



Base Hospital Advanced Life Support Program for Durham Region

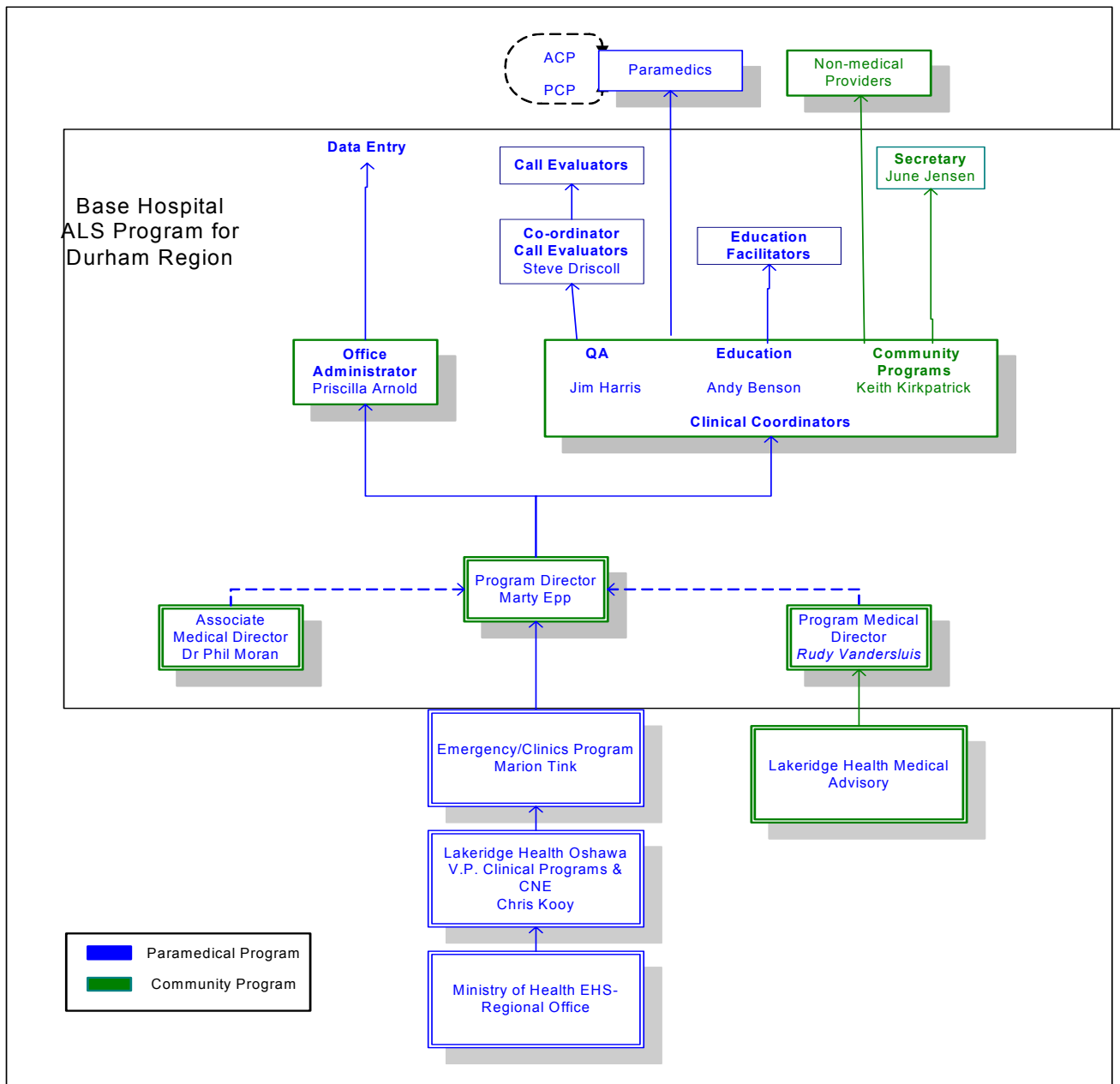
Title: Organizational Chart **Number: 3.1**

