



Paramedics in Crisis: A report on the working conditions of Emergency Medical Services (EMS) Workers

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The National Union of Public and General Employees (NUPGE) is a family of 13 Components unions. Taken together, we are one of the largest unions in Canada. Most of our 425,000 members work to deliver public services of every kind to the citizens of their home provinces. We also have a large and growing number of members who work for private businesses.

The office of the National Union of Public and General Employees is situated on the traditional unceded territory of the Algonquin Anishinaabeg people and is now home to many diverse First Nations, Inuit, and Métis communities. We recognize and acknowledge the crimes that have been committed and the harm that has been done. And, we dedicate ourselves, as a union, to moving forward in partnership with Indigenous Peoples in a spirit of reconciliation and striving for justice.

Bert Blundon, President

Jason MacLean, Secretary-Treasurer

This paper outlines very serious concerns about the working conditions and the occupational health of paramedics, the workers who are central to Canada’s prehospital emergency medical system (EMS).

Background information: Who are we talking about?

Each year, paramedics attend to millions of patients in their communities across Canada, deploying complex medical and nonmedical skills. They perform an essential public service requiring the cooperation and coordination of numerous organizations devoted to providing timely prehospital care.

Paramedics are responsible for responding to medical emergencies, and where necessary, transporting patients by ambulance—ground and air—to hospital. Paramedics work for Emergency Medical Services (EMS) providers.

Municipalities and district social services administration boards are responsible for the provision of land ambulance services within their boundaries, while the provinces are responsible for these within certain First Nations communities and remote areas.

In some provinces, ground and air ambulance services are publicly administered. In others, aspects have been privatized. For example, in some provinces, air ambulance services are provided by non-profit corporations governed by independent boards of directors. And in some provinces, there are private ambulance operators.

In every province and territory, paramedics exercise very limited rights to collective bargaining because of essential services laws that prevent lockouts, and that prohibit workers from exercising their constitutional rights to strike. In addition, EMS workers are explicitly forbidden by law to refuse dangerous work, as stipulated in occupational health and safety (OHS) legislation. Under normal circumstances, provincial OHS statutes grant workers the right to refuse work where they have reason to believe that such work is likely to endanger themselves or another worker. This includes the right to refuse working where there is the threat of, or an instance of, workplace violence.

However, these rights do not normally apply to workers for whom danger is inherent in their work, or in their normal conditions of employment. And this includes paramedics. On a regular basis, paramedics are exposed to many different types of occupational danger: stress, trauma, critical incidents and dangerous events, sometimes involving children, and threats and violence against paramedics themselves while executing their normal duties. Exposure can be through personal engagement with such an event, or by witnessing it directly or indirectly.

Because these are considered inherent or normal conditions of employment, the rights of paramedics to occupational health and safety (OHS) are limited. Because dangerous circumstances are considered inherent in the paramedic’s job, or normal conditions of employment, and because a work stoppage would directly endanger the life, health, or safety of others, under the provincial OHS statutes, a person employed in the operation of

an ambulance service does not have the right to refuse or stop work that they believe is unsafe to themselves or another worker.

This paper outlines very serious concerns about the working conditions and the occupational health of paramedics, the workers who are central to Canada's prehospital emergency medical system (EMS).

Paramedics in Canada: Burnout, demoralization, and psychological injury

There is a growing body of evidence that Canada's system of prehospital emergency medical services is failing to protect the health and safety of its workers. And contrary to what some might expect, since the end of the COVID-19 pandemic, paramedics' working conditions are either not improving at all, or are deteriorating. This is the testimony from paramedics themselves about their normal everyday working conditions reported in reputable news sources.

The bigger picture: Public health care in crisis

Emergency medical services across Canada are in trouble for the same reasons the public health system is in crisis. After many decades of cuts, chronic underfunding, privatization, and wage stagnation, our hospitals and public health clinics are unable to meet the tremendous need. There are not enough nurses, family doctors, home care workers, psychiatrists, personal support workers, social workers, and other medical professionals for the many patients who need them. Patients need hospital beds, long-term care homes, and affordable mental health programs—all of which are in short supply. Systematic understaffing is part of the problem. Public health institutions need more of these workers—but they can't retain or recruit enough to adequately care for patients.

Prehospital emergency medical services: Wait times, offload delays, parked paramedics, and Code Red

One of the consequences of hospital staffing shortages is evident in the emergency departments in many cities. They are dangerously filled beyond capacity, patients in hospital beds and on stretchers parked in hallways, storage rooms, and closets. And this in turn is having a direct effect on prehospital emergency services. Because paramedics are under the authority of the hospital system, they are required to stay at hospitals with the patients they are transporting until beds or nurses are available. Exacerbating this problem, there are reports that ambulances are used to simply transfer patients not requiring any medical care.

Rampant overcrowding in emergency departments means paramedics are getting backed up in hospitals, where doctors and nurses are already swamped. During these periods, known as offload delays, paramedics are parked at hospitals where they are caring for patients in hallways and ambulance bays, unable to move on to the next person in need.

This is one of the major problems paramedics have faced for years: they can't respond to people that need them, because they're stuck in the emergency department. There are numerous reports that this results in serious delays that compromise patient safety.

Global News reported that in Winnipeg, it can take 20 minutes for paramedics to arrive. Other reports say longer: 30 minutes to several hours, during which paramedics are unavailable to take urgent calls.ⁱ

In its 2022 report, Nova Scotia’s Standing Committee on Health included powerful testimony from representatives of local paramedics’ unions about delays. One worker said, “We’re dealing with a system that has been left to rot and our paramedics are the ones left to pick up the pieces.” Another said, “Imagine being the paramedic crew who has to respond to call after call where a patient has died because you couldn’t get there in time—not because of anything you did, but because of a system in tatters. This is what our paramedics are facing every day.”ⁱⁱ

Is the pandemic to blame?

The result of all this is that there are slower ambulance response times, and ambulance wait times have gone up. In other words, this crisis in public hospitals is exacerbating a crisis in prehospital emergency medical services. Hospitals are using paramedics to relieve overcrowded and understaffed emergency departments. These problems are partly due to high call volumes, but they can’t be blamed on the COVID-19 pandemic, or the opioid and overdose crisis. While these certainly exacerbated the challenges experienced by paramedics, the EMS system was already in trouble long before the overdose crisis and pandemic began.

CBC News recently reported that the number of 911 calls has been rising for at least a decade; some estimates indicate by at least 5% per year.ⁱⁱⁱ In May 2022, the Nova Scotia Standing Committee on Health received testimony that Emergency Health Services call volumes increased 34% between 2011 and 2021.^{iv} A new study from the Parkland Institute and HSAA on Alberta’s EMS crisis explains: “The pandemic just exposed the weak foundation of a system that has been teetering on the edge for some time.” The report shows that the combination of COVID-19 and the drug overdose crisis “increased system pressures in an already depleted system that had no capacity to respond to unplanned emergencies.”^v

Code Red: Sometimes no ambulances at all

Perhaps the most dangerous manifestation of the EMS crisis is the alarming frequency in which a Code Red is issued, which means there are no ambulances or paramedics available to help, no matter how critical the emergency. In 2022, cities all over Canada reported Code Reds.^{vi} Toronto called one in January 2022, and Waterloo, called 11 in December alone. Between August 1 and December 6, 2021, Calgary and Edmonton were issuing red alerts every 90 minutes. According to the Parkland Institute study, Code Reds “have become the new norm In Alberta and exemplify a broken system with serious impacts on patients, paramedics, and our hospital system.”^{vii}

Occupational health and safety: Overworked paramedics are burnt-out, physically and psychologically injured

This crisis, the failure in prehospital emergency medical services, is injuring the workers central to that system—paramedics. There is an emerging body of empirical evidence grounded in the real experience of everyday work of paramedics that offers clarity about the impact that these working conditions are having on paramedics.^{viii} In short, the working conditions are taking a terrible toll.

