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911

2011

A MAGAZINE FOR FIRST RESPONDERS
UN MAGAZINE POUR LES PREMIERS RÉPONDANTS

**CALLING ALL
FIRST RESPONDERS**
EMERGENCY SERVICES MANAGEMENT
CONFERENCE SET FOR MONTREAL

**APPEL À TOUS
LES PREMIERS
RÉPONDANTS**
CONFÉRENCE SUR LA GESTION DES
SERVICES D'URGENCE PRÉVUE À
MONTREAL



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WE WANT TO DRAW ON YOUR EXPERIENCES AND YOUR EXPERTISE TO BUILD INTEGRATED EMERGENCY MANAGEMENT STRATEGIES, POLICIES, PROCESSES AND PRACTICES.



JE SUIS HEUREUX de vous présenter le numéro inaugural du magazine 911 : *Un magazine pour les premiers répondants*. C'est un projet commun de l'Association canadienne des chefs de police (ACCP) et des Directeurs des services médicaux d'urgence du Canada (DSMUC). L'ACCP et les DSMUC ont collaboré comme jamais auparavant sur les questions de gestion des urgences qui touchent au cœur même de la sécurité publique et qui sont importantes pour tous les Canadiens.

I AM PLEASED to introduce you to the inaugural issue of 911: *A Magazine for First Responders*. This innovative annual magazine is a joint venture between the Canadian Association of Chiefs of Police (CACP) and the Emergency Medical Services Chiefs of Canada (EMSCC). The CACP and the EMSCC, protective services and government have been working together like never before on emergency management issues – issues at the very core of public safety that are important to every Canadian.

We want to share with you what we have learned through our work and what is new in the emergency management field. We also want to inform you of upcoming learning opportunities that will bring together policing and other emergency services, industry, and academic leaders to engage for the common purpose of preparing our communities to respond effectively to any emergency.

The feature article in this issue highlights our upcoming conference, *The Way Forward – Governance and Integration: First Responders, Communities, Governments and the Private Sector Working Together*, to be held April 17 – 19, 2011 in Montreal. Participants will have the opportunity to examine—with other first responders, emergency managers, government officials, military, non-government organizations, academia and private industry representatives—some of the multi-agency and multi-jurisdictional emergency management challenges they are dealing with and then to collaboratively develop strategies to improve first responder and public safety, and operational effectiveness.

We want to draw on your experiences and your expertise to build integrated emergency management strategies, policies, processes and practices that can be adapted and applied across the country to reduce duplication of effort, optimize research data, promote new knowledge, improve resource allocation, improve interoperability, and improve first responder safety. We hope to see you and your emergency management team members at this important event.

I congratulate the CACP and EMSCC on the leadership they are showing in launching this magazine and in preparing Canadian communities to better respond to any emergency. I invite you to join us in this effort.

Nous voulons partager avec vous ce que nous avons appris à travers travail et ce qui est nouveau dans le domaine de la gestion des urgences. Nous tenons également à vous informer des prochaines occasions d'apprentissage qui rassembleront les services d'urgence, de police et d'autres pour s'engager dans le but commun de la préparation de nos communautés pour répondre efficacement à toute situation d'urgence.

L'article de fond traite de notre prochaine conférence, *La voie vers l'avant — Gouvernance et intégration : La collaboration entre les premiers intervenants, communautés, gouvernements et secteur privé*, qui se tiendra à Montréal du 17 au 19 avril 2011. Les participants auront l'occasion d'examiner — avec les autres premiers intervenants, gestionnaires des urgences, responsables gouvernementaux, militaires, ONG, universitaires et représentants du secteur privé — une partie des problèmes de gestion des urgences, puis d'élaborer conjointement des stratégies visant à améliorer la sécurité des premiers intervenants et du public, de même que l'efficacité.

Nous voulons faire appel à votre expérience et à votre expertise pour établir des stratégies, politiques, et pratiques de gestion intégrée des urgences qui peuvent être adaptées à travers le pays afin de réduire la duplication des efforts, d'optimiser les données de recherche, de promouvoir de nouvelles connaissances, d'améliorer l'allocation des ressources, d'accroître l'interopérabilité, et d'améliorer la sécurité des premiers intervenants. Nous espérons vous voir vous et les membres de votre équipe de gestion des urgences à cet événement important.

Je tiens à féliciter l'ACCP et les DSMUC pour le leadership dont ils font preuve dans le lancement de ce magazine et dans la préparation des collectivités canadiennes afin de mieux répondre à toute urgence. Je vous invite à nous rejoindre dans cet effort.

NOUS VOULONS FAIRE APPEL À VOTRE EXPÉRIENCE ET À VOTRE EXPERTISE POUR ÉTABLIR DES STRATÉGIES, POLITIQUES ET PRATIQUES INTÉGRÉES EN MATIÈRE D'URGENCES.



WE LOOK FORWARD TO RESPONDING TO THE NEEDS OF CANADIANS AS A STRONGER AND MORE UNIFIED EMERGENCY SERVICE COMMUNITY.



ON BEHALF OF THE Emergency Medical Services Chiefs of Canada (EMSCC) and its Board of Directors, I welcome you to the inaugural issue of *911: A Magazine for First Responders*. This issue is precedent-setting because it charts the work and collaboration between the EMSCC and the Canadian Association Chiefs of Police (CACP). I am proud to showcase our two associations' concerted efforts on national emergency management issues, working with our government and partners. The fundamental theme is public safety, impacting all Canadians.

Throughout this issue we invite you to read about our key findings, provide you with updates on the emergency management field, and the synergies that have brought together police and EMS to work together to prepare Canadian communities to respond appropriately to any emergency.

Of particular note in this issue is an article on our upcoming Emergency Services Management Conference, *The Way Forward — Governance and Integration: First Responders, Communities, Governments and the Private Sector Working Together*, to be held April 17-19, 2011 in Montreal. This inaugural event will include Police, Fire, and EMS representatives, hosted by the Canadian Association Chiefs of Police (CACP), the Canadian Association of Fire Chiefs (CAFC), and the Emergency Medical Services Chiefs of Canada (EMSCC). Delegates will collaborate with other first responders, emergency managers, non-governmental organizations, military, government officials, and private industry representatives. The discussions will target the multi-agency and multi-jurisdictional emergency management issues many services are facing, and create potential solutions to improve public safety through operational effectiveness.

I invite you and your colleagues to attend this groundbreaking conference and benefit from the experience of experts in your industry on innovation, interoperability, first responder safety and information sharing. There is no greater knowledge base that exists than that within your respective emergency management teams.

I would like to thank Chief William Blair, Chief of Toronto Police Service and President of the Canadian Association Chiefs of Police and his team for assisting in the promotion of this magazine. We will be working together to better prepare all Canadians in the event of an emergency. We look forward to responding to the needs of Canadians as a stronger and more unified emergency service community.

AU NOM DES DIRECTEURS DES SERVICES médicaux d'urgence du Canada (DSMUC), je vous souhaite la bienvenue au premier numéro du magazine *911 : Un magazine pour les premiers répondants*. Ce numéro retrace la collaboration entre les DSMUC et l'Association canadienne des chefs de police (ACCP). Je suis fier de présenter les efforts concertés de nos deux associations sur les questions nationales de gestion des urgences, en collaboration avec notre gouvernement et les partenaires. Le thème fondamental est la sécurité publique, et il touche tous les Canadiens.

Tout au long de ce numéro, nous vous invitons à lire nos principales constatations, nous vous fournissons des mises à jour sur la gestion des urgences, et sur les synergies qui ont réuni la police et les SME pour préparer les collectivités canadiennes à répondre adéquatement à toute situation d'urgence.

Il convient de noter l'article sur notre Conférence sur la gestion des services d'urgence, *La voie vers l'avant — Gouvernance et Intégration : La collaboration entre les premiers intervenants, communautés, gouvernements et secteur privé*, qui se tiendra à Montréal du 17 au 19 avril 2011. Cet événement réunira la police, les services d'incendie, et les SME, sous l'égide de l'Association canadienne des chefs de police (ACCP), de l'Association canadienne des chefs de pompiers (ACCP), et des Directeurs des services médicaux d'urgence du Canada (DSMUC). Les délégués collaboreront avec d'autres premiers intervenants, gestionnaires des urgences, organisations non gouvernementales, militaires, fonctionnaires et représentants du secteur privé. Les discussions porteront sur les questions de gestion des urgences, dans le but d'améliorer la sécurité publique grâce à l'efficacité opérationnelle.

Je vous invite à cette conférence inédite pour bénéficier de l'expérience des experts en matière d'innovation, d'interopérabilité, de sécurité des premiers intervenants et de partage de l'information. Il n'y a pas de source de connaissances plus riche que celle qui réside dans vos équipes de gestion des urgences.

Je tiens à remercier le chef William Blair, chef du Service de police de Toronto et président de l'Association canadienne des chefs de police et son équipe qui ont aidé à la promotion de ce magazine. Nous allons travailler ensemble pour mieux préparer tous les Canadiens aux urgences.

Nous sommes impatients de répondre aux besoins des Canadiens par des services d'urgence plus forts et plus unifiés.

