings.

(8) Record RPM used during test.

(9) Record voltage at conversion battery.

(10) ambient temperature, speed and direction of wind related to the vehicle's positioning shall be recorded.
(11) record the date, start and finish time of testing.

20.19.5 Test Equipment:

The test shall be conducted using a sound level meter that meets the OH&S requirements of a type 2 meter operating on the A-weighting network with a slow meter response.

20.20 *Intentionally Deleted*

20.21 Passenger and Patient Safety Restraints Load

20.21.1 Scope:

This performance standard establishes requirements for passenger and patient safety restraints.

20.21.2 Requirements:

20.21.2.1 All seat belts and seats installed by the Contractor for the use of seated passengers shall be tested and certified for compliance to CMVSS 207, 208, 209, 210 and all other relevant CMVSS regulations.

20.21.2.1.1 Where there is no regulation under CMVSS (such as a side-facing seat) the material and design shall meet the spirit of CMVSS regulations for passenger restraint.

20.21.2.1.2 All installations shall be tested to the relevant CMVSS standards.

20.21.2.2 Seat belts installed by the Contractor to restrain patients in a prone position shall be tested and certified to the intent of CMVSS 210 by the application of a total force of 2267 kg divided equally between the seat belt assemblies.

20.21.2.3 The ambient temperature shall be between 0°C and 35°C.

20.21.2.3 Testing shall be certified by a Licenced Professional Engineer in Ontario.

20.22 10 G restraint test

20.22.1 Scope:

This performance standard establishes the minimum static load requirements for securing equipment or material weighing over 14kg (30lbs) within the vehicle.

20.22.2 Requirements:

20.22.2.1 When a force equal to 10 times the total weight of the intended equipment or material, and the weight of the restraint is applied to the restraint then:

(1) the restraint shall not fail and/or separate along attachment points; and

(2) the restraint or any component thereof shall not separate from the vehicle at any attachment point.

20.22.2.2 The ambient temperature shall be between 0°C and 35°C.

20.22.2.3 Testing shall be certified by a Licenced Professional Engineer in Ontario.

20.22.3 Test Procedure:

20.22.3.1 The test shall be conducted in accordance with the following procedures:

(1) attach a force application device to the restraint and incrementally apply the required load in a plane parallel to the fasteners;

(2) repeat the test procedures applying the load perpendicular to the initial plane;

(3) examine the restraint and record the results.

20.22.3.2 The above test procedures shall be completed for each different material the restraint is secured to.

20.23 Occupant Restraint Load Test

20.23.1 Scope:
This performance standard establishes the minimum static load requirements for the occupant restraint device and its fasteners.

20.23.2 Requirements:

20.23.2.1 Fasteners shall be tested and certified to withstand a force by the application of a total force of 2268 kg divided equally between the fasteners securing occupant device.

20.23.2.2 The occupant restraint device installed at side facing seats by the Contractor to comply with this standard shall be tested and certified to withstand a force of 1361 kg.

20.23.2.3 The ambient temperature shall be between 0°C and 35°C.

20.23.2.4 Testing shall be certified by a Licenced Professional Engineer in Ontario.

20.23.3 Test Procedure - Fasteners:

20.23.3.1 The test shall be conducted in accordance with the following procedures:

(1) attach a force application device to the fastener, apply the required load in a plane parallel to the fastener;

(2) repeat the test procedures applying the load perpendicular to the initial plane; and

(3) examine the fastener(s) and record the results.

20.23.3.2 The above test procedures shall be completed for each different material the fastener is secured to.

20.23.4 Test Procedure - occupant restraint

20.23.4.1 The test shall be conducted in accordance with the following procedures:

(1) apply a force in a forward direction at the centre of the device using a suitable solid block to distribute the load; and

(2) examine the restraint device and fastener(s) and record the results.

20.24 <u>Occupant Head Protection Zone</u>

20.24.1 Scope: This test establishes the minimum acceptable dimension for an occupant seating position.

20.24.2 Purpose: To ensure the measurement of the occupant's head protection zone is preformed correctly for all makes and models of Ambulances.

20.24.3 Definitions:

20.24.3.1 "Seating position" means any seating space that provides a seat belt to restrain the occupant.

20.24.3.2 "Head protection zone" means the space above a seating position that is to be free of contact surfaces.

20.24.3.3 "Test Fixture" is a ridged rectangular structure weighing not more than 27kg and has the following dimensions, 1093mm (43") high x 458mm (18") wide x 381mm (15") deep (All dimensions have a tolerance of +/- 2mm). The Test Fixture is to be clearly marked, with TOP and FRONT as illustrated in figure #1.

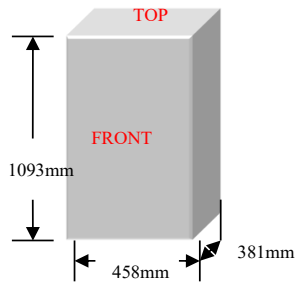

Figure #1

20.24.4 Requirements:

20.24.4.1 Each seating position within the patient's compartment shall be validated using the Test Fixture.

20.24.4.2 Pictures shall form part of the test report for each seating position.

20.24.4.3 Testing shall be certified by the Contractor.

20.24.5 Test procedure:

20.24.5.1 The test is conducted in accordance with the following procedures:
(1) the vehicle shall be parked on a level surface;
(2) all seating positions shall have finished cushions installed;
(3) for each seating position, place the Test Fixture, top up, onto the seat, with the front of the Test Fixture facing the direction of the intended occupant;

(4) the Test Fixture shall not overhang the front of the seat cushion, unless it is a Type 2 ambulance and it is not a contact surface within the head protection zone set out in section 20.24.3.2.
(5) no permanent objects shall not be in contact with the Test Fixture;
(6) the test shall be documented; and
(7) the test results shall be recorded.

ANNEX A

EMERGENCY RESPONSE VEHICLE REQUIREMENTS

Ontario

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ANNEX A - EMERGENCY RESPONSE VEHICLE REQUIREMENTS

A1. SCOPE

Annex A describes the minimum acceptable requirements for Emergency Response Vehicles (ERV) intended for use in ambulance services in the Province of Ontario.

