



Report To:	Manitoulin-Sudbury District Services Board – Budget Committee
From:	Paul Myre, Chief of Paramedic Services
Date:	November 9 th , 2021
Re:	2021 Deployment Plan Pilot Update- Issue Report

Background

In the fall of 2020, then Chief Rob Smith brought a proposed pilot to the Board that would see the movement of both Chapleau and Gore Bay Paramedic Services stations to a 24/7 deployment for 14 weeks and a 7 day per week 12-hour/day transport ambulance out of the Little Current Paramedic Services station also for 14 weeks. Staff have remained cognizant of the current fiscal climate and the many unknowns that surround it. Staff have assessed the viability and practicality of deploying the pilot and have new recommendations on the most effective use of resources given the current trends and operational pressures.

Current State

The advent of the COVID-19 Pandemic has forced staff to take a deeper dive to revisit the 2021 deployment pilot modelling while paying special attention to maintaining a balanced emergency coverage in high call volume areas of our district. As described to the Board in previous issue reports, the pandemic has had a noticeable impact on our agility in staffing and we have continued to weigh the benefits of deploying the pilot, as proposed, against creating a staffing crisis and risk down staffing ambulances. By depleting our Part-Time pool of staff for 14 weeks at 3 stations, we would have created a situation where we could not authorize time off for our staff and would have lost our ability to manage unanticipated leaves of absence (Short-Term, Long-Term Disability or WSIB). Of course, the staffing of ambulances always trumped the perceived benefits of deploying the pilot. As such, we have pivoted away from the proposed 2021 pilot and are proposing deploying only the Little Current model but instead of a transporting unit, we would deploy a single Paramedic Response Unit (PRU). Continuous loss of resources off Manitoulin Island due to regionalized health care continues to present the largest risk in our ability to maintain balanced emergency coverage. Urgent and Emergent patient transfers from the Manitoulin-Health Centres to Health Sciences North in Sudbury have become daily occurrences and present an unsustainable stress on our system. In studying all possible

and fiscally responsible countermeasures, staff have determined that positioning a PRU in Little Current would maintain our response capabilities but that resources could not be lost to urgent or emergent transfers as it would not be a transporting unit. This proposal is contingent on the approval of a business case submitted to the Ministry of Health in September requesting funding to increase current staffing at the Wikwemikong station from the current single PRU 12 hours per day, 7 days per week to 12-hour, 7 day per week transporting unit. This would mean that there would be two twelve hours ambulances during the day (start times to be determined) and no change to the one ambulance on night shift.

As our highest call volume station, Wikwemikong requires this staffing enhancement (with no impact to the Municipal Share) as the current model presents response time pressures due to having to travel to Little Current to drop off patients. Although DSB staff have made the proposal to the Ministry of Health, ultimately it will be the Ministries decision to fund the additional Paramedic for 12 hours, fund an ambulance, and any capital improvements required at the station all at 100% provincial funding.

This funding would be 100% provincial, however there would be a direct impact on municipally funded service as the elimination of the 12-hour PRU in favour of a fully staffed ambulance will mean the ability to respond to calls when ambulances are at hospitals will be diminished. The current PRU is frequently being reassigned to either Mindemoya or Little Current for balanced coverage while either of those units are in Sudbury for transfers to HSN creating a gap in coverage for our highest call volume area.

Should the Ministry of Health approve our business case, we would re-position the Wikwemikong PRU for the Little Current pilot so no upfront expenditure to purchase a new vehicle would be necessary. The Service would essentially trade one of our spare Ambulances for the PRU currently assigned to the Wikwemikong station and request a net new ambulance for the 2023 fiscal year. The additional cost to operate the Little Current PRU pilot would be \$218,000 in 2022 using part-time staff. If this becomes a permanent enhancement, the DSB would need to fund the benefits for a full-time staff and fund the PRU vehicle from the DSB vehicle reserve fund which would be approximately \$20,000 annualized.

Conclusion

Staff are seeking approval to work towards implementing the Wikwemikong 12-hour transport unit and the Little Current PRU in 2022.