

'12 years of frustration' Paramedics speak out about systemic ambulance issues

Pincher Creek Emergency Services has been burdened by lengthy hospital transfers and calls from locals in non-critical condition

By Gillian Francis
Local Journalism
Initiative Reporter

When George Porter became a paramedic, he never imagined that he'd one day choose to leave his job on account of a broken system.

For years, the former Pincher Creek resident campaigned for change within the emergency service sector in Alberta, drawing attention to issues like ambulance wait times in rural communities, patient backlogs in hospitals across the province and short-staffing among emergency medical personnel, but his efforts, he says, were largely dismissed.

He promised himself he'd see the issue resolved before his retirement, but after over a decade of advocacy with no clear end in sight, he finally made the decision to quit his job two years ago.

"I couldn't keep going to work, not being able to do my job properly," he says.

Alberta health-care workers and paramedics are busier than ever now that they're battling the opioid crisis and Covid-19, and they have been saddled with the added burden of supporting a growing provincial population.

As urban hospitals become overcrowded with increased wait times and emergency service workers take leave from their jobs due to stress and burnout, rural communities like Pincher Creek have also begun to feel the burden.

Porter says EMS workers often get stuck in the city for hours at a time while transferring patients to urban hospitals. Paramedics have no choice but to wait with the patient until the hospital finds a bed for them, he says, a process that can take hours if it's full. When paramedics finally get the chance to leave, he adds, they often get tagged on other emergency calls in the area.

This very issue affects Pincher Creek, says Pat Neumann, chief of emergency services. Paramedics leaving the community on assignment will often spend their whole shift in the city, he explains, which in turn leaves more work for those who stay behind. Unfortunately, he says, given that emergency call volumes in Pincher Creek have increased 10 per cent annually for the past five years.

"Our membership have to work harder, they work extra hours. They're working overtime. They're tired," he says.



Photo by Gillian Francis

Paramedic Eleanor Maund-Stephens and Chief of Emergency Services Pat Neumann say issues affecting the sector are complex and multifaceted, made more difficult by increasing emergency call volumes, which are often the result of locals requesting ambulances for non-emergency reasons.

Eleanor Maund-Stephens, a paramedic who has worked in Pincher Creek for the past 15 years, has experienced this issue herself. It can take up to four hours to complete a patient transfer for a simple CT scan at Chinook Regional Hospital in Lethbridge, she says.

To make matters more complicated, many of the people she is called to transfer do not have life-threatening conditions, but nevertheless request emergency transport when they could easily utilize their own vehicles.

Porter reports similar circumstances. He says it isn't uncommon for paramedics to be called to a house to transfer someone with a broken ankle or to transport someone to and from the dentist or to get insoles fitted into shoes.

There are also people who claim to have certain health conditions that they really don't, just to get a free ride, says Maund-Stephens.

This imposes a huge burden on EMS staff, she says, adding there were multiple instances where she was not able to attend to someone in medical distress because she was in the process of transferring someone with a non-critical condition to a hospital in the city.

When this happens, she explains, ambulances from Crowsnest Pass, Brocket or Fort Macleod are called in as backup, which means the person who made the call must wait

longer to receive medical attention.

Although Maund-Stephens says she's never been involved in a situation where an individual has died during a longer dispatch, it can happen.

Porter, who has worked out of Nanton, Black Diamond and Cardston in addition to Pincher Creek, has been dispatched to distant communities as backup before, and he and his team weren't always able to get to the person in time.

"You know there's nothing you're gonna be able to do for that person by the time you get there, but you've got to respond anyway because you're the closest ambulance," he explains, adding that it's the paramedics who often have to deal with the repercussions.

"It's the medics that are front and centre that suffer these moral injuries," he says. "Having to respond into very volatile, very emotional, very difficult circumstances because of time, because of long responses."

For the past 12 years, Porter has been lobbying the provincial government to address the situation.

He's also been involved with citizen action groups and has attended public meetings in towns in and around Calgary.