A2 DEFINITIONS

A2.1 "Emergency Response Vehicle" (ERV) shall have the same meaning as defined in Ontario regulation 257/00 and the vehicles that are recognized as ERVs under this *Standard* shall consist of the following:

(1) "ERV - responder" means a vehicle that responds on a regular basis to emergency medical incidents.
(2) "ERV support" means an equipment and supply carrier that responds to support ambulance service operations at major emergency medical incidents
(3) "ERV command" means a vehicle that responds to provide operational command and control functions for major emergency medical incidents.

A3. GENERAL REQUIREMENTS

A3.1 Each ERV shall comply with the following documents, listed in order of precedence:

(1) the Canadian Motor Vehicle Safety Standards (CMVSS);
(2) applicable sections of the HTA;
(3) Except where exemptions apply, the applicable sections of the Ontario Provincial Land Ambulance & Emergency Response Vehicle Standard (the *Standard*);
(4) any criteria established by the OEM for the conversion of chassis to Emergency Response Vehicles; and
(5) all relevant Standards and Recommended Practices of technical agencies and bodies referred to in this *Standard*.

A3.2 Each ERV shall comply with the version of the documents listed in section A3.1 that were in effect at the time that the manufacturing of the ERV was completed.

A3.3 Each ERV shall be,

(1) constructed with the operating accessories as required herein; and

(2) furnished with such modifications and attachments as may be necessary to enable the vehicle to function reliably and efficiently in its intended operating environment.

A3.4 Each ERV certified for use in Ontario under previous versions of the *Standard* shall be deemed to continue to be certified under the current version until sold or modified in contravention of the version in effect at the time of the change.

A3.5 When an ERV is equipped with 110v electrical power,

(1) each outlet shall have an indication that power to the outlet(s) is present.

(2) such installations shall be completed in accordance with relevant Ontario law governing 110v installations in vehicles.

(3) all electrical installation shall be inspected and approved by an inspector certified under relevant Ontario law.

(4) an approved seal or certificate shall be affixed adjacent to the installation.

A4. EXTERIOR IDENTIFICATION

A4.1. The exterior markings and design of an **ERV – responder** vehicle shall readily identify the vehicle as an Emergency Response Vehicle to all observers.

A4.1.1 This identification, in conjunction with the activated emergency warning systems shall alert the public to the purpose and need to yield the right of way to this vehicle.

A4.2 The exterior markings and design of an **ERV – support** vehicle shall readily identify the vehicle as an Emergency Response Vehicle to all observers. This identification, in conjunction with the activated emergency warning systems shall alert the public to the purpose and need to yield the right of way to this vehicle.

A4.3 **Each ERV - command vehicle** shall comply with the certified ambulance service's municipally approved Visual Identification Program and may with the written authorization of the municipality be exempt from exterior markings as identified in A.4.1.1.

A5. EMERGENCY WARNING SYSTEM

A5.1 Design Parameters

A5.1.1 The emergency lighting system shall utilize flashing lights.

A5.1.2 Subject to exemptions set out below, the emergency lighting system design shall abide by the following principles:

(1) white (i.e. clear) light or blue light will be used to gain the viewer's attention;
(2) red light will convey the "emergency" message;
(3) amber light will convey the "caution" message;
(4) no colour other than red, white, blue and amber shall be used;
(5) any flashing lights of the same light type (e.g. incandescent, halogen strobe or Neobe®) and colour shall flash simultaneously, then alternate to the other colour along the same side and plane; and
(6) amber lights(s) shall not flash at the same time as other emergency lights facing in the same direction.

A5.1.3 The following shall be exemptions to the emergency lighting system design in section A5.1.3;

(1) the white grille lights (Wig Wags), which are not required to flash in or with any other lights on the vehicle;
(2) traffic directional devices ;
(3) red or amber stop turn signalling devices required under the HTA; and
(4) inside exterior door warning lights.

A5.1.4 The emergency lighting system shall be comprised of components and devices that comply with the requirements of SAE J576, J578, J591, J595, J1318 and J1889 as applicable to the unit.

A5.1.5 The primary emergency lighting system shall achieve all criteria and performance testing standards as set out in section 20 of the *Standard*.

A5.1.5.1 The primary emergency lighting system shall be,
(1) wired to operate independently of the other warning lights; and
(2) controlled by a separate switch on the drivers console.

A5.1.6 The primary emergency lights shall include:
(1) 360 degree warning lights;
(2) Grille lights; and
(3) Intersection lights.

A5.2 <u>360 Degree Warning Lights</u>

A5.2.1 Each Emergency Response Vehicle (ERV) shall be equipped with an array of red and either white or blue flashing lights installed on the front, sides and rear of the ERV which are visible for 360 degrees around the vehicle.

A5.2.1.1 This array shall include a minimum of two (2) red and one (1) white or blue light in each direction.

A5.2.1.2 The red light(s) shall be in the extreme upper outer corner unless the light head utilizes LEDs that perform the function of both red and white or blue.

A5.3 Grille Lights

A5.3.1 Each ERV shall have grille lights installed on the vertical plane of the grille such that:
(1) the location is in compliance with OEM considerations regarding air flow through the grille;
(2) the lights are visible in the rear view mirror(s) of a passenger car preceding the ambulance;
(3) there are two (2) red lights; and
(4) there are two (2) white lights (Wig Wags) (which may be the high beam of the OEM headlights when permitted by the OEM) which flash in an alternating or random sequence.

A5.3.1.1 With respect to subsection A5.3.1(4), when an alternating pattern is selected of the same type light as the red emergency grille lights, the flash rate shall be,
(1) faster;
(2) wired to operate independently of the other warning lights; and
(3) controlled by a separate switch on the driver's console.

A5.4 Intersection Lights

A5.4.1 Red and either white or blue intersection lights shall be installed at each of the front lower corners of each ERV.

A5.5 Siren - Public Address System

A5.5.1 Each ERV shall have a combination siren and public address system that,
(1) is capable of producing high/low horn tones and other warning sounds;
(2) is complete with a microphone and speaker; and
(3) achieves all criteria as detailed in section 20 of the *Standard.*

A5.6 Backup Warning Alarm

Each ERV shall have a heavy-duty reverse warning signal that operates when the gear selector is in "REVERSE".

