



MANDATE

- The Board has been tasked under the Ambulance Act to insure provision of Land Ambulance to all citizens in the district of Nipissing and cost share 50/50 for the total cost of ambulance services.
- The Board is the Designated Delivery Agent for the District of Nipissing.



OPERATION OPTIONS (2001)

1. Same Provider

- Remain with the same provider at the download in 2001

2. Direct Delivery

- Paramedic employees of DNSSAB
- 80 plus paramedics

3. Third Party

- Certified Ambulance Provider (RFP)
- Present Model



NIPISSING AMBULANCE (PARAMEDIC) SERVICES PROVIDERS

North Bay Regional Health Centre Centre régional de santé de North Bay



North Bay Regional Health Centre

North Bay

West Nipissing

Chisholm

South Algonquin

Bonfield

East Ferris

Mattawa General Hospital

Mattawa

Calvin

Papineau-Cameron

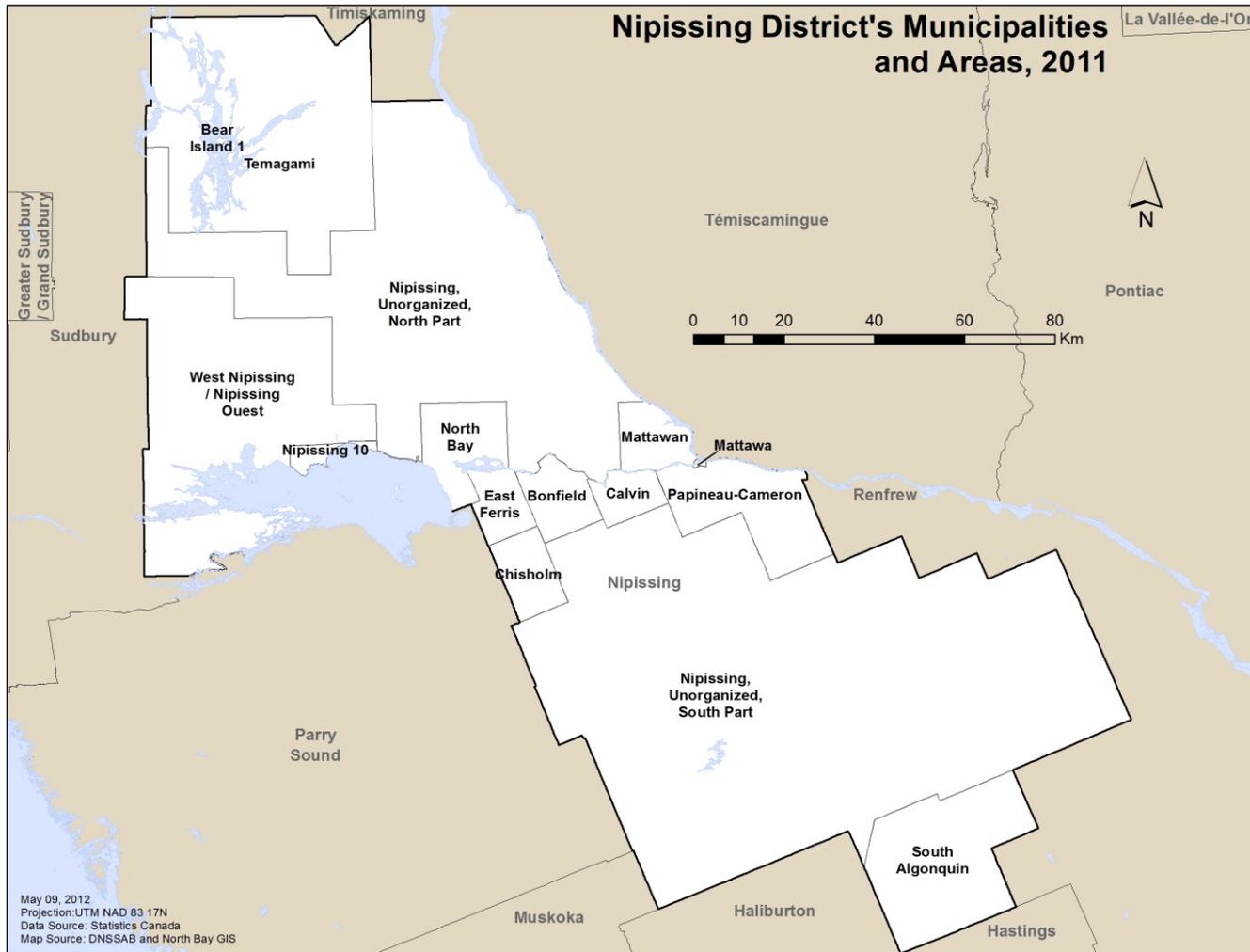
Mattawan

Town of Temagami

Temagami



NIPISSING DISTRICT COMMUNITIES





