HEALTH MINISTER LEO GLAVINE SAYS SEARCH FOR NEW AIR AMBULANCE UNDERWAY

News / Business aviation



The company that operates EHS LifeFlight says Transport Canada agreed more than a decade ago that the helicopter met the intent of safety regulations, and it doesn't know what prompted the agency to raise concerns about hospital helipad landings last month.

Canadian Helicopters Ltd. says it would have faced fines or had its helicopter grounded if it continued landings at QEII Health Sciences Centre, IWK Health Centre and the Digby General Hospital.

During a routine review in April, federal inspectors informed the company that it didn't meet performance requirements.

Transport Canada says there was no change in regulations, but that it audits aviation companies to ensure compliance and "inspectors continuously ensure that operators meet the safety standards."

Tested for worse-case scenarios

Sylvain Séguin, vice-president and chief operating officer of Canadian Helicopters Ltd., which operates the air ambulance, says aircraft are tested for worst-case scenarios.

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He says the issue with the Sikorsky S-76A is the manufacturer never wrote into its operating manual that the twin-engine helicopter was certified to take off from an elevated helipad if it only had the use of one engine.

"The aircraft was manufactured in 1980, and at the time, that level of regulation did not exist," he said.

"It's not that the aircraft is unsafe. And it's not that the aircraft does not meet the flyaway capability at all times. But the manufacturer did not do the flight testing for that particular profile."

Issue arose in 2003

He says the issue first came up in 2003, three years after the helicopter started landing on Halifax hospitals.

"We spent a full week with Transport Canada in the flight simulator going over the procedures and they were satisfied at the time that all operations were safe, that basically we met … that the 76-A met the intent of the regulations so basically an equivalent level of safety, and they were satisfied with that," he said.

Séguin says he doesn't know what prompted inspectors to raise the issue last month.

"There seems to be a push to restrict, or at least all the heliports in Canada have been under more scrutiny for populated areas," he said.

No one from Transport Canada was available for an interview Monday.

EHS estimates the 36-year-old helicopter has made more than 6,000 landings on hospital roofs over the past 16 years.

Search on for new chopper

On Monday, Nova Scotia's health minister says his department is working to find a replacement for the EHS LifeFlight helicopter.

"We lease the helicopter, we pay somewhere in the vicinity of $3.6 million for a fee and lease," Leo Glavine said Monday.

"Whether or not we will have the same arrangement remains to be seen, but we know we are not going to compromise on standards of today that are required. The work of procuring a helicopter is already underway."

He could not say when the helicopter will be available.

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The current LifeFlight helicopter is now landing in Halifax at a Transport Canada certified helipad near the Point Pleasant Park parking lot. The 12 Wing Shearwater air base on the other side of Halifax Harbour is a backup option.

In Digby, it is landing at the nearby airport. Patients are then taken by ambulance to hospital.

EHS says not being able to land directly on hospitals adds an additional 15 minutes of transit time, but that the same team travels with the patient from the helicopter to the hospital, so there isn't an interruption in care.

"Our critical care teams are so highly skilled that the level of care would offset any prolonged transport teams simply because patients are all receive the exact care they would need to receive in an ICU setting," Colin Flynn, program manager for EHS LifeFlight, said on Monday.

"That care is just transferred over to whatever mode of transport we're using."

Scary situation

The province does have service agreements with New Brunswick and Prince Edward Island, so the issue affects a small number of patients from those provinces.

"We need a helicopter to make sure that even those minutes that may be make a difference and that's meeting the highest standard, but I don't feel patient safety is compromised here in any way," said Glavine.

Tami Harris of Yarmouth isn't so confident. Her daughter Katie, 4, has a tracheostomy and a feeding tube. She's had to be flown from Yarmouth to Halifax for care in the past.

"It's not very comfortable knowing that we live in a rural area and that if an emergency situation were to arise, and that getting to the IWK in a timely situation might not happen. It kind of puts us in a scary situation."

03 MAY 2016

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