Category: 3.0 Organization and Direction

Written By: M. Perez **Approved By: Dr. R. Vandersluis**

Issue Date: October 2002 **Review Date: March 2005**

COMMUNITY "Patient's First"





*Base Hospital Advanced Life Support Program
for Durham Region*

Title: Objectives of The Base Hospital Program Number: 3.2

Category: 3.0 Organization and Direction

Written By: M. Epp

Approved By: Dr. R. Vandersluis

Issue Date: October 2002

Review Date: March 2005

DEPARTMENT OBJECTIVES:

1. To educate pre-hospital care workers to develop job related skills, to provide in-service education and to promote staff development by providing opportunities for continuous education.
2. To provide support for employees which should result in changed attitudes and improved communications.

These changes subsequently resulting in increased motivation, greater job satisfaction and decreased absenteeism in the employees.

Record the following data on a yearly basis:

- The attendance of employees for in-service education programs
- The attendance of employees for the mandatory in-service education programs

Ongoing Objectives

Administrative:

1. Planning

- **To ensure that the services provided by the Base Hospital Program are consistent with other departments and with external accreditation guidelines.**
- To conduct an annual department audit and use it as a basis for planning
- To annually review and revise as necessary the departmental Mission Statement
- To review/revise/set annual department goals and objectives
- To maintain membership and effective participation in the necessary interdisciplinary committees

2. Policies and Procedures

- **To ensure that departmental staff have a clear direction on the scope and limitations of their functions and responsibilities for departmental operations.**



Base Hospital Advanced Life Support Program for Durham Region

- To review/revise departmental functional chart annually.
- To review policies and procedures annually.
- To maintain and update annually Patient Care and Administrative Manuals.

3. Human Resources

- **To ensure that all paramedics have qualifications consistent with their duties.**
- To ensure that all paramedics meet established departmental qualification guidelines.
- **To ensure that all staff participate in professional development.**
- To ensure that all departmental staff and paramedics maintain an accurate written record of professional development activities.
- To maintain a departmental continuing education program.
- To have each staff member attend at least one out-of-hospital workshop/seminar annually.
- To encourage all staff and paramedics to attend pertinent educational sessions within the hospital.
- **To maintain and promote morale and job satisfaction as an adjunct to job performance.**
- To ensure increased communication by maintaining business, team building and Quality Assurance meetings and record meetings for each meeting.
- To have all staff and Paramedics participate in a “feedback” questionnaire annually.
- To conduct annual performance reviews with each staff member and Paramedic.
- To establish individual performance objectives through the performance review system and to review regularly.
- To monitor departmental rate of absenteeism and Paramedic rate of turnover.

4. Finance

- **To ensure the efficient utilization of departmental personnel and funding.**
- Monitor individual, program and departmental workload indicators.
- To maintain and monitor statistics
- To annually monitor compliments/complaints.

5. Operations

- **Patient Care**
- **To ensure that assessment and intervention strategies are consistent with professional and departmental standards and reflect the patients physical, cognitive and emotional needs.**
- To audit charts quarterly



Base Hospital Advanced Life Support Program for Durham Region

- To continue to develop policies and procedures with other departmental staff and Paramedics.
- To regularly update Patient Care Standards and Treatment Protocols.

6. Education

- **To provide education to community and other health care professionals is the role of the Base Hospital.**
- To ensure that the Base Hospital Program Hand-out for the hospital-wide orientation program is current.
- To ensure that new physicians receive written information about departmental functions and relevant policies and procedures.
- To provide education to community interest and self-help groups.
- **To provide education to Paramedics concerning continuous medical education.**
- To ensure that an ongoing pre-hospital medical education program is delivered to all Paramedics.
- **To provide and educational training program to paramedic training candidates.**
- To ensure that a training program is maintained and updated in accordance with Ministry of Health and Hospital Standards.

7. Clinical Teaching

- **To provide meaningful clinical experiences for paramedics in training.**
- To review departmental student objectives.

8. Safety

- **To ensure that there is a safe patient, staff and paramedic environment.**
- To adhere to preventative maintenance schedules for all mechanical/electrical equipment belonging to the Base Hospital Program.
- To ensure that each departmental member attends fire/WHMIS lectures/demonstrations as scheduled in accordance with Hospital Standards.
- To conduct departmental safety inspections as per hospital standards.
- To ensure that portable sharps containers are available for Paramedics at all times.
- To monitor staff, Paramedic and patient incidents.



