

Program Document No.: 12008.00		Subject: MFR Registration		Type: Policy	
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Replaces:	None	Revision Date 04:	July 1, 2006		
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		Revision Date 06:	July 24, 2007		
		Revision Date 07:	October 29, 2008		
		Revision Date 08:	February 5, 2009		
		Revision Date 09:	March 22, 2010		
		Revision Date 10:	June 23, 2010		
Signature of Director, EHS Provincial Programs: <i>original signed by Derek LeBlanc</i>			Signature of Manager, EHS MFR Services: <i>original signed by Robert Boudreau</i>		

1.0 Purpose:

- 1.1 To provide the medical first responders with standardized registration and training programs.

2.0 Procedure:

- 2.1 Medical first responders must complete MFR training through one of the EHS approved Medical First Responder training agencies - St. John Ambulance or Canadian Red Cross.
- 2.2 Anyone who is 19 years of age or older, has successfully completed MFR training by an EHS approved MFR training agency, is a current resident of Nova Scotia, and is associated with an EHS MFR response agency (listed in the CAD at the EHS Communications Centre) can make application for his/her EHS MFR tag by completing the *“Medical First Responder Registration/Re-registration Application”* form or contacting the EHS MFR Registrar at (902) 832-4685 or by email to mfr.registry@emci.ca.
- 2.3 Within the first 12 months of EHS sponsorship, fully sponsored MFR agencies are entitled to receive training costs reimbursed to the EHS MFR agency at a maximum rate of \$150 per person, to a maximum of \$1,500.

Each consecutive year, a fully sponsored EHS MFR agency is entitled to receive reimbursement for MFR training of two (2) persons at a maximum rate of \$150/person.

Cheques can only be issued to those agencies who supply an invoice that is marked “paid” when they apply for either their initial reimbursement or their annual reimbursement.

- 2.4 EHS MFR tags remain the property of EHS Emergency Health Services.

3.0 MFR Agency Training Reimbursement Request Form attached.



MFR AGENCY TRAINING REIMBURSEMENT REQUEST FORM

Per Program Document 12008.00, Section 2.3:

Within the first 12 months of EHS sponsorship, fully sponsored EHS MFR agencies are entitled to receive training costs reimbursed to the EHS MFR agency at a maximum rate of \$150 per person, to a maximum of \$1,500.

Each consecutive year, a fully sponsored EHS MFR agency is entitled to receive reimbursement for MFR training of two (2) persons at a maximum rate of \$150/person.

Cheques can only be issued to those agencies who supply an invoice that is marked "paid" when they apply for either their initial reimbursement or their annual reimbursement.

PLEASE PRINT

Fire Department/MFR Agency: _____

Mailing address: _____

Telephone: _____

Fax: _____

Training provider: St. John Ambulance

Canadian Red Cross

Date and location of training: _____

Total claim: \$ _____

Paid invoice/receipt attached:

Submitted by: _____

Position: _____

Signature: _____

Date submitted: _____

Note: Payment of this claim will be issued to the Fire Department or MFR Agency.

Submit completed form to: Manager
EHS MFR Services
239 Brownlow Avenue, Suite 300
Dartmouth, NS B3B 2B2
Fax: (902) 832-8602

Approved by: _____

Date: _____

Date processed to Finance: _____