

CENTRE FOR PREHOSPITAL CARE STANDARDS

CATEGORY: Program Specific
ISSUE DATE: June 2009
SUBJECT: **PARAMEDIC REACTIVATIONS**

REVIEW DATE: Oct. 2024
REVISION DATE: Nov. 15, 2023
ARCHIVE DATE:

Page 1 of 4

Document Owner: Regional Education and Certification Coordinator	Name: Corey Petrie
Update Schedule: Annually	
Stakeholder Consultation and Review: HSN CPC Quality of Care Committee HSN CPC Program Committee	Date: March 19, 2025 November 15, 2023
Approval: Corey Petrie, Chair, CPC Program Council 	Date: February 26, 2025

Note: Electronic signatures must be embedded as a .jpeg or .png image then saved as a PDF before posting on the Intranet.

PURPOSE:

Return to Practice offers a Paramedic an opportunity to orientate to the clinical environment after a period of absence. Return to practice is required as per the current Ministry of Health and Long Term Care (MOHLTC), Advanced Life Support Patient Care Standards (ALS PCS), Appendix 6 and may include a consolidation phase as outlined within. This process will be initiated upon request by the Employer.

PROCEDURE

Method

1. The employer will:
 - Notify the Health Sciences North Centre for Prehospital Care Program through the Paramedic Portal of Ontario when a paramedic has been absent for a period > 90 days
 - Notify the Health Sciences North Centre for Prehospital Care Program (HSN CPC) through the Paramedic Portal of Ontario when the Paramedic's return to practice date is confirmed.
 - Ensure the Basic Life Support Patient Care Standard (BLS PCS) education and/or testing is completed prior to the Paramedic starting the HSN CPC return to practice process.
2. The HSN CPC will:
 - Contact the Employer and Paramedic within two **(2)** business days to coordinate dates and requirements associated with the HSN CPC reintegration process, once written notification has been received regarding the Paramedic's expected return to practice date. The return to practice plan will be communicated in writing within two **(2)** business days.
 - Advise the Paramedic that they will have a maximum of one **(1)** business day to complete all mandatory CME requirements as set out in the table below prior to review and/or evaluation(s). If the Paramedic does not complete all mandatory requirements within two **(2)** business days then another return to practice plan will be created in consultation with the Employer. The return to practice plan will be communicated in writing within two **(2)** business days.

CATEGORY: Program Specific

SUBJECT: **PARAMEDIC REACTIVATIONS**

- Schedule the Paramedic for review and/or evaluation(s) within a maximum of four **(4)** business days from the time their mandatory requirements were completed. The Paramedic and Employer will be notified within one **(1)** business day:
 - i. Successful completion, no further requirements. Proceed to full reactivation.
 - ii. Successful completion, consolidation required. Proceed to consolidation.
 - iii. Unsuccessful, further adjustments to the plan will be communicated in writing within three **(3)** business days.

Notes:

- If consolidation was required; once it has successfully been completed the HSN CPC will remove the condition of Consolidation. The Paramedic and Employer will be notified in writing within three **(3)** business days that all requirements are complete.
- The certification requirements for all paramedics returning to practice after an absence from clinical practice is based upon the duration of the absence, and described in the table below.

STANDARDS

Return to Practice Timelines and Requirements (PCP & ACP)		
	PCP	ACP
90 days to < 6 months	• Any missed mandatory CME with HSN CPC staff	• Any missed mandatory CME with HSN CPC staff
6 months to < 12 months	• Paramedic Portfolio Evaluation • Completion of identified mandatory CME(s) missed during absence • Up to one day of review and evaluation with HSN CPC representative or designate • Additional requirements may be identified by HSN CPC staff following the one-day review and evaluation and may be suggested as an addition to the plan at the discretion of the HSN CPC Medical Director	• Paramedic Portfolio Evaluation • Completion of identified mandatory CME(s) missed during absence • Up to one day of review and evaluation with HSN CPC representative or designate • Additional requirements may be identified by HSN CPC staff following the one-day review and evaluation and may be suggested as an addition to the plan at the discretion of the HSN CPC Medical Director
12 months to < 18 months	• Paramedic Portfolio Evaluation • Completion of identified mandatory CME(s) missed during absence • Up to two (2) days review and evaluation with HSN CPC representative or their designate • (12) hours of Consolidation with a Paramedic of equivalent or higher level of certification/authorization with a minimum of (0.5) year experience (≥975 hours) • Additional requirements may be identified by HSN CPC staff following the one-day review and evaluation	• Paramedic Portfolio Evaluation • Completion of identified mandatory CME(s) missed during absence • Up to two (2) days review and evaluation with HSN CPC representative or their designate • (24) hours of Consolidation with a Paramedic of equivalent or higher level of certification/authorization with a minimum of (0.5) year experience (≥975 hours) • Additional requirements may be identified by HSN CPC staff following the one-day review and evaluation and may be