Paramedic shortages: recruitment, retention, and turnover

Paramedics across Canada work in an EMS system that traps them in a vicious cycle of intersecting problems, each contributing to a system that is failing patients and workers. Here is the situation: they typically work long shifts, and are forced to work overtime because there isn't enough staff to cover the shifts.^{ix} With staff shortages, EMS workers can't adequately respond to all 911 calls, which creates distress at the inability to keep up with the increased demands. Bigger workloads, burnout, and demoralization result in problems with retention and recruitment. This is further exacerbated by low and stagnant wages, which in turn intensify the vicious cycle.^x With chronic understaffing, the overworked paramedics are not able to access vacation time. There are many reports of a lot more requests to go from full-time to part-time work. Some people are leaving the profession altogether.^{xi}

The bottom line is that paramedics are suffering burnout and exhaustion. They are demoralized and unable to cope. What's even worse is that all this is causing occupational injuries: physical, moral, and psychological, including post-traumatic stress disorder. And this is supported by data.

The Data

What is being reported in the media is corroborated by data and published research. For example, according to 2016 to 2022 data from the Workplace Safety and Insurance Board, paramedics are listed among the occupations with multiple suicide claims.^{xii}

In British Columbia there is evidence of an increase in the numbers of paramedics requiring assistance from Critical Incident Stress Management (CISM) programs. For example, in 2021 British Columbia Emergency Health Services reported an "all time high demand" for its CISM program compared to any other year previously.^{xiii} A news story from British Columbia reported that burnout and mental health issues are hitting first responders "worse than ever" and in ways "never seen before." As many as 30% of paramedics are on sick leave due to workplace psychological injuries, or are in treatment with CISM program psychologists or mental health professionals.^{xiv}

For instance, Health Sciences Association of Alberta learned through a freedom of information request that 623 paramedics working for Alberta Health Services (AHS) suffered a disabling injury on the job in 2022.^{xv}

In Nova Scotia, testimony provided to the Standing Committee on Health documented that, at any given time, from 200 to 250 paramedics are off on sick leave. Every day the province is short of paramedics because of workers on short-term and long-term disability.^{xvi}

Paramedics almost 5 times more likely than the general population to have mental injury

What is being reported in the media is also supported by scientific research. Published peer-reviewed studies reveal that paramedics experience diagnosed mental disorders with extreme frequency, because they are exposed to many different and recurring dangerous and traumatic events as a normal part of their work. This research verifies that a large proportion of paramedics suffer an alarming rate of occupational stress injuries, including PTSD.

There is broad international evidence published in highly reputable peer-reviewed literature that paramedics have substantially more difficulties than the general population with clinically significant symptoms of one or more mental disorders. Research published in the *Canadian Journal of Psychiatry* (2018) and the *Canadian Journal of Behavioural Science* (2019) reviews this evidence, adds to this body of research, and reveals very troubling findings among paramedics in Canada.^{xvii} The 2019 study by the *Canadian Journal of Behavioural Science* offers clear empirical evidence that different traumatic events are frequently experienced by paramedics. Paramedics are regularly exposed to violence and traumatic events, both directly and indirectly, as a normal function of their work.

There is growing evidence that the ongoing exposure to such events contributes to clinically significant symptoms of mental health disorders. And there is broad international and Canadian evidence that these workers have substantially more difficulties with mental injuries than the general population.

According to this research, paramedics are almost 5 times more likely than the general population (49.1% compared to 10.1%) to screen positive for clinically significant symptoms consistent with one or more mental disorders, including PTSD, major depressive disorder, generalized anxiety disorder, social anxiety disorder, panic disorder, and alcohol abuse.

Conclusion

The EMS crisis is the direct result of decades of destructive public policies of austerity, chronic underfunding and defunding, and privatizing the public health system. The crisis in public hospitals is spilling over into a failure in prehospital emergency medical services, which is having a devastating impact on paramedics, the EMS workers central to that system.

Paramedics work in situations of increased response times, offload delays at emergency centres (getting stuck in emergency departments), increased numbers of Code-Red alerts (i.e., no ambulances available). Their wages have stagnated, the result of years of deliberate anti-worker policies. They are overworked, burnt out, and suffering psychological and

moral injuries like never before. All this has led to recruitment and retention problems, thereby perpetuating the vicious cycle. Paramedics are

ⁱ Amy-Ellen Prentice, "Ambulance wait times getting slower, paramedic and union president calls on Manitoba for resources," *Global News*, Posted March 1, 2023, <https://globalnews.ca/news/9520266/ambulance-wait-times-getting-slower-manitoba> ; Simon Little and Neetu Garcha, " 'This isn't a heat wave issue': B.C. paramedics say there's a systemic crisis in emergency care," *Global News*, Posted July 9, 2021, Updated August 3, 2021, <https://globalnews.ca/news/8017380/bc-ambulance-crisis/>.