"It's been 12 years of frustration," he says. "I thought this would have been relatively easy to

elicit some change and fix things and it just doesn't happen."

It's been difficult, in part, because of poor management, he says, adding that he thinks there haven't been leaders within Alberta Health Services or the provincial government who have been willing to tackle the problem.

Of the last six health ministers, he says, Tyler Shandro was the only one who was willing to listen to his concerns.

"I firmly believe he was on the verge of making some things happen when he got shuffled into another position," Porter says.

And while the government states that Covid has been a major catalyst for increases in hospital transfers and lower levels of emergency staff, Porter disagrees.

He thinks these problems were primarily the result of the switch to AHS-governed ambulance services in 2009.

Prior to this, a variety of institutions across the province offered emergency medical care, including municipalities, fire services, hospitals and private ambulance services, he says, and many had established a volunteer system, where regular citizens who were medically trained could be called in as backup if there was a shortage of paramedics. AHS put an end to this, he says, committing to using only full-time staff.

Most backup ambulances disappeared as well, he adds.

Hospitals have also become less selective about the types of people who are using ambulances, he explains, leading to a higher number of non-critical patients being transported. He attributes this to the fact that payments for transfers are now the responsibility of AHS rather than individual hospitals.

Maund-Stephens thinks differently than Porter. She says that too many people are quick to blame AHS.

"This is a systemic problem that's been going on for years and years, long before AHS came along, and everyone seems to feel the need to put the blame solely on AHS, which I don't think is appropriate," she says.

The issue of residents not using ambulance services for the right reasons has always been a problem, she says, and predates the arrival of

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Vital southwestern Alberta habitat protected by NCC

By Jenaya Launstein
Community Reporter

In 1912, Berwyn Pisony's grandfather Joseph Pisony homesteaded a piece of land in what is now the Castle-Crowsnest Watershed Natural Area. Thirty-eight years later, Joseph bought five more quarters from a neighbour and the ranch grew from there.

Fast-forward 110 years and five generations, and a portion of the land is now part of a conservation easement between the Pisony family and the Nature Conservancy of Canada, which will restrict development rights.

"Time goes on and things keep

changing, and I just hope that whoever else runs the land in the future [will] honour the use of the land and take care of it," Berwyn said in a press release.

The property has been named Chapel Rock and is 303 hectares in size. It is home to coniferous forests, grasslands and vital riparian zones, a habitat that the NCC says is one of the rarest in Alberta.

The legal contract between the Pisonys and the NCC will ensure that the property can continue as a working cattle ranch, while maintaining the landscape in a natural, healthy and unfragmented state.

The NCC says its conservation of the land will assist in conserving water quality, flood mitigation and the maintenance of an important watershed along the province's southern foothills.

Chapel Rock's wetlands are imperative to the survival of many species, as they provide nesting, breeding and feeding opportunities.

Part of a natural corridor, the property sees mammals move through the foothills along the eastern edge of the Rocky Mountains, providing much-needed habitat for animals such as elk, bighorn sheep, moose, mule deer and grizzly bears.

Sharp-tailed grouse, a species designated as sensitive in Alberta, have also been sighted on the property. This species of grouse is only found in native grasslands and shrublands.

The new conservation site is close to several other protected areas, including the Oldman River Provincial Recreation Area, Castle Provincial Park and Castle Wildland Provincial Park.

The NCC says it has not yet been determined if the public will be permitted to access the land. To view a list of NCC-managed properties with public access, visit www.connect2nature.ca.



Photo by Brent Calver

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AHS. She thinks solving this issue requires a different approach than simply reworking the system from the top down.

Local EMS need to do a better job educating citizens and putting resources out there, so they understand when it's appropriate to take an ambulance and when it's not, she says.

Maund-Stephens says EMS services have even benefited in some ways from being run by AHS, as it has increased communication between dispatchers and paramedics. AHS tracks Alberta ambulances to find out which are in use and which are free, she says, and alerts paramedics when there are additional patients that need to be picked up at a hospital.

Pincher Creek is unique when it comes to emergency services. Unlike Crowsnest Pass and Fort Macleod, its services aren't run directly by AHS and are instead contracted through it.

Back when AHS began buying out local ambulance services, it gave communities the option of keeping control of their emergency fleets, which Pincher Creek chose to do. This has provided Pincher Creek with some distinct advantages and has given the town more control over its emergency resources.

Most small communities have only one ambulance and don't really have access to backups, explains Porter, but Pincher Creek has two primary ambulances running 24 hours a day and a third ambulance that can be brought in as backup

upon request from AHS.

Maund-Stephens also sees some benefits.

"Being contracted does allow us more freedoms as far as our scheduling goes," she adds, explaining that when the two primary ambulances are busy, emergency services has the ability to phone around and call in local paramedics to staff the third.

Unlike other towns, there has never been a time when Pincher Creek has been short-staffed or has had no ambulances at its disposal, says Neumann.

"We're very fortunate," he says. "We never shut an ambulance down because we're short-staffed. I won't tell you that it'll never happen, but it hasn't happened yet."

AHS has begun rolling out a 10-point plan to help address EMS capacity throughout the province, which includes transferring low-priority and non-emergency calls to agencies like Poison and Drug Information Service or Health Link 811—currently in the process of being developed.

It has launched pilot projects in Calgary and in Alberta's north zone that are overseeing the transfer of people with non-urgent conditions using vehicles other than ambulances.

Two weeks ago, the government announced it would be increasing EMS funding by \$64 million in order to help combat high workloads and stress within the sector.

Forty-four per cent will go toward sustainable funding for air ambulances and recruiting more ground ambulances and crews. Thirty-four per cent will support

the development of inter-facility transport projects and the extension of ground ambulance contracts, and the remaining 22 per cent will support an AHS initiative to alleviate fatigue among staff by changing shifts, schedules and hours of operation.

Rural Municipalities of Alberta is helping the provincial government create the Alberta EMS Provincial Advisory Committee. The committee will serve as a go-between for communication between representatives of rural communities and the government on the ambulance crisis.

Paul McLauchlin, president of the RMA, says the committee is working on a report that will be released in May.

The plan is to divide the greater committee into smaller subgroups that will source information from local communities.

Pincher Creek's MD council previously expressed interest in advocating for Coun. Dave Cox, former chief of emergency services, to be added to one of the subcommittees, but McLauchlin says it's unlikely that any local councillors will be able to have a direct role.

There are simply too many municipalities in Alberta to be able to effectively orchestrate something like that, he says.

"I represent 69 municipalities," he says. "We just have such a great body of representatives that could be involved.... It would just be difficult."

Mayor Blair Painter of Crowsnest Pass says that although it would be nice to have a local

councillor on the subcommittee, he understands the constraints.

"If you make a task force too big, it really doesn't become effective," he says. "If everyone gets one person on the task force, you've got a task force of like 200 people."

Porter remains skeptical over whether these initiatives will work, as he thinks the system needs to be dismantled and rebuilt rather than tweaked or changed.

The government has committed to providing Edmonton and Calgary with five additional ambulances over the next two fiscal years and AHS has already hired 66 new emergency staff, but Porter doesn't believe this will have a big impact until underlying structural and organizational problems are fixed.

"Putting 50 more ambulances on the road in Calgary tomorrow is going to result in 50 more crews stuck in the hospital hallways," he says.

Still, he remains hopeful.

"I've been here so many times, where I'm cautiously optimistic that that wheel is starting to turn and it hasn't, and I'm there again right now, but I'm probably more cautiously optimistic than I've ever been," he says.

"I think because of these citizen action groups we've formed we're getting more people involved, more people speaking up, more people complaining justifiably and I think this time it might just happen."

The views expressed in this article are those of individual paramedics and service workers and are not representative of Pincher Creek Emergency Services as a whole.