

Southwest Ontario Regional Base Hospital Program

Policy:	Continuing Medical Education (CME)	
Owner of Policy:	Regional Medical Director, Regional Program Manager	
Department/Program:	Southwest Ontario Regional Base Hospital Program	
Approval By:	Director, Emergency Services & Base Hospital	Approval Date: April 2014

	Last Review Date: June 2019	Last Revised Date: June 2019
Original Effective Date: April 2014	Reviewed Date(s): Nov 2014, Jan 2016, June 2017, June 2018,	Revised Date(s): Nov 2014, Jan 2016, June 2017, June 2018

POLICY

Once initial certification with the Southwest Ontario Regional Base Hospital Program (SWORBHP) has been achieved, Paramedics must complete the required continuing medical education (CME) points yearly. All Primary Care Paramedics (PCPs) must achieve eight (8) CME points which are obtained through annual mandatory CME. All Advanced Care Paramedics (ACPs) must achieve a minimum of twelve (12) points of approved CME by December 31st of each calendar year in addition to the twelve (12) CME points obtained through annual mandatory CME.

This policy details the process for maintaining PCP or ACP SWORBHP certification as per Ontario Regulation 257/00, s. 8. (1)(b), and/or s. 8. (2)(c). Failure to comply with all aspects of this policy may result in revocation of SWORBHP authorization to perform controlled acts through deactivation and/or decertification at the discretion of the Medical Director.

PROCEDURE

- 1. All CME requires approval from the SWORBHP Medical Director of Education (or delegate). CME that is undertaken without preapproval may not be awarded points if it is deemed not to meet the objective of enhancing the clinical activity of the Paramedic at the certification level of the Paramedic.
- 2. Approval will be granted only after determining:
 - the relevancy to the Paramedic's scope of practice; and a.
 - congruence with SWORBP's learning objectives expectation. b.
- 3. CME activity must be completed by December 31st of each calendar year. Any CME activities taken after December 31st will be applied to the following CME cycle and will not be retroactively applied to the previous CME cycle.
- 4. The deadline for CME submission is December 31st of each calendar year. Paramedics must have received and submitted supporting documentation regarding any activity by this date. ACPs who fail to submit their required CME points by December 31st of each calendar year may be deactivated.
- 5. Paramedics working during their first year as an ACP are required to achieve a prorated number of points (2 CME points per month certified as an ACP) based on the remaining time in the yearly CME cycle in which they began their employment as an ACP.
- 6. Paramedics who are returning after clinical inactivity and have missed their annual mandatory CME, will complete the Annual Mandatory CME (12 CME points) in addition to any other educational activities determined by the Local Medical Director and receive 4 CME points for their return to work review day(s).
- 7. ACPs will require a prorated number of CME points (2 CME points per month certified as an ACP) based on the amount of time worked during and/or remaining time in the annual CME cycle.

- 8. After <u>CME</u> completion, <u>Paramedics</u> are required to submit proof of attendance/completion via the <u>Paramedic</u> <u>Portal of Ontario (PPO)</u>.
- 9. <u>Paramedics</u> can obtain <u>CME</u> points through the options outlined in <u>Appendix 1</u>.

DEFINITIONS

Authorization

Means written approval to perform Controlled Acts and other advanced medical procedures requiring medical oversight of a Medical Director.

Certification

Means the process by which Paramedics receive Authorization from a Medical Director to perform Controlled Acts and other advanced medical procedures in accordance with the ALS PCS.

Continuing Medical Education (CME)

Means a medical education program and confirmation of its successful completion as approved by the Regional Base Hospital Program (RBHP)

Controlled Act

Means a Controlled Act as set out in subsection 27(2) of the Regulated Health Professions Act, 1991.

Deactivation

Means the temporary revocation, by the Medical Director, of a Paramedic's Certification.

Decertification

Means the revocation, by the Medical Director, of a Paramedic's Certification.

Medical Director

Means a physician designated by a RBH as the Medical Director of the RBHP.