ⁱⁱ Nova Scotia Standing Committee on Health Annual Report 2022, May 17, 2022, Government Initiatives of Ambulance Availability and Offload Delays, and DHW Response Department of Health and Wellness; IUOE Local 727, 6, 7, 23, <https://nslegislature.ca/legislative-business/committees/standing/health/reports>.

ⁱⁱⁱ Shawn Jeffords, "Toronto's paramedic service struggles to keep pace amid burnout, competitive job market: Recruitment, retention challenges come as city enters final year of a plan to staff up EMS service," *CBC News*, Posted: Apr 14, 2023, <https://www.cbc.ca/news/canada/toronto/toronto-paramedic-retention-challenges-1.6809892>.

^{iv} Hansard, Nova Scotia House of Assembly Standing Committee on Health, Tuesday, May 17, 2022, 5, https://nslegislature.ca/sites/default/files/pdfs/committees/he/he_20220517.pdf.

^v Michael K. Corman, *Lights and Sirens: The Critical Condition of EMS in Alberta*, Health Sciences Association of Alberta and Parkland Institute, Alberta, 2023, 6, 33.

^{vi} Christina Frangou "Canadian paramedics are in crisis" *Maclean's* April 20, 2022, <https://macleans.ca/longforms/canadian-paramedics-are-in-crisis/>.

^{vii} Ibid., 9.

^{viii} Corman, *Lights and Sirens*.

^{ix} Shane Mercer "Fatigue main safety issue as paramedics poised to strike: Understaffed profession plagued by mental health issues caused by fatigue and burnout January 9, 2023," <https://www.thesafetymag.com/ca/topics/psychological-safety/fatigue-main-safety-issue-as-paramedics-poised-to-strike/432091>.

^x Amy-Ellen Prentice, "Ambulance wait times getting slower, paramedic and union president calls on Manitoba for resources," *Global News*, Posted March 1, 2023, <https://globalnews.ca/news/9520266/ambulance-wait-times-getting-slower-manitoba/>.

^{xi} Andrew Waterman, "How 'Kafkaesque situations and burnout are driving this physician and paramedic out of Newfoundland and Labrador,'" *Saltwire*, Oct. 14, 2022, <https://www.saltwire.com/atlantic-canada/news/how-kafkaesque-situations-and-burnout-are-driving-this-physician-and-paramedic-out-of-newfoundland-and-labrador-100783251/>.

^{xii} Shane Mercer "Paramedics pushed 'to the max' hope new committee will help," March 6, 2023, <https://www.thesafetymag.com/ca/topics/government-and-public-sector/paramedics-pushed-to-the-max-hope-new-committee-will-help/438404>.

^{xiii} BC Emergency Health Services, 2021 Progress Report, April 1, 2021 to March 31, 2022, http://www.bcehs.ca/about-site/Documents/bcehs_progress_report_2021_web.pdf.

^{xiv} Victoria Femia, "Paramedic burnout a growing concern as staff shortages continue in B.C.," *Global News*, Posted October 2, 2022, <https://globalnews.ca/news/9171120/paramedic-burnout-growing-concern-bc/>.

^{xv} Mike Parker, Health Sciences Association of Alberta, Press Conference, March 7, 2023.

^{xvi} Nova Scotia Standing Committee on Health, 9.

^{xvii} R. Nicholas Carleton et al., "Mental Disorder Symptoms among Public Safety Personnel in Canada," *The Canadian Journal of Psychiatry*, 63, no.1 (2018): 5. For a summary of the literature, see R. Nicholas Carleton et al., "Exposures to Potentially Traumatic Events Among Public Safety Personnel in Canada," *Canadian Journal of Behavioural Science/Revue canadienne des sciences du comportement*, 51, no. 1 (2019).