

Program Document No.: 6006.03	Subject: Paramedic/Emergency Medical Dispatcher Conduct & Competency Review Process	Type: Policy
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Signature of Program Director:	Signature of Program Document Coordinator:	

1.0 Purpose

- 1.1 To provide a fair process to Emergency Health Services (EHS) Registered Paramedic/Emergency Medical Dispatcher's (EMD's) for investigations and decisions of cases brought to the attention of the Provincial Medical Director (PMD).

2.0 Guiding Philosophy

- 2.1 To ensure safe optimal care to patients in the prehospital setting by competent Paramedic/EMD's .

3.0 Definitions

- 3.1 ADR: Alternative Dispute Resolution, is arrived at by agreement between the Provincial Medical Director the Review Committee and the Paramedic(s) involved and may consist of remedial, educational and/or training conditions and /or disciplinary actions.
- 3.2 Concerns: All medical care concerns and/or issues are classified into one of the following categories :
- 3.2.1 Minor Concerns: These would include documentation errors, or minor protocol errors with no potential or actual effect on patient care/condition. These concerns will be addressed following the Continuous Quality Improvement (CQI) process.
- 3.2.2 Intermediate Concerns: These would include protocol deviations, errors of commission or omission with potential for poor patient outcome, or recurrent or unaddressed minor concerns. These concerns will follow the CQI process.
- 3.2.3 Major Concerns: These would include any incident/occurrence that resulted in or would likely cause a detrimental effect to a patient, concerns about competence or recurrent or unaddressed intermediate concerns. Major concerns may be a contravention of the CQI process or a concern that the PMD feels should be referred to the Conduct & Competency (C&C) Review Process.
- 3.2.4 Conduct Concerns: These would include issues which contravene the EHS Paramedic/EMD Code of Conduct or practising outside of ones essential competencies. These concerns will be addressed through the EHS Paramedic/EMD C&C Review Process.
- 3.3 Conduct and Competency Committee (C&C Committee): A committee comprised of Paramedics and

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EMD's established to act as a peer review/evaluation body, making recommendations to the PMD. The C&C Committee deals with matters concerning professional conduct or competency to help ensure the highest quality of patient care. It will consist of a minimum of 12 members and will attempt to include members from each of the four regions in the province, (North, Central, East & West) and will attempt to include members from each of the paramedic levels. (PCP, ICP, ACP, CCP & EMD)

- 3.4 Continuous Quality Improvement (CQI): A process / program initiated to continuously improve patient care. Under the direction of the PMD this process involves assessment, audits and reports on patient care processes and outcomes. It supports the development of standardized templates and processes for educational programs and utilizes evidence-based methodology to encourage and develop research and initiatives, with a focus on improving morbidity and mortality.
- 3.5 Decisions: A conclusion, resolution or ADR reached by the PMD after consideration of information and recommendations received from the peer review/evaluation. body. Decisions will be communicated by signature to the individual(s) within 10 days of the decision. For decisions affecting registration, notices will be sent to employers.
- 3.5.1 Possible Decisions shall include but not be limited to:
- prescribed education with evaluation
 - registration revoked
 - registration suspended with specified conditions for reinstatement
 - registration level reduced with specified conditions for reinstatement
 - placed on probation with specified conditions for reinstatement
 - a written "Letter of Caution" (*This is a letter placed on the individual's registration file for a specific time frame. It will include the date of application ie. when it begins and the proposed date of removal from the paramedic's file. Time frame may be up to a maximum of two (2) years.*)
 - a written "Letter of Reprimand" (*This is a letter placed in the individual's registration file permanently.*)
 - dismissal of complaint
- 3.6 Grounds for Investigation / Disciplinary Action: These factors form a basis for justification to initiate the Review Process and shall include but not necessarily be limited to the following:
- aiding or abetting the practice of paramedicine by a person not duly registered at the level for said skills
 - notification of or charging of a Paramedic/EMD for a criminal offense
 - the provision of inaccurate, untrue or misleading information in an application for Registration or Re-registration or in helping others to do same
 - Incompetent Professional Practice as evidenced by ; a demonstrated inability to respond appropriately to a patient or the general public or inability to apply principals, skills or knowledge necessary to successfully carry out the level of practice for which (s)he is registered
 - practising or providing care beyond that allowed by his/her registration level or presenting oneself as being able to provide care at a scope beyond that allowed by his/her registration level
 - unprofessional conduct ; this is contrary to conduct as defined by the EHS Paramedic Code of Conduct
- 3.7 Investigation: A systematic or formal inquiry into an incident or allegation so as to establish the relevant facts surrounding the matter being investigated. This investigation may include interviews with dispatchers,