NIPISSING AMBULANCE (PARAMEDIC) SERVICES PROVIDERS

- All providers must be certified and inspected by MOH & Long Term Care at a minimum every 3 year
- Providers are fully responsible to insure that all aspect of the act are followed
- The paramedics are employees of the provider and not the DNSSAB all HR issues are dealt by the provider (Employment Standards, Collective agreements Health & Safety and any other act that may apply)

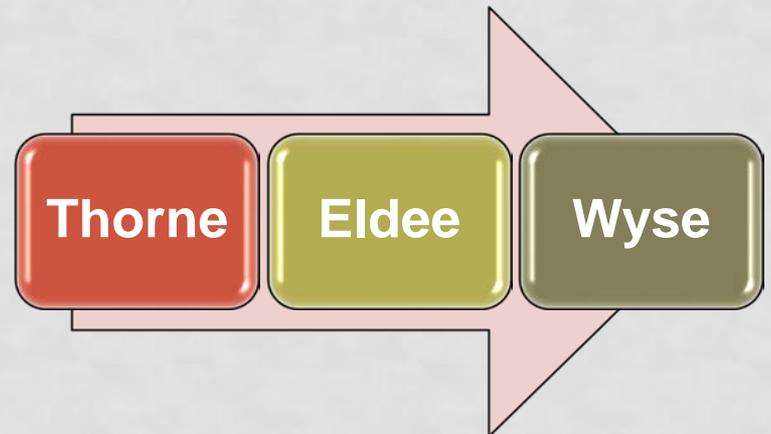


NIPISSING AMBULANCE (PARAMEDIC) SERVICE PROVIDERS

- The DNSSAB manages the funding distribution to meet the need of the districts citizens in pre-hospital primary emergency care
- The DNSSAB purchases medical equipment to stock ambulances
- The DNSSAB purchases paramedics uniforms
- The DNSSAB processes monthly Electronic Fund Transfers in accordance with approved budgets
- The DNSSAB purchases Ambulances, capital medical equipment and manages fleet maintenance
- Contracts with successful providers.