Paramedic

Means a Paramedic as defined in subsection 1(1) of the Ambulance Act, and for purposes of this Standard a reference to the term includes a person who is seeking Certification as a Paramedic, where applicable.

Regional Base Hospital (RBH)

Means a base hospital as defined in subsection 1(1) of the Ambulance Act, and provides an RBHP pursuant to an agreement entered into with the MOHLTC.

Regional Base Hospital Program (RBHP)

Means a base hospital program as defined in subsection 1(1) of the Ambulance Act.

REFERENCES

Advanced Life Support Patient Care Standards Version 4.5 Emergency Health Services Branch Ministry of Health and Long Term Care, May 1, 2018

Ontario Regulation (O.Reg.) 257/00

Southwest Ontario Regional Base Hospital Program CME CHART 2016

CME Opportunity	Description	Mandatory	Weight/Points
BH Rounds/Webinar	Rounds will be scheduled throughout the year and topics will be posted at least 2 weeks prior to the scheduled date. CME points will be awarded upon completion of the live webinar. If you cannot watch live, the webinar will be made available on the SWORBHP website. CME points will be applied once the webinar is viewed and the associated online quiz is successfully completed.		1/webinar
Presentation at Rounds/Webinar	Paramedics who wish to may present a relevant prehospital care topic. The presentation should not exceed 50 minutes. Upon approval from the Medical Director, paramedics will be paired with a SWORBHP team member who will assist with the development and presentation of the rounds/webinar		8
Mandatory BH Training	When the Base Hospital requires paramedics to be oriented to a new piece of equipment or procedure, they will receive points towards their CME obligation.		1/hour
Annual Recertification	Paramedics will attend a skills performance competency practice and evaluation day.		8
Peer Chart Audit Review	Paramedics can perform up to 60 audits per calendar year. No more than 15 audits for CME points can be performed monthly. These calls will be ALS attended calls where an advanced life support skill is performed, or, when call volumes cannot support this, calls attended by Advanced Care providers, where symptom relief medications have been administered. IV starts only, no service calls and forms where no intervention has been initiated are not to be audited for CME purposes. Paramedics will record the call date, call number, and date that audit was performed on a form within the Base Hospital office. 15 charts 1 point 30 charts 2 points 45 charts 3 points 60 charts 4 points		Max 4/year
Operational Preceptorships	Paramedics will receive a maximum of 4, one time, CME points for taking a preceptor course (if available). Additional points will be applied if the paramedic chooses to precept more than once in a calendar year.Preceptor Course4 points PCP StudentPCP Student4 points (final month) 4 points (usually 6 weeks up to 140 hours)	No	Max 10/year

CME Opportunity	Description		Mandatory	Weight/Points
Teaching	Paramedics will receive CME points a maximum of 2 times per subject Teach Symptom Relief, defibrillation etc. for Base Hospital Teach ACLS, PHTLS etc. Teaching Paramedic Students at College	ct matter taught. 1 point 3 points 1 point per workshop/lecture	No	Max 10/year
Self Development	ACLS, PALS, NALS, APALS, PHTLS, ACP Program etc. (See list of preapproved courses) Paramedics will receive the appropriate points for self-development based on 1/hr (Course content should be reviewed for courses unfamiliar to the Medical Director in order for CME points to be assigned). CECBEMS (Continuing Education Coordinating Board for Emergency Medical Services) points can be used as a basis for point per Medical Director approval.		No	1/hour Max 16/course
Journal Study	Paramedics will be required to submit documentation on each article before points will be given. A brief synopsis of the article should be pre- Each article will be credited as follows, with a maximum of 3 CME po Prehospital care journal articles Emergency Medicine journal articles Critical Care Journal article Landmark EMS/Emergency Medicine / Ressuscitation article	rovided.	No	Max 3/year
Lecture Review/Study	Must be applicable to the practice of paramedicine at the level of the paramedic. If not a previously approved electronic lecture/podcast, supporting documentation including a copy of the lecture, source, lecture length, and learning objectives/outcomes will be submitted. 1 hour = 1 point		No	Max 4/year
Conference/Workshop/ Course Work/Presentation	 Conference/Workshop/Course Work/Presentation must be applicable to the practice of paramedicine at the level of the paramedic. Paramedics must apply via the Registry for consideration of CME points for attendance or participation in any conference, workshop, course work, or presentation at least 2 weeks in advance of participation. Courses attended without prior approval can be submitted for individual consideration, but may not be awarded CME points based on content. Consideration will be given to the following: Topic of presentation or agenda of workshops Description of how this activity will fit in with professional development in paramedicine CME points for this type of activity will be at the discretion of the Medical Director and assigned on an individual application basis. A report of material covered and points learned may be required. 		No	Varies depending on content Max 16