**NOUS SOMMES IMPATIENTS DE
RÉPONDRE AUX BESOINS DES CANADIENS
AVEC DES SERVICES D'URGENCE
PLUS FORTS ET PLUS UNIFIÉS.**

CALLING ALL **FIRST RESPONDERS**

Emergency Services Management Conference Set for Montreal

Industry experts, first responders, military personnel, emergency managers, private industry and government officials from across Canada will soon descend upon Montreal. From April 17-19, the second-largest city in the country will play host to a new conference that will examine the challenges of multi-agency and multi-jurisdictional emergency management. The three-day conference promises to bring together industry stakeholders who have a vested interest in improving public safety and operational effectiveness.

Jeff McGuire, Staff Superintendent of Operational Services with Toronto Police Service and Chair of the Canadian Association of Chiefs of Police Emergency Management Committee, is excited about the prospects of the committee and the upcoming conference. "The Emergency Management Committee is unique as it is comprised of representatives from three national associations: the Canadian Association of Chiefs of Police, the Canadian Association of Fire Chiefs and the Emergency Medical Services Chiefs of Canada. Our mandate is to champion integrated emergency management based on the pillars of prevention, mitigation, preparedness response and recovery, through formal relationships with police, fire and emergency medical services," McGuire explained. The committee has worked diligently to foster

relationships and set strategic priorities. "The conference in April will act as a launching pad for promoting and advocating ongoing development and delivery of an integrated national framework for emergency management," he added.

The committee has been receiving accolades for bringing together services of various sizes to address the challenges of emergency management. "Attendees at the conference will have the opportunity to learn more about the steps that are being taken to foster integration at the municipal, regional, provincial/territorial, national and international levels. It's also an opportunity for attendees to hear firsthand how the association is working to address provincial and federal policy issues and how we are working to provide united emergency services approach to crucial issues," McGuire said.

Set to take place at the Fairmont Queen Elizabeth Hotel, the conference will be the first of its kind as it brings together not just the industry, but also government officials and the private sector. "It's safe to say that there are no conferences like this in North America. For the first time, the challenges facing those working in multi-agency and multi-jurisdictional emergency management will be discussed," says Kim Ayotte, Chief of Special Operations, Ottawa Fire Service. The conference will examine in greater detail the many benefits of a tri-service perspective. "Working together, we can reduce duplication of efforts and capitalize on research data and

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APPEL À TOUS LES PREMIERS RÉPONDANTS

Conférence sur la gestion des services d'urgence prévue à Montréal

Les experts, les premiers intervenants, le personnel militaire, les gestionnaires des urgences, le secteur privé et des fonctionnaires de partout au Canada convergeront bientôt vers Montréal. Du 17 au 19 avril, la deuxième plus grande ville du pays sera l'hôte d'une nouvelle conférence qui se penchera sur les défis de la gestion des urgences impliquant des organismes et territoires de compétence multiples. La conférence de trois jours promet de réunir les intervenants de l'industrie qui ont un intérêt direct dans l'amélioration de la sécurité publique et de l'efficacité opérationnelle.

Jeff McGuire, surintendant des services opérationnels du Service de police de Toronto et président du Comité sur la gestion des urgences de l'ACCP est enthousiaste à l'idée de cette prochaine conférence. « Le Comité sur la gestion des urgences est composé de représentants de l'Association canadienne des chefs de police, de l'Association canadienne des chefs de pompiers et des Directeurs des services médicaux d'urgence du Canada, explique M. McGuire. Notre mandat est de promouvoir la gestion intégrée des urgences en s'appuyant sur les piliers de la prévention, de l'atténuation, de la préparation et de la récupération, par le biais des relations formelles entre la police, les pompiers et services médicaux d'urgence. » Le comité a travaillé avec diligence pour favoriser les relations et établir des priorités stratégiques. « La conférence d'avril servira de tremplin pour la promotion d'un cadre national intégré pour la gestion des urgences », ajoute-t-il.

Le comité a reçu des éloges pour avoir réuni les services de différentes tailles. « Les participants à la conférence auront l'occasion d'en apprendre davantage sur les mesures qui sont prises pour favoriser l'intégration à l'échelle municipale, régionale, provinciale, territoriale, nationale et internationale, poursuit M. McGuire. C'est aussi une occasion de voir comment l'Association traite les questions de politique provinciale et fédérale et comment nous nous efforçons de fournir des services d'urgence unifiés. »

Cette conférence, qui aura lieu à l'Hôtel Fairmont Le Reine Elizabeth, sera la première en son genre, car elle réunira non seulement l'industrie, mais aussi des représentants

« ON PEUT DIRE À COUP SÛR QU'IL N'Y A PAS D'AUTRES CONFÉRENCES DU GENRE EN AMÉRIQUE DU NORD. »

du gouvernement et du secteur privé. « On peut dire à coup sûr qu'il n'y a pas d'autres conférences du genre en Amérique du Nord, déclare Kim Ayotte, chef des opérations spéciales du Service des incendies d'Ottawa. Pour la première fois, on pourra discuter des défis touchant plusieurs organismes et territoires de compétence. » La conférence examinera plus en détail les nombreux avantages d'une perspective interservices. « En travaillant ensemble, nous pouvons réduire la duplication des efforts et tabler sur les données de recherche et les nouvelles connaissances. Il y a un trésor d'informations que nous pouvons échanger au bénéfice des premiers intervenants et du public. »

La conférence « Gestion des services d'urgence au Canada : la voie vers l'avant — gouvernance et intégration » promet d'attirer les meilleurs experts de partout au pays. « La conférence

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new knowledge. There is a wealth of information that we can be share to benefit both first responders and the public.”

The conference ‘Emergency Services Management in Canada: The Way Forward-Governance and Integration’ promises to attract some of the very best from across the country. “The conference is targeted specifically to the executive level audiences of public and private organizations. We fully expect to see representation from police services, fire and emergency medical services executives, first responders, emergency managers, military, coast guards, NGOs and government officials,” McGuire said. The conference is unique as it will also draw attendees from other sectors. “Attendees from across the private sector, researchers and academics, and likeminded professional and industrial associations will also play a pivotal role throughout the three day conference.”

With an emphasis on education and ongoing communication, the conference promises to touch on a variety of subject areas. The committee has made a concerted effort to arrange speakers that would be of interest to a wide range of audiences. A representative from Public Safety Canada, along with the presidents of each individual service association is anticipated to speak at the conference opening. The committee continues to source other speakers from across the country that would best meet the conference’s mandate. “We’re in talks with several other high-profile speakers and look forward to sharing a medium for learning and cooperation for those in attendance. In an effort to share best practices, all sessions will be conducted in plenary format.”

As the committed list of speakers grows, so too, do the topics that will be discussed at the conference. “There is a wide range of topics that are sure to engage discussion and provide a forum for new ideas and information. Confirmed topics for this year’s conference include, Emergency Services Management and Private Industry, Governance, Leadership in Emergency Management, Intelligence and Information Sharing, Interoperability and Emergency Management Exercises to name a few,” according to Kelly Nash, Executive Director of EMS Chiefs, who also sits on the conference planning committee. Although the conference is in its infancy, the planning committee is excited about the subject areas that will be discussed. “Dialogue between the attendees should be interesting as the selected topics are far reaching. We hope that attendees come to the conference to both share and learn from their counterparts.” □

REGISTER TODAY!

For additional information or to register for the conference, log on to the Canadian Association of Chiefs of Police website at www.cacp.ca or call (613) 233-1106. Registration for the conference is \$495 plus GST and includes all sessions, two breakfasts, two lunches and three refreshments breaks.

In addition to attending the conference, there will be sponsorship and vendor display opportunities for interested parties.

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« LA CONFÉRENCE EST DESTINÉE SPÉCIFIQUEMENT AUX DIRIGEANTS D'ORGANISMES PUBLICS ET PRIVÉS. »

est destinée spécifiquement aux dirigeants d’organismes publics et privés, poursuit M. McGuire. Nous nous attendons à voir des représentants des services de police, d’incendie et médicaux d’urgence, des premiers intervenants, des gestionnaires d’urgence, des militaires, des gardes-côtes, des ONG et des gouvernements. » La conférence est unique, car elle attirera également les participants d’autres secteurs. « Les participants du secteur privé, les chercheurs, les universitaires et les associations sectorielles joueront également un rôle essentiel tout au long de la conférence de trois jours. »

En mettant l’accent sur l’éducation et la communication constante, la conférence promet d’aborder une variété de sujets. Le comité a fait un effort concerté pour trouver des conférenciers susceptibles d’intéresser des publics très divers. À l’ouverture de la conférence, on pourra entendre les allocutions d’un représentant de Sécurité publique Canada, suivi des présidents de chacune des associations de premiers répondants. Le comité continue de recruter des conférenciers partout au pays. « Nous sommes en pourparlers avec plusieurs autres intervenants de haut niveau et sommes impatients de partager un milieu d’apprentissage et de coopération pour les personnes présentes. Dans un effort pour partager les meilleures pratiques, toutes les sessions se dérouleront en plénière. »

La diversité des sujets traités à la conférence s’accroît avec la liste des conférenciers confirmés. « Il y a un large éventail de sujets qui ne manqueront pas de susciter le débat », déclare Kelly Nash, directrice exécutive des chefs des services d’urgence. Les thèmes confirmés pour la conférence de cette année comprennent, les services de gestion des urgences et le secteur privé, la gouvernance, le leadership dans la gestion des urgences, l’échange d’informations, l’interopérabilité et les exercices de gestion des urgences. » Bien que la conférence soit à ses débuts, le Comité de planification est enthousiasmé par les sujets qui seront discutés. « Le dialogue entre les participants devrait être intéressant, car les sujets choisis sont de grande envergure. Nous espérons que les participants viendront autant pour partager que pour apprendre de leurs collègues. » □

INSCRIVEZ-VOUS AUJOURD'HUI!

Pour plus d’informations ou pour s’inscrire à la conférence, visitez le site Web de l’ACCP à www.cacp.ca ou composez le (613) 233-1106. Les frais d’inscription à la conférence sont de 495 \$ plus la TPS et comprennent toutes les séances, deux petits déjeuners, deux déjeuners et trois pauses rafraîchissements.

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CITIG brings together representatives from public safety, industry, academia, government and non-governmental organizations to collectively shape the future of Canadian public safety interoperability. Launched in April 2007, the CITIG has evolved into a partnership between the Government of Canada's Canadian Police Research Centre (CPRC), the Canadian Association of Chiefs of Police (CACCP), the Canadian Association of Fire Chiefs (CAFC) and Emergency Medical Services Chiefs of Canada (EMSCC). Key federal partners such as Public Safety Canada, Industry Canada, the Canadian Council of Emergency Measures Organizations (CEMO) and the Senior Officials Responsible for Emergency Management (SOREM) are also supporting CITIG's direction and efforts. Together, these partners have been at the forefront of advancing the interoperability agenda in Canada.

Best of all, CITIG has made remarkable progress since its inception. The ability to have a diverse group work toward a common goal and accomplish so much in such a short time reflects the overdue need for the initiative. In short, the CITIG has:

- significantly increased awareness about interoperability challenges and helped provide useful tools for practitioners and policy-makers to overcome those challenges;
- promoted the effective use of resources, particularly through the sharing of best practices and adapting international work to Canadian needs; and

continued on page 17

FACILITER L'INTEROPÉRABILITÉ
DES COMMUNICATIONS DE

LA SÉCURITÉ PUBLIQUE

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menée par les
répondants
rapporte
d'excellents
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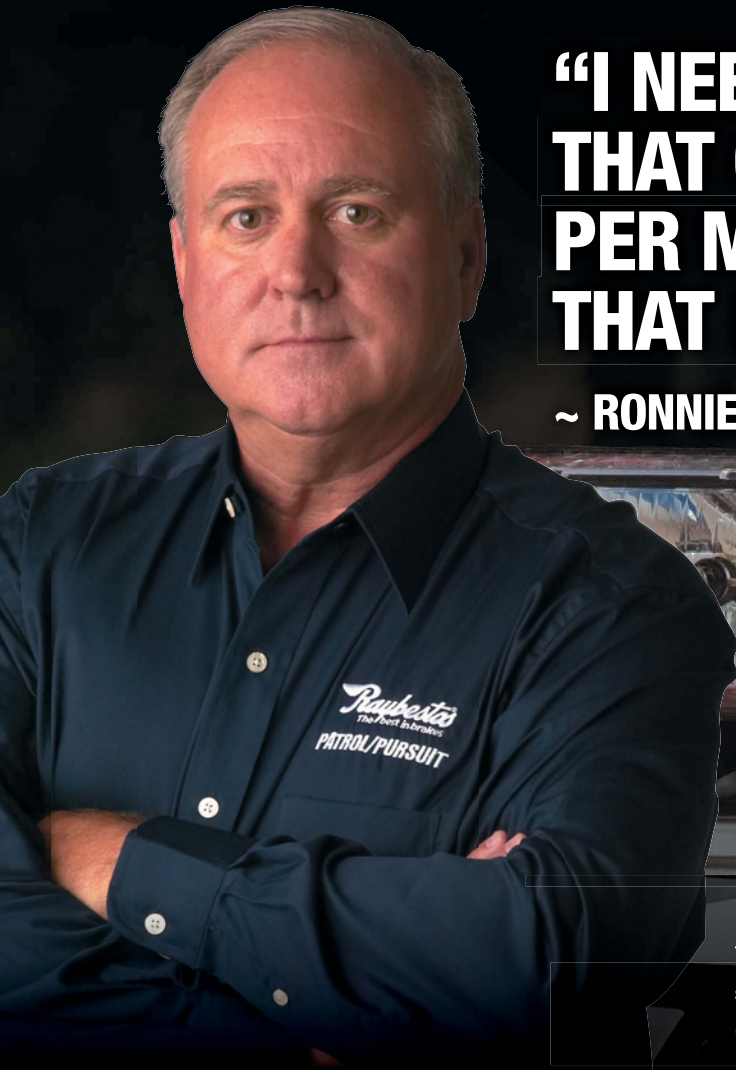
Il faut être en mesure de communiquer pour collaborer, en particulier quand il s'agit de la question délicate de l'interopérabilité des communications au Canada. Heureusement, la coopération a atteint un sommet de tous les temps entre les policiers, les ambulanciers et les pompiers, et les résultats sont significatifs. Le fer de lance de cette coopération est le Groupe d'intérêt canadien en technologie de l'interopérabilité (GICTI) et ses nombreux partenaires.

Le GICTI rassemble des représentants de la sécurité publique, de l'industrie, des universités et des organisations gouvernementales et non gouvernementales pour façonner ensemble l'avenir de l'interopérabilité de la sécurité publique au Canada. Lancé en avril 2007, le GICTI a évolué en un partenariat entre le Centre canadien de recherches policières (CCRP), l'Association canadienne des chefs de police (ACCP), l'Association canadienne des chefs de pompiers (ACCP) et les Directeurs des services médicaux d'urgence du Canada (DSMUC). Les principaux partenaires fédéraux tels que Sécurité publique Canada, Industrie Canada, le Conseil canadien des organismes de mesures d'urgence (CCOMU) et les cadres supérieurs responsables de la gestion des urgences (CSRGU) soutiennent également l'orientation et les efforts du GICTI. Ensemble, ces partenaires ont été à la pointe de l'avancement du programme d'interopérabilité au Canada.

Le GICTI a fait des progrès remarquables depuis sa création. La possibilité de faire travailler un groupe aussi diversifié vers un but commun et accomplir autant en si peu de temps témoigne de la nécessité de l'initiative. En bref, le GICTI a accompli ce qui suit :

- Il a considérablement augmenté la sensibilisation à des problèmes d'interopérabilité et aidé à fournir des outils utiles permettant aux praticiens et aux décideurs politiques de surmonter ces difficultés.
- Il a promu l'utilisation efficace des ressources, notamment par l'échange des meilleures pratiques et l'adaptation des pratiques étrangères aux besoins du Canada.
- Il a amélioré les communications entre les intervenants et entre les différents paliers de gouvernement, tant au Canada qu'à l'étranger.

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Ronnie Faison spent 35 years as Equipment Superintendent for the North Carolina Highway Patrol. The final two years of his tenure he managed the largest Charger fleet in the country. He has served on the Police Advisory boards for Ford, General Motors and Chrysler and has served as Vice Chairman for the National Association of Fleet (NAFA) Administrators.

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« CITIG AND ITS PARTNERS STRONGLY ADVOCATE THAT THE INITIAL EMPHASIS SHOULD BE ON GOVERNANCE AND DEVELOPING STANDARD OPERATING PROCEDURES (SOPS) TO ADVANCE COMMUNICATIONS INTEROPERABILITY. »

- enhanced communications within and cooperation among agencies —both responder agencies and between many levels of government, both in Canada and internationally.

One of CITIG's greatest successes involves facilitating the development of the Canadian Communications Interoperability Plan (CCIP) in collaboration with Public Safety Canada. In 2008, a group of 20 or so responders from across the country were brought together to draft the initial plan during the *Second Canadian Voice Interoperability Workshop: A CITIG National Forum* in Toronto, Ontario. The ultimate goal of the CCIP was to establish a seamless and coordinated approach to wireless voice and data system across municipal, provincial and federal public safety jurisdictions to enhance mission requirements and maximize information sharing. The fruit of that work is starting to benefit public safety practitioners from coast to coast, public safety agencies, the Government of Canada and Canadians in general.

The CCIP working group has done much of the legwork in identifying Canadian priorities for advancing public safety communications interoperability. One of the main lessons learned involves focusing less on technology. While standardizing equipment is a valid and needed approach to ensuring interoperability, CITIG and its partners strongly advocate that the initial emphasis should be on governance and developing standard operating procedures (SOPs) to advance communications interoperability. Work on the CCIP and related efforts to pass along that planning approach to the provincial, regional and municipal levels will make a significant impact.