EMERGENCY FIRST RESPONSE TEAMS





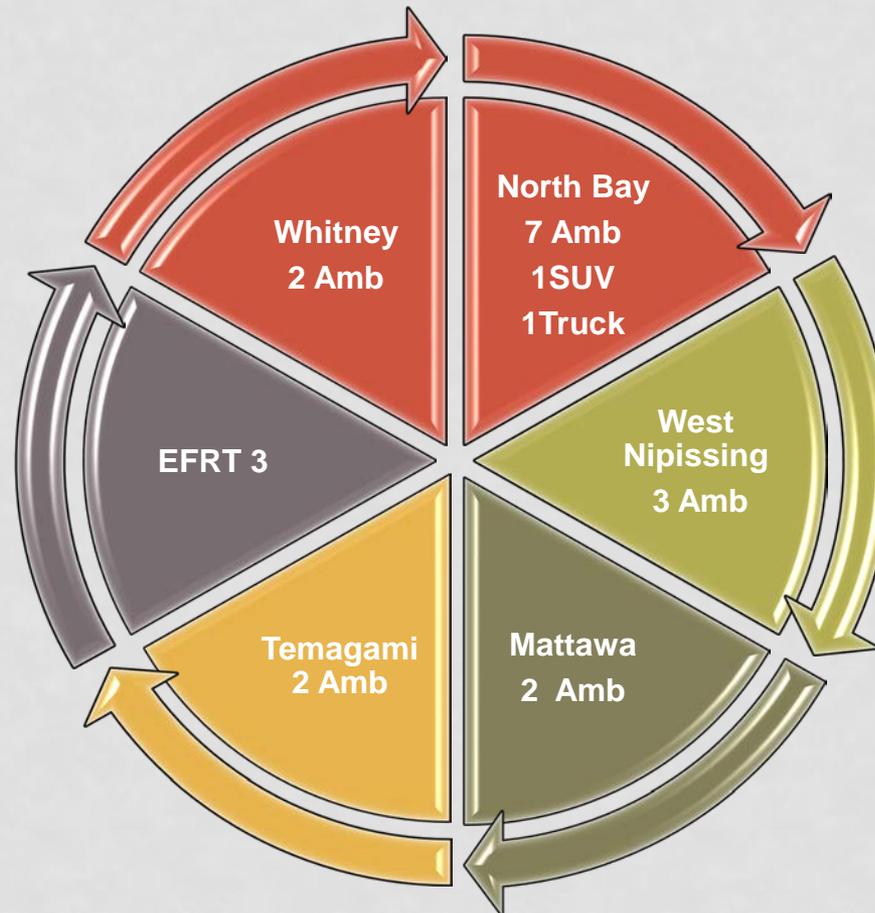
EMERGENCY FIRST RESPONSE TEAMS

- Emergency First Response Teams (EFRT) are bonded to an ambulance provider under their certification and oversight
- The DNSSAB Board pays for the Medical and Personal Protection Equipment, Training, Liability Insurance and WSIB
- EFRT volunteer members provide first aid and CPR where the need may arise in order to keep the patient comfortable until the ambulance arrives on scene
- Both the EFRT and ambulance are dispatched by the Central Ambulance Communication Centre simultaneously.
- All Communications equipment are provided and maintained by the Ministry of Health & Long Term Care Emergency Health Services Branch.
- Bonfield EFRT Certification will be completed by mid June 2019



FLEET

- 21 vehicles in the district
- Maintained at Canadian Tire, Brown's Auto and Truck in Whitney.





AMBULANCE BASES

North Bay (1)



Mattawa Hospital (1)



West Nipissing (1)



Town of Temagami (1)



