

West Kelowna Fire Rescue 2024 Q4

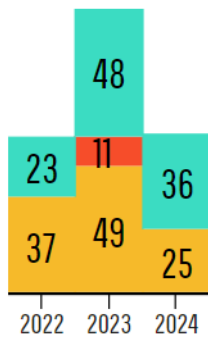
The response to the McDougall Creek Fire, from August 15 – September 30 has skewed some stats in 2023. This includes dollar loss, response hours and inspections completed.



	OVERALL STRENGTH	Career Firefighters	Paid-On Call Firefighters	Admin & Chiefs	Prevention
Q4 2023	93.6	43	40	6.6	4
Q4 2024	100.6	41	49	6.6	4

*Note: Career Firefighter vacancy due to promotion (Assistant Chief, Training Officer)

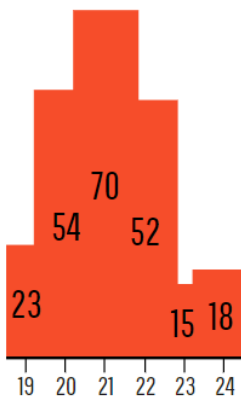
\$\$\$ Lost & Saved



● Q1 ● Q2
● Q3 ● Q4

Burning Permits

Open burning season commenced Oct 4, 2024

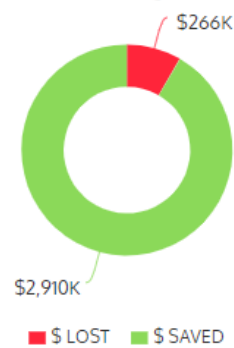


FireSmart Grants

Q4 2023

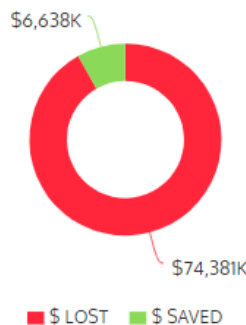


Q4 2024

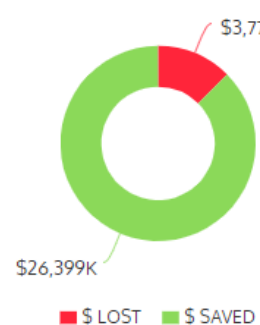


Dollars lost represents the value of property damaged due to fire events, while dollars saved represents the property value undamaged and saved. This metric is useful to evaluate the effectiveness of fire service.

2023 YTD



2024 YTD



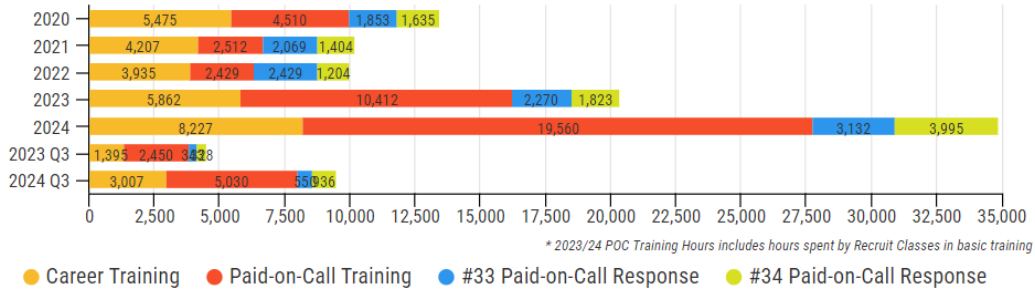
Fire Inspections Completed

COVID restrictions reduced inspections completed in 2020 and 2021. McDougall Creek Wildfire reduced inspections in Q3 & Q4 2023.

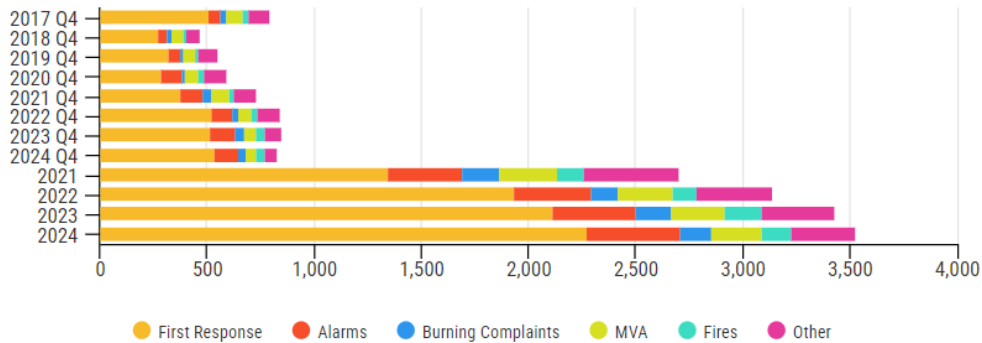
Year	Q1	Q2	Q1-3	Q4	Total
2020	664	368			Total: 1,032
2021	283	156	116	410	Total: 965
2022	222	264	401	433	Total: 1,320
2023	226	233	56	299	Total: 814
2024	294	315	330	282	YTD: 1,221

