



## Toronto Emergency Medical Services EMS Operational Service Delay Incident Report & Checklist

CALL INFORMATION			
Date:	Time:	Call Location:	
Run #:	Geocode	Dispatch Code	CTAS
Vehicle #	Destination:		
Call Information:	<hr/> <hr/>		
<input type="checkbox"/> Call information includes direction not to approach (i.e. wait for police).			
CALL & SCENE ASSESSMENT (Does not apply if directed by CACC not to approach)			
<input type="checkbox"/> Visual assessment conducted and results (If not done, explain rationale):			
<hr/> <hr/>			
<input type="checkbox"/> Access/egress routes identified:			
<input type="checkbox"/> Additional sources of information:			
<hr/> <hr/>			
<input type="checkbox"/> The scene is in direct visual sight of crew. (If no, rationale)			
<hr/> <hr/>			
<input type="checkbox"/> Is the preliminary concern validated and how?			
On-going violence?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Known weapons involved?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Fire or are other chemicals involved?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
Allied service directed you to delay service?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
<b>Other details:</b>			
<hr/>			
Report and Declaration			
<input type="checkbox"/> Vehicle and portable radios on tactical channel			
<input type="checkbox"/> Contact with supervisor made			
<input type="checkbox"/> Contact with CACC maintained as per directive.			
<input type="checkbox"/> Crew is located in a safe location at:			
<hr/>			
<input type="checkbox"/> Based on assessment, I have chosen to delay emergency medical service as I believe that there is a patient and/or scene safety issue based on findings and in compliance with BLS Standards, S.O.P's and O.H. & S. Act and that we are staging on the call.			
<b>Paramedic</b>			
Oasis:	Name (Print):	Signature:	
<hr/>	<hr/>	<hr/>	
<b>Receiving Operations Supervisor</b>			
EMS #:	Name (Print):	Signature:	
<hr/>	<hr/>	<hr/>	
Date Received:	Comment:		
<hr/>	<hr/> <hr/>		
<b>Operations Manager Name</b>			
Date Received:	Comment:		
<hr/>	<hr/> <hr/>		

**Service Delay Patch Format:** Unit, Run #, Call location, Call information, Scene assessment findings\* (if applicable), Declaration, Staged location.



# Toronto Emergency Medical Services

## EMS Operational Service Delay Incident Report & Checklist

### OCCUPATIONAL HEALTH AND SAFETY ACT R.S.O. 1990

#### RIGHT TO REFUSE OR TO STOP WORK WHERE HEALTH OR SAFETY IN DANGER (SECTION 43, 1-3)

**Refusal to work**

**Non-application to certain workers**

**43. (1)** This section does not apply to a worker described in subsection (2),

- (a) when a circumstance described in clause (3) (a), (b) or (c) is inherent in the worker’s work or is a normal condition of the worker’s employment; or
- (b) when the worker’s refusal to work would directly endanger the life, health or safety of another person. R.S.O. 1990, c. O.1, s. 43 (1).

**Idem**

**(2)** The worker referred to in subsection (1) is,

- (a) a person employed in, or a member of, a police force to which the *Police Services Act* applies;
- (b) a firefighter as defined in subsection 1 (1) of the *Fire Protection and Prevention Act, 1997*;
- (c) a person employed in the operation of,
  - (i) a correctional institution or facility,
  - (ii) a place of secure custody designated under section 24.1 of the *Young Offenders Act* (Canada), whether in accordance with section 88 of the *Youth Criminal Justice Act* (Canada) or otherwise,
  - (iii) a place of temporary detention under the *Youth Criminal Justice Act* (Canada), or
  - (iv) a similar institution, facility or place;
- (d) a person employed in the operation of,
  - (i) a hospital, sanatorium, nursing home, home for the aged, psychiatric institution, mental health centre or rehabilitation facility,

**Note: On a day to be named by proclamation of the Lieutenant Governor, subclause (i) is amended by the Statutes of Ontario, 2007, chapter 8, section 221 by striking out “nursing home, home for the aged” and substituting “long-term care home”. See: 2007, c. 8, ss. 221, 232 (2).**

- (ii) a residential group home or other facility for persons with behavioural or emotional problems or a physical, mental or developmental disability,
- (iii) an ambulance service or a first aid clinic or station,
- (iv) a laboratory operated by the Crown or licensed under the *Laboratory and Specimen Collection Centre Licensing Act*, or
- (v) a laundry, food service, power plant or technical service or facility used in conjunction with an institution, facility or service described in subclause (i) to (iv). R.S.O. 1990, c. O.1, s. 43 (2); 1997, c. 4, s. 84; 2001, c. 13, s. 22; 2006, c. 19, Sched. D, s. 14.