Base Hospital Advanced Life Support Program for Durham Region

Title: Base Hospital Program Departmental Function

Number: 3.3

Category: 3.0 Organization and Direction

Written By: M. Epp

Approved By: Dr. R. Vandersluis

Issue Date: October 2002

Review Date: March 2005

ROLES AND RESPONSIBILITIES OF A BASE HOSPITAL

- Designated by the Ministry of Health to provide leadership and direction in the provision of pre-hospital emergency health services within a specified geographic area.
- Serves as a regional resource by providing training, consultation and guidance to pre-hospital emergency care workers in the delivery of both basic and advanced life support, monitors and audits the quality of patient care provided and coordinates the placement and transfer of emergency patients.
- Responsible for: provision of supervised clinical training to paramedic trainees and bonding between paramedic trainees and Base Hospital Physicians in accordance with criteria established by the Ministry of Health
- The delegation of medical acts to Paramedics by Emergency Physicians in the Base Hospitals as authorized by College of Physicians and Surgeons in Ontario
- Assuming legal responsibility for patient care and for medical acts delegated by the Emergency Physicians and performed by Paramedics in the field until the patient is admitted into the Emergency Department of the receiving hospital
- Directing the transport of patients on ALS to the nearest appropriate facility for treatment, bypassing one or more hospitals if necessary
- Conducting reviews of cases where medical acts have been delegated to paramedics in order to evaluate the accuracy of patient assessment, appropriateness and quality of ALS provided, the quality of communication in describing patient condition, and accuracy and completeness of documentation of treatment rendered
- Providing a continuing education program for paramedics and testing their skills as part of the Ministry of Health's quality assurance and recertification program
- Maintaining an adequate supply of drugs and equipment used by paramedics in pre-hospital care
- Providing specific information and records of ALS patients to the Ministry and cooperating with the evaluation of the overall ALS Program

Organization

- The Base Hospital Committee will oversee the operations of the Base Hospital and assure the quality of care of the Regional Pre-hospital ALS Program.
- Reports to the MAC and through it to the Board of Governors.



Base Hospital Advanced Life Support Program for Durham Region

- Reports to the Ministry of Health and the DHC as required.

Policies

- A. Any devices that are meant to perform Pre-hospital Advanced Life Support procedures can be used only with the approval of the Medical Director, Base Hospital Program
- B. All ALS equipment used must be done by adhering to quality assurance criteria that satisfy certification and accreditation.
- C. The Base Hospital Program will be responsible for the administration of an appropriate quality control program providing statistical analysis and interpretation.
- D. Personnel operating such ALS equipment must be trained in routine operation, quality control and maintenance to the satisfaction of standards determined by the Base Hospital Program

Responsibilities of the Base Hospital Program

- A. Provide initial training in all ALS procedures. Maintain records of such training and any signed forms.
- B. Review and update the ALS Standards Manual annually.
- C. Direct the Quality Control Program, which includes monthly interpretation of data and providing troubleshooting recommendations to the Paramedics.
- D. Provide recommendations and guidance to Paramedic staff, experiencing difficulties with ALS equipment.

Responsibilities:

- Collect pertinent magazine articles for reference
- Identify new books/resource material
- Develop training packages that can be implemented while crews are “on-duty”
- Identify recertification needs
- Make sure that all personnel are acquainted with new equipment/techniques
- Develop evaluation criteria for new personnel and existing Paramedics
- Monitor morphine control sheets and file.

