



CERTIFICATION POLICY

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DEFINITIONS

Academic Certification	The certification of Paramedic Students.
Advanced Life Support Patient Care Standards	The most current version of the Ontario Advanced Life Support Patient Care Standards (ALS PCS).
Auxiliary Skill Set	Controlled acts and other procedures listed in Appendix 3 and 4 of the Advanced Life Support Patient Care Standards.
Basic Life Support Patient Care Standards	The most current version of the Ontario Basic Life Support Patient Care Standards (BLS PCS).
Candidate	A paramedic, paramedic student, or Department of National Defense (DND) paramedic seeking certification to perform controlled acts and/or other procedures listed in the Ontario Advanced Life Support Patient Care Standards, under the license and authority of the Regional Paramedic Program for Eastern Ontario Medical Director.
Falsifying	Providing information that is factually inaccurate. This includes the omission of information deemed relevant by the Regional Paramedic Program for Eastern Ontario (RPPEO).
Mandatory Skill Set	The controlled acts and other procedures listed in Appendix 1 and Appendix 2 of the Advanced Life Support Patient Care Standards.
MedicNet	RPPEO online database which manages the status of all certifications.
Practical Certification	The certification of a Department of National Defense Paramedic.
Preceptorship	A period of practical experience and training under the guidance and supervision of a certified paramedic.
Professional Certification	The certification of a paramedic employed by a Stakeholder Service.



Stakeholder Service

A Paramedic service with whom the Regional Paramedic Program for Eastern Ontario has a signed Memorandum of Understanding relating to the program's core mandate from the Ontario Ministry of Health and Long-Term Care (MOHLTC).

ABBREVIATIONS

ALS	Advanced Life Support
ACP	Advanced Care Paramedic
AEMCA	Advanced Emergency Medical Care Assistant
ALS PCS	Advanced Life Support Patient Care Standards
BLS PCS	Basic Life Support Patient Care Standards
CME	Continuing Medical Education
CPR	Cardiopulmonary Resuscitation
DND	Department of National Defence
IV	Intravenous
MOHLTC	Ministry of Health and Long-Term Care
OBHGE	Ontario Base Hospital Group Executive
O.Reg.	Ontario Regulation – Ambulance Act Ontario Regulations – 257/00 General
RPPEO	Regional Paramedic Program for Eastern Ontario
SAED	Semi Automated External Defibrillation
SR	Symptom Relief

RELATED POLICIES/LEGISLATION

Advanced Life Support Patient Care Standards

Ontario Regulation (O.Reg.) 257/00

RPPEO Performance Agreement with the Ministry of Health and Long-Term Care (MOHLTC)
Emergency Health Regulatory and Accountability Branch



CERTIFICATION POLICY

- PURPOSE:** To outline a standardized and consistent process for certification with the Regional Paramedic Program for Eastern Ontario for paramedics, paramedic students and Department of National Defense Paramedics.
- POLICY:** The RPPEO's Medical Director will initially certify eligible paramedics to perform controlled acts and other advanced medical procedures listed in the Advanced Life Support Patient Care Standards (ALS PCS), in accordance with O.Reg. 257/00.



CERTIFICATION ELIGIBILITY

Professional

The RPPEO's Medical Director will certify eligible professional paramedics, employed by one or more stakeholder services, to perform controlled acts and other advanced medical procedures listed in the ALS PCS, in accordance with O.Reg. 257/00.

A PCP candidate who graduates from a recognized paramedic training program in Ontario may be certified by the RPPEO's Medical Director to perform controlled acts and other advanced medical procedures listed in the ALS PCS for a period of up to 210 days post-graduation prior to holding their Advanced Emergency Medical Care Assistant (AEMCA).

Stakeholder service staff will maintain copies of all documents required by a candidate for certification by a Regional Base Hospital Medical Director under O.Reg. 257/00. These documents will be made available to RPPEO staff for review as required.

A candidate can only demonstrate successful completion of a paramedic training program by providing their stakeholder service with an original copy of:

- their official program certificate/diploma; or
- a dated letter, on college letterhead, signed by the Program Director, explicitly stating that the candidate has successfully completed the program's criteria for graduation.

A candidate seeking certification at the **Primary Care Paramedic (PCP)** scope of practice must have:

- successfully completed a PCP training program at a recognized college in Ontario or hold an AEMCA certificate issued by the MOHLTC;
- a valid Cardiopulmonary Resuscitation (CPR) certificate; and
- no prior history of clinical deactivation or decertification by an Ontario Regional Base Hospital or other certifying bodies in the previous ten (10) years.