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L'un des plus grands succès du GICTI a été de faciliter le développement du Plan d'interopérabilité des télécommunications au Canada (PICT) en collaboration avec Sécurité publique Canada. En 2008, une vingtaine d'intervenants de partout au pays se sont réunis pour ébaucher le plan initial au cours du *Deuxième atelier canadien sur l'interopérabilité des communications vocales : Un Forum national du GICTI* à Toronto. Le but ultime du PICT était d'établir une approche intégrée et coordonnée des systèmes sans fil voix-données à travers les administrations municipales, provinciales et fédérales de sécurité publique pour renforcer les exigences et maximiser l'échange d'informations. Le fruit de ce travail commence à profiter aux praticiens de la sécurité publique d'un océan à l'autre, aux organismes de sécurité publique, au gouvernement du Canada et aux Canadiens en général.

Le groupe de travail du PICT a fait beaucoup de démarches pour identifier les priorités du Canada pour faire progresser l'interopérabilité des communications en sécurité publique. L'une des grandes leçons est de moins se concentrer sur la technologie. Même si la normalisation de l'équipement est une approche valable et nécessaire pour assurer l'interopérabilité, le GICTI et ses partenaires plaident vigoureusement pour que l'on mette l'accent initial sur la gouvernance et le développement de procédures normalisées pour faire progresser l'interopérabilité des communications. Les travaux sur le PICT et les efforts pour faire adopter cette démarche de planification aux niveaux provincial, régional et municipal auront un impact significatif.

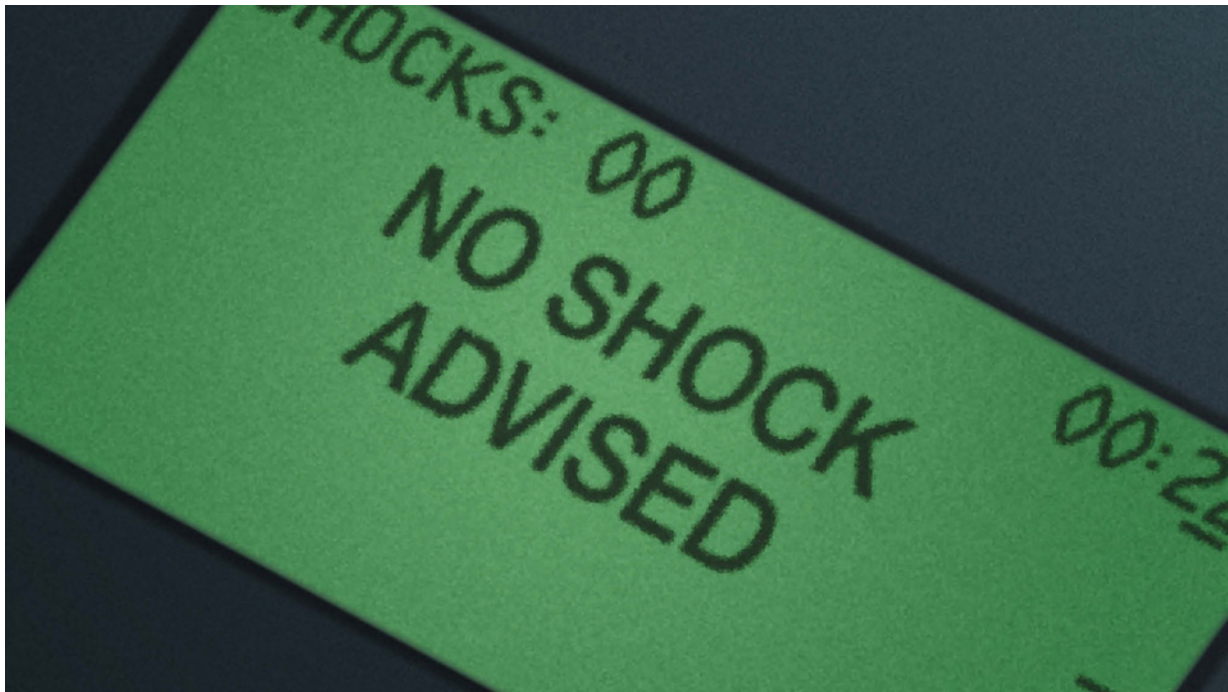
Le PICT a aussi évolué au fil du temps. Au cours des deux dernières années, les travaux sur le PICT se sont poursuivis dans les grands colloques nationaux et transfrontaliers (y compris le quatrième atelier national organisé en décembre 2010 à Victoria) et le groupe de travail sur le PICT s'est réuni à plusieurs reprises pour apporter de nouvelles améliorations au plan. En outre, le document du PICT a été largement distribué aux principaux promoteurs municipaux, régionaux, provinciaux et nationaux en vue d'améliorer l'interopérabilité des

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Public Safety Canada Associate Assistant Deputy Minister Daniel Lavoie addresses the 150-plus delegates gathered during the Second Annual Canada-U.S Cross Border Interoperability Conference in Windsor in September 2010. A recent realignment of interoperability functions at Public Safety combined with Mr. Lavoie's recent assignment to the file signals a renewed commitment to advancing interoperability in Canada. Photo: Phil Culhane

Le sous-ministre adjoint Daniel Lavoie de Sécurité publique Canada s'adressant aux quelque 150 délégués réunis au cours de la deuxième édition annuelle de la Conférence transfrontalière Canada-États-Unis sur l'interopérabilité à Windsor, en septembre 2010. Un récent réalignement des fonctions d'interopérabilité à Sécurité publique Canada combiné avec l'affectation récente de M. Lavoie au dossier témoigne d'un engagement renouvelé envers l'avancement de l'interopérabilité au Canada. Photo : Phil Culhane





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1 Dante SA, Kurz MC et al. *Circulation*. 2009;120:S1456.
2 Lundy D et al. *Circulation*. 2009;120:S1470-S1471.
3 Ong ME, Omato JP et al. *JAMA*. 2006;295(22).

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The CCIP has also evolved over time. Over the past two years, work on the CCIP continued at major national and cross-border workshops (including the Fourth National Workshop in December 2010 in Victoria, B.C.) as the CCIP working group regularly reconvened to make further improvements to the plan and revise action items. As well, the CCIP document has been shared extensively with key municipal, regional, provincial and national champions with a view to achieving enhanced communications interoperability. As well, SOREM and PS Canada are leading the way on the Canadian Communication Interoperability Strategy (CCIS), a higher-level guiding document and a key enabler to achieving the communications interoperability vision. Expect a major announcement about the plan and strategy in early 2011.

An important spin-off of the CCIP involves the concept of a Public Safety Interoperability Centre (PSIC). Originally conceived as a CCIP action plan, the PSIC would promote Canadian innovation and industrial competitiveness by advancing methodologies and tools to support and promote concept development, specification, integration, test and evaluation of communications interoperability capabilities to enhance the safety and security of Canadians.

The PSIC would focus on the five tracks of the SAFECOM® Interoperability Continuum — the framework adopted in Canada to assist emergency response agencies and policy-makers to plan and implement interoperability solutions for data and voice communications. Currently, a formal Working Group has been initiated, action items have been identified and work is being completed with the intent of delivering a demonstration project or proof of concept in the near term.

While the first few years of CITIG's existence focused primarily on voice interoperability, during 2009 the focus was expanded to include all aspects of interoperability — issues such as situational awareness, common operating pictures, resource (blue force) tracking, geographical information systems, data interoperability, spectrum issues with a focus on 700 MHz and common alerting. The reaction to date has been very positive.

Looking ahead, the CITIG will continue to help inform and mobilize Canadian first responders on a wide array of interoperability issues — it's part of a collaborative effort to help improve public safety provider interoperability in Canada. Moreover, as we continue to work on the CCIP and the PSIC (and help facilitate progress on the CCIS), Canadian responders will be better positioned to overcome many of the communications hurdles that present themselves while protecting Canadians.

For more information on CITIG's efforts, please visit www.citig.ca. □

Lance Valcour, O.O.M. is a recently retired Inspector from the Ottawa Police Service currently working with the Canadian Police Research Centre leading the Canadian Interoperability Technology Interest Group. In addition to his long-time participation as a member of the Canadian Association of Chiefs of Police Informatics Committee and International Association of Chiefs of Police Law Enforcement Information Management Section, he has compiled over 33 years experience working in operational roles and led many operational and technology-related projects both in the public and private sectors.

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communications. En outre, les CSRGU et SP Canada ouvrent la voie à la Stratégie canadienne d'interopérabilité des communications (SCIC), un guide de haut niveau et un outil clé pour réaliser la vision d'interopérabilité des communications. Attendez-vous à une annonce importante au sujet du plan et de la stratégie au début de 2011.

L'un des sous-produits importants du PICT implique le concept d'un Centre d'interopérabilité de la sécurité publique (CISP). Initialement conçu comme un plan d'action du PICT, le CISP ferait la promotion de l'innovation canadienne par la promotion des méthodes et des outils pour soutenir et promouvoir le développement de concepts, la spécification, l'intégration, l'essai et l'évaluation des capacités d'interopérabilité des communications pour améliorer la sûreté et la sécurité des Canadiens.

Le CISP mettrait l'accent sur les cinq plages du Continuum d'interopérabilité SAFECOM® — cadre adopté au Canada pour aider les organismes d'intervention d'urgence et les décideurs à planifier et à mettre en oeuvre des solutions d'interopérabilité pour les communications voix et données. Actuellement, un groupe de travail officiel a été lancé, des points d'action ont été identifiés et des travaux sont en cours pour livrer un projet de démonstration ou une preuve de concept à court terme.