Key Responsibility Areas:

- Planning, developing, administering the Base Hospital Program, including formulating and implementing policy.
- Monitoring and evaluating the effectiveness of the pre-hospital emergency care system. (analyzing and defining short and long term goals and educational needs)
- The administrative and technical supervision of subordinate staff. (selection and orientation, performance evaluation provide for training and development needs)



Base Hospital Advanced Life Support Program for Durham Region

- Preparing, administering and controlling the budget. (review operational statements and authorizing normal operating expenditures)
- Promoting good public/community relations. (establishing liaison and cooperative working relations with all agencies, individuals, institutions within or neighbouring an area)
- Participating in the further development of Base Hospital Programs throughout the province. (maintaining an awareness of any advances in technology, equipment and methods, recommending improvements, implement new programs/procedures/policies, participate as required in the development of province-wide initiatives)

Departmental Objectives:

- To educate pre-hospital care workers to develop job related skills, to provide in-service education and to promote staff development by providing opportunities for continuous education.
- To provide support for employees which should result in changed attitudes and improved communications. These changes subsequently resulting in increased motivation, greater job satisfaction and decreased absenteeism in the employees.
- Record the following data on a yearly basis:
 - The attendance of employees for in-service education programs
 - The attendance of employees for the mandatory in-service education programs



*Base Hospital Advanced Life Support Program
for Durham Region*

Title: Base Hospital Committee

Number: 3.4

Category: 3.0 Organization and Direction

Written By: M. Perez

Approved By: Dr. R. Vandersluis

Issue Date: October 2002

Review Date: March 2005

**Draft Terms of Reference for:
The Prehospital Care Committee of Durham Region**

- Note the Base Hospital Advanced Life Support Program is mandated by the Ministry of Health Emergency Health Services to operate and chair a base hospital committee.

At the March 1 meeting discussion centred around decreasing workload and numbers of meetings by streamlining several related committees into one, with temporary working groups to address issues as they arise.

The attached “DRAFT” terms are from several sources including:

- The Ministry of Health Emergency Health Services – Base Hospital Roles and Responsibilities document.
- Members of the ad hoc terms of reference group, which includes Durham EMS, Paramedics, the Hospitals and Central Ambulance Communication Centre and the Base Hospital.

Sample #1 “Mandate Statements”

1. The Base Hospital will have a Base Hospital Utilization Committee which will meet at least twice per year for hospital staff, ambulance service operators, Central Ambulance Communication, Ministry of Health Regional Office Staff, paramedics, tiered/first response agencies, municipal representatives and area hospitals to communicate and address issues relating to ambulance base prehospital patient care.
2. The Prehospital Care Advisory Committee for Durham Region will be responsible for providing advice and input into activities and the policy development that affects patient care in the prehospital and emergency care environment in Durham Region.

Terms of Reference – Membership

- Base Hospital Medical Director (chair)
- Durham EMS Director
- Durham EMS QA Manager



Base Hospital Advanced Life Support Program for Durham Region

- Oshawa CACC Director
- Lakeridge Health COO or rep
- Second Emergency Room Physician
- Rouge Valley COO or rep
- Lakeridge Health Emergency Services rep
- Rouge Valley, Ajax & Pickering Site Emergency Services rep
- Emergency Health Services Regional Manager
- District Health Council rep
- Base Hospital Program Manager
- Regional Fire Chiefs Representative
- 2 Primary Care Paramedics *two year*
- 2 Advanced Care Paramedics *rotating terms*
- Durham Regional Police Operations Representative

A quorum will consist of at least 8 members. Other resource staff and concerned groups may be invited to meetings as required.

1. Develop, revise and implement clinical guidelines for the provision of prehospital patient care; in conjunction with the approval of the Base Hospital Medical Director, the Clinical Advisory and medical Advisory Committee of Lakeridge Health.
2. Foster and assist with the development of a region-wide systems based approach to prehospital care in Durham Region.
3. Provide consultation to the local EMS system, emergency departments, hospital administration, Emergency Health Services Branch of the Ministry of Health, Fire Services, and allied service agencies as required. Areas of consultation may include, but are not limited to: education, research, Policy and any issues influencing patient care in the prehospital setting.

Sample – Working group or sub committee Terms of Reference

Potential Groups:

- Central Ambulance Communications Advisory Group
- EMS Continuing Education Advisory Group
- EMS Research Development Group

Membership and chairs of sub committee to be designated by the Region Pre-hospital Care Committee.

i.e. Communications Advisory Committee Chair – CACC Manager

District Health Council Staff



***Base Hospital Advanced Life Support Program
for Durham Region***

Other ad hoc or as required members may include:

Police Operations

EMS Paramedics

Ministry of Health Emergency Health Services Regional Staff



*Base Hospital Advanced Life Support Program
for Durham Region*

Title: Advanced Life Support Patient Care Structure Number: 3.5

Category: 3.0 Organization and Direction

Written By: M. Epp

Approved By: Dr. R. Vandersluis

Issue Date: October 2002

Review Date: March 2005

ADVANCED LIFE SUPPORT PATIENT CARE STRUCTURE

Ministry of Health (MOH)

- Relationship to licensed ambulance service:
 - Emergency Medical Care Assistant certification
 - Sets qualifications for employment as ambulance driver/attendant

- Relationship with Base Hospital
 - Approval of ALS Program content and standards
 - Ensures consistency of core curriculum
 - Provides policies and guidelines

Licensed Ambulance Service Responsibilities

- Ensures all employees meet the qualifications for employment specified by the MOH
- Ensures all qualifications of employees are maintained
- Sets policies and procedures for the delivery of patient care by employees

Advanced Life Support Paramedic

- Provide patient care to the level of training and job specification
- Performs specific delegated acts of medicine as certified by a Base Hospital and defined in the job specification. This delegation may be through direct communications with a Base Hospital Physician or through Base Hospital approved protocols.
- Provide safe transportation

[As an employee of an ambulance service you must provide patient care to the level specified in your job description. There may be occasions when an individual's qualifications exceed the level of care specified, but you must only provide the level specified by your employer, if you are to be legally protected.]

- Compliance to Ambulance Act and Regulations

Base Hospital

- Relationship to MOH and ambulance service – provides service in accordance with Base Hospital Guidelines issued by MOH, including:



Base Hospital Advanced Life Support Program for Durham Region

- The provision of medical direction, guidance and support to ambulance attendants and other pre-hospital emergency providers
 - Monitoring the quality of care provided and auditing basic life support services delivered by ambulance attendants as part of the Ministry's Quality Assurance and Recertification Program
 - The direction of ambulance transportation of emergency patients to the nearest facility where the medical attention required for the care of the patient is available.
 - The development and promotion of area-wide arrangements for the transfer of patients between health facilities, and the coordination of medical transfer teams for the transfer of critically ill and injured patients.
 - Promoting the cost-efficient use of emergency health care resources within the Region
- Relationship to ALS Paramedics:
- Certification
 - Medical direction, guidance and support

Primary Care Paramedic Responsibilities:

- Provide patient care to the level of training and job specifications
- Provide safe transportation

Base Hospital

- Provide medical direction, guidance and support to ALS paramedics and to a lesser degree to BLS paramedics
- Direct the transportation of patients requiring immediate medical attention to the appropriate facility (attending physician status)
- Advise receiving hospitals of incoming patients when required and/or appropriate

Receiving Hospital

- Provides medical advice when requested by ambulance crew
- Receives and provides health care to patients

Ambulance Dispatch

- Provides communications network that enables the ambulance crew to talk directly or indirectly (through dispatch) to the Base Hospital or receiving hospital.
- Directs patient to appropriate health care facility in accordance with the Ambulance Act, when direction is not made by Base Hospital Physician.

Patient

- Person requiring health care attention and transportation

As you can see from the preceding cursory review of the Organizational and Patient Care Structures, the introduction of Advanced Life Support Programs is a complex process. To better understand the process the following sections deal with some of the specifics and conclude with a general overview summary.

Title: Legislative Authority

Number: 3.6

Category: 3.0 Organization and Direction

Written By: M. Epp

Approved By: Dr. R. Vandersluis

Issue Date: October 2002

Review Date: March 2005

LEGISLATIVE AUTHORITY:

The authority for the development of ALS Programs in the ambulance industry in Ontario lies within the Ambulance Act. The pertinent sections are:

