

SWORBHP LINKS

MARCH 2022 | VOLUME 34

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Pivoting From COVID Patients to Prepare for Less Lethal Weapon Injuries

Not that the challenges of prehospital care of sick COVID patients was not enough in the daily grind of wearing PPE, recent national protests provided a significant new potential test. Paramedic Services were forced to consider their preparedness in treating injuries from rioting. Emergency Services leadership teams pulled together for interagency joint command planning in responding to escalating national issues. This required a quick refresher for Paramedic Services on the potential clinical issues in order for responding teams to be best prepared.

Thomas LeClair is a full-time Advanced Care Paramedic in Windsor Ontario where he has served for three decades. He brings a significant amount of international teaching and training experience in Tactical Combat Casualty Care and Special Operations. He is a Live Agent Trained CBRNE Advanced Technician, NFPA certified mass hazardous materials tech and instructor trained in both Advanced Hazmat Life-Support and PHTLS. He and Essex-Windsor EMS have agreed to share his recently authored Clinical Practice Guideline in Medical Implications of Less Lethal Technologies. It is an outstanding practical prehospital overview delving into mechanism of injury, decontamination, and patient care implications. It is an excellent 8 page referenced document to keep your patients and your teams well prepared and can be found on the SWORBHP Website: <https://www.lhsc.on.ca/media/11230/download?attachment>.

Dr. Paul Bradford, M.D. FCFP(EM), MDS, CD
Local Medical Director, SWORBHP

SWORBHP Updates



London Office

The Southwest Ontario Regional Base Hospital Program's office located at 145-4056 Meadowbrook Drive in London, ON is currently closed for construction.

Renovations are underway to improve our training spaces and provide a better service to all with anticipated completion for April.

We will update you once our offices are open again.



Website

We are currently in the process of redeveloping the SWORBHP website. There is no disruption to the current website. The new and improved site is being adapted to meet the needs of paramedics and other stakeholders with a more efficient design and layout.

We look forward to receiving your feedback on the new design and content!



Contact

General Inquiries:

Email: sworbhp@lhsc.on.ca

Paramedic Portal of Ontario:

Email: paramedicportalofontario@lhsc.on.ca

Self-Reporting:

Huron Paramedic Services ONLY

[Submit Huron SWORBHP Communication Form](#)

All other SWORBHP Services

[Submit SWORBHP Communication Form](#)

Phone: 1-888-997-6718

SWORBHP Updates

Welcome New SWORBHP Staff!



Melanie Ruthven

*Department
Administrative
Assistant*

Melanie joined SWORBHP in February 2022 as the Department Administrative Assistant and has worked at LHSC for 5 years. Melanie holds a Medical Office Administration Diploma from Fanshawe College. She comes to us from the London Regional Cancer Program at Victoria Hospital where she was an Ambulatory Clerk working in registration, admissions for the oncology department, and patient intake.



Drew Crocker

*Prehospital Care
Specialist*

Drew joined SWORBHP in January of 2022 as a temporary Prehospital Care Specialist. Drew holds an Honors B.Sc. degree from University of Toronto, primary care paramedic diploma from Centennial College, and an advanced care paramedic diploma from the Rubes Center for EMS Education. Drew has spent most of his career working for Toronto Paramedic Services but recently transitioned into SWORBHP. Currently, Drew works part time as a PCP in Grey County.



Stephanie Grant

*Prehospital Care
Specialist*

Stephanie has been with SWORBHP as an AI since 2019, but has recently become one of our temporary Prehospital Care Specialists as of October 2021. Stephanie attended and graduated Fanshawe College's Paramedic Program in 2001. Stephanie has been working as a PCP-IV in Elgin county for the last 18 years. She also holds the instructor certification in level C –CPR and BLS / O2 and airway management.



Jason Constable

*Prehospital Care
Specialist*

Jason has been with SWORBHP as an AI since August 2019 but recently transitioned to the role of temporary Prehospital Care Specialist in November 2021. Jason holds a Paramedic Diploma from Fanshawe College, a Law and Security Diploma from Fanshawe College, and is currently finishing his degree from Athabasca University in Education. Jason has been PCP-IV in Elgin County since 2007 and is also an educator at Fanshawe College in the Paramedic Program.



Amanda Vaccarello

*Prehospital Care
Specialist*

Amanda joined SWORBHP in January 2022. She graduated with distinction from the University of Western Ontario with a Bachelor of Science in Nursing. Prior to joining SWORBHP, she worked in the Emergency Department with London Health Sciences Centre and continues to work casually as an ED nurse. Amanda believes in lifelong learning and making education fun and accessible.

EDUCATION @ SWORBHP

SWORBHP welcomed a new Education Coordinator to the team in October of 2021.

Gabrielle Willems joined us in July of 2021 as a Prehospital Care Specialist and transitioned into the new role in the fall. Gabrielle comes to us from the emergency department at LHSC, and continues to work clinically on a casual basis. She has a background in research, having obtained a Master's degree in neuroscience from Wilfrid Laurier University, and experience teaching at the university level and clinically as a registered nurse. Gabrielle is absolutely thrilled to be working with such a dynamic and talented team, and looks forward to continuing to collaborate with our services to build a strong prehospital community in the Southwest.

The SWORBHP Education team is happy to announce the completion of another successful MCME cycle. While the pandemic landed us in year two of running the MCME via video conference, we would like to thank all of the paramedics for their vibrant and active participation. This year, paramedics submitted a record number of questions and feedback! In general, paramedics really enjoyed the interactive nature of the precourse modules and the case studies that were incorporated into the modules. 88% of respondents felt the quality of the material was good or excellent. We are working to improve the quality of the audio on the modules for the future. Dr. Valdis, our medical director of education, has collated many of the questions that we received throughout the MCME this year and answered them in a Podcast that was recently published on the SWORBHP website.

This year, we brought all ACPs in to the SWORBHP office to review some hands-on skills. The feedback from the ACPs was overwhelmingly positive, with a particular appreciation for informal time with the medical directors and an opportunity to practice low frequency skills. With the endorsement from our services, SWORBHP is endeavoring to incorporate an ACP Hands-On Day into the MCME cycle each Spring.

February 1st, version 4.9 of the ALS PCS came into force. Please sign into the PPO to acknowledge that you have read and understand the new changes to your practice if you haven't done so already. Our education team has published a webinar outlining that changes to both PCP and ACP practice related to the new version of the ALS PCS which can be found on our website.

March 1st, the Education Team is implementing a standardized education schedule. In 2021, we had a lot of success implementing a standardized approach to scheduling the Return to Practice sessions and are expanding this process across all education. We envision this process will optimize scheduling for our services and allow SWORBHP to better serve our paramedics.

The beginning of 2022 has brought with it a surge of newly hired paramedics coming into the Southwest region. We have been providing New Hire testing, Academic Certification testing, and base hospital orientation to an unprecedented number of candidates and foresee another wave coming in the spring. SWORBHP is proud to work with our services to optimize this process and is grateful for the patience the services have demonstrated as we work through this volume together.

Gabrielle Willems, RN, BScN, MSc
Education Coordinator, SWORBHP

PARAMEDIC SERVICES WEEK

The Faces of Paramedicine

May 22nd - 28th, 2022

Follow us on social media and stay tuned for more details!



Maintenance of Certification

Many factors contribute to paramedics' maintenance of certification (MOC). Completing annual mandatory CME and providing patient care are some components that contribute to the ability to maintain certification to perform Controlled Acts and other advanced medical procedures. One of the requirements in the ALS PCS Appendix 6 or Certification Standard includes providing patient care to a minimum of ