

October 8, 2009

**Summary recommendations & Toronto Emergency Medical Services (EMS) action plan
in response to Alexander Street investigation and report**

The following outlines the 13 recommendations from the Ministry of Health and Long-Term Care (MOHLTC) report on the above investigation and the corresponding actions that have been taken, or will be taken by Toronto EMS, in response to the recommendations. A glossary of short forms is provided at the end of this document.

Recommendation	Toronto EMS Action
<p>1. That the management of Toronto Central Ambulance Communication Center (CACC) provides remedial training to Emergency Medical Dispatcher #1 (EMD) in the roles and responsibilities of a call receiver and the requirements to process requests for emergency medical services as required by Toronto CACC policy and procedure and upon successful completion of this training that performance be monitored for a minimum of three (3) months to ensure compliance.</p>	<ul style="list-style-type: none"> • EMD #1 has been retrained on the CACC policy and has been scheduled to receive remedial training on return to work. • Toronto CACC management staff will monitor EMD #1 performance to ensure compliance for six (6) months which exceeds the MOHLTC recommendation. • All EMS CACC staff have been reissued the CACC policy. • In addition all EMD's and their Supervisors have been told to review and reinforce existing policy and procedure.
<p>2. That the management of Toronto CACC provide remedial training to EMD #1 in the requirement to document all pertinent patient and scene condition information learned while receiving requests for ambulance service, including any information that there are individuals with a patient, and that such documentation be accurate as provided by the call and that upon successful completion of this training that performance be monitored for three (3) months to ensure compliance.</p>	<ul style="list-style-type: none"> • EMD #1 has been retrained on the CACC SOP (Standard Operating Procedure) with respect to documenting pertinent patient and scene condition information and has been scheduled to receive remedial training on return to work. Toronto CACC management staff will monitor performance to ensure compliance for six (6) months which exceeds the MOHLTC recommendation. • In addition, all CACC, EMD's and Supervisors have been told to review and enforce existing policy and procedure.

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<p>3. That the management of Toronto CACC provide remedial training to EMD #1 in the appropriate method to request police assistance on scene as stipulated by CACC policy and procedure and that performance be monitored for a minimum of thirty (30) days to ensure compliance.</p>	<ul style="list-style-type: none"> • EMD # 1 has been retrained on the CACC SOP with respect to the appropriate method of requesting police assistance and has been scheduled to receive remedial training on return to work. • All CACC EMDs and their Supervisors have been told to review and enforce existing policy and procedures.
<p>4. That the management of Toronto CACC provide remedial training to EMD #2 in the roles and responsibilities of a call receiver and the requirements to process requests for emergency medical services as required by Toronto CACC policy and procedure and upon successful completion of this training monitor performance for a minimum of 3 months. (90 days)</p>	<ul style="list-style-type: none"> • EMD #5 has been retrained on the CACC policy and has been scheduled to receive remedial training on return to work. • Toronto CACC management staff will monitor performance to ensure compliance for six (6) months which exceeds the MOHLTC recommendation.
<p>5. That the management of Toronto CACC provide remedial training to EMD #2 in the requirement to document all pertinent patient and scene condition information learned while receiving requests for ambulance service, including any information that there are individuals with a patient, and that such documentation be accurate as provided by the call and that upon successful completion of this training that performance be monitored for 3 months. (90 days)</p>	<ul style="list-style-type: none"> • EMD #5 has been retrained on the CACC SOP with respect to documenting pertinent patient and scene condition information and has been scheduled to receive remedial training on return to work. • Upon successful completion of remedial training, Toronto CACC management staff will monitor his performance to ensure compliance for six (6) months which exceeds the MOHLTC recommendation. • All CACC EMDs and their Supervisors have been told to review and reinforce existing policy and procedure.
<p>6. That the management of Toronto CACC review current policy and procedure regarding call processing and documentation requirements and to update and or modify such policy to ensure that all EMD's document action requirements pertaining to patient scene conditions.</p>	<ul style="list-style-type: none"> • As an Accredited Centre of Excellence with the International Academy of Emergency Dispatch (IAED), Toronto EMS CACC maintains a CQI (continuous quality improvement) process and is required to perform call receiving audits daily, and to provide counsel to EMDs who fall below a 95% compliance level with the protocol. This process exceeds the requirements of the MOHLTC. • The current policy and existing Continuous Quality Improvement processes will be reviewed by an EMS