● Q1 ● Q2 ● Q1-3 ● Q4

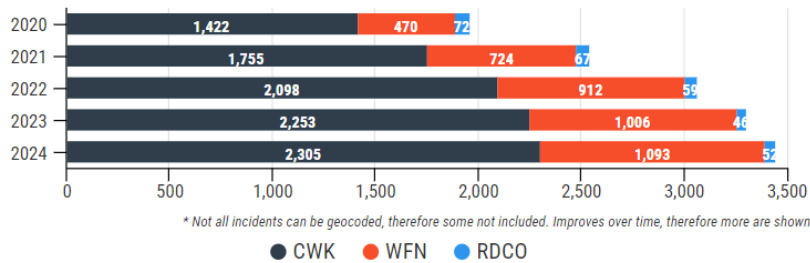
Activity Hours



Incidents



Incident Locations



\$58,600

raised by the 27th Annual Food Drive
14,537 pounds of food + \$6,602.05 in cash donations

Smoke Alarms Save Lives

44% (▼11%)

DID NOT have a smoke alarm present, working smoke alarm or installed properly

- 70 WKFR Firefighters
- 213 homes visited in October 2024
- 153 homes assessed
- 66 new alarms installed
- No cost to residents

The following statistics and information for First Medical Response (FR) calls:

	2018	2019	2020	2021	2022	2023	2024
# of FR calls	1452	1349	745	1350	1935	2116	2276
% of call volume	58%	56%	37%	50%	62%	61%	64%

Note: 2020/2021 were influenced by provincial direction not to attend some FR calls during the pandemic

- WKFR participates in the full range of first response calls (Purple, Red, Orange and some Yellow with ambulance delayed > 10 mins)
- While they represent a high proportion of our overall call volume, they are done on an as available basis.
- WKFR has engaged in a higher level of training (Emergency Medical Responder) for about 50% of our staff. This is cost neutral over a 5-year period due to different relicensing requirements.
- There is budget dedicated to FR equipment, training and medical oversight (~\$25,000)
- There are minor incremental costs (not presently tracked) relating to fuel and wear and tear on equipment as well as call outs of the POC staff for FR calls in their first due areas.
- We benefit from having this level of training within the department to meet WorkSafe requirements and protect/treat our firefighters.

In 2025, the province (BC Emergency Health Services) will propose a new First Responder Service Agreement (FRSA) and within that agreement is an opportunity to create a specific local Operational Response Plan (ORP). There are 20 communities across the province in the first wave of this initiative as of late 2024.

My recommendation is that in the second half of 2025 WKFR brings forward a comprehensive report to council, when the new FRSA is proposed to us. We will detail the specific costs as well as outline our recommended level of service under the new ORP. We would likely be proposing a decrease to the types of calls we attend (most minor would be dropped) that will result in a decrease in call volume. The time that is freed up would be allocated back to operational activities such as training or fire prevention inspections.

In terms of advocacy from the province, support in the form of funding for training and equipment would be of the greatest impact to delivery of this program. A stipend or payment based on calls attended would be an additional support. I am positively optimistic that the new agreement and the ability to create a local ORP will allow us to set our own service level and manage some of the concerns around downloading and increased call volumes.

Finally, with regards to the specific comment in the IMAC minutes regarding requests for additional firefighters – “municipalities may not need increased personnel with new methods used in building code to make buildings safer by construction design” I would note that in our case, responding to medical calls is entirely unrelated to our increased needs for complex buildings. Our staffing levels are not linked to our

medical call volumes in any fashion. Dropping or eliminating FR calls will not change the need to grow the fire service to meet the changing needs and risks of the community. “New methods” under the building code have already been considered in our complex buildings plan.