Alors que les premières années d'existence du GICTI ont porté principalement sur l'interopérabilité vocale, en 2009 l'accent a été élargi pour inclure tous les aspects de l'interopérabilité — des questions telles que la conscience de la situation, les images opérationnelles communes, le suivi des ressources (force bleue), les systèmes d'information géographique, l'interopérabilité des données et les questions de spectre avec un accent sur le 700 MHz et les alertes communes. La réaction à ce jour a été très positive.

Pour l'avenir, le GICTI continuera à aider à informer et mobiliser les premiers intervenants canadiens sur un large éventail de problèmes d'interopérabilité — cela fait partie d'un effort de collaboration pour aider à améliorer l'interopérabilité au Canada. En outre, alors que nous continuons à travailler sur le PICT et la CCIS (et aidons à faciliter les progrès sur la SCIC), les intervenants canadiens seront mieux en mesure de surmonter de nombreux obstacles à la communication tout en protégeant les Canadiens.

Pour plus d'informations sur les efforts du GICTI, visitez le site www.citig.ca. □

Lance Valcour, O.O.M. est un inspecteur à la retraite du Service de police d'Ottawa qui travaille actuellement avec le Centre canadien de recherches policières pour animer le Groupe d'intérêt canadien en technologie de l'interopérabilité. En plus de sa participation de longue date en tant que membre du Comité de l'informatique de l'Association canadienne des chefs de police et de la section de gestion de l'information de l'Association internationale des chefs de police, il a compilé plus de 33 ans d'expérience dans des fonctions opérationnelles et conduit de nombreuses opérations et projets liés à la technologie dans les secteurs public et privé.

MEDICAL SC

Dr Mark Lysyshyn, Medical Adviser at the Centre for Emergency Preparedness and Response in Canada, tells CBRNe World's Gwyn Winfield about their lessons learned.

For a country in the Northern hemisphere, Canada seems to get its fair share of exotic diseases. As well as being hit hard by SARS and H1N1, Canada has also had to deal with an Ebola case (2001) and a serious listeriosis outbreak (2008). This magazine's focus on CBRN threats (chemical, biological, radiological and nuclear) within a Canadian context has previously centred on defence, fire and police services. Yet – like other countries – any Canadian CBRN response will involve the public health system. Within the Public Health

Agency of Canada (PHAC), the CBRN role is looked after by the Centre for Emergency Preparedness and Response (CEPR).

Public health response is the shared responsibility of local, provincial and federal governments, and CEPR is the central co-ordinating body for the federal public health response to everything, from CBRN through to outbreaks and quarantine. It is split into interlocking offices: the Health Portfolio Operations Centre, the Office of Emergency Response Services, the Pathogen Regulation Directorate, the Office of Quarantine Services, the Office of Program Coordination and Partnerships and the Offices of the Director General and the Executive Director.

Since CEPR has the Pathogen Regulation Directorate within it, there is no doubt that, as the US rolls out its "World at Risk" legislation which mandates a certain level of security, and it looks across its northern border, that this office will be the one ensuring Canada, should it need to be, is compliant.

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HOOOL

Editor's note: This article originally appeared in the Summer 2010 issue of CBRNe World magazine, www.cbrneworld.com. It has been reprinted here with permission.

Note de la rédaction : Cet article a paru dans le numéro Été 2010 du magazine CBRNe World, www.cbrneworld.com. Il a été reproduit ici avec permission.



“SARS taught us the value of public health measures, quarantine of contacts, isolation of sick patients and closure of public places,” says Dr Mark Lysyshyn of the Centre for Emergency Preparedness and Response.

« Le SRAS nous a enseigné la valeur des mesures de santé publique, de la mise en quarantaine des contacts, de l'isolement des malades et de la fermeture des lieux publics », explique le Dr Mark Lysyshyn du Centre de mesures et d'interventions d'urgence.



ÉCOLE DE MÉDECINE

Dr Mark Lysyshyn, médecin-conseil au Centre de mesures et d'interventions d'urgence du Canada fait état des leçons apprises à Gwyn Winfield de CBRNe World.

Pour un pays de l'hémisphère nord, le Canada semble obtenir sa juste part de maladies exotiques. En plus d'être durement touché par le SRAS et la grippe H1N1, le Canada a également dû faire face à un cas d'Ebola (2001) et à une éclosion de listériose (2008). Ce magazine se concentre sur les menaces CBRN (chimiques, biologiques, radiologiques et nucléaires). Les préparatifs du Canada dans ces domaines ont jadis impliqué principalement la Défense, les services d'incendie et la police, mais il faudra aussi, comme dans d'autres pays, mettre l'accent sur le système public de santé. Sein de l'Agence de santé publique du Canada (ASPC), le rôle CBRN est pris en charge par le Centre de mesures et d'interventions d'urgence (CMIU).

La réponse de santé publique est une responsabilité partagée des gouvernements locaux, provinciaux et fédéral, et le CMIU est l'organe central de coordination de la

suite à la page 25

Any event the size and breadth of the Olympics is always going to be a major challenge – certainly for the health community.

Tout événement de la taille des Jeux olympiques va toujours être un défi majeur — et certainement pour les services de santé.



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AN EADS COMPANY

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But Canada has a blot on its biosecurity copybook. In May 2009, a scientist moving from the National Microbiology Lab in Winnipeg was arrested after allegedly trying to smuggle Ebola over the Manitoba-North Dakota border. Konan Yao was moving from PHAC to the National Institute of Health Lab in Maryland, and seemingly decided he didn't want to leave without samples of the Ebola virus that he had been working on. Having made this decision, he put 22 vials of denatured, noninfectious Ebola in the trunk of his car. Yao was described as a "normal researcher" and, while there was no immediate risk to the public, this shows scientists can put their work before safety and that it is possible to "take work home." CEPR's Medical Advisor, Dr Mark Lysyshyn, suggested a lot had changed since this case.

"One of CEPR's roles is oversight of all labs in Canada working with human pathogens," he said. "This was previously under the *Human Pathogen Importation* legislation, and the *Human Pathogen and Toxin Act* was passed more recently. The two pieces of legislation require labs working with human pathogens to comply with biosafety guidelines, and the office here has a robust inspection program for Level Three and Four labs to ensure compliance with the lab bio-safety guidelines requirements.

"The *Pathogen and Toxin Act* needs to come fully in force, but when it does it will provide enhanced pathogen accountability in terms of inventory controls and personnel suitability and reliability to work with dangerous pathogens for all labs working with human pathogens, so we hope the new act will limit the potential for a Yao-type incident to happen again."

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réponse de santé publique du gouvernement fédéral toute menace CBRN ou épidémie. Le CMIU se divise en plusieurs unités étroitement liées : le Centre des opérations du portefeuille de la santé, le Bureau des services d'interventions d'urgence, la Direction de la réglementation des agents pathogènes, le Bureau des services de quarantaine, le Bureau de la coordination des programmes et des partenariats et les bureaux du directeur général et du directeur exécutif.

Comme le CMIU englobe la Direction de la réglementation des agents pathogènes, il ne fait aucun doute que ce bureau sera responsable de la conformité du Canada à la législation américaine « World at Risk » qui impose un certain niveau de sécurité.

Mais le Canada a une tache sur son cahier de bio-sécurité. En mai 2009, un ex-scientifique du Laboratoire national de microbiologie de Winnipeg a été arrêté après avoir tenté de traverser la frontière entre le Manitoba et le Dakota du Nord avec des échantillons d'Ebola. Konan Yao avait quitté son emploi à l'ASPC pour un autre au laboratoire des NIH au Maryland, et il avait apparemment décidé qu'il ne voulait pas partir sans des échantillons du virus Ebola sur lequel il avait travaillé. Ayant pris cette décision, il a mis 22 flacons d'Ebola dénaturé, non infectieux, dans le coffre de sa voiture. Yao a été décrit comme un « chercheur normal » et même si le public n'a pas été mis en danger, il a démontré que les savants pouvaient faire passer leur travail avant la sécurité et qu'il est possible de « rapporter du travail à la maison ».