CME Opportunity	Description	Mandatory	Weight/Points
Committee Participation	 Paramedics must apply via the Registry for consideration of CME points for committee work, at least 2 weeks in advance of participation. Application for CME point consideration will include: Goals of the committee, agenda/topic of discussion Description of how this activity will fit in with professional development in paramedicine CME points for this type of activity will be at the discretion of the Medical Director and assigned on an individual application basis. 	No	Up to 0.5pts/hour Max 8/year
Clinical Settings	Paramedics may attend a variety of clinical settings: Emergency Department (in the presence of a BHP where possible), operating room (intubation skills), respiratory therapy, ICU, day surgery (IV skills). Rotations should be completed by November 30th. Specific goals and outcomes of the clinical experience (skills retention, disease A&P) as well as supervisor signature should be submitted to the registry.	No	0.5/hour Max 6/year/ clinical setting
Research	 Paramedics must apply via the Registry for consideration of research work. Paramedics may do so in advance or concurrently with research work. Research material must be ongoing and relevant to Paramedicine and published or translated into English. Application for CME point consideration will include specific research techniques to be utilized, goals and expected outcomes of the research experience. CME points for this type of activity will be at the discretion of the Medical Director and assigned on an individual application basis. <i>Note:</i> Presentation of this information at Rounds/Webinar will receive additional points. 	No	Per Case
Publication	 Paramedics must apply via the Registry in advance of the publication. Work must be published in a recognized, professionally related Paramedicine/Prehospital Care journal. Application for CME point consideration will include specifics of journal article as well as information on the publication that article is being submitted to. CME points for this type of activity will be at the discretion of the Medical Director and assigned on an individual application basis. Note: Presentation of this information at Rounds/Webinar will receive additional points. 	No	Per Case
Presentation	Paramedics may choose to get together and present topics of relevance to one another. This activity will be self- organized. Paramedics must apply via the registry, at least 4 weeks in advance. Presentations must be relevant to Paramedicine/Prehospital Care. In order for this activity to be approved, the session(s) must be attended by a Base Hospital Physician or delegate.	No	Per Event

CME Opportunity	Description	Mandatory	Weight/Points
Community Paramedicine	 Medics must apply via the Registry for consideration of CME credits for attendance or participation in any conference, workshop, course work, or presentation related to community paramedicine at least 2 weeks in advance of participation. Courses attended without prior approval can be submitted for individual consideration, but may not be awarded CME credits based on content. Consideration will be given to the following: Topic of presentation or agenda of workshops Description of how this activity will fit in with professional development in paramedicine CME credits for this type of activity will be at the discretion of the Medical Director and assigned on an individual application basis. A report of material covered and points learned may be required 	No	Per Case Max 2/year
Professional Self Development	Courses, lectures or events aimed at professional self-development that have an impact on improving patient medical care. Sessions must be directed towards the field of prehospital care and taught by qualified personnel. Medics must apply via the Registry for consideration of CME credits for attendance or participation in any event related to professional self-development at least 2 weeks in advance of participation. This includes courses surrounding the psychosocial aspects of prehospital care (i.e. mental health, PTSD, communication skills, ethics). This must be preapproved prior to granting points.	No	Per Case Max 8/year
Other	Paramedics may apply via the Registry at least 2 weeks in advance for approval of a potential CME event. Applications should include the objectives of the event and how it will enhance the clinical practice of paramedicine at the certification level of the paramedic.	No	Per Case