A candidate seeking certification at the **Advanced Care Paramedic (ACP)** scope of practice must have:

- an AEMCA certificate issued by the MOHLTC;
- a valid CPR certificate;



- no prior history of clinical deactivation or decertification by an Ontario Regional Base Hospital or other certifying bodies in the previous ten (10) years; and
- successfully completed an ACP training program at a recognized college in Ontario and hold an Ontario ACP certificate issued by the MOHLTC.

CERTIFICATION ELIGIBILITY

Academic

The RPPEO will certify eligible paramedic students to perform controlled acts and other advanced medical procedures listed in the ALS PCS during a clinical preceptorship while under the direct supervision of a service-approved scope-appropriate preceptor.

A candidate seeking academic certification at the **Primary Care Paramedic (PCP)** scope of practice must:

- be enrolled in a recognized PCP training program at a college in Ontario;
- have completed all the college's didactic training requirements necessary to proceed to the preceptorship phase of training;
- have completed all the college's clinical training requirements necessary to proceed to the preceptorship phase of training;
- have received an orientation to and training on the BLS PCS and the ALS PCS;
- have been trained to perform the controlled acts and other advanced medical procedures listed in the ALS PCS for which certification is being requested;
- be deemed competent by the college's Medical Director to proceed to the preceptorship phase of training;
- be in good standing with the college;
- hold a valid CPR certificate;
- be covered under a formal preceptorship agreement between the college and the stakeholder service hosting the preceptorship; and
- be covered by a malpractice insurance policy that is agreeable to the stakeholder service hosting the preceptorship.

If academic certification is obtained a PCP student may be certified and authorized to perform procedures and skills as listed in their certification letter.



A candidate seeking academic certification at the **Advanced Care Paramedic (ACP)** scope of practice must:

- be enrolled in a recognized ACP training program at a college in Ontario;
- hold an AEMCA certificate issued by the MOHLTC;
- have completed all the college's didactic training requirements necessary to proceed to the preceptorship phase of training;
- have completed all the college's clinical training requirements necessary to proceed to the preceptorship phase of training;
- have received an orientation to and training in the BLS PCS and ALS PCS;
- have been trained to perform the controlled acts and other advanced medical procedures listed in the ALS PCS for which certification is being requested;
- be deemed competent by the college's Medical Director to proceed to the preceptorship phase of training;
- be in good standing with the college;
- hold a valid CPR certificate;
- be covered under a formal preceptorship agreement between the college and the stakeholder service hosting the preceptorship; and
- be covered by a malpractice insurance policy that is agreeable to the stakeholder service hosting the preceptorship.

If academic certification is obtained an ACP student may be certified and authorized to perform procedures and skills as listed in their certification letter

CERTIFICATION ELIGIBILITY

Practical

The RPPEO's Medical Director will certify eligible military paramedics to perform controlled acts and other advanced medical procedures listed in the ALS PCS during a field practicum while under the direct supervision of a service-approved scope-appropriate preceptor.

A candidate seeking practical certification at the DND Paramedic scope of practice must:

- be employed by the DND as the equivalent of a PCP;
- hold a valid CPR certificate;
- have received an orientation to and training in the BLS PCS and the ALS PCS;



- have been trained to perform the controlled acts and other advanced medical procedures listed in the ALS PCS for which certification is being requested;
- be covered under a formal practicum agreement between DND and the stakeholder service hosting the field practicum; and
- be covered by a malpractice insurance policy that is agreeable to the stakeholder service hosting the preceptorship.

If practical certification is obtained a military paramedic may be certified and authorized to perform procedures and skills as listed in their certification letter. If eligible for certification, a military paramedic may be certified and authorized to perform:

- semi-automatic external defibrillation (SAED);
- symptom relief (SR) drug administration; and
- supraglottic airway insertion (SGA) and maintenance.

CERTIFICATION REQUEST

A certification candidate must demonstrate clinical competence prior to receiving certification by the RPPEO's medical director. Clinical competency will be determined by RPPEO staff through knowledge assessments, skills demonstrations, and scenario testing. Candidate performance will be assessed using an evidence based Global Rating Scale.

A Certification Request Form must be submitted for each candidate. It is the responsibility of stakeholder service staff, paramedic program staff or DND staff to submit the Certification Request Form to RPPEO staff on the candidate's behalf.

RPPEO staff must receive the Certification Request Form, completed in full, at least ten (10) business days in advance of the candidate's requested certification test date. If the form is incomplete, the candidate's certification request will not be processed, and the candidate will not be tested.

The submission of the Certification Request Form ten (10) business days in advance allows the candidate appropriate time to complete mandatory knowledge assessment content prior to their scheduled testing date, and allows time for the RPPEO to receive any required Certification Referrals.



Falsifying a Certification Request Form may result in denial of entry into certification testing or, if already certified, immediate deactivation and decertification at the RPPEO's discretion.

This policy applies to:

- Paramedics testing for Professional eligibility
- Paramedics seeking a scope of practice conversion from PCP to ACP
- DND paramedics testing for Practical eligibility
- Paramedic students testing for Academic eligibility

CERTIFICATION TESTING

The RPPEO's certification testing is designed to assess a candidate's ability to safely and effectively perform controlled acts and other procedures listed in the ALS PCS. It is not intended to assess a candidate's ability to use service-specific equipment. It is the responsibility of the stakeholder service to ensure that a candidate can safely and effectively use service-specific devices, equipment, and supplies required to perform controlled acts and/or other procedures, prior to the candidate entering into clinical practice, if certified by the RPPEO's medical director.

The duration of certification testing will vary depending on the scope of practice requested by the stakeholder service, and the number of candidates testing.

Professional Certifications will test the candidate in the appropriate level of certification on the Core and approved Auxiliary Medical Directives in the ALS PCS.

Academic Certification will test candidates in designated Medical Directives and applicable skills

Practical Certification will test candidate in designated Medical Directives and applicable skills.

A professional candidate who fails their initial certification test will be eligible for retesting at the stakeholder service's discretion. A minimum of two (2) weeks must elapse between the failed test and the retest or as determined by the associate medical director for certification. A minimum of two weeks between attempts allows the candidate time to prepare for subsequent testing.

A retest will only be undertaken at the written request of the stakeholder service.

A candidate is limited to a maximum of three (3) certification attempts at their current scope of practice.

PROCEDURE:

1. The candidate should prepare for their test by reviewing the BLS PCS, ALS PCS, Companion Document, RPPEO medical directives, educational online content, and program policies.
2. The candidate should arrive at the test site at least 15 minutes in advance of their scheduled time. If a candidate arrives late, RPPEO staff may refuse to test the candidate or ask the candidate to return later in the day.
3. Upon arrival at the test site, the candidate must sign in to the test event. A valid driver's license must be presented to confirm candidate identity and proceed with testing
4. RPPEO staff will brief the candidate at the beginning of the certification test to ensure the candidate is aware of the schedule and expectations for the day.
5. The candidate will complete all knowledge assessments, skill station(s), and scenario(s) according to the provided schedule. The schedule may be subject to change without notice at the RPPEO's discretion.
6. The candidate must pass all knowledge assessments, skill station(s), and scenario(s) to pass the certification testing. If a candidate fails their certification test, they may be retested at the discretion of their sponsoring stakeholder service in accordance with RPPEO policy.
7. The RPPEO shall notify the paramedic and stakeholder service within three (3) business days of the decision with respect to certification as to whether the paramedic was successful or not in attaining their certification.
8. Any candidate caught cheating will automatically fail, and the RPPEO's program director, medical director, and stakeholder service will be notified.
9. Any candidate that behaves in an obscene, abusive, threatening, or otherwise unprofessional manner will automatically fail the certification test. The program director, medical director, and stakeholder service will be notified.

PREVIOUS CERTIFICATION REPORTING

Professional

Prior to certification testing, a candidate must report to the RPPEO all certifications, deactivations, and/or decertifications issued to them by any Regional Base Hospital or other certifying bodies within the ten (10) years preceding application for certification.

It is the responsibility of the paramedic candidate to submit Certification Referral Form(s) to the RPPEO. One form should be submitted for each Regional Base Hospital that has certified, deactivated, and/or decertified the paramedic in the preceding ten (10) years.

RPPEO staff must receive the Certification Referral Form(s), completed in full, at least ten (10) business days in advance of the candidate's scheduled certification test date. If the Certification Referral Form(s) is (are) incomplete, then the candidate's certification request will not be processed and the candidate will not be tested.

A candidate may undergo certification testing if the Certification Referral Form(s) was(were) submitted to the RPPEO, but the referring Base Hospital(s) has(have) not yet responded to the certification referral.

The RPPEO will not issue a certification letter to a candidate until all applicable certification referrals have been received.

