


Policies, Procedures, Standard Operating Practices

No.QM-400

Title: Paramedic Response & Administrative Requirements	<input checked="" type="checkbox"/> Policy	<input checked="" type="checkbox"/> Procedure	<input type="checkbox"/> SOP
Category: Quality Management Dept/Prog/Service: Base Hospital Program	Distribution: NW Region Designated Delivery Agents & Paramedics		
Approved: Program Medical Director & Program Manager Signature: 	Approval Date:		Oct 2006
	Reviewed/Revised Date:		April 2017

CROSS REFERENCES: Maintenance of Certification Criteria Policy (CERT-100)

1. PURPOSE

Maintenance of certification requires that each Paramedic employed and certified in the NW Region meet all Base Hospital administrative requirements. Base Hospital administrative requirements include but are not limited to the following:

- Completion and submission of Ambulance Call Reports (ACR) and ECG strip/report
- Review and response to Ambulance Call Evaluations (ACE) forms
- Notification of any **known** ALS patient care deficiency (*deviation in the medical directive, controlled medical act, medication incident, patch failure, etc.*)
- Completion and submission of any supporting documentation/form/information requested by Base Hospital
- Response to a request for a meeting with the Medical Director or designate.

2. POLICY STATEMENT

Each certified Paramedic is responsible for reviewing Base Hospital correspondence in a timely fashion. Paramedics are required to check their work email on a regular basis to avoid delays and communication from Base Hospital.

Paramedics must make every effort to communicate with the Base Hospital in a timely fashion and before the due date to avoid any delays/further actions.

3. DEFINITIONS

- Ambulance Call Evaluation (ACE):** is a communication tool used by the Base Hospital to converse with a Paramedic in reference to a call.
- 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
- Controlled Act:** as set out in subsection 27 (2) of the Regulated Health Professions Act, 1991
- Paramedic:** as defined in subsection 1(1) of the Ambulation Act Ontario Regulation 257/00
- Primary Care Paramedic (PCP):** as defined in subsection 8 (1) of the Ambulation Act Ontario Regulation 257/00
- Advanced Care Paramedics (ACP):** defined in subsection 8 (2) of the Ambulation Act Ontario Regulation 257/00
- Meeting:** could be in the form of a teleconference, face to face, Skype, Face Time, OTN etc. The chosen format and will be at the discretion of the Program Medical Director/Medical Lead.

4. PROCEDURE

ACE Response

- I. Paramedics will be given a period of 21 days to respond to the initial Base Hospital ACE.
- II. When a response to an ACE form is not received by the Base Hospital within 21 days the process will be as follows:
 - i. The ACE form will be re-sent to the responsible Paramedic(s) and will be copied to the appropriate EMS Operator.
 - ii. The Paramedic will then be given a additional 9 days to respond to the second request.
 - iii. Should the Paramedic fail to respond to the second request, the EMS Operator will be contacted by Base Hospital to inquire if the Paramedic(s) are on LOA. If the Paramedic (s) is on LOA then the ACE response will be put on hold until their return.
 - iv. Failure to respond to the second request, Base Hospital will contact the Paramedic(s) by phone. Once contact has been made the Paramedic(s) are given until 12:00 EST on their next scheduled shift to submit a response.
 - v. Should the Paramedic(s) fail to respond by 12:00 EST on their next scheduled shift to submit a response an immediate administrative deactivation will occur. The Paramedics(s) will remain deactivated until such time as the Program Medical Director deems to be appropriate.

Ambulance Call Report (ACR) and Supporting Documentation

Paramedics are responsible to submit all ACRs and supporting documentation as outlined in the current Ontario Ambulance Documentation Standards.

- I. If call information is deemed urgent but has not been submitted to the Base Hospital the paramedic will be contact by Base Hospital and request that the ACR and/or supporting documents be completed and submitted within 24 hrs.
- II. Failure complete and submit the ACR &/or supporting documentation will result in an administrative deactivation until such time as the required information is submitted and until such time as the Program Medical Director deems to be appropriate.

Meeting Request

At the discretion of the Program Medical Director (PDM) or designate a meeting with a Paramedic may be requested at any time.

Urgent

- i. Paramedics will be contacted by a Clinical Educator (CE) to arrange a meeting as per the availability of the PMD.
- ii. Failure to follow through on the meeting as scheduled will result in an administrative deactivation until the meeting occurs and the issue is resolved.

Non-Urgent

- i. The responsible Paramedic(s) will be contacted through the ACE form for any circumstance that is deemed non urgent by the Medical Director or designate. A meeting time is required to be scheduled within a specific time frame.
- ii. The responsible Paramedic(s) will be allowed 7 days to respond to Base Hospital request for a meeting with the Program Medical Director or designate.
- iii. Failure to respond to the meeting request or to follow through on the meeting as scheduled with the Program Medical Director or designate will result in an **administrative deactivation** until the meeting occurs and the issue is resolved.

Personal Contact Information

It is the Paramedic's responsibility to update their profile summary (PPO) prior to December 31st each year.

- i. Base Hospital is **not** responsible for any delayed or lost correspondence directed to you or any change in certification status that may result due to incorrect or outdated contact information.

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*