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witnesses, paramedics, and examination of records, documents and tapes including, as permitted, those maintained by a health care facility, other service organizations or persons related to the delivery of health services, including the Medical Examiner (ME). The investigation is conducted by an investigator approved by the PMD.

- 3.8 Investigator: A Paramedic trained to do investigations or an independent investigator. These investigations may include formal interviews with dispatchers, witnesses, paramedics, and examination of records, documents and tapes including, as permitted, those maintained by a health care facility, other service organizations or persons related to the delivery of health services, including the Medical Examiner (ME). The investigator will provide a written report to the PMD after the investigation is complete.
- 3.9 Medical Oversight Physician (MOP): MOP's are the principal physicians who assist the PMD with medical oversight of health care provided by Paramedics/EMD's. They are geographically dispersed throughout the province. They assist and are involved with initiatives such as education, medical policy and protocol development and the CQI Program.
- 3.10 Protocols: These are the guidelines set and approved by EHS for patient management which establish the standards for patient care.
- 3.11 Quality Assurance (QA): A process initiated to assist Paramedics to continue to meet their current level of requirements to ensure safe optimal patient care. This process is facilitated through consultation with the PMD, MOP's, QCM's and the Paramedic(s) involved. The Quality Assurance process may include remedial, educational and/or training conditions.
- 3.12 Quality Control Medic (QCM): QCM's are registered paramedics or nurses, geographically dispersed throughout the province and are responsible for auditing patient care reports. They assist in the CQI process. The information from these audits is used to continually improve medical care standards and care.
- 3.13 Review Committee: A Committee of three (3) members chosen by the Registrar from the C&C Committee, established for the review of the particular complaint. This Committee will review the findings of the investigation and make recommendations to the PMD for issues pertaining to conduct and/or competency.
- 3.14 Review Process Algorithm: The series of actions and steps used in the processing of and incorporation of regulations and principles set forth in this policy. (*Appendix A*)

4.0 Policy

- 4.1 The EHS PMD will investigate, or cause to be investigated, any written complaint, or situation made publicly known, or audit revealing a potential problem regarding a Paramedic's or EMD's conduct or competency that, if true, may have resulted in:
- Compromise of patient care
 - A threat to the public safety or trust
 - Conduct contravening the EHS Paramedic/EMD Code of Professional Conduct
 - Any other complaint which reveals a ground for investigation or discipline
- 4.2 In all cases and incidents, only the PMD has the right, to immediately suspend or alter a Paramedic/EMD's Registration if there is a potential for ongoing compromise of patient care, a threat to the public safety or trust. (*In all cases and incidents, only the PMD will decide if it is necessary to consult or notify and/or forward case information to the Department of Health (DOH) Lawyer/Legal Department.*)