A5.6.1 Where a disable switch is installed, this switch shall be programmed to reset automatically prior to the lapse of 60 seconds from the time the switch is disabled.

A6 2-WAY RADIO INSTALLATIONS

A6.1 General

A6.1.1 Each ERV design shall provide for the installation of radio equipment.

A6.1.2 The term "radio equipment" shall include all peripheral equipment associated with the radio, including:

(1) a mobile radio unit which consists of the mobile radio transceiver or the FleetNet mobile radio repeater package;

(2) the front control head, microphone and speaker;

(3) all associated antennas

(4) cables between the control head, speaker, mobile radio unit, battery and antenna and;

(5) portable radio

A6.2 Radio Equipment Mounting

A6.2.1 Each ERV shall have a designated area for mounting radio equipment to ensure uninterrupted operation that:

(1) provides adequate access for installation or removal and periodic maintenance;

(2) provides protection from physical damage; and

(3) is ventilated.

A6.2.2 A mounting position shall be provided for the radio control head and microphone clip in the driver's area that allows equal access for both the driver and passenger.

A6.2.3 The mounting of radio equipment shall not:

(1) interfere with other control functions;

(2) block vents;

(3) block the line of sight for gauges or instruments;

(4) interfere with air bag type passenger restraint systems; or

(5) encroach into the paramedic seating area.

A6.3 Antenna Ground Plane

A6.3.1 Where the ERV is equipped with a non-metallic roof, an antenna ground plane that is a minimum of 1 square metre shall be moulded into the roof.

A6.3.2 The ground plane shall,
(1) be grounded to the vehicle frame; and
(2) meet criteria as detailed in section 20 of this *Standard.*

A6.3.3 To enable installation of an antenna mount, the total thickness of the roof and ground plane shall not exceed 10 mm for a 75 mm diameter circle at each antenna mount point.

A6.3.4 At each antenna mount point, the lower surface of the ground plane shall be exposed to enable contact with the antenna mount.

A6.4 Cable Routing

A6.4.1 Cables to radio equipment shall be protected from wear and damage. This may include any or all of the following:
(1) passages between sections of cabinetry;
(2) fixed conduits with a minimum inside dimension of 75x50 mm; and
(3) removable channels with a minimum inside dimension of 60x35 mm.

A6.4.2 Maximum cable routing length between the radio control head and mobile radio unit shall not exceed 5.2m (17ft).

A6.5 Installation of Radio Equipment

A6.5.1 All radio equipment shall be installed so that all fasteners and other means of attachment used in the installation or relocation into the ERV provide a minimum restraining force of at least 10 times the weight of the component and/or object being secured.

A6.5.2 All attachments shall be fastened in a manner that will preclude unintentional loosening.

A6.5.3 Mounting of radio equipment shall not:

(1) interfere with other control functions;

(2) block vents or instruments; or

(3) interfere with air bag passenger restraint systems.

A7. STORAGE

A7.1 Each ERV shall be designed with adequate storage arrangements to safely contain the minimum mandatory equipment specified by the PES.

A7.1.1 Each ERV shall have one (1) fire extinguisher that is,

(1) 5lb C-UL approved;

(2) rating 3-A, 10 BC; and

(3) rechargeable type with pressure gauge and service inspection tag,

A7.2 All equipment or material carried in the cab or passenger compartment of an ERV shall be appropriately secured to ensure the safety of the occupants.

A7.2.1 All storage compartments, securing straps, brackets and cargo nets shall be capable of retaining at least 10 times the total weight of component, fasteners, equipment or material they are designed to restrain.

A7.3 All oxygen cylinder cradles and fire extinguisher brackets shall be designed and mounted to comply with all criteria for pressure vessel retention as set out in section 20 in the *Standard*.

A8 INTERIOR SIGNS AND LABELS

A8.1 All weight related labels shall,

(1) contain the maximum weight rating;

(2) be located in such a way that does not restrict the occupant's ability view; and

(3) indicate weights in both lbs and kg.

A8.2 Each ERV shall have the following labels;

(1) each pressure vessel holder shall be labelled with the type, size of tank(s) and maximum weight of tank(s) it is intended to restrain,

(2) accessory receptacles and other electrical outlets shall be labelled with their intended use (e.g.12V, 20amp or 110VAC 15amp)

(3) each storage area, securing strap, bracket and/or cargo net

A9. CERTIFICATION OF AN EMERGENCY RESPONSE VEHICLE

A9.1 Prior to being in service**,** every new ERV model intended to be used in the Province shall be certified in accordance with this *Standard* by the Director.

A9.1.2 The process for Ministry certification of an ERVs may include site visits to the Contractor's production and testing facilities at times when the Director determines that manufacturing or performance standard testing of an ERV intended for use in Ontario is occurring,

A9.1.3 To facilitate the site visits described in section A9.1.2, the Contractor shall:

(1) provide the Director with a minimum of 60 calendar days notice prior to commencing testing of ambulances;

(2) if the Contractor is American, ensure that the models proposed the Contractor are included in the current edition of the Transport Canada 'List of Vehicles Admissible from the United States'.

A9.1.4 Certification of a vendor shall,

(1) be done by ERV type as defined in A2.1, and

(2) remain valid until such time as determined solely by the Director, EHRAB.

A9.1.5 The Contractor shall apply for certification of an ERV type by submitting the following documentation:

(1) a letter signed by the Contractor stating that the ERV type as offered for use in the Province of Ontario is in compliance with all provisions of this Standard;

(2) a copy of all test certificates and technical reports required for the Performance Standards (Section 20);

(3) if applicable a copy of the "Ministerial Authorization" for the use of the National Safety Mark issued by Transport Canada relevant to the model for Canadian Contractors.

(4) a completed copy of Annex E noting compliance with specified sections of the Standard, signed by an officer of the Contractor, dated and notarised; and

(5) included with the test submission shall be model or part numbers of products tested and a pictorial record of the tests;

A9.1.6 Each ERV type certification will be granted solely at the discretion of the Director and shall be in writing.