Whitney (1)
Township of South Algonquin





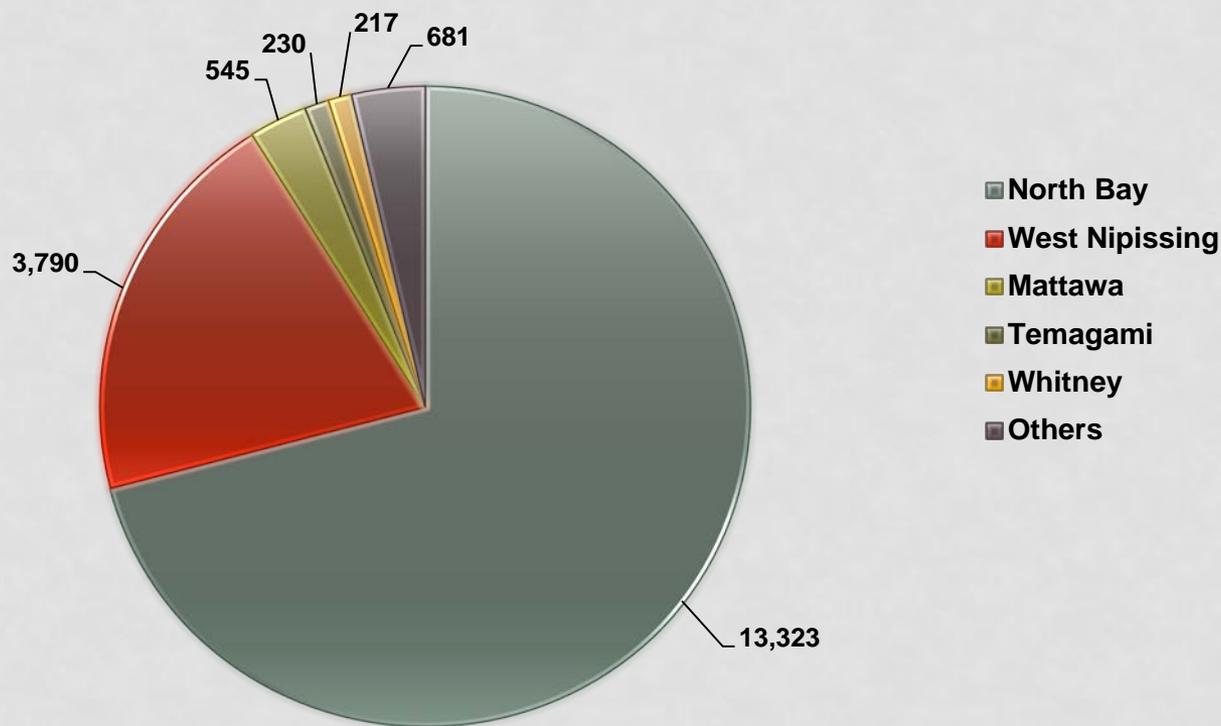
AMBULANCE DISPATCH

- The North Bay Central Ambulance Communications Centre (CACC) provides emergency medical communications services twenty four hours a day, seven days a week for an area of approximately 60,000 square kilometers
- In December 2009, North Bay CACC moved to a new state of the art building on Ferris Drive in North Bay
- This area includes the Districts of Nipissing, Parry Sound and Temiskaming, which encompasses ambulance services in the communities of North Bay, Mattawa, Temagami, West Nipissing, Powassan, South River, Port Loring, Timiskaming Shores, Englehart and Kirkland Lake. Emergency First Response Teams (EFR) are also dispatched in the communities of East Ferris, Phelps, Bear Island, Field, Latchford, Restoule, Virginia Town and Larder Lake. Paging services for Fire Departments in the communities of Sundridge, Callander, Restoule, Argyle, Nipissing, East Ferris, Tilden lake, Marten River, Temagami, Calvin and Papineau Cameron are also coordinated through the North Bay CACC
- 100 percent funded by MOH<C



