


Title: Patient Management While Waiting for Transfer of Care at the Receiving Hospital	<input checked="" type="checkbox"/> Policy	<input checked="" type="checkbox"/> Procedure	<input type="checkbox"/> SOP
Category: Primary & Advanced Care Paramedic Clinical Dept/Prog/Service: Base Hospital Program	Distribution: Superior North EMS, TBRHSC Emergency Department		
Approved: Program Medical Director Signature: 	Approval Date: May 2005		Reviewed/Revised Date: May 2017

1. PURPOSE

This policy is intended to address the issue of paramedics performing controlled acts while waiting for a bed and/or the transfer of care within the receiving hospital's Emergency Department.

2. POLICY STATEMENT

It is understood that paramedic practice will be guided by the following principles:

- i. Patient care and safety is paramount and must take precedence in all decisions.
- ii. The standing order(s)/medical directive(s) will be followed; you must never exceed these limits.
- iii. Paramedics acknowledge that all hospital staff are doing their very best to manage hospital inpatients, emergency patients, ambulatory or ambulance-carried patients within the hospital Emergency Department, and that due to these factors, the hospital staff's ability to render immediate care may be compromised.

3. DEFINITIONS

- i. Ambulance Call Report (ACR): is either a written or electronic and contains all the required documentation and information as per the Ontario Ambulance Documentation Standards
- ii. Controlled Act: as set out in subsection 27 (2) of the Regulated Health Professions Act, 1991
- iii. Paramedic: as defined in subsection 1(1) of the Ambulation Act Ontario Regulation 257/00
- iv. Primary Care Paramedic (PCP): as defined in subsection 8 (1) of the Ambulation Act Ontario Regulation 257/00
- v. Advanced Care Paramedics (ACP): defined in subsection 8 (2) of the Ambulation Act Ontario Regulation 257/00

4. PROCEDURE

- A. While in the ED, the paramedic will continue to monitor and provide patient care to the patient as appropriate, and according to ALS/BLS Patient Care Guidelines, including the provincial standing orders/medical directives/controlled acts in which they have been certified to perform.
- B. Upon arrival into the ED and while waiting for transfer of care if any deterioration in the patient's condition occurs, or the patient does not show signs of improvement as a result of the pre-hospital care being provided, **and** it is felt that the patient is in urgent need of further assessment and medical care, the paramedic will immediately notify the charge nurse of the patient and the patient's unchanged or deteriorating condition. If the charge nurse is not able to promptly secure a bed for the patient, the paramedic may continue to deliver patient care and controlled acts as per their standing order(s)/medical directive(s) and the BLS/ALS Patient Care Guidelines.

- C. If the patient's conditions remains unchanged or worsens following the completion of any particular standing order(s)/medical directive(s), or the limits of patient care have been met the paramedic must communicate this to the charge nurse immediately who will be responsible to communicate this to the ED Physician. NB. It is expected that the patient's status will immediately be relayed to the ED Physician and a request will be made for the patient to be assessed at this time. If possible, transfer of care should occur at this time.
- D. All patient care and communication in the ED concerning patient care and treatment must be documented by the paramedic onto the ACR. This includes all controlled acts or patient care rendered while in the ED **AND** time(s)/name(s) of who the paramedic communicated with regarding the patient while waiting in the ED. A receiving signature is required from the RN upon transfer of care.

5. RELATED PRACTICES AND/OR LEGISLATIONS

- i. *Ambulance Act (Ontario) and Ontario Regulation 257/00*
- ii. *Emergency Health Services Branch (EHSB), Ontario Ministry of Health and Long-term care (MOHLTC) and Thunder Bay Regional Health Sciences Centre (TBRHSC) Performance Agreement (PA), 2008*

6. REFERENCES

- i. *Current EHSB MOHLTC Basic Life Saving (BLS) & Advanced Life Saving (ALS) Patient Care Standards(PCS)*
- ii. *Current EHSB MOHLTC Ontario Ambulance Documentation Standards*