A9.1.7 Each ERV individual test certificates shall remain valid for a maximum of three (3) years so long as they are applicable to the vehicle model, component(s) and equipment offered as tested under this *Standard*.

A9.1.7.1 After the expiry of the three (3) year period, and subject to sub-section A9.1.8, the test certificate then shall require recertification.

A9.1.8 In lieu of recertification of a test, a Contractor may make application to the Director of the Emergency Health Regulatory and Accountability Branch to have the term of an individual test certificate extended for an additional period of two years from the original test date.

A9.1.8.1 This application shall,
(1) be completed prior to expiry of original certificate; and
(2) include a detailed argument, based on sound engineering principles, explaining why the extension should be granted.

A9.1.9 Extensions shall be,
(1) granted solely at the discretion of the Director; and
(2) in writing.

A9.1.9.1 A maximum of one extension shall be allowed for any individual certification.

A9.2 If an Ambulance is converted or its primary purpose is to be used as an ERV, then,

(1) only those areas modified to fit this new role shall require certification; and

(2) the remainder of the unit shall be deemed to be in compliance with the *Standard* and Annex A, providing the ownership remains unchanged and the word ambulance is removed or covered.

A9.3 Certificates and Reports

A9.3.1 The Contractor shall,

(1) retain on file the original copy of all currently valid test certificates required under the Performance Standards set out in section 20 of this *Standard;* and

(2) complete technical reports in support of those certificates.

A9.3.2 Each individual test certificate shall clearly state:

(1) the number and title and date of revision of the Performance Standard;
(2) the date and location when the test was performed;
(3) the name of the company or organization which completed the test;
(4) the name and title of the person who has verified the test results complete with signature (and proof of License for the engineer);
(5) that the test requirements were passed;
(6) the chassis type(s) and ERV type(s) for which the certificate is valid;
(7) the make, model, year and Vehicle Identification Number of the tested chassis;
(8) the make, model, type and year of the tested ERV conversion;
(9) the make, model, and other identifying marks on any components being tested or that make up systems which are being tested; and
(10) the make, model, and other identifying marks on any components being tested or that make up systems which are being tested and include photographs and/or diagrams that clearly distinguish the components or systems for future reference.
(11) a unique test certificate reference number.

A9.3.3 Each technical report held in support of a test certificate shall contain at minimum:

(1) all information required on the test certificate;
(2) all data collected in performance of the test including any descriptive or explanatory notes, pictures, videos;
(3) a description of equipment and facilities used to perform the tests; and
(4) next calibration due date.

A9.3.4 The following tests shall be completed by a Licensed Professional Engineer in Ontario and certified as conforming to these Performance Standards.

(a) Pressure Vessel Retention (20.4);
(b) Interior Sound Level Test (20.5);
(c) Centre of Gravity Location (20.7);
(d) Body Door Components Test (20.15);
(e) Emergency Lighting Requirements (20.16);
(f) Carbon Monoxide Levels (20.17);

(g) Load Test for Grab Rail/Handles (20.18);

(h) Siren/Public Address System Sound Levels (20.19);

(i) 10G Restraint Test (20.22)

A9.3.5 The following tests shall be completed by the Contractor and certified as conforming to these Performance Standards.

(1) Antenna System Test (20.10);

A9.4 Certificate Distribution

A9.4.1 At the time of delivery of each ERV, the Contractor shall provide a copy of:

(1) ERV type certificate signed by the Director;

(2) a completed Annex E Compliance Checklist,

A9.4.2 Non-Compliant Vehicles

Each ERV supplied as a non-compliant ERV at the request of the Purchaser shall have a certificate that;

(1) is annotated as "Non-Compliant Vehicle– See Attached", and

(2) specifically sets out the areas of non-compliance in Part II.

A9.4.3 Where an ERV is non-compliant, the Operator prior to being placed into service shall ensure that:

(1) the areas of non-compliance are rectified; and

(2) retain on file all documentation and testing information.

A9.5 Continued Compliance

A9.5.1 The Operator shall ensure that the ERV maintains its compliance with the applicable version of the *Standard*.

A9.5.2 Any subsequent modifications or changes made to the ERV shall be in accordance with the version of the *Standard* in effect at the time of the modification or change.

A9.5.3 Where modifications or changes occur to components or materials that require testing under the Performance Standards, the Operator shall ensure that new testing is undertaken and completed.

A9.5.4 The Operator shall maintain on file,
(1) all necessary documentation;
(2) new testing information; and
(3) confirmation of compliance with respect to the modified or changed ERV.

A9.5.4.1 The information specified in A9.6.4 shall be made available for inspection by the Ministry.

A9.6 Compliance Review Program

A9.6.1 The Ministry shall maintain a program for the purpose of monitoring the compliance of the Contractor with the requirements under this Standard.

A9.6.2 The program shall include site visits to the Contractor's production facilities at times while manufacturing and/or performance standard testing of ERVs intended for use in Ontario is occurring or at such other reasonable times as determined by the Director.

A9.6.3 To aid in scheduling Ministry compliance reviews the Contractor shall regularly provide the Director with a minimum of 60 calendar days' notice prior to commencing conversion or testing of ERVs being produced for use in Ontario.

A9.6.4 The Contractor shall make available to designated Ministry personnel, for inspection and review, all documentation relating to the production and certification testing of ERVs being produced for use in Ontario.

A9.6.5 Where the Contractor employs sub-contractors, testing agencies or consultants to provide goods or services,
(1) the process described in sub-sections A9.7.2 and A9.7.3 shall apply; and
(2) the Contractor shall arrange access for Ministry personnel to the facilities of its sub-contractors, testing agencies or consultants to observe activities relating to the manufacturing and/or performance standard testing of ERVs intended for use in Ontario.

A9.7 Revocation and Suspension of an ERV Certification

A9.7.1 The Director may revoke or suspend an ERV type certification where:
(1) a revision to, or a new version of, the Standard requires new testing certification of any Performance Standards listed in sub-section A9.3.5 or A9.3.6;
(2) the Contractor fails to provide required notification, documentation and/or access to production and testing facilities as described in sub-section A9.7.4 and A9.7.5; or
(3) the Director is of the view that the Contractor has contravened any requirement under this Standard.