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- 4.2.1 The Registrant, his/her employer, his/her QCM and/or MOP shall be notified concurrent with the initiation of suspension, inactivation of registration or change in Paramedic level. The notification shall:
- be in writing and sent by signature service to the registrant
 - specify the allegations and/or circumstances which caused the PMD to immediately suspend or alter the registration level
 - state that the suspension and/or alteration in paramedic level is in effect immediately and specify duration and terms
 - inform registrant that (s)he has the right to request a meeting with the PMD to review the facts which necessitated this action
 - must include a statement that the registrant must report the suspension or action if (s)he applies for employment, registration or authorization from another employer or agency during this period of suspension or change in paramedic level
- 4.3 All issues / incidents will be investigated by following the Paramedic/EMD C&C Review Process Algorithm. (*Appendix A*) The PMD, using the Investigation Matrix for PMD (*Appendix B*) will decide if the issue is a CQI issue or if the issue or incident is a conduct or competency issue (C&C Issue).
- 4.3.1 Quality Assurance (QA) issues will follow the CQI process and the PMD may require the individual(s) to complete retraining requirements. Training may be conducted through the QCM's, MOP's, and/or the Learning department . The PMD will have the final decision if /when the registrant has met all remedial requirements.
- 4.3.2 For C&C issues, the PMD may draft an ADR. The ADR will be presented:
- in writing and sent by signature service to the registrant.
 - will specify allegations and/or circumstances which brought this forward
 - will state that the requirements and/or conditions which must be accepted and specify length of time in which these requirements must be met
 - inform registrant that (s)he has the right to request a meeting with the PMD to review the facts which necessitated this action
 - request a reply by 10 business days of receipt of the ADR (If no reply the ADR is deemed to be in effect)
 - if not acceptable the individual must submit a response in writing to the Registrar/EHS
- 4.3.3 If the ADR is refused by the individual the case/incident will be immediately referred to an Investigation Committee. All issues referred to an Investigation Committee will be investigated using the Investigative Matrix. (*Appendix C*) The Committee will investigate with a target completion date of four to six (4-6) weeks and submit this report to the PMD.
- 4.3.4 When an investigation is begun, the individual(s) shall be notified. The notification shall:
- be by signature service to the Paramedic/EMD
 - include a statement of allegations against the Paramedic/EMD
 - and reason for this investigation
 - instruct the individual that they will be contacted and interview(s) will be arranged with the investigator or by an independent Investigator.
- 4.3.5 Following investigation, the PMD, after consideration of information and/or recommendations will complete and place in the case record a signed and dated statement certifying his decision. The notification shall be:

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- in writing and sent within 10 days of completion of the decision, by signature service to the individual(s) involved
 - specify allegations and/or circumstances that caused the investigation
 - detail the results of the findings
 - Specify any conditions that must be met by the Paramedic/EMD in order to maintain their registration and the time limit in which these must be accomplished
- or
- State if the registration is suspended or revoked, and if so state the duration of the suspension
 - Specify any conditions that must be met in order for reinstatement of registration to occur at the conclusion of the suspension period
 - Include a statement that the registrant must report the suspension if (s)he applies for employment, registration or authorization from another employer or agency during the period of the suspension.
 - copies of notification affecting registration will also be sent to the registrant(s)' employers.

- 4.4 Documentation pertaining to all C&C issues and incidents will be placed in the registrant's C&C case record file.
- 4.5 The Investigation and/or review of any complaint or incident may, with the discretion of the PMD, be reopened in light of new evidence.
- 4.6 Compliance with the Review Process: Failure to comply will result in suspension of registration pending compliance.
- 4.7 The PMD will ensure that if the original information was received from a source outside EHS, (employer, public, hospital, patient etc.) the outside source will be notified in writing that their information has been evaluated and/or investigated. This outside contact will be provided with a summary of the action taken .

5.0 Appendices

- 5.1 Appendix A: Paramedic/EMD Conduct & Competency Review Process Algorithm
- 5.2 Appendix B: Investigation Matrix for PMD
- 5.4 Appendix C: Investigative Matrix for Conduct & Competency Issues for Investigation Committee

6.0 Reports

None

7.0 References

- 7.1 Essential Competencies Policy 6000
- 7.2 Registration Policy 6001
- 7.2.1. EHS Paramedic /EMD Code of Conduct - Appendix E
- 7.3 Re-Registration Policy 6002
- 7.4 Re-activation Policy 6003

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7.5 Alberta College of Paramedicine

8.0 Outcome Measurement

None

9.0 Revisions

9.1 Revision Number: 3

- 9.1.1 Definition added for Quality Assurance (QA) and Section 4.3.1 QA abbreviation was written in full as "Quality Assurance"
- 9.1.2 Appendix A has been revised to match PMD Matrix and Investigative matrix
- 9.1.3 Appendices B & C "headers" corrected to reflect changes made
- 9.1.4 Appendix C - Title has been changed and form has been changed to reflect that this form is used for only Conduct Issues.