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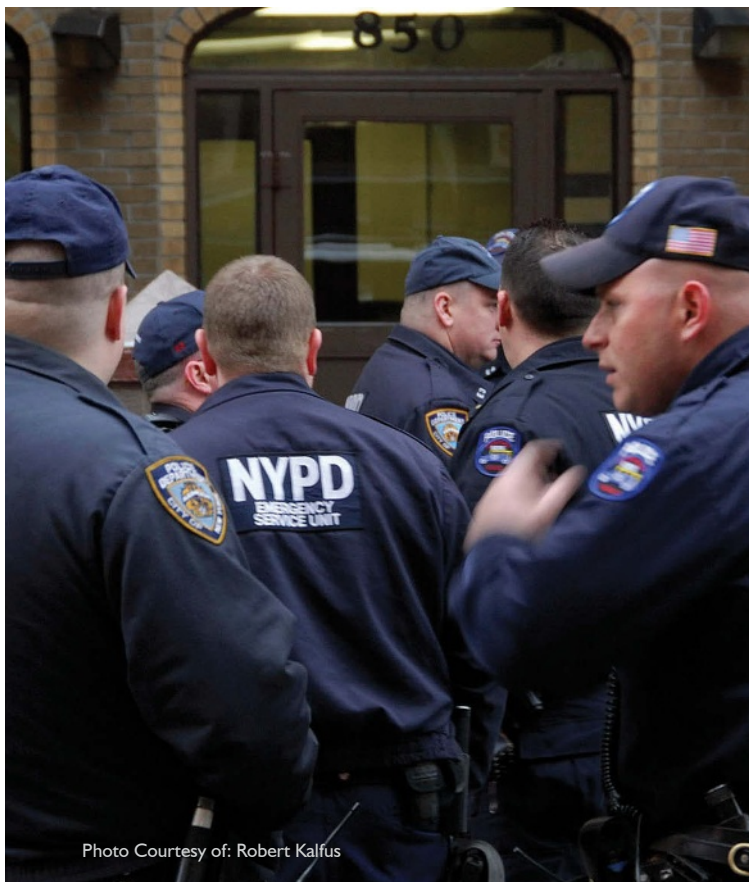


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« WE PARTICIPATED IN A SERIES OF WHOLE-OF-GOVERNMENT EXERCISES LEADING UP TO THE OLYMPICS, EXERCISES BRONZE, SILVER AND GOLD. »

More recently, Canada has been fighting the H1N1 battle which, when combined with their previous SARS experience, has given PHAC a rounded idea of what to expect in terms of unexpected outbreaks. Since PHAC is the coordinating body for the federal public health response, what lessons have been taken out of these outbreaks?

“Every challenge brings us new solutions and allows us to improve our response,” said Dr Lysyshyn. “We don’t have terrorist CBRN attacks all the time, so we have to take advantage of these outbreak events that we do have more routinely to improve our responses. I wasn’t with the agency for SARS, but it taught the public health community quite a bit about responding to an unknown pathogen that we didn’t have medical countermeasures for. This may be the case in a biological terrorism event – we may not know what the agent is for some time and even then we might not have medical countermeasures for certain agents, or have them in sufficient quantities. So SARS taught us the value of public health measures, quarantine of contacts, isolation of sick patients and closure of public places. These things, combined with infection control in the hospital and community – hand washing and masks – could be put into effect and successfully used.

“From an organizational perspective, SARS led to the creation of the Public Health Agency and the Pan-Canadian Public Health Network. SARS revealed to the public health community in Canada that there was a need for federal leadership and co-ordination in responding to complicated multijurisdictional outbreaks. So the creation of the Agency, of the position of the Chief Public Health Officer and the pan-Canadian Public Health Network that connects the provinces with the federal government are all connections that arose following SARS. I was with PHAC for H1N1, and I can say that event taught us a great deal about responding to CBRN events. It taught many of us at the Agency to work in an activated emergency operations centre. For H1N1 our emergency operations centre was activated for nine months, and it needed a lot of people to staff those positions. In order to work in the

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Le conseiller médical du CMIU, le Dr Mark Lysyshyn, croit que cette affaire a provoqué de nombreux changements.

« L’un des rôles du CMIU est de surveiller tous les laboratoires au Canada qui travaillent avec des agents anthropopathogènes, dit-il. Cela relevait antérieurement du *Règlement sur l’importation d’agents anthropopathogènes et maintenant de la Loi sur les agents pathogènes humains et les toxines.*

Les deux lois exigent que les laboratoires travaillant avec des agents pathogènes humains se conforment aux directives de prévention des biorisques, et le bureau a un programme d’inspection étroite des laboratoires de niveau trois et quatre pour assurer la conformité avec les exigences des lignes directrices en matière de biosécurité en laboratoire.

« La *Loi sur les agents pathogènes et toxines* lorsqu’elle sera pleinement en vigueur, renforcera le suivi des pathogènes en termes de contrôle des stocks et de l’aptitude du personnel à travailler avec des agents pathogènes dangereux. Alors nous espérons que la nouvelle loi limite la possibilité d’un incident de type Yao. »

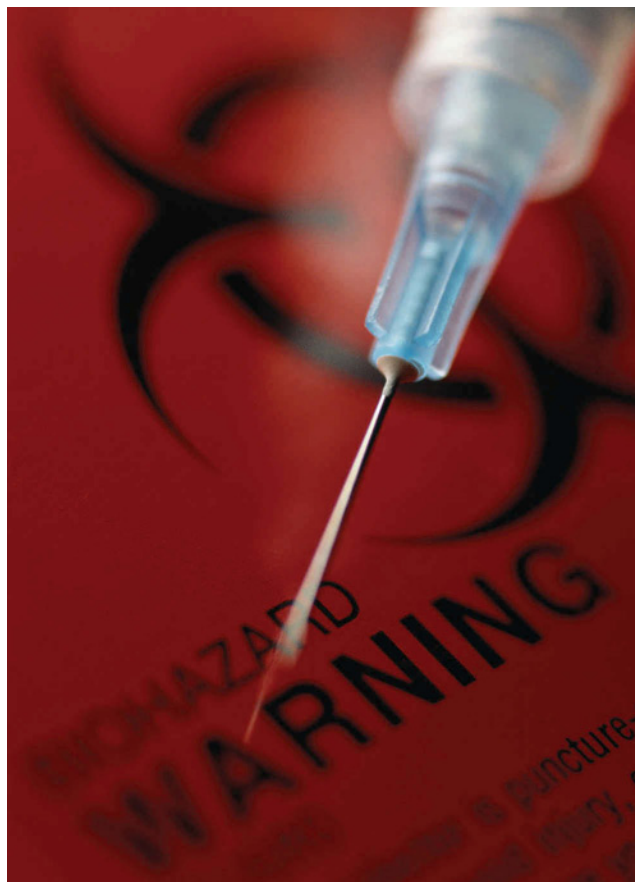
Plus récemment, le Canada a lutté contre le virus H1N1 ce qui, avec l’expérience antérieure du SRAS, a permis à l’ASPC de savoir à quoi s’attendre en termes de prolifération inattendue. Quelles leçons en a tiré l’ASPC comme organe de coordination pour l’action de santé publique du gouvernement fédéral?

« Chaque défi nous apporte de nouvelles solutions et nous permet d’améliorer notre réponse, a déclaré le Dr Lysyshyn. Nous n’avons pas d’attaques terroristes de type CBRN tout le temps, nous devons donc profiter de ces épidémies pour

améliorer notre capacité de réponse. Je n’étais pas à l’agence au moment du SRAS, mais celui-ci nous a appris de nombreuses leçons sur la lutte contre un pathogène inconnu. Cela pourrait être le cas lors d’une attaque bioterroriste. Nous ne saurons peut-être pas avant un certain temps quel est l’agent pathogène et même alors, nous n’aurons peut-être pas de remède. Ainsi, le SRAS nous a enseigné la valeur de mesures de santé publique : mise en quarantaine des contacts, isolement des malades et fermeture des lieux publics. Ces mesures, combinées avec le contrôle des infections à l’hôpital et dans la collectivité — le lavage des mains et les masques — pourraient être mises en oeuvre et utilisées avec succès.

« D’un point de vue organisationnel, le SRAS a conduit à la création de l’Agence de

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emergency operations centre staff needed to know how to function in an incident management system (IMS). People got good experience of working within the IMS, and for future events we have more depth in our organization and are more prepared to respond – we mounted a response to the Vancouver Olympics and there was a lot less training needed because of that.”

While less training was needed on the back of a previous outbreak, it could not be assumed the Olympics would be an easy ride. Any event the size and breadth of the Olympics is always going to be a major challenge – certainly for the health community. Any incident would have seen the hospitals flooded with the ill and worried; this is not only a draw-down on the medical health professionals, but also makes it difficult for them to deal with all the business-as-usual patients – those that require long-term health care, dialysis and chemotherapy. How then did the CEPR prepare to deal with this emergency?

“The thing to keep in mind is that, in Canada, the provinces and territories have jurisdiction over frontline health care,” said Dr Lysyshyn. “Here at PHAC we provide national leadership, coordination and surge capacity to the provinces upon their request. Plans needed to be put in place at the local, provincial and federal level for the Olympics, and the Public Health Agency developed a mass-gathering public health plan for the Olympics which outlined our enhanced surveillance activities, response capabilities and protocols for the federal health portfolio, which consists of PHAC and Health Canada.