A9.7.2 The Director may revoke or suspend an individual ERV certification where:
(1) a revision to, or a new version of, the Standard requires new testing certification of any Performance Standards listed in sub-section A9.3.5 or A9.3.6;
(2) the Operator fails to provide required documentation and/or testing information and/or access to production and testing facilities as described in sub-section A9.7; or
(3) the Director is of the view that the Operator has contravened any requirement under this Standard.

A9.8 Fees

A9.8.1 The Director may establish fee schedules relating to the recovery of travel expenses from the Contractor, and any other costs associated with the provision of ambulance model certification and compliance monitoring.

ANNEX B

REMOUNTED AMBULANCE TRANSFER OF PATIENT COMPARTMENT MODULE

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ANNEX B - REMOUNTED AMBULANCE

TRANSFER OF PATIENT COMPARTMENT MODULE

B1. SCOPE

Annex B describes the minimum acceptable requirements for the remounting of patient compartment modules, removed from previously certified ambulances, on new or used chassis, intended for use in Ontario.

B2. GENERAL REQUIREMENTS

B2.1 Each Remount shall comply with the following documents, listed in order of precedence:

(1) the Canadian Motor Vehicle Safety Standards (CMVSS);

(2) Applicable sections of the HTA;

(3) this *Standard*;

(4) any criteria established by the OEM for the conversion of chassis to ambulances; and

(5) all relevant SAE Standards and SAE Recommended Practises.

B2.2 The documents referenced in sub-section B2.1 shall be those documents that were in effect no earlier than when the motor vehicle chassis was manufactured and no later than when the vehicle was completed as a Remount.

B2.3 Each Remount shall be complete with the operating accessories as required herein, and furnished with such modifications and attachments as may be necessary to enable the vehicle to function reliably and efficiently in its intended operating environment.

B2.4 The design of the vehicle and the required equipment installations shall maximize the safety and security of the occupants.

B2.5 Each Remount shall be in compliance with all appropriate sections of the *Standard* .

B3. STRUCTURAL INTEGRITY

The Contractor, prior to any other work taking place, shall verify the structural integrity of the patient compartment module.

B4. MATERIAL CHANGES

B4.1 Seats, Seat Belts & Other Occupant Safety Restraints:

B4.1.1 All seats in the patient compartment shall be replaced in accordance with applicable requirements under CMVSS, unless Transport Canada has given prior approval of an acceptable testing program that is in compliance with CMVSS.

B4.1.2 If Transport Canada has given prior approval of an acceptable testing program, replacements will be based on test results and the seats will not have to be replaced.

B4.1.2 All passenger seat belts in the patient compartment shall be replaced with new seat belts certified under CMVSS.

B4.1.3 Floor and other anchor points for seats, the occupant restraint device and the incubator rear tie-down fixture shall be inspected and, if necessary, replaced or reinforced in order to comply with the applicable CMVSS requirements and the ambulance performance tests contained in this *Standard*.

B4.1.4 All other patient safety restraints and equipment securing straps shall be inspected and, if necessary, replaced in order to comply with test restraint requirements in this *Standard*.

B4.1.5 Where seats, seat belts and/or other occupant restraints are replaced,
(1) performance tests required under the *Standard* shall be completed; and
(2) the results shall be submitted.

B4.2 Compartment Materials

Unless flammability-testing protocols have been approved by Transport Canada in accordance with CMVSS, all material shall either,

(1) be in compliance with CMVSS 302; or

(2) be replaced with material that is in compliance with the requirements of the CMVSS standard.

B4.3 Exterior Lights

B4.3.1 All "clearance lights" required under CMVSS shall be inspected and, if necessary, replaced with lamps/lights that are compliant with the requirements of CMVSS.

B4.3.2 All other exterior operating and emergency lights shall,

(1) be inspected; and

(2) if necessary upon inspection, the lamps, lens and reflectors replaced in order to comply with the CMVSS, the HTA and the photometric levels required under this *Standard*.

B4.4 Body Door Components:

All door frames, fasteners, hinges and door locks shall be inspected to ensure continued compliance with CMVSS.

B4.4.1 All replacement components shall also comply with this safety standard.

B4.5 Seat Travel

The mounting of the module on the chassis shall not alter the horizontal travel of the vehicle cab seat bases as manufactured by the OEM.

B5. CERTIFICATION

B5.1 Certification for a Remount model shall be in accordance with section 19 of the *Standard.*

B5.2 The Contractor shall inspect every patient compartment offered for Remount and submit to the Operator, a written statement as to whether or not there exists any condition that may cause the ambulance after Remount to not be in compliance with the current Performance Standards as detailed in the *Standard* and listed below:

(1) Main Cot Retention;
(2) Static Load Test for Ambulance Body Structures;
(3) HVAC Performance Test;
(4) Pressure Vessel Retention;
(5) Interior Lighting;
(6) Body Door Components Test;
(7) Emergency Lighting Requirements;
(8) Load Test for Grab Rail/Handles;
(9) Passenger and Patient Safety Restraints Load Tests;
(10) 10G restraint test;
(11) Occupant Restraint Load Test; and
(12) Occupant Head Protection Zone

B5.2.1 Failure to correct noted deficiencies shall result in a non-compliant Remount.

B5.3 The following tests shall be completed by a Licenced Professional Engineer in Ontario and certified as conforming to the Performance Standards.

(1) Interior Sound Level Test;
(2) Centre of Gravity Location;
(3) Carbon Monoxide Levels; and
(4) Siren/Public Address System Sound Levels.

B5.4 The following tests shall be completed by the Contractor and certified as conforming to the Performance Standards.

(1) Vehicle Weight Distribution;

(2) 12 Volt dc Electrical System Performance;

(3) Antenna System Test; and

(4) Oxygen System Pressure Test.

B5.5 For Remounts of an identical type, the Contractor may request Compliance Certification for all like Remounts and compete actual testing only once for all the above Performance Standards. The exception being the 'Oxygen System Pressure Test' shall be completed for every Remount.