The RPPEO will work diligently with its peer Regional Base Hospitals to minimize the time required to complete a certification referral. However, once a certification referral is sent to a peer Regional Base Hospital by the RPPEO, the RPPEO does not have control over the time required to complete the certification referral.

Falsifying or failing to submit a required Certification Referral Form may result in a paramedic's immediate deactivation and decertification at the RPPEO's discretion.

NUMBER & LOCATION of CERTIFICATION EVENTS

Professional

The RPPEO will hold a minimum of six (6) regional certification test events each year. The yearly dates for certification test events will be set and communicated to the services.

Resources permitting, RPPEO staff will conduct a service specific certification test event at the request of a stakeholder service.

PROCEDURE:

1. Twenty (20) business days prior to a certification test event, stakeholder service staff will advise the RPPEO of the projected number of candidates they will send to the scheduled certification test event.
2. Ten (10) business days prior to a certification test event, stakeholder service staff will update the RPPEO of the final number of candidates they will send to the scheduled certification test event.
3. If, ten (10) business days prior to a scheduled certification test event, there are no candidates projected to attend, then RPPEO staff will cancel the event and inform the stakeholder services.
4. At least ten (10) business days prior to a scheduled certification test event, RPPEO staff will set and communicate the location(s) of the event to stakeholder service staff.
5. All certification test events, regardless of location or size, will be conducted in accordance with the RPPEO's standards of practice.

CERTIFICATION FEE

Professional

Professional Paramedic certification is part of the RPPEO's core mandate. The RPPEO receives funding from the MOHLTC to administer professional certification testing. The RPPEO does not charge paramedics or stakeholder services for professional certification testing.

Academic or Practical

Academic or practical certification is not within the RPPEO's core mandate. The RPPEO's funding, which is provided by the MOHLTC, must be used exclusively for core mandate work.

Since these certifications are not part of the RPPEO's core mandate, the RPPEO must charge a fee to cover the costs associated with such certification. These costs include but are not limited to testing, re-testing, chart review, clinical support, and administration.

The fee for certification is **\$350.00** per PCP student or DND Paramedic and **\$500.00** per ACP student.

The fee will apply to all paramedic students or DND paramedics who undergo certification testing, whether certification is granted or not. If the candidate is not successful in certification testing the fee is non-refundable.

If a paramedic student is employed by one or more of the RPPEO's stakeholder services at the time of academic certification testing, then the RPPEO will waive the fee for this paramedic student.

Payment of the certification fee is due within thirty (30) days of the invoice date. The RPPEO's Medical Director may revoke certification for non-payment.

A stakeholder service may restrict a paramedic student's or DND Paramedic's authorization to perform controlled acts or other advanced medical procedures during preceptorship.

The RPPEO will not refund the certification fee if a stakeholder service restricts the authorization to perform controlled acts or other advanced medical procedures during preceptorship.

RPPEO will review its certification fee on an annual basis, and inform the colleges or DND six (6) months in advance of any planned certification fee changes.

PROCEDURE:

Certification Invoicing

1. RPPEO will invoice the paramedic program or DND within ten (10) business days of a certification test event.

2. RPPEO will contact paramedic program or DND staff approximately ten (10) business days after issuing an invoice to confirm receipt of the invoice. If the invoice has not been received, then a second invoice will be issued within five (5) business days.

Payment Receipt

1. RPPEO will notify program staff of receipt of payment within ten (10) business days of receiving payment for certification testing. Notification will be made via phone or email.

Non-Payment

1. If the RPPEO does not receive payment for certification testing within thirty (30) days of the issuance of an invoice, program staff and the candidate will be contacted to notify them that payment is overdue.
2. If payment still has not been received ten (10) business days after the late payment notification, then the paramedic students or DND paramedics for whom payment is overdue may have their certification revoked at the discretion of the Program Director.
3. If certification is revoked for non-payment, it may be reinstated by the Program Director once payment has been received by RPPEO.

Direct Payment

1. Candidates who are sponsored by their paramedic program for certification testing are required to pay the fee directly to RPPEO, payment in full must be received prior to testing.

NOTIFICATION of CERTIFICATION

A candidate who meets the criteria for certification and who is deemed clinically competent by RPPEO staff will be certified and authorized to perform controlled acts and other advanced medical procedures and skills as listed in their certification letter.

Certification will be granted by the RPPEO's Medical Director in the form of a certification letter.

Certification letters will be issued by the RPPEO within five (5) business days of the candidate meeting all clinical and administrative requirements for certification.