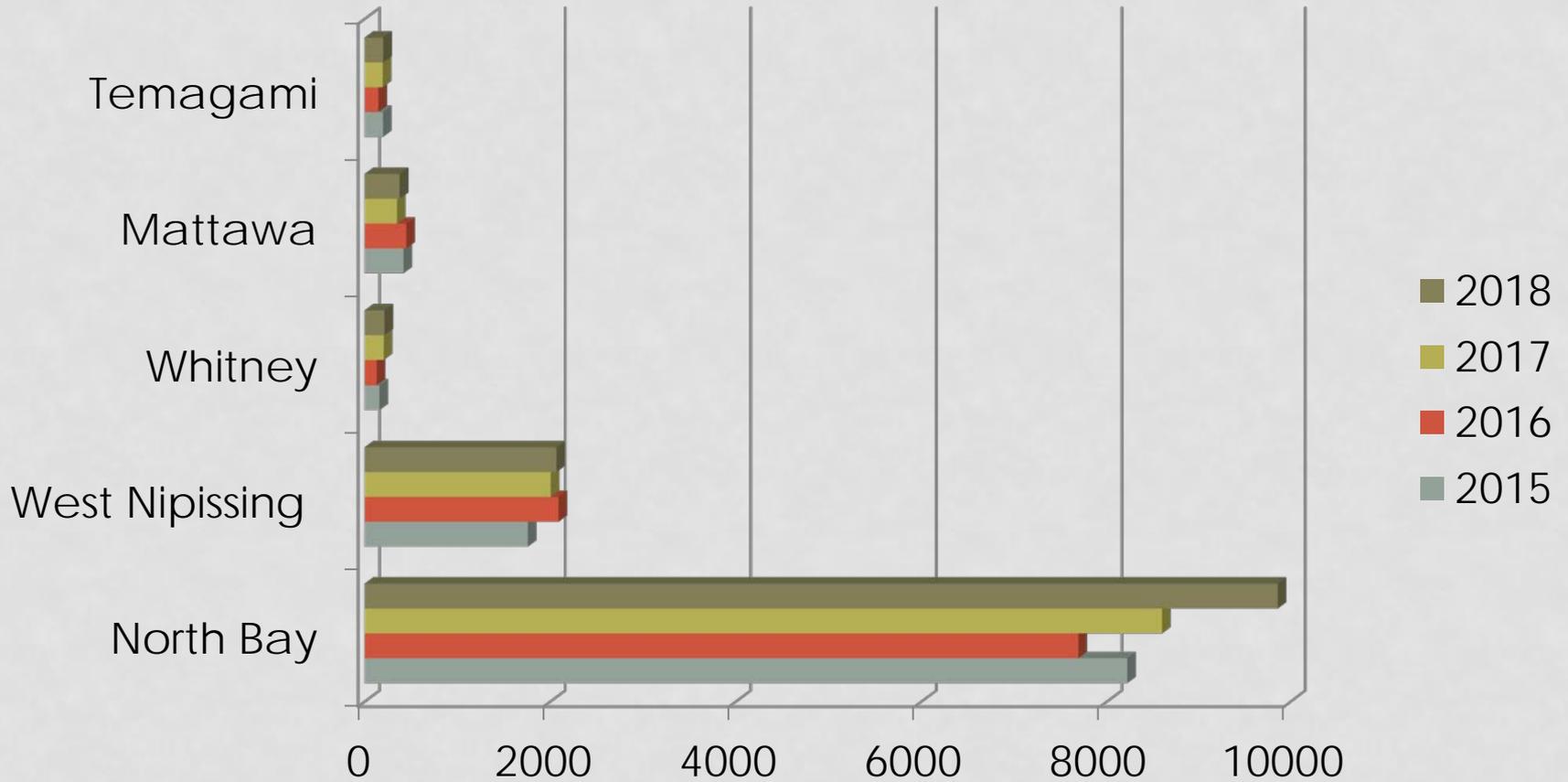
CALL VOLUME 2018

- Total 18,786

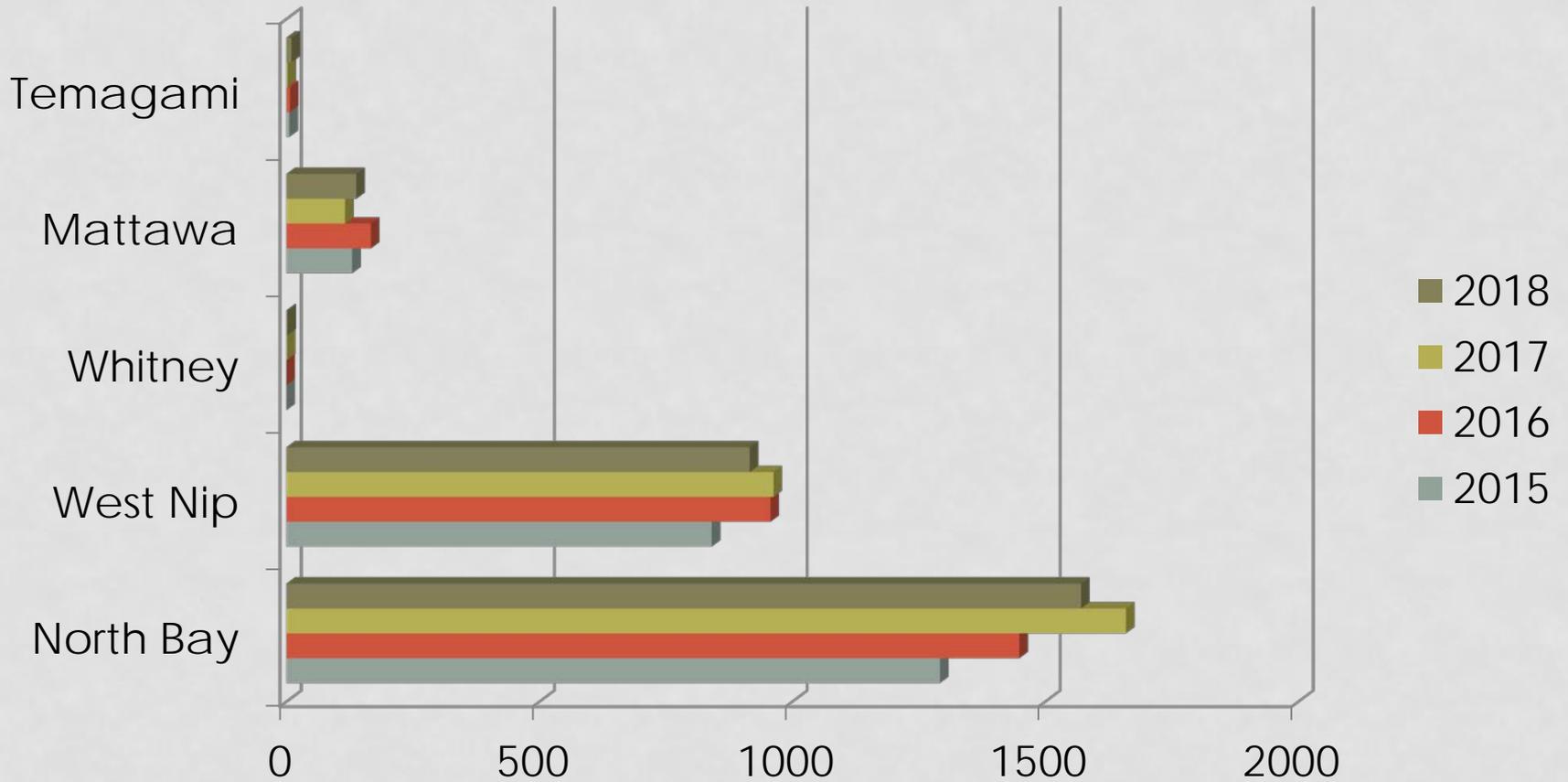




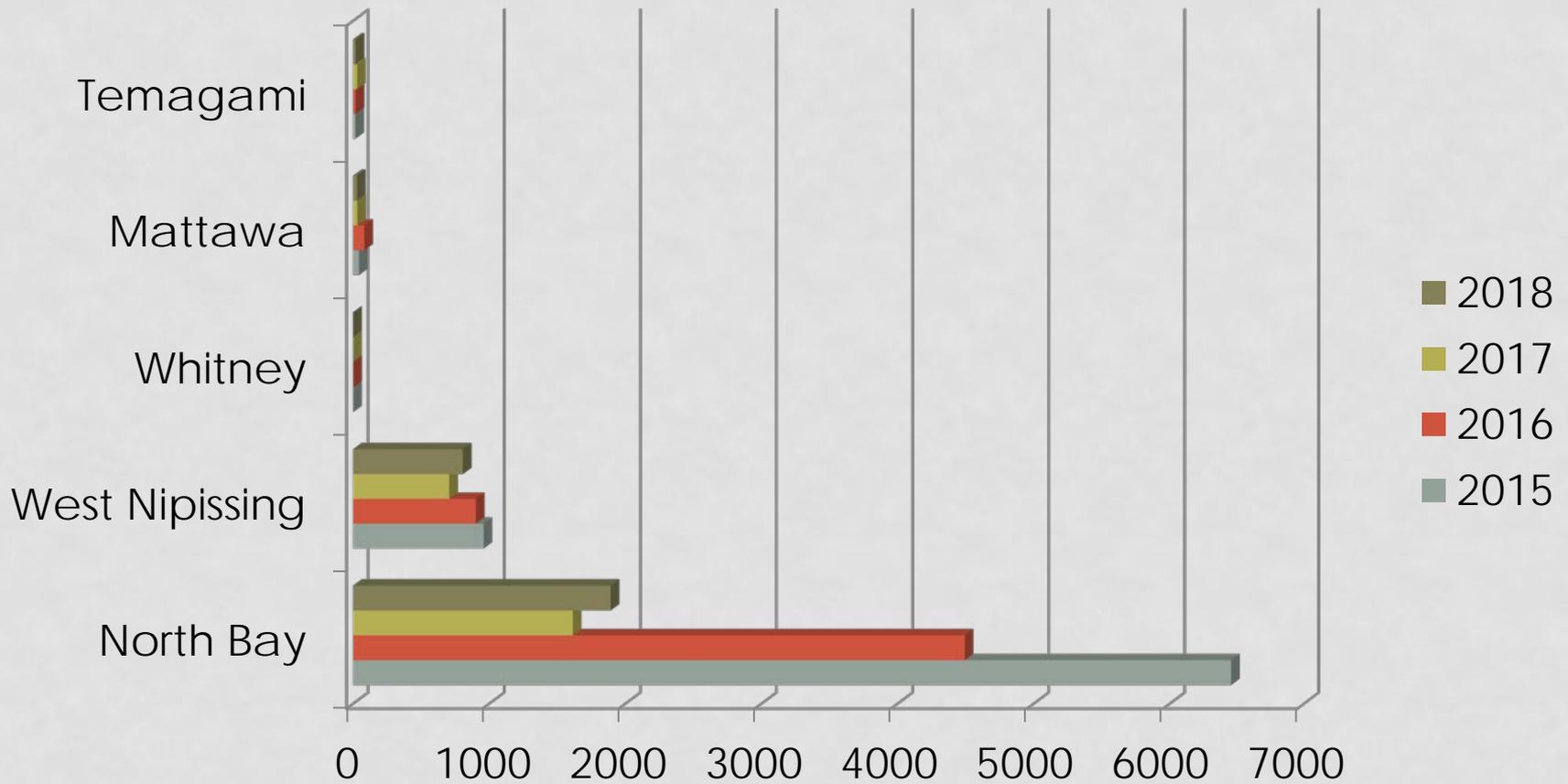
HIGH PRIORITY CALLS BY AREA



LOW PRIORITY CALLS



STAND BY CALLS (CODE 8)





COMMUNITY PARAMEDICINE

- The funding is 100% funded through the NE LHINS. This program is DNSSAB/NBRHC collaboration and its funds are directed to our contracted provider.
- Program started in July of 2014 with the introduction of CREMS
- Public education and blood pressure clinics are ongoing
- Frequent users of ambulance services have been visited and have been referred to CCAC where applicable
- NBRHC/MAC has approved a medical directive for the paramedicine program to administer the annual influenza vaccination where Paramedicine clinics take place. This can also be done when visiting a patient as a follow up after discharged from the hospital or a CREMS.
- We will continue to pursue more of the 100% funding with the LHIN in hopes of enhancing the program throughout the district.

Name	District of Nipissing (DSSAB)
Type of Place	District
Reporting Year	2019
Date Submitted (YYYY-MM-DD)	2018-10-02

Response Time Performance Plan (Regulation 257/00 Part VIII)				