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ANNEX C

NEW AMBULANCE COMPLIANCE CHECKLIST

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Published by Ministry of Health, Version 6.0 – May 1, 2022

ANNEX C - NEW AMBULANCE

COMPLIANCE CHECKLIST

PART 1- COMPLIANCE CHECKLIST

This Checklist is to be completed in accordance with sub-section 19.1.3 (6) of the *Standard* and submitted to the Director Emergency Health Services Branch along with the other required documentation for compliance certification. Compliance or non-compliance with each requirement will be noted by (✓). In instances where any non-compliance is noted, within a section the details of the non-compliance will be provided in the Part II including the sub-section number.

1. Scope of the Standard..... Compliance ( ) Non-Compliance ( )

2. Definitions ..... Compliance ( ) Non-Compliance ( )

3. General Requirements of the Ambulance..... Compliance ( ) Non-Compliance ( )

3.7 110v Electrical Power ..... Compliance ( ) Non-Compliance ( )

4. Ambulance Owners Manual ..... Compliance ( ) Non-Compliance ( )

5. Materials..... Compliance ( ) Non-Compliance ( )

6. Exterior Identification..... Compliance ( ) Non-Compliance ( )

7. Construction and Design Details ..... Compliance ( ) Non-Compliance ( )

8. Heating, Ventilation and Air Conditioning ..... Compliance ( ) Non-Compliance ( )

9. Low Voltage Conversion Electrical System..... Compliance ( ) Non-Compliance ( )

10. Emergency Warning System ..... Compliance ( ) Non-Compliance ( )

11. 2-Way Radio Installations..... Compliance ( ) Non-Compliance ( )

11.6 Installation of radio equipment..... Compliance ( ) Non-compliance ( )

12. Oxygen System..... Compliance ( ) Non-Compliance ( )

13. Suction Aspiration System ..... Compliance ( ) Non-Compliance ( )

14. Accommodation and Storage..... Compliance ( ) Non-Compliance ( )

15. Safety Equipment ..... Compliance ( ) Non-Compliance ( )

16. Interior Signs and Labels..... Compliance ( ) Non-Compliance ( )

17. Modular Ambulance Body - Type 1 and 3..... Compliance ( ) Non-Compliance ( )

18. Ambulance Chassis Specifications..... Compliance ( ) Non-Compliance ( )

19. Certification of an Ambulance Model..... Compliance ( ) Non-Compliance ( )

20. Ambulance Performance Standards ..... Compliance ( ) Non-Compliance ( )

20.1 Main Cot Retention ..... Compliance ( ) Non-Compliance ( )

20.2 Static Load Test Ambulance Body Structures..... Compliance ( ) Non-Compliance ( )

20.3 HVAC Performance Tests..... Compliance ( ) Non-Compliance ( )

20.3.3 Heating System ..... Compliance ( ) Non-Compliance ( )

20.3.6 Air Conditioned System ..... Compliance ( ) Non-Compliance ( )

20.3.8 Ventilation System ..... Compliance ( ) Non-Compliance ( )

20.4 Pressure Vessel Retention ..... Compliance ( ) Non-Compliance ( )

20.5 Interior Sound Level Test..... Compliance ( ) Non-Compliance ( )

20.6 Vehicle Weight Distribution..... Compliance ( ) Non-Compliance ( )

20.7. Centre of Gravity Location..... Compliance ( ) Non-Compliance ( )

20.8 12 Vdc Electrical System Performance ..... Compliance ( ) Non-Compliance ( )

20.10 Antennae System..... Compliance ( ) Non-Compliance ( )

20.11 Interior Lighting ..... Compliance ( ) Non-Compliance ( )

20.12 Oxygen System Pressure Test ..... Compliance ( ) Non-Compliance ( )

20.15 Body Door Components Test ..... Compliance ( ) Non-Compliance ( )

20.16 Emergency Lighting Requirements..... Compliance ( ) Non-Compliance ( )

20.17 Carbon Monoxide Levels ..... Compliance ( ) Non-Compliance ( )

20.18 Load Test for Grab Handles/Rail..... Compliance ( ) Non-Compliance ( )

20.19 Siren/Public Address System Sound Levels..... Compliance ( ) Non-Compliance ( )

20.21.2.1 All installed passenger seat belts……..……..Compliance ( ) Non-Compliance ( )

20.21.2.2 All installed patient restraint belts……..Compliance ( ) Non-Compliance ( )

20.22 10 G Restraint Test…….. Compliance ( ) Non-Compliance ( )

20.23 Occupant Restraint Load Test……..…… Compliance ( ) Non-Compliance ( )

20.24 Occupant Head Protection Zone……..….Compliance ( ) Non-Compliance ( )

PART II – NON-COMPLIANCE DETAILS

Provide sub-section number and provide details. Attach additional information to the Checklist as required.

PART III – Components and options supplied by Contractor at time of delivery

In this area Contractors are to list all components and options supplied on unit. **Attach additional information to the Checklist as required.**

Part IV - CONTRACTOR'S COMPLIANCE CERTIFICATION

Contractor's Name: _____

I certify that this Annex to Version 6.0 of the 'Ontario Provincial Land Ambulance & Emergency Response Vehicle Standard' has been completed accurately and that all areas of non-compliance have been identified.

Company Officer:

_____
(Print Name)

_____ _____
(Signature) (date)

_____ _____
(Notarized, required for ambulance model certification only) (date)

PART V- INDIVIDUAL AMBULANCE DETAILS

Vehicle Identification Number: _____

MOHLTC Compliance Certificate Number: _____

Date of Completion (final inspection): _____

Name of Purchaser: _____

ANNEX D

REMOUNTED AMBULANCES COMPLIANCE CHECKLIST

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Published by Ministry of Health, Version 6.0 – May 1, 2022

ANNEX D - REMOUNTED AMBULANCES
COMPLIANCE CHECKLIST

Part I - COMPLIANCE DETAILS

This Checklist is to be completed in accordance with sub-section 19.1.3 (6) of the *Standard* and submitted to the Director Emergency Health Services Branch along with the other required documentation for compliance certification. Compliance or non-compliance with each requirement will be noted by (✓). Where a requirement is not applicable (N/A) will be noted.