**Refusal to work**

**(3)** A worker may refuse to work or do particular work where he or she has reason to believe that,

- (a) any equipment, machine, device or thing the worker is to use or operate is likely to endanger himself, herself or another worker;
- (b) the physical condition of the workplace or the part thereof in which he or she works or is to work is likely to endanger himself or herself; or
- (c) any equipment, machine, device or thing he or she is to use or operate or the physical condition of the workplace or the part thereof in which he or she works or is to work is in contravention of this Act or the regulations and such contravention is likely to endanger himself, herself or another worker. R.S.O. 1990, c. O.1, s. 43 (3).

### Standard Operating Procedures

#### Chapter 03 Operations

#### 03.06.13

#### Patient Care and Scene Safety Policy and Procedures

Policy

Patient safety and the safety of all Toronto EMS staff are of utmost priority. The purpose of the policy is to ensure that paramedics can safely provide prompt and effective patient care.

1. As per the Ministry of Health and Long Term Care, Basic Life Support Patient Care Standards, Section (A), the paramedic will:
  - “On arrival at scene, *perform an assessment of the environment*. Park the ambulance in a safe place, as close to the point of patient contact as possible. Identify obvious and potential hazards to the patient (s) and crew. Where appropriate, identify routes of entry and exit, e.g. for multiple patient incidents; for potential violence or confrontation.
  - “Secure the environment if assessment indicates there is no danger to self or others.
  - “If danger exists, or there is uncertainty regarding personal and / or patient safety, request assistance from allied emergency services personnel/agencies and leave the immediate area.”
2. Paramedics will use reasonable judgment based on specific, available information when choosing to delay provision of service. When performing an *assessment of the environment* to determine potential hazards to patient(s) and/or crew, Paramedics are reminded of their responsibility under the Occupational Health and Safety Act, Section 43, (1) and (2). These sections exclude paramedics from the right to refuse work where the circumstances are inherent in their work and/or if the work refusal would directly endanger the health and safety of another person. These sections do not preclude a decision to *delay* the provision of service if there is a legitimate risk.

The decision to delay EMS service must include recognizing and evaluating the reasons for problematic patient behaviour—such as metabolic causes of combative behaviour—to ensure staff are not jeopardizing the patient’s life, health or safety.

On-Scene Procedures

In proceeding to making patient contact, paramedics will;

1. Continuously seek information with which to assess the safety of the patient and scene using the Operational Service Delay Incident Report and Checklist as appropriate. Assessment procedures should include but not be limited to
  - Driving by the patient’s location;
  - Talking with bystanders;
  - Making verbal contact by apartment lobby intercom devices;
  - Accessing any additional resources e.g. local security personnel
2. Not enter a scene until the appropriate agency has arrived in circumstances involving;
  - the use of weapons at the scene;
  - continuing violence at the scene;
  - fire / hazardous materials
 Or as directed by Police, Fire or EMS management.
3. Immediately notify Central Ambulance Communications Centre (CACC) of any situations which may affect their ability to respond to the patient.
4. Establish contact on a radio Talk Group (channel) identified by e (CACC). Ensure both vehicle and portable radios remain on assigned talk group until directed to change. Once contacted by the assigned Operations Supervisor, paramedics will communicate their reasons for delaying service.
5. Provide updates to CACC every 10 (ten) minutes.
6. Immediately notify CACC when Police, Fire or any allied service arrive on scene.
7. Immediately notify CACC when the decision is made to access the scene.
8. Submit an Operational Service Delay Incident Report and Checklist outlining their actions by end of the shift or as directed to by the Operations Supervisor.

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