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santé publique et du Réseau pancanadien de santé publique. Le SRAS a révélé à la communauté de santé publique du Canada que le gouvernement fédéral devait diriger et coordonner la réponse aux épidémies couvrant des territoires de compétence multiples. Ainsi, la création de l'Agence, du poste de directeur général de la santé publique et du Réseau pancanadien est un sous-produit de l'épidémie de SRAS. J'étais à l'ASPC lors de l'épidémie de H1N1, et je peux dire que cet événement nous a enseigné beaucoup de leçons en vue d'une attaque CBRN. Il nous a enseigné à agir comme un centre d'opérations d'urgence. Pour le H1N1 notre centre a été activé pendant neuf mois, et il a fallu beaucoup de personnes pour occuper ces postes. Afin de travailler dans le centre des opérations d'urgence, le personnel avait besoin de savoir comment fonctionner dans un système de gestion des incidents (SGI). Les gens ont pris de l'expérience au sein du SGI, et c'est ce qui nous a permis d'organiser ensuite la réponse en vue des Olympiques de Vancouver avec beaucoup moins de formation. »

On ne pouvait pas présumer, toutefois, que la préparation aux Olympiques serait facile. Un événement de cette taille va toujours être un défi majeur. Tout incident aurait rempli les hôpitaux, qui

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« NOUS AVONS PARTICIPÉ, AVANT LES JEUX OLYMPIQUES, À UNE SÉRIE D'EXERCICES APPELÉS BRONZE, ARGENT ET OR. »

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« WE DON'T HAVE TERRORIST CBRN ATTACKS ALL THE TIME, SO WE HAVE TO TAKE ADVANTAGE OF THESE OUTBREAK EVENTS THAT WE DO HAVE MORE ROUTINELY TO IMPROVE OUR RESPONSES. »

“We also did some additional CBRN work to develop a protocol for what would happen if there was a positive bio detection, and these protocols were validated through an exercise involving all levels of public health – local, provincial and federal, as well as people from the security sector to build the health/security interface. We participated in a series of whole-of-government exercises leading up to the Olympics, exercises BRONZE, SILVER and GOLD.

The concept of “surge” capacity is one of the easiest to write and most difficult to provide. During a serious outbreak there is enough concern about absenteeism in the immediate region where people are dying, never mind bringing people into the region, away from their homes, when they know their province might be the next one to be hit. So how did they prepare to provide the surge and also bring out the long-term care patients so the affected province can concentrate on the outbreak? “The provinces already have relationships with their neighbours to unload patients they can’t handle within their system – the critically ill and the pregnant.” said Dr Lysyshyn. “There are agreements with neighbouring provinces and states,

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auraient non seulement manqué de médecins, mais aussi de ressources pour traiter les patients habituels qui ont besoin de soins de longue durée, de dialyse et de chimiothérapie. Comment le CMIU s'est-il préparé à cette urgence éventuelle?

« Il faut se souvenir que ce sont les provinces et territoires qui sont responsables des soins de première ligne, poursuit le Dr Lysyshyn. L'ASPC peut seulement donner une direction, coordonner et prêter main-forte aux provinces qui le demandent. Il a fallu adopter des plans locaux, provinciaux et fédéraux pour les Olympiques, et l'ASPC a élaboré un plan de santé publique qui comprenait une surveillance accrue, des capacités d'intervention et des protocoles.

« Nous avons également élaboré un protocole CBRN en cas de biodétection positive, et celui-ci a été validé par un exercice impliquant tous les paliers de la santé publique — local, provincial et fédéral — de même que des gens du secteur de la sûreté.

Nous avons participé, avant les Jeux olympiques, à une série d'exercices appelés BRONZE, ARGENT et OR.

Le concept de capacité de capacité de « pointe » est l'un des plus faciles à écrire, mais des plus difficiles à réaliser. Au cours d'une grave épidémie, on a déjà assez de problèmes d'absentéisme dans la région où les gens meurent, alors ne pensez même pas à amener des gens des autres régions quand ils savent que leur province sera la prochaine à être touchée. Alors, comment se sont-ils préparés à prêter main-forte et à évacuer les patients

suite à la page 32

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and it is fairly routine that patients get transferred between provinces and states. There were discussions leading up to the Olympics about how we could do that during the Games and in a large-scale fashion – if mass aerial evacuation was needed.”

One of the assets that was able to provide some support for the Olympics was the Health Emergency Response Team (HERT). These were first mooted in 2002, and there was supposed to be a range of them throughout Canada, but little has happened after the first one was established. These teams are supposed to be the emergency team providing surge capacity for the province that has been impacted by an emergency – either natural or man-made – to provide emergency medical care, mental health care and public health risk identification. So what has happened to the other teams? Is this an idea that has run out of support? “There is one Health Emergency Response Team, based here in the Ottawa area,” confirmed Dr Lysyshyn. “It has been in business for about three years and has 80 members: 25 nurses, 35 paramedics, five respiratory therapists, 12 physicians, and three pharmacy technicians. They do exist and are equipped, staffed and trained; the idea is they would provide surge support to a province or territory. They can act as a self-sufficient medical team to provide acute care for patients for a limited period of time, and as such did deploy to the Vancouver Olympics – not in response to a request but in response to an earlier arrangement to provide some of the medical care during the Games.

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de longue durée pour que la province touchée puisse se concentrer sur l'épidémie? « Les provinces ont déjà des relations avec leurs voisins pour décharger les patients en surnombre — ceux qui ont des maladies graves et les femmes enceintes, poursuit le Dr Lysyshyn. Il y a des ententes avec les provinces et les États voisins, et il est assez courant que les patients soient transférés entre les provinces et les États. Il y avait des discussions avant les Jeux olympiques pour voir si nous pouvions faire une évacuation de masse par voie aérienne. »

L'un des atouts qui a été en mesure de fournir un certain soutien pour les Jeux olympiques a été l'Équipe d'intervention sanitaire d'urgence (EISU). Évoquées pour la première fois en 2002, il devait y en avoir partout au Canada, mais la création de la première a eu peu de suites. Ces équipes sont censées fournir une capacité de pointe dans la province touchée par une situation d'urgence – soit naturelle ou d'origine humaine — afin de fournir des soins médicaux d'urgence, des soins de santé mentale et l'identification des risques sanitaires. Alors qu'est-il

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“Instead of creating more of these teams over the past years, the new idea has become a national medical reserve of health emergency responders that would be developed with the provinces and territories. This would have broad representation across Canada, so the current HERT team would be integrated into this national medical reserve. So it wouldn't be teams all across Canada – it would be one medical reserve that could operate in different configurations; this is the current model being developed.”

However, this would seem to be a retrograde step; a national reserve would, by definition, be national, as distinct from the HERTs that would come from regions. Not only would this cut down on their transit time, but it would also give them the advantage of knowing each other to a far greater degree than if they were pulled from all over Canada. How, then, is CEPR planning to get them on the ground in a matter of hours? “The HERT team or the National Medical Reserve are national teams in the sense that they are organized nationally,” said Dr Lysyshyn. “But the people on these teams already work within a province or territory so if there is an emergency there it is hard for them to act as their own surge capacity. The people will need to come from neighbouring areas, but they don't have to fly in as they are coming from adjacent areas. But they are part of the national medical reserve.”

Yet some of the specialists they will need for this team, such as epidemiologists and virologists, mean there will have to be a time delay as they are, potentially, shipped from coast to coast, rather than coming from a HERT that might be closer to the incident. Dr Lysyshyn said there were already links at the provincial level that would be able to speed this up, “The main contingency is the existing agreements between provinces and states,” he said. “There are various cross-border agreements; there is one out west, for example – the Pacific Northwest Emergency Management Agreement – and they have provision for medical personnel or supplies or whatever is needed from the neighbouring provinces and states. That is the first line until the national medical reserve becomes fully implemented. There are similar arrangements throughout North America, such as the Great Lakes Health Accord, and another in the Atlantic region.”

PHAC has had a hard time of it. There was a certain amount of bad press about their handling of the listeriosis outbreak, and also their handling of the H1N1 outbreak – but to put these into perspective they were national, rather than international, scandals – the sort that every national health agency has when confronted with an unexpected outbreak. Yet, as Dr Lysyshyn notes, once the problems were identified the funds were found to fill in the gaps in the system. There is no doubt that, with any CBRN outbreak, the health providers generally will find the approbation of the press – the frontline responders that drag the victims out will be seen as heroes, while the system that needs to deal with this unexpected surge will be castigated for each one lost. Perhaps, then, the constant testing of Canada's public health system will prove to its advantage; the problems that have been identified in earlier cases will have been dealt with by the time a major terrorist attack happens. □

arrivé aux autres équipes? Est-ce une idée qui n'a plus de soutien? « Il y a une EISU ici, dans la région d'Ottawa, confirme le Dr Lysyshyn. Elle existe depuis trois ans et compte 80 membres : 25 infirmières, 35 auxiliaires, 5 inhalothérapeutes, 12 médecins et 3 techniciens en pharmacie. Ils sont prêts à porter main-forte à une province ou à un territoire. Ils peuvent agir comme une équipe médicale autonome pour prodiguer des soins aigus aux patients pour une période de temps limitée. On les a déployés à ce titre aux Olympiques de Vancouver — non pas en réponse à une demande, mais en réponse à un arrangement préalable pour fournir une partie des soins médicaux pendant les Jeux.

