

# City of Hamilton Report for or Consideration

To: Chair and Members

**Emergency and Community Services Committee** 

Date: February 27, 2025

Report No: HSC25013

Subject/Title: Transition of New Ambulance Stations to Posting Stations in

Support of the Central Ambulance Deployment Model

Ward(s) Affected: City Wide

#### Recommendations

1. That Hamilton Paramedic Service transition to a Central Deployment Model, with paramedics reporting to at least one large facility to receive vehicles and assignments.

- 2. That five (5) smaller Paramedic Posts be developed and built, in addition to the existing stations, consistent with the Master Plan, featuring reduced amenities to reduce the city's capital expenditures while maintaining adequate space for staff and response coverage across the city.
- 3. That staff be directed to develop a financial strategy, including exploration of funding sources and debt financing, to support planning, design, and construction costs for the five new Posts for the 2026 Capital budget.

# **Key Facts**

The purpose of this Report is to operationally and logistically support the shift from station-based reporting to a central deployment model as contemplated in Report HSC22012. The intent is to retain existing stations, including the Victoria Street Hub, develop the already approved and funded Central Reporting Station, and add five new, cost-efficient Posts in the key areas identified within Report HSC22012.

- A central deployment model is the most cost-effective and operationally efficient approach to paramedic resource management, allowing for improved coordination and resource use. It is utilized extensively in comparable services in the province.
- Under central deployment, each new Post added will be scaled down to essential
  amenities only, reducing both infrastructure duplication and significant capital
  expenses as compared to construction of single full-service stations.
- Having most staff report to a central reporting station for deployment improves supervisory interactions; a face-to-face check-in each shift helps address training, administrative follow-up, essential stock and supply management, and performance/support tracking.
- This initiative aligns with the previously approved New Paramedic Facility: Central Reporting Station (Report HSC24028/PW24037) and with the Paramedic Service Master Plan 2022-2031 (Report HSC22012).

#### **Financial Considerations**

Transitioning to a Central Deployment Model and building five additional limited-amenity Posts will reduce the scale and cost of constructing multiple full-service stations. Additionally, centralizing large-scale items (e.g., lockers, training rooms, parking) at one or two principal facilities lowers duplication. As outlined in Report HSC22012 capital investments are still required for the new Posts, requiring debt financing, development charges, or other revenue sources.

The required capital investments for the five posting locations have not yet been presented to Council or approved. Report HSC22012 outlined that all funding request will be further defined and integrated in the City's annual capital and operating budget processes for approval with the applicable year. Recommendation 3 above provides direction to develop these cost estimates for inclusion in the 2026 Capital Budget processes.

# **Background**

Historically Hamilton Paramedic Service has followed a full-service station-based reporting model, with multiple stations. Shifts are started and ended at the individual stations with dispersing shift starts. Recently, the primary Central Reporting Station was approved, paving the way for a more centralized resource allocation approach. To support projected demand, five additional Posts were recommended, but in a simplified format (garage, washroom facilities, lunch area, and lounge only).

Central deployment has been adopted by multiple jurisdictions because it provides a "hub-and-spoke" system acknowledged for efficiency and cost savings. Paramedics will still have access to existing stations. As time progresses paramedics currently reporting to single-start stations will be increasingly deployed from central reporting stations allowing leadership teams to meet daily with every crew and deployment of crews across the City to posts of varying levels of activities to be more balanced. If serviced properly, this approach can reduce response time, improve work balance for paramedics, avoid duplication of infrastructure, and ease the coordination of ambulance fleets and supply inventories, helping ensure vehicles spend less time out of service.

### **Analysis**

Under this model, paramedics will begin shifts at a central reporting facility, ensuring vehicles are fully prepared, cleaned, and stocked by Logistical staff. This centralized checkpoint provides frequent supervisory contact that has been historically limited by distance and multiple shift locations. Existing stations will remain operational to support coverage, supplemented by five new Posts featuring basic amenities.

Collectively, these improvements reduce deployment delays, improve equipment management, and promote daily interactions between staff and supervisors for training, performance reviews, and immediate issue resolution. Should future population growth and call volume surpass projections, Hamilton Paramedic Service may need to explore an additional central reporting station, offering further improvements to efficiency and on-site support for front-line personnel.

#### **Alternatives**

Build the five posting stations identified in HSC22012 as Full-Service Stations. This would raise both capital and long-term operating costs.

# **Relationship to Council Strategic Priorities**

Shifting to a central deployment model aligns with Safe & Thriving Neighbourhoods by providing reliable emergency response while optimizing resources. It also supports Responsiveness & Transparency by creating operational efficiencies, reducing redundant infrastructure, and improving supervisory oversight of daily front-line activities.

# **Previous Reports Submitted**

HSC24028/PW24037 – New Paramedic Facility: Central Reporting Station HSC22012 – Hamilton Paramedic Service Master Plan 2022-2031

## Consultation

The following staff were consulted who found there were no financial impacts. They note that these stations will be put in the 2026 Capital Budget.

Paul Ragona, Business Administrator, Financial Planning Administration and Policy

David Trevisani, Manager – Finance and Administration, Financial Planning Administration and Policy

## **Appendices and Schedules Attached**

None

Prepared by: Cliff Eggleton, Deputy Chief

Healthy and Safe Communities, Hamilton Paramedic Service

Submitted and Michael Sanderson, Chief

recommended by: Healthy and Safe Communities, Hamilton Paramedic Service