In instances where any non-compliance is noted within a section then details of the non-compliance will be provided in PART II including the sub-section number

1. Scope of the Standard…… Compliance ( ) Non-Compliance ( )

2. Definitions……. Compliance ( ) Non-Compliance ( )

3. General Requirements of the Ambulance…….. Compliance ( ) Non-Compliance ( )

3.7 110v Electrical Power……Compliance ( ) Non-Compliance ( )

4. Ambulance Owners Manual…… Compliance ( ) Non-Compliance ( )

5. Materials…… Compliance ( ) Non-Compliance ( )

6. Exterior Identification…….. Compliance ( ) Non-Compliance ( )

7. Construction and Design Details……. Compliance ( ) Non-Compliance ( )

8. Heating, Ventilation and Air Conditioning……Compliance ( ) Non-Compliance ( )

9. Low Voltage Conversion Electrical System…….Compliance ( ) Non-Compliance ( )

10. Emergency Warning System……Compliance ( ) Non-Compliance ( )

11. 2-Way Radio Installations……Compliance ( ) Non-Compliance ( )

11.6 Installation of radio equipment.....Compliance ( ) Non-compliance ( )

12. Oxygen System……..Compliance ( ) Non-Compliance ( )

13. Suction Aspiration System……Compliance ( ) Non-Compliance ( )

14. Storage Requirements & Design……..Compliance ( ) Non-Compliance ( )

15. Safety Equipment…….. Compliance ( ) Non-Compliance ( )

16. Interior Signs and Labels……Compliance ( ) Non-Compliance ( )

17. Modular Ambulance Body -Type 1 and 3…………………………………...Compliance ( ) Non-Compliance ( )

18. Ambulance Chassis Specifications………………………………………..Compliance ( ) Non-Compliance ( )

19. Certification of an Ambulance Model………………………………………Compliance ( ) Non-Compliance ( )

20. Ambulance Performance Standards…………………………………….. .. Compliance ( ) Non-Compliance ( )

20.1 Main Cot Retention………………………………………………Compliance ( ) Non-Compliance ( )

20.2 Static Load Test Ambulance Body Structures………………………Compliance ( ) Non-Compliance ( )

20.3 HVAC Performance Tests………………………………………..Compliance ( ) Non-Compliance ( )

20.3.3 Heating System ……………………………………………….. Compliance ( ) Non-Compliance ( )

20.3.4 Air Conditioning System…………………………………………Compliance ( ) Non-Compliance ( )

20.3.5 Ventilation System……………………………………………..Compliance ( ) Non-Compliance ( )

20.4 Pressure Vessel Retention………………………………………..Compliance ( ) Non-Compliance ( )

20.5 Interior Sound Level Test………………………………………...Compliance ( ) Non-Compliance ( )

20.6 Vehicle Weight Distribution……………………………………..Compliance ( ) Non-Compliance ( )

20.7. Centre of Gravity Location………………………………………Compliance ( ) Non-Compliance ( )

20.8 12 Vdc Electrical System Performance……………………………..Compliance ( ) Non-Compliance ( )

20.10 Antennae System………………………………………………..Compliance ( ) Non-Compliance ( )

20.11 Interior Lighting…………………………………………………Compliance ( ) Non-Compliance ( )

20.12 Oxygen System Pressure Test…………………………………….. Compliance ( ) Non-Compliance ( )

20.15 Body Door Components Test…………………………………... Compliance ( ) Non-Compliance ( )

20.16 Emergency Lighting Requirements……………………………….. Compliance ( ) Non-Compliance ( )

20.17 Carbon Monoxide Levels………………………………………...Compliance ( ) Non-Compliance ( )

20.18 Load Test for Grab Handles/Rail………………………………...Compliance ( ) Non-Compliance ( )

20.19 Siren/Public Address System Sound Levels………………………..Compliance ( ) Non-Compliance ( )

20.21.2.1 All installed passenger seat belts…………….………….. .... Compliance ( ) Non-Compliance ( )

20.21.2.2 All installed patient restraint belts………………………... .... Compliance ( ) Non-Compliance ( )

20.22 10 G Restraint Test……………………………….…….....….. Compliance ( ) Non-Compliance ( )

20.23 Occupant Restraint Load Test……………………………….. Compliance ( ) Non-Compliance ( )

20.24 Occupant Head Protection Zone…………………………….….. Compliance ( ) Non-Compliance ( )

B2 General Requirements of a Remounted Ambulance…… Compliance ( ) Non-Compliance ( )

B3 Structural Integrity……Compliance ( ) Non-Compliance ( )

B4 Material Changes……..Compliance ( ) Non-Compliance ( )

B4.1 Seats, Seat Belts, Occupant Restraints……..Compliance ( ) Non-Compliance ( )

B4.2 Compartment Materials…….Compliance ( ) Non-Compliance ( )

B4.3 Exterior Lights…… Compliance ( ) Non-Compliance ( )

B4.4 Body Door Components……Compliance ( ) Non-Compliance ( )

B5 Certification of Remount……..Compliance ( ) Non-Compliance ( )

B5.2 Any Non-Compliance Conditions……..Compliance ( ) Non-Compliance ( )

B5.3 Testing by Professional Engineer……...Compliance ( ) Non-Compliance ( )

B5.4 Testing by Contractor…….Compliance ( ) Non-Compliance ( )

B5.5 Oxygen system pressure test…… …….Compliance ( ) Non-Compliance ( )

PART II – NON-COMPLIANCE DETAILS

Provide sub-section number and provide details. Attach additional information to the Checklist as required.

PART III – Components and options supplied by Contractor at time of delivery

In this area Contractors are to list all components and options supplied on unit. **Attach additional information to the Checklist as required.**

Part IV - CONTRACTOR'S COMPLIANCE CERTIFICATION

Contractor's Name: _____

I certify that this Annex to Version 6.0 of the 'Ontario Provincial Land Ambulance & Emergency Response Vehicle Standard' has been completed accurately and that all areas of non-compliance have been identified.