All candidates will receive a notification of their issued certification letter by direct email from the RPPEO. Certification letters are accessible to each candidate by login to their individual MedicNet profile.

Stakeholder service staff, paramedic program staff and DND staff will have access to all their respected candidate certification letters by login to their assigned MedicNet account.

Professional paramedics, paramedic students, and DND paramedics must not perform controlled acts or other advanced medical procedures until they receive formal notification of certification from the RPPEO's Medical Director.

ANNUAL MAINTENANCE OF CERTIFICATION

POLICY: The RPPEO's maintenance of certification process complies with the MOH certification standard requirements as noted in Appendix 6 of the ALS PCS. It is each paramedic's mandate to maintain the required elements for continued certification. Failure to do so is the responsibility of the individual paramedic.

PROCEDURE:

All paramedics are required to provide patient care to a minimum of ten (10) patients per year whose care requires assessment and management at the Paramedic's level of certification. On October 1st, a request will be made to each of the stakeholder services to send an updated staff list and status of completion of the required ten (10) patient contacts. RPPEO will update MedicNet with the submitted information.

Paramedics shall not have an absence from providing patient care that exceeds ninety (90) consecutive days without successful completion of a Return to Clinical Practice process.

Any Paramedic that is not able to maintain certification will be required to undergo a return to clinical practice with the RPPEO, at the discretion of the RPPEO and the stakeholder service.

PCPs are required to complete 8 Continuing Medical Education (CME) hours annually with the RPPEO.

ACPs are required to complete 24 CME hours annually. The RPPEO breaks this down into 16 hours in official RPPEO CME and 8 hours chosen from an elective calendar published on the RPPEO website. Events not on the officially approved RPPEO Electives Calendar must receive pre-approval from the RPPEO to be eligible.

ACPs in their first year of certification **are** required to complete elective CME hours. They also require any CMEs that fall after their certification as an ACP. With respect to an ACP whose Certification has been for a period of less than a year and who has completed a minimum of eight (8) hours of CME, the Medical Director shall proportionally adjust the remaining required CME hours.

DEACTIVATION

POLICY: The Medical Director may deactivate a paramedic for administrative or clinical cause at their discretion.

- An administrative deactivation is issued when a paramedic fails to meet the criteria for certification by the Medical Director, in accordance with Ontario Regulation 257/00 or Appendix 6 of the ALS PCS (Certification Standard).
- A clinical deactivation is issued when the Medical Director has serious concerns regarding a paramedic's ability to provide safe and effective care, accurately document the provision of care in a timely manner, or behave in an ethical manner in the practice of paramedicine.

A deactivation may be complete or partial.

- A complete deactivation means a paramedic is no longer certified or authorized to perform any controlled acts or other procedures listed in the ALS PCS under the license or authority of the Medical Director.
- A partial deactivation means a paramedic is no longer certified or authorized to perform one or more controlled acts or other procedures listed in the ALS PCS under the license or authority of the Medical Director.

Deactivation may be temporary or permanent, at the discretion of the Medical Director.

In cases of egregious conduct or practice, the Medical Director may elect to pursue decertification in accordance with the Ontario Paramedic Practice Review Committee (PPRC).

A paramedic may contest deactivation.

- PROCEDURE:**
1. In the case of an administrative deactivation:
 - RPPEO staff will review the administrative issue(s) with the Manager, Education and Certification.
 - The Manager, Education and Certification, will determine if deactivation is warranted.
 - If warranted, RPPEO will issue a deactivation letter and notify:
 - The service;
 - The paramedic;
 - The Program Director; and

- MOH Field Office.

2. In the case of a clinical deactivation:

- RPPEO staff will review the clinical concern(s) with the Medical Director.
- The Medical Director will determine if deactivation is warranted.
- If warranted RPPEO will issue a deactivation letter and notify:
 - The service;
 - The paramedic;
 - The Program Director; and
 - MOH Field Office.
- An Associate Medical Director may deactivate a paramedic at the discretion of, and under authority of the Medical Director.
 - In such cases, the above does not apply and the Medical Director will be notified and consulted post deactivation.
- A Clinical Performance Coordinator may deactivate a paramedic at the discretion of, and under authority of the Medical Director.
 - In such cases, the above does not apply and the Medical Director will be notified and consulted post deactivation.
- A paramedic believing deactivation is unwarranted, may request a review by submitting a Deactivation Review Form to RPPEO within two (2) days of receiving notification of deactivation.
- Review of administrative deactivation will be conducted by the Program Director whose decision is final.
- Review of clinical deactivation will be conducted by the Medical Director whose decision is final.
 - If a deactivation is reversed, a recertification letter will be issued and the deactivation will be removed from the paramedic's record.