Patient Type (A)	Plan in Minutes (mm:ss) (B)	Plan in Percentage (%) (C)	Performance Results in Percentage (%) (D)	Comments (E)
SCA	06:00	30.00%	To be submitted by March 31 in each year	
CTAS 1	08:00	30.00%		
CTAS 2	16:00	80.00%		
CTAS 3	16:00	80.00%		
CTAS 4	16:00	80.00%		
CTAS 5	16:00	80.00%		
*Select if Required				
*Select if Required				
*Select if Required				

As per the Ambulance Act, ambulance dispatch centres are required to submit the response time targets and performance to the ministry on an annual basis.

Pink area means the data will be pre-populated/auto-populated based on login credentials.

*Select if Required: Additional information – other triage level may be reported by UTM/FN if required.

Plan in Minutes (Column B) refers to response time performance plan in minutes (mm:ss).
 Plan in Percentage (Column C) refers to response time performance plan in percentage (%).
 Performance in Percentage (Column D) refers to response time performance achieved in percentage (%).

The form has been signed off

(Signature of Paramedic Chief/Deputy Chief)

District of Nipissing Ambulance Services Response Time Standard Performance Plan

Must be submitted October reflecting the plan for the next year

Canadian Triage and Acuity Scale

This performance plan addresses the response time commitment that the First Nations Ambulance

i. Sudden Cardiac Arrest (SCA) Sudden Cardiac Arrest

The ambulance service will endeavour to have a responder equipped and ready to use an AED at the location of a patient determined to be in SCA within 6 minutes from the time ambulance dispatch conveys the call information to the paramedic 40% (e.g. 80) percent of the time.

ii. CTAS 1

The ambulance service will endeavour to have a paramedic as defined by the Ambulance Act and duly equipped at the location of a patient determined to be CTAS 1 within 8 minutes from the time ambulance dispatch conveys the call information to the paramedic 70% (e.g. 80) percent of the time.

iii. CTAS 2, 3, 4, 5

The ambulance service will endeavour to have a paramedic as defined by the Ambulance Act and duly equipped at the location of a patient determined to be CTAS 2, 3, 4, 5 within the amount of time specified in the table below. The percentage of time the target time will be achieved is also specified in the table below.

Target time: the amount of time (minutes) from paramedic notification (T2) until on scene (T4)

** % of target: percentage of time the target time will be achieved