« Au lieu de créer plusieurs de ces équipes, on parle maintenant de créer une réserve nationale d'intervenants qui serait formée avec les provinces et les territoires. Elle aurait une large représentation à travers le Canada, et l'EISU serait intégrée à cette réserve. Donc, ce ne seraient pas des équipes partout au Canada, mais une réserve médicale qui pourrait fonctionner dans différentes configurations. »

Toutefois, cela paraît rétrograde; cette réserve serait par définition nationale et distincte des EISU provenant des régions. Non seulement cela réduirait-il leurs temps de transit, mais cela leur donnerait aussi l'avantage de se connaître beaucoup mieux que si on les recrutait de partout au Canada. Comment le CMIU compte-t-il donc les déployer en quelques heures seulement? « L'équipe EISU ou la Réserve nationale sont des équipes nationales dans le sens où elles sont organisées au niveau national, explique le Dr Lysyshyn. Mais les membres de ces équipes travaillent déjà dans une province ou un territoire, alors s'il y a une urgence, il est difficile pour eux d'être leur propre capacité de pointe. Les gens devront venir des régions voisines, mais ils feront partie de la réserve nationale. »

Il faudra cependant que ces équipes comptent des spécialistes comme des épidémiologistes et des virologues, ce qui veut dire qu'on devra attendre leur transport d'un bout à l'autre du pays. Le Dr Lysyshyn dit qu'il y a déjà des liens au niveau provincial pour accélérer les choses. « La contingence principale est celle des accords existants entre les provinces et les États, dit-il. Il y a des accords transfrontaliers comme le Pacific Northwest Emergency Management Agreement qui permettent de faire appel aux ressources des provinces et des états voisins. C'est la première ligne jusqu'à ce que la réserve nationale soit pleinement mise en oeuvre. Il existe des dispositions similaires en Amérique du Nord, comme le Great Lakes Health Accord, et un autre dans la région de l'Atlantique. »

L'ASPC a eu beaucoup de difficultés. Elle a eu mauvaise presse sur son traitement de la listériose et du H1N1, mais c'étaient des scandales nationaux et non internationaux, typiques d'une agence sanitaire nationale confrontée à une écloison imprévue. Pourtant, comme le note le Dr Lysyshyn, une fois que les problèmes ont été identifiés les fonds ont été trouvés pour combler les lacunes dans le système. Il ne fait aucun doute que, dans toute écloison CBRN, les prestataires de santé en général auront l'approbation de la presse — les intervenants de première ligne qui traînent les victimes seront perçus comme des héros, tandis que le système qui doit faire face à cet afflux inattendu sera fustigé pour chaque perte de vie. Peut-être que ces épreuves du système de santé publique l'auront mieux préparé aux éventuelles attaques terroristes. □

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Intergraph's open and interoperable software solutions reduce the cost of ownership and increase operational efficiencies for more effective emergency response.

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Outserts



Inserts
Outserts



THE EVOLUTION OF EXCELLENCE

2011 INTERNATIONAL CONFERENCE FOR POLICE & LAW ENFORCEMENT EXECUTIVES

MAY 15 - 17, 2011 | DELTA GRAND OKANAGAN | KELOWNA, BC, CANADA



You're Invited

Deputy Commissioner Peter Hourihan of "E" Division of the Royal Canadian Mounted Police invites you to attend the International Conference for Police & Law Enforcement Executives to be held in Kelowna, British Columbia from May 15th to 17th, 2011. The theme "The Evolution of Excellence" will highlight the growing importance of pursuing excellence through effective leadership strategies in an ever changing social environment.

Topics

The conference program will highlight:

- Strategies for renewing your organization for excellence
- Ideas for creating strategic support from your executive team
- Concrete actions for maintaining high morale and discipline
- Personal accounts from executives who have faced catastrophic events
- Strategies for creating opportunities out of chaos
- Steps for identifying and removing barriers to the next level of excellence



Invited Speakers

An international roster of speakers will share their personal experiences on a variety of issues every police and law enforcement executive will face at some time in their career. Some of our invited speakers include:



ASSOCIATION OF CHIEF POLICE OFFICERS OF ENGLAND, WALES AND NORTHERN IRELAND
Sir Hugh Orde, President



WARSAW METROPOLITAN POLICE, POLAND
Rober Kukielka, Deputy Chief



ROYAL CANADIAN MOUNTED POLICE
William J. S. Elliott, Commissioner



MADRID MUNICIPAL POLICE, SPAIN
Emilio Monteagudo, Chief Inspector



SAN MATEO POLICE DEPARTMENT
Susan E. Manheimer, Chief of Police
President, California Police Chiefs' Association



TORONTO POLICE SERVICE
William Blair, Chief of Police
President, Canadian Association of Chiefs of Police



NATIONAL PUBLIC SECURITY SERVICES, ITALY
Antonio Manganelli, Chief of Police



PORTLAND POLICE BUREAU
Michael Reese, Chief of Police



SERVICE DE POLICE DE LA VILLE DE MONTRÉAL
Marc Parent, Directeur



FRENCH NATIONAL POLICE
Emile Perez, Directeur,
International Cooperation Department

How to Register:

 Register online at www.internationalpoliceconference.com

 Register over the phone by calling 604-688-2641 or toll free 1-888-452-6422 (Canada & US only) from 8am to 5pm PST



2011 INTERNATIONAL CONFERENCE FOR FIRE & RESCUE EXECUTIVES

MAY 29 - 31, 2011 | HILTON TORONTO | TORONTO, ON, CANADA



CANADIAN
ASSOCIATION
OF FIRE
CHIEFS



TORONTO
FIRE
SERVICES



ONTARIO
ASSOCIATION
OF FIRE
CHIEFS



VANCOUVER
FIRE & RESCUE
SERVICES



FIRE CHIEFS'
ASSOCIATION
OF BRITISH
COLUMBIA



CALGARY
FIRE
DEPARTMENT



ALBERTA
FIRE CHIEFS
ASSOCIATION



SERVICE DE
SÉCURITÉ
INCENDIE DE
MONTRÉAL



ASSOCIATION DES
CHEFS EN SÉCURITÉ
INCENDIE DU
QUÉBEC



CANADIAN
PROFESSIONAL
MANAGEMENT
SERVICES



You're Invited

Chief William Stewart of the Toronto Fire Services invites you to attend the International Conference for Fire & Rescue Executives to be held in Toronto, Ontario from May 29th to 31st, 2011. The theme "Leadership on the Edge of Reason" will highlight the importance of executive career development and will focus on issues critical to your success.

Topics

The conference program will highlight:

- Strategies for balancing reality with increasing public expectations
- Concrete actions for building relationships
- Strategies for creating equity in the collective bargaining process
- Ideas for renewing your organization's culture
- Practical strategies for gaining the edge in that next competition
- Actions that will create professional and effective communication with the union



Invited Speakers

An international roster of speakers will share their personal experiences on a variety of issues every fire and rescue executive will face at some time in their career. Some of our invited speakers include:



**SOUTH AUSTRALIAN METROPOLITAN
FIRE SERVICE**

Grant Lupton, Chief Fire Officer



**LONDON FIRE BRIGADE,
UNITED KINGDOM**

Ron Dobson, Commissioner



AUSTIN FIRE DEPARTMENT

Rhoda Mae Kerr, Fire Chief



DETROIT FIRE DEPARTMENT

James W. Mack, Jr., Executive Fire Commissioner



**SERVICE DE SÉCURITÉ INCENDIE
DE MONTRÉAL**

Serge Tremblay, Directeur



**ANTWERP CITY AND PORT FIRE AND
RESCUE SERVICE, BELGIUM**

Chris Addiers, Chief Fire Officer



DUBLIN FIRE BRIGADE, IRELAND

Hugh O'Neill, Chief Fire Officer



TORONTO FIRE SERVICES

William A. Stewart, Fire Chief



ODGERS BERNDTSON

Paul R. A. Stanley, Managing Partner



BUFFALO FIRE DEPARTMENT

Garnell W. Whitfield, Jr., Commissioner

How to Register:

 Register online at www.internationalfireconference.com

 Register over the phone by calling 604-688-2641 or toll free 1-888-452-6422 (Canada & US only) from 8am to 5pm PST

ELECTRICITY THE INVISIBLE KILLER™

Every year in Canada more than 1,000 contacts are made with energized high voltage power lines and equipment. In addition to these contacts, electrical substations are routinely broken into. A contact or break-in may require a response from police, fire or EMS workers. Each contact or electrical substation break-in has the potential to place emergency first responders at risk of serious injury or even death.

Don't become a casualty... Important information for Emergency First Responders



Canadian
Electricity
Association

Association
canadienne
de l'électricité



The DVD consists of six typical scenarios that may involve response from police, fire and EMS:



A police officer responds to a car accident involving a power line and pole. The officer is fatally injured when he contacts the vehicle which is in contact with an energized power line.

SCENARIO 1



A construction vehicle contacts a power line and the worker receives a severe electrical shock. Paramedics arrive and are exposed to the electrical hazard.

SCENARIO 2



Farming equipment contacts a power line and the paramedic demonstrates the lessons learned from scenario 2.

SCENARIO 3



The hazards that may be present when responding to a call involving electric utility substations are examined.

SCENARIO 4



The hazards of downed power lines, including trees are introduced.

SCENARIO 5



The potential hazards an emergency first responder may face when responding to a scene with an underground power line contact are introduced.

SCENARIO 6



The key learnings for emergency first responders from the DVD are:

- Perform a scene survey
- Assess the hazards
- Do not become a casualty
- Take control
- Treat the power line as energized
- Stay a minimum of 10 metres away
- Keep others away
- Contact the electric utility



City of Medicine Hat Electric Utility



For your local electric utility contact, please visit electricity.ca/theinvisiblekiller