Company Officer:

_____
(Print Name)

_____ _____
(Signature) (date)

_____ _____
(Notarized, required for ambulance model certification only) (date)

PART V- INDIVIDUAL AMBULANCE DETAILS

Vehicle Identification Number: _____

MOHLTC Compliance Certificate Number: _____

Date of Completion (final inspection): _____

Name of Purchaser: _____

ANNEX E

ERV
COMPLIANCE CHECKLIST

Ontario

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ANNEX E - ERV
COMPLIANCE CHECKLIST

PART I –COMPLIANCE DETAILS

To confirm compliance with Annex A of the *Standard* this Checklist is to be completed and accompany the letter of certification by the Contractor for each unit. Compliance or non-compliance with each requirement will be noted by (**X**). In instances where any non-compliance is noted, within a section the details of the non-compliance will be provided in the Part II including the sub-section number.

A3. General Requirements.....Compliance ( ) Non-Compliance ( )

A4. Exterior Identification.....Compliance ( ) Non-Compliance ( )

A5. Emergency Warning System.....Compliance ( ) Non-Compliance ( )

A6. 2-Way Radio Installations.....Compliance ( ) Non-Compliance ( )

..... A6.5 Installation of radio equipment Compliance ( ) Non-Compliance ( )

A7. Storage……Compliance ( ) Non-Compliance ( )

A8. Interior signs and labels……Compliance ( ) Non-Compliance ( )

A9. Certification of an ERV.....Compliance ( ) Non-Compliance ( )

PART II – NON-COMPLIANCE DETAILS

Provide sub-section number and provide details. Attach additional information to the Checklist as required.

PART III – Components and options supplied by Contractor at time of delivery

List all components and options supplied on unit. Attach additional information to the Checklist as required.

Part IV - CONTRACTOR'S COMPLIANCE CERTIFICATION

Contractor's Name: _____

Contractor's Certification #: _____

VIN# of ERV _____

Name of Purchaser: _____

I certify that this Annex to Version 6.0 of the 'Ontario Provincial Land Ambulance & Emergency Response Vehicle Standard' has been completed accurately and that all areas of non-compliance have been identified.

Company Officer:

_____
(Print Name)

_____ _____
(Signature) (date)

_____ _____
(Notarized, required for ERV type certification only) (date)


Ontario

By-Law Number 2023-015

of

The Corporation of the County of Frontenac

being a by-law to appoint an Area Weed Inspector for the County of Frontenac.

Whereas Section 8 of the Municipal Act, S.O. 2001, as amended provides that a municipality has the capacity, rights, powers and privileges of a natural person for the purpose of exercising its authority under the Municipal Act or any other Act; and;

Whereas Sections 5 of the Municipal Act, 2001, as amended provides that a municipal power, including a municipality's capacity, rights, powers and privileges, shall be exercised by its council by by-law, unless the municipality is specifically authorized to do otherwise; and,

Whereas Section 6 of the Weed Control Act, R.S.O., 1990 Chapter W.5 and amendments thereto provides that the council of every upper-tier municipality shall by by-law appoint one or more persons as area weed inspectors to enforce this Act in the area within the council's jurisdiction and fix their remuneration or other compensation; and,

Whereas the Council of the County of Frontenac, deems it expedient to appoint an area Weed Inspector for the provision of weed inspection services;

Now Therefore Be It Resolved That the Council of the Corporation of the County of Frontenac hereby enacts as follows:

1. **That** Kelly J. Pender be and is hereby re-appointed as area Weed Inspector for the area within the jurisdiction of the Corporation of the County of Frontenac,

2. **That** this By-law shall come into force and take effect upon the date of final passing.

Read a First and Second Time this 15th day of March, 2023.

Read a Third Time, Signed, Sealed and Finally Passed this 15th day of March, 2023.

The Corporation of the County of Frontenac

Ron Vandewal, Warden	Jannette Amini, Clerk

By-Law No. 2023-016

of

The Corporation of the County OF Frontenac

being a by-law to confirm all actions and proceedings of County Council on March 15, 2023

Whereas Section 8 of the *Municipal Act, S.O. 2001, c.25* and amendments thereto provides that a municipality has the capacity, rights, powers and privileges of a natural person for the purpose of exercising its authority under the *Municipal Act* or any other *Act*; and;

Whereas Subsection 2 of Section 11 of the *Municipal Act, S.O. 2001, c.25* and amendments thereto provides that a lower-tier municipality and an upper-tier municipality may pass by-laws respecting matters within the spheres of jurisdiction described in the Table to Subsection 2 subject to certain provisions, and;

Whereas Section 5 of the *Municipal Act, S.O. 2001, c. 25* and amendments thereto provides that a municipal power, including a municipality's capacity, rights, powers and privileges under Section 8 shall be exercised by its council and by by-law unless the municipality is specifically authorized to do otherwise; and;

Whereas the Council of the County of Frontenac deems it expedient to confirm its actions and proceedings;

Now Therefore Be It Resolved That the Council of the Corporation of the County of Frontenac hereby enacts as follows:

1. **That** all actions and proceedings of the Council of the County of Frontenac taken at its regular meeting held on March 15, 2023 be confirmed as actions for which the municipality has the capacity, rights, powers and privileges of a natural person.

2. **That** all actions and proceedings of the Council of the County of Frontenac taken at its regular meeting held on March 15, 2023, be confirmed as being matters within the spheres of jurisdiction described in Subsection 2 of Section 11 of the *Municipal Act, S.O. 2001, c.25* and amendments thereto.

3. **That** all actions and proceedings of the Council of the Corporation of the County of Frontenac taken at its regular meeting held on March 15, 2023 except those taken by by-law and those required by by-law to be done by resolution are hereby sanctioned, ratified and confirmed as though set out within and forming part of this by-law.

4. **That** this by-law shall come into force and take effect as of the final passing thereof.

Read a First and Second Time this 15th day of March, 2023

Read a Third Time and Finally Passed, Signed and Sealed this 15th day of March, 2023.

The Corporation of the County of Frontenac

Ron Vandewal, Warden	Jannette Amini, Clerk