APPLICABLE FORMS: Administrative Deactivation Form
 Deactivation Review Form

REACTIVATION / RECERTIFICATION

POLICY: To be reactivated, a paramedic deactivated for clinical reasons must undergo a remediation and reactivation process. This will include an assessment of their learning needs and completion of any comprehensive remediation / learning plan developed. A paramedic off for more than ninety (90) days with an administrative deactivation and returning to work must also undergo this process.

PROCEDURE:

1. The deactivated paramedic will meet with a Clinical Coordinator and a needs assessment will be completed inclusive of:
 - 1-year history of call documentation from Quality and Patient Safety
 - Recommendations from Medical Director's, Clinical Review Committee, Quality and Patient Safety
 - Identification of any outstanding CME requirements
 - Paramedic self-assessment
2. The Clinical Coordinator drafts a comprehensive learning plan inclusive of:
 - Learning opportunities
 - Expected outcome
 - Strategies to be used
 - Evaluation methods
 - Completion dates for each stage
3. A detailed comprehensive remediation / learning plan will then be submitted to Education and Certification Manager, and the Medical Director for approval:
 - two (2) day turnaround expected
4. Once approved, the remediation / learning plan is to be implemented by the Clinical Coordinator in conjunction with the service:
 - Scheduling of 5 clinical scenarios as per Return to Clinical Practice process map will be required
 - The remediation and reactivation process shall not exceed ninety (90) consecutive days in length
5. When all aspects are complete, a full written report with recommendations is given to the Manager and Medical Directors.
6. The Medical Directors review all documentation and decide upon reactivation or further necessary steps for comprehensive learning prior to reactivation.
7. Where the Medical Director has made the decision to proceed with reactivation:
 - the paramedic, stakeholder service, Senior Field Manager, and all other RBHP's will be notified of the reactivation
 - The RPPEO will update the paramedics MedicNet profile

DECERTIFICATION

POLICY:

In the event that the Medical Director believes that decertification is warranted, the Regional Paramedic Program will follow the decertification process approved by the MOHLTC. This requires the convening of a Paramedic Practice Review

Committee (PPRC) which will function in an external advisory role to the RPPEO. The purpose of the review will be to determine:

1. If the information used by the Base Hospital in its evaluation was valid.
2. The appropriateness of the Base Hospital action for the event(s) involved.
3. If the requirements for decertification are “reasonable” for the event(s).

The Medical Director will not proceed to decertification without going through the PPRC process as approved by the MOHLTC in Appendix 6 of the ALS PCS.

PROCEDURE: After thorough investigation and subsequent deactivation, the Program Director of the RPPEO will notify the OBHG Executive Chair of the possibility of decertification. If the Chair is from the RPPEO at the time of this request, they will send the request to the OBHG Executive Vice Chair.

The affected Paramedic(s) will be notified that a PPRC has been convened to review the case. They will be requested to submit their rebuttal of the case findings, and the reasons they should not be decertified, in writing within ten (10) business days. This will be forwarded to the PPRC.

The committee will proceed to review case submissions, which will be in written format only. No in person meetings or oral depositions will be permitted.

If clarification of an issue is required, the OBHGE Chair will contact both parties in writing. The PPRC may also seek information regarding applicable standards and legislation as required.

The PPRC will review the submissions and any responses and render an opinion within ten (10) business days of the final review meeting and submit it to the OBHG Executive Chair. All records regarding the process will be stored for a period of four (4) years by the Chair of the PPRC.

The OBHG Executive Chair will send a written copy of the opinion to the RPPEO and the affected Paramedic(s).

The RPPEO will update the certification of the Paramedic(s) and notify them and their stakeholder service(s) immediately.

REVISION RECORD

Version number	Revision Date	Summary of Changes
1.0	June 2016	Pre-existing 2015 version reviewed as baseline for new versioning system.
2.0	February 20, 2019	Requirement revoked for 144 hours of service in Annual Maintenance of Certification. Language updated to be more gender inclusive. Requirement added for 10 previous years of reporting in Previous Certification Reporting.
2.1	September 17, 2019	Corrected typos, grammar and removed mark-up
2.2	July 2023	Minor corrections such as revising MOHLTC to MOH