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	management working group.
7. That the management of Toronto CACC and Toronto EMS review the police notification policies and amend as required to ensure that police assistance at the scene of a medical emergency is necessary for the protection of paramedics, patients and bystanders health and safety.	<ul style="list-style-type: none"> • Toronto EMS has reviewed this policy. • Recommended changes will be tabled with the City of Toronto's 9-1-1 Emergency Response Committee to consider impacts to all allied emergency services.
8. That the management of Toronto EMS provide remedial training to Primary Care Paramedic (PCP) #1 in the requirements of the Basic Life support Patient Care Standards as well as Toronto EMS Standard Operating Procedures regarding the decision making process to withhold patient care (stage) and that upon successful completion of this training performance be monitored for a minimum of 6 months.	<ul style="list-style-type: none"> • PCP #1 will be retrained and will receive remedial training upon his return to work. • Upon successful completion of remedial training, Toronto EMS management staff will monitor performance to ensure compliance for six (6) months. • All Primary Care Paramedics and their Supervisors have been advised to review and enforce this existing policy and procedure.
9. That the management of Toronto EMS provide remedial training to PCP #2 in the requirements of Basic Life support Patient Care Standards as well as Toronto EMS Standard Operating Procedures regarding decision making process to withhold patient care (stage) and that upon successful completion of this training that performance be monitored for 6 months to ensure compliance.	<ul style="list-style-type: none"> • PCP #2 will be retrained and will receive remedial training upon return to work. • Upon successful completion of remedial training, Toronto EMS management staff will monitor performance to ensure compliance for six (6) months.
10. That the management of Toronto EMS provide remedial training to Supervisor #1 in the roles and responsibilities of a Supervisor when notified that a paramedic crew is withholding patient care (staging) and upon successful completion of this training performance be monitored for a minimum of thirty (30) days to ensure compliance.	<ul style="list-style-type: none"> • Supervisor #1 has been reinstructed and will receive remedial training upon return to work. • Upon successful completion of remedial training, Toronto EMS management staff will monitor performance to ensure compliance for six (6) months which exceeds the MOHLTC recommendation.
11. That the management of Toronto EMS provide direction to all staff, either by memorandum, directive or policy, that in any situation where the paramedic does not believe they have sufficient information regarding scene safety that they will	<ul style="list-style-type: none"> • Toronto EMS is currently reviewing the 3 possible recommended options to provide this direction to staff.

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request the dispatcher to provide additional information.	
<p>12. That the management of Toronto CACC provide direction to all staff, either by memorandum, directive or policy that in any situation where it is unclear as to what is occurring on scene to ask pertinent questions of the caller in order to obtain as much information as possible and all such information will be documented in the call details and provided to the responding paramedics.</p>	<ul style="list-style-type: none"> • Toronto EMS CACC is currently providing direction to all EMD staff through a Continuing Education program reinforcing the situational interrogation inherent in the protocol and the need for documentation of all pertinent information.
<p>13. That the management of Toronto EMS review the current policies regarding paramedic withholding service (staging) to ensure it is compliant with the Basic Life Support Patient Care Standards as well as relevant health and safety legislation and that consideration is given to amending these policies to include;</p> <ul style="list-style-type: none"> • immediate notification of TEMS management of any and all paramedic withholding service (staging) events • the immediate response of an individual from TEMS management to the scene to perform a scene and safety assessment • that Incident Reports will be completed by the paramedics and TEMS manager involved with a paramedic staging event 	<ul style="list-style-type: none"> • Toronto EMS has implemented an “Alert Line” in the CACC to provide immediate notification to TEMS management of <u>any</u> EMS crew who delay patient contact as a result of a scene safety concern. This application will be applied to all delayed responses immediately. The notification will provide the CACC Management Staff and the Operations Duty Officer with the location of the delay in order to deploy the closest available Operations Supervisor to respond. • July 17, 2009, Toronto EMS reissued a Management directive to all operations management staff to establish direct communications with a paramedic withholding service (staging) to ensure the safety of the crew and provide any necessary assistance or direction. If the crew remains staged, the Operations Supervisor is to respond to the staged crew. • A revised documentation process is being developed using existing CAD (Computer Aided Dispatch) data and reporting tools to provide real time access to information and updated incident status comments. This will support the Professional Standards Unit (PSU) in collating all required documentation

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<ul style="list-style-type: none"> that all such incident reports will be traced and reviewed in a timely manner to ensure that all paramedic staging events are reasonable and necessary. 	<p>as CACC management staff can initiate the audit process electronically.</p> <ul style="list-style-type: none"> PSU will continue to review and match Operations and CACC documentation and forward for review to Operations management. In addition, TEMS has implemented working group to review and make recommendations to policy, the SOP and paramedic education, for calls where ambulance service is withheld. TEMS will participate in the proposed City Manager's working group with the Union, the Ministry of Labour and Ministry of Health to review and make recommendations to improve the current withholding service or "staging" policy. In 2005, "staging" was put in place by a joint group of union and TEMS management in response to a Ministry of Labour order to protect the health and safety of its staff.

GLOSSARY OF TERMS

1. CACC - Central Ambulance Communication Center – where 9-1-1 calls are received, caller questioned, situation assessed over the phone, calls recorded and ambulances dispatched
2. EMD – Emergency Medical Dispatcher – the person who works in the CACC who takes the 9-1-1 call, questions caller, performs questioning according to established protocols, determines the priority of the call, provides the information to the paramedics and dispatches the ambulance
3. MOHLTC - Ministry of Health and Long Term Care – provincial Ministry provides the City funds to run the CACC and legislates provision of ambulance services through the Ambulance Act
http://www.e-laws.gov.on.ca/html/regs/english/elaws_regs_000257_e.htm
4. PCP – Primary Care Paramedic – a health care provider who is a first responder to patients at a 9-1-1 call
5. ACP – Advanced Care Paramedic – a health care provider who is a first responder to patients at a 9-1-1 call who has achieved the highest level certification as a paramedic is able to perform advanced care such as intubation.
6. CAD – Computer Aided Device – the system that records the calls at the CACC and transmits the information to the paramedics dispatched to a call.
7. MOL – Ministry of Labour – the Provincial Ministry that inspects Toronto EMS adherence to the Occupational Health and Safety Act and responds to employee concerns about working conditions.

<http://www.labour.gov.on.ca/english/hs/>

Media contact: Kim McKinnon, Coordinator Public Information and Media, kmckinn2@toronto.ca, 416-392-2255