

# DSB says standby ambulances may be eliminated

The Manitoulin Expositor

by Alicia McCutcheon

MANITOULIN—The days of ‘standby’ ambulances at such Island locations as the Manitoulin East Airport and Highway 540 and Bidwell Road may soon be over as statistical data has proven their usefulness in responding to an emergency from such a rural location is slim to none.

At last week’s monthly meeting of the Manitoulin-Sudbury District Services Board (DSB), emergency medical services chief Michael MacIsaac presented an issue report to the board regarding ambulance standbys, or ‘balanced emergency coverage.’

Mr. MacIsaac explained that when ambulance services were downloaded to the municipalities in 2000, an added level of responsiveness was sought and “balanced emergency coverage

became the goal” which is when code 8s, or ambulance standbys, came into being.

“The moment one station receives a call for service, another station moves,” he explained. “Depending on the number of available resources that move, it may be minor or it might actually involve moving (another ambulance) right to the station that lost its coverage. In general, the standby locations have been developed trying to reach a half-way point.”

For Manitoulin, between the Little Current and Espanola EMS stations, the standby is at Whitefish Falls; for Little Current and Wikwemikong, the standby is located at Manitoulin East Airport; for Mindemoya and Wikwemikong, it’s at Gauthier’s Road and Highway 6; for Gore Bay and Mindemoya stations, the standby is in Spring

Bay; while the Little Current and Mindemoya standby is at Highway 540 and Bidwell Road (also known as Moore’s Corner/Cup and Saucer Corner).

“In most cases, the standby location is not within a community but rather on the side of the road or intersection,” the chief of EMS continued. “An example of this is the Moore’s Corner standby. When Little Current gets a call, the first option is to send Mindemoya to Highway 540 and Bidwell Road. The actual parking lot is on the side of Bidwell Road and this location has no buildup of population. When Mindemoya is on standby at this location, they are roughly 12 minutes back to Mindemoya and 15 minutes back to Little Current.”

Mr. MacIssac explained that more and more calls for service

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occur each year, and the majority of these are Code 8 standbys. In 2012, 47 percent of the calls were for Code 8s, followed by Code 4s (urgent calls) at 27 percent.

The DSB studied the months between January 1, 2011 and September 30, 2012 which showed 11,186 Code 8 standbys, 91 percent of which resulted in the ambulance returning to its home base without having responded to any calls. "That, in any organization, is a very high level of futility," he said.

To further break it down, the percentage of time an ambulance gets a call while on standby that results in an improved response time is 4.7 percent, while the percentage for reduced response time while on standby is 3.5 percent.

New this year is the Ministry of Health and Long Term Care's legislated Response Time Performance Plan, which sees the DSB's former response time of 24 minutes reduced to between six and eight minutes when responding to a cardiac arrest. "These highly aggressive timeframes are extremely hard to maintain in a rural and remote environment," the chief said. "The previously noted timeframes, to

reach a community when on standby in, for the most part, an unpopulated roadside location, is vastly greater than the first two components of the new response time standard. In other words, there is no chance of achieving the response time criteria in any percentage when we are at a standby location. When you factor in the new response time standard with the highly ineffective nature of the standby, it becomes highly evident that our current situation, considering balanced emergency coverage, is not very effective."

Manitoulin, Espanola and Massey represent 79.7 percent of the overall call volumes of the DSB coverage area and for this area specifically, Mr. MacIsaac proposed the creation of three zones: Manitoulin West, Gore Bay and Mindemoya (with 4,051 calls last year); Manitoulin East, Little Current and Wikwemikong (with 3,776 calls); and the North Shore, Espanola and Massey (with 3,527 calls). The DSB would then only provide coverage when a zone is without either available resource (when both stations within the zone are without an ambulance).

Mr. MacIsaac explained to the board that the DSB

is funded to provide one ambulance for each community with an EMS station. "When that resource is in use, it would not be unreasonable to suggest that for that time period they must go without a timely response," he said. "By moving to a mid-way point, we are hurting the community whose resource is being moved due to the lack of a resource in another, while also providing a substandard service to the community requiring coverage. While we are trying to save many for the sake of one, we are in fact not performing well for anyone."

Both Derek Stephens of Central Manitoulin and Lou Addison of Western Manitoulin said they would be pleased with the new deployment plan, but Sonja Flynn, representative for Sudbury East, said she was not pleased and would be bring the matter back to the Sudbury East Municipal Association. (Ms. Flynn was concerned about service to the Hagar and Noelville communities.)

"For us, this is going to be a good plan and then in a year's time we can review the stats," Ms. Addison commented.

While much of the board commented on the plan, Fern Dominelli, DSB

CAO, reminded the board that their role was not to overhaul a manager's plan, but that it was reviewed before them as a matter of courtesy and to keep them apprised of the changes.

"The board's job is not to micromanage," added board chair Les Gamble.

The new deployment plan will now be reviewed by the MOHLTC Emergency Health Services Branch and the Central Ambulance Communications Centre before being implemented by the DSB, which should happen this spring.