Policy:	Auxiliary Medical Directives – Primary and Advanced Care Paramedics	
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: May 2011

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POLICY

In addition to the core medical directives, the Advanced Life Support Patient Care Standards (ALS PCS) provides a number of auxiliary medical directives for both Primary Care <u>Paramedics</u> (PCP) and Advanced Care <u>Paramedics</u> (ACP).

This policy details the utilization of auxiliary medical directives (both controlled and non-controlled acts). Delegation must be provided exclusively by the Regional <u>Medical Director</u>.

This policy specifies the requirements of the <u>Employer</u>, the <u>Regional Base Hospital Program</u> (<u>RBHP</u>) and the individual <u>Paramedic</u>. Failure to comply with all aspects of this policy may result in revocation of the <u>RBHP</u> <u>authorization</u> to perform <u>controlled medical acts</u> through <u>deactivation</u> and/or <u>decertification</u> at the discretion of the <u>Medical Director</u>.

PROCEDURE

- 1.0 The <u>RBHP</u> will work collaboratively with the <u>Employer</u> to determine the need for <u>authorization</u> for the use of an auxiliary medical directives.
- 2.0 The <u>RBHP</u> will determine training and <u>certification</u> requirements for new auxiliary medical directives.
- 3.0 The training requirements (material, delivery, evaluation tools, etc.) will be established and approved by the <u>Medical Director</u>.
- 4.0 The <u>Employer</u> may elect to deliver the training using its own training staff when approved by the <u>Medical</u> <u>Director</u>. In this situation, the <u>RBHP</u> maintains the right to audit the training program as required. In specified situations, the <u>RBHP</u> staff will be present to oversee formal evaluation (e.g. to proctor oral/written evaluations).
- 5.0 At the <u>Employer's</u> request, the <u>RBHP</u> staff will provide training on auxiliary medical directives based on a mutually agreeable schedule.
- 6.0 <u>Paramedics</u> must successfully complete all aspects of the approved training program in order to be <u>authorized</u> to perform the medical procedure.
- 7.0 When the <u>Employer</u> provides the training, complete records (course roster, evaluation results, etc.) will be provided to the <u>RBHP</u> within 5 business days.
- 8.0 Upon successful completion of the training and submission of course records, the <u>RBHP</u> will update the <u>Paramedic's certification</u> in the Paramedic Portal of Ontario (PPO) to reflect all auxiliary medical directives that the <u>Paramedic</u> is <u>authorized</u> to perform. The <u>Employer</u> and the <u>Paramedic</u> have access to the PPO and may choose to print a hard copy of the certificate or save an electronic copy to their file.
- 9.0 An implementation plan for the new auxiliary medical directive will be developed and agreed upon by the <u>Employer</u> and the <u>RBHP</u>.

10.0 While it is understood that the <u>Employer</u> may not require all staff to be trained and <u>certified</u> in an auxiliary medical directive, <u>Paramedics</u> who are <u>certified</u> will be expected to perform (or at least attempt) these procedures in appropriate situations.

RECIPROCITY OF AUXILIARY DIRECTIVES

- 1.0 <u>Paramedics authorized</u> to perform an auxiliary medical directive may do so in all of the <u>RBHP</u> Paramedic Services in which they are employed provided the <u>Employer</u> has endorsed the use of that auxiliary medical directive. It is the expectation of the <u>RBHP</u> that all <u>Paramedics</u> use their complete skill set when indicated and appropriate for the greatest benefit of the patient.
- 2.0 Should a <u>Paramedic authorized</u> to perform an auxiliary medical directive that has been endorsed by their <u>Employer</u>, leave the employment of that Paramedic Service and gain employment with another Paramedic Service where the auxiliary medical directive is not endorsed, the <u>Paramedic</u> does not remain <u>authorized</u> to perform the auxiliary medical directive. Should the <u>Paramedic</u> gain employment where the auxiliary medical directive is <u>authorized</u>, or their current <u>Employer</u> now implements the use of that directive per the Certification Standard, the <u>Paramedic</u> would be expected to perform the auxiliary medical directive once <u>authorized</u> to do so.
- 3.0 The <u>RBHP</u> will honor reciprocity of auxiliary medical directive <u>certification</u> completed at other Ontario <u>Regional Base Hospital Programs</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.

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.

Employer

Means an ambulance service operator certified to provide ambulance services as defined in the Ambulance Act.

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

Ministry of Health and Long Term Care (MOHLTC); Emergency Health Services Branch <u>Advanced Life Support</u> <u>Patient Care Standards Version 4.7</u>, Appendix 6 as updated from time to time.

Ontario Regulation (O.Reg.) 257/00

Paramedic Portal of Ontario (www.paramedicportalontario.ca)