CATEGORY: Program Specific

SUBJECT: PARAMEDIC REACTIVATIONS

	and may be suggested as an addition to the plan at the discretion of the HSN CPC Medical Director • Please refer to HSN CPC Paramedic Consolidation Policy	suggested as an addition to the plan at the discretion of the HSN CPC Medical Director • Please refer to HSN CPC Paramedic Consolidation Policy
18 months 36 months	• Paramedic Portfolio Evaluation • Completion of identified mandatory CME(s) missed during absence • Up to three (3) days of review and evaluation with HSN CPC representative or their designate • Up to (36) hours of Consolidation • Additional requirements may be identified by HSN CPC staff following the three-day review and evaluation and may be suggested as an addition to the plan at the discretion of the HSN CPC Medical Director • Please refer to HSN CPC Paramedic Consolidation Policy	• Paramedic Portfolio Evaluation • Completion of identified mandatory CME(s) missed during absence • Up to three (3) days of review and evaluation with HSN CPC representative or their designate • Up to (72) hours of Consolidation • Additional requirements may be identified by HSN CPC staff following the one-day review and evaluation and may be suggested as an addition to the plan at the discretion of the HSN CPC Medical Director • Please refer to HSN CPC Paramedic Consolidation Policy
≥ 36 months	The plan will be created based upon an individual needs assessment after discussion with the Employer. HSN CPC will determine the final decision on the RTP plan. Please also see 18–36-month requirements. In addition to the requirements listed above, the Paramedic will be evaluated using a 7-station OSCE style process. The OSCE will be convened as soon as practical and scored according to the global rating scale (GRS) *May involve college academic initiatives	The plan will be created based upon an individual needs assessment after discussion with the Employer. HSN CPC will determine the final decision on the RTP plan. Please also see 18–36-month requirements. In addition to the requirements listed above, the Paramedic will be evaluated using a 7-station OSCE style process. The OSCE will be convened as soon as practical and scored according to the global rating scale (GRS) *May involve college academic initiatives

CATEGORY: Program Specific**SUBJECT: PARAMEDIC REACTIVATIONS**

EDUCATION AND TRAINING**Definitions**

1. Paramedic Portfolio Evaluation: This is a comprehensive review of the paramedic's file by the Paramedic Practice Coordinator (PPC) in order to complete a needs analysis and formulate an educational/certification plan.
2. HSN CPC Reintegration Process (Orientation): Hours set by the Program and delivered by the PPC. This may include orientation to new skills, mandatory training and/or a certification component. It is based on time away from clinical.
3. RBH PA- Regional Base Hospital Performance Agreement This term isn't used in the standard
4. HSN CPC- Health Sciences North Centre for Prehospital Care
5. RTP- Return to Practice
6. OSCE – Objective Structured Clinical Exam
7. GRS – Global Rating Scale

References and Related Documents

- Ontario Base Hospital Group Return to Work Standard
- Ontario Base Hospital Group Consolidation Standard
- Ontario Base Hospital Certification Working Group Document
- Regional Base Hospital Performance Agreement
- Ministry of Health and Long-Term Care (*MOHLTC*); Emergency Health Services Branch Advanced Life Support Patient Care Standards, Appendix 6
- Ontario Regulation (O.Reg.) 257/00
- Paramedic Portal of Ontario – Training Materials for Service Operators