- 1.0 It is the duty of the Minister and he has the power, to establish and operate, alone or in cooperation with one or more organizations, institutions and centres for the training of personnel for ambulance services;
- 2.0 Subject to the approval of the Lieutenant Governor in Council, the Minister may make regulations:
 - a) prescribing the standards of conveyances and equipment for ambulance services and of their maintenance and repair and requiring the approval of the Director for the acquisition of such conveyance and equipment as are specified in the regulations;
 - b) governing the management, operation and use of ambulance services, including insurance against liability in connection with their operation;
 - c) prescribing the records, books, audits and accounting system to be kept, made or followed by operators and the returns, reports and information to be submitted to the Director or the Minister;
 - d) prescribing the qualifications for persons employed in ambulance services including their testing and examination, physical or otherwise;
 - e) providing for the issuing of licenses and prescribing terms and conditions of licenses;

Part III Medicine

46. [1] The College of Physicians and Surgeons of Ontario is continued as a body corporate without share capital with the power to acquire, hold and dispose of real and personal property for the purposes of this Part.
[2] The objectives of the College are:
 - a) to regulate the practice of medicine and to govern its members in accordance with RHPA, the regulations and the bylaws;
 - b) to establish, maintain and develop standards of knowledge and skill among its members;
 - c) to establish, maintain and develop standards of qualification and practice for the practice of medicine;
 - d) to establish, maintain and develop standards of professional ethics among its members;



Base Hospital Advanced Life Support Program for Durham Region

- e) to administer this Part and perform other duties and exercise such other powers as are imposed or conferred on the College by or under any Act;
 - f) such other objects relating to human health care as the Council considers desirable, in order that the public interest may be served and protected.
50. Subject to the approval of the Lieutenant Governor in Council and with prior review by the Minister, the Council may make regulations,
- (k) authorizing persons other than members to perform specified acts in the practice of medicine under the supervision or direction of a member;

What Is A Pre-hospital, Advanced Life Support Program?

“A Pre-hospital Advanced Life Support Program is one component within a total Pre-hospital Emergency Care Program which includes physician supervised and delegated advanced life support measures that are acts in the practice of medicine.”

In Ontario, the pre-hospital provision of delegated acts in the practice of medicine lies primarily with the ambulance attendants of licensed ambulance services. The components of a Pre-hospital Advanced Life Support Program are:

- “A Base Hospital is a hospital in voice contact with pre-hospital care workers that is responsible for providing medical supervision within a defined geographic area. The Base Hospital Physician will determine to which receiving hospital a patient should be taken.”
- An Associate Base Hospital
- A receiving hospital
- A Base Hospital Physician
- A licensed ambulance service
- An appropriate Ambulance Dispatch Centre which is capable of providing direct verbal communication between the ambulance attendant, Base Hospital and/or Base Hospital Physician as well as receiving hospitals.



*Base Hospital Advanced Life Support Program
for Durham Region*

Title: Ambulance Act

Number: 3.7

Category: 3.0 Organization and Direction

Written By: M. Epp

Approved By: Dr. R. Vandersluis

Issue Date: October 2002

Review Date: March 2005

AMBULANCE ACT (R.S.O. 1980, Chapter 20)

Revisions to Regulation 14

Base Hospital:

Means a hospital that is classified as a Base Hospital under Regulation 863 of revised Regulations of Ontario, 1980 (Classification of Hospitals)

Attending Physician:

Means a physician who is aware of a patient's condition and who accepts responsibility for the patient.

Base Hospital Physician:

Means a physician so designated by the Medical Director of a Base Hospital Program.

Medical Director of a Base Hospital Program:

Means a physician so designated by a Base Hospital

Paramedic:

Means a person who is an emergency medical care assistant and who;

- Is authorized to perform one or more delegated medical acts and
- Has a document signed by a Medical Director of a Base Hospital that confirms that the person is capable of performing the medical acts specified therein under the direction of a Base Hospital Physician.

Conditions of Employment:

- Free from each communicable disease
- Successfully immunized against tetanus, diphtheria, hepatitis B and poliomyelitis (or that immunization thereto is medically contraindicated)
- EMCA
- RRO
- CPR



Base Hospital Advanced Life Support Program for Durham Region

- No criminal convictions for crime involving moral turpitude for which the person has not been pardoned

What Is A Paramedic?

A paramedic is synonymous with an Advanced Life Support (ALS) attendant.

“In Ontario, the term “paramedic” should be considered as generically describing an ambulance attendant with Emergency Medical Care Assistant certification who is permitted, under the supervision of a physician, to perform one or more medical acts.” The second portion of the definition: “That has obtained the appropriate training and education to perform the approved medical acts; and has subsequently obtained the official designation from a Base Hospital Physician to perform such acts in accordance with the published guidelines.”

“An Emergency Medical Care Assistant as defined in Regulation 14 under the Ambulance Act.”

In this Regulation, unless the context otherwise requires:

- (d) “Emergency Medical Care Assistant” ,means a driver attendant who,
- i) has successfully completed a course in ambulance and emergency care provided by a College of Applied Arts and Technology or has experience and qualifications approved as equivalent thereto by the Minister or by an official of the Ministry who is authorized by the Minister to grant such approval.
 - ii) Has obtained a pass standing in an Emergency Medical Care examination set by the Director under this Regulation, and
 - iii) Has worked full-time as a driver attendant in an ambulance service in Ontario for a period of at least twelve months and has demonstrated his competence as such

Regulation 14: Part III Qualifications for Employment

7. [1] No person shall be employed in ambulance service as a driver attendant unless he,
- a) is at least eighteen years of age
 - b) holds an Ontario Secondary School Graduation Diploma or has academic qualifications approved as equivalent thereto by the Minister or by an official of the Ministry who is authorized by the Minister to grant such approval
 - c) is able to read, write and speak the English language with reasonable fluency
 - d) holds a valid and subsisting driver’s license issued under the Highway Traffic Act, that authorizes him to drive an ambulance

Base Hospital Advanced Life Support Program for Durham Region

- e) is free from any communicable disease within the meaning of the Public Health Act and is not a carrier of any such disease
- f) is the holder of a subsisting certificate signed by a legally qualified medical practitioner stating that he is successfully immunized against tetanus, diphtheria and poliomyelitis or that immunization therefore is contraindicated;
- g) for a period of one year before the date he commences employment, has not had six or more demerit points recorded by the Registrar of Motor Vehicles under the Highway Traffic Act;
- h) for a period of two years immediately prior to the date he commences employment, has not had his driver's license suspended under the Highway Traffic Act;
- i) for a period of three years immediately prior to the date he commences employment, has not been prohibited under the Criminal Code (Canada) from driving a motor vehicle in Canada; and
- j) has not been convicted of any crime involving moral turpitude for which he has not been pardoned.

[3] In addition to the qualifications set out in sub-section (1), a person who commenced full-time employment as a driver attendant on or after the 1st day of August, 1975 shall be qualified as an emergency medical care assistant.

[5] Subject to sub-sections (6) and (7), no operator shall hire, or keep in his employ, a driver attendant who lacks the qualifications set out in sub-section (1) and who lacks the qualifications applicable to such driver attendant as set out in sub-section (2), (3), or (4), as the case may be.

The Attending Physician

"A Physician who is aware and informed of a patient's problem and who takes on the management and responsibility for the patient."

50. [1] Subject to section 52, the driver of an ambulance in which a patient is transported shall, in an emergency, transport the patient –
- a) to a facility directed by an attending physician
 - b) where a direction is not made pursuant to clause (a), to a facility directed by a dispatcher ordering the movements of the ambulance; or
 - c) where a direction is not made under clause (a) or (b), to the nearest facility where the medical attention apparently required for the care of the patient is available.
- [2] In a case other than an emergency, where the use of an ambulance is medically necessary, the driver of an ambulance in which a patient is transported shall transport the patient a reasonable distance
- a) to a place directed by an attending physician; or
 - b) where a direction is not made under clause (a), to a place directed by a dispatcher ordering the movements of the ambulance
- [3] Notwithstanding subsections (1) and (2),



Base Hospital Advanced Life Support Program for Durham Region

- a) where an Act or Regulation, or an order, direction or authorization made thereunder, requires the transportation of a patient to a place other than that prescribed by the Regulation , the driver of an ambulance shall transport the patient in accordance therewith; and
- b) where an Act of Regulation, or an order, direction or authorization made pursuant thereto, expressly permits the transportation of a patient to a place other than that prescribed by this Regulation, the driver of an ambulance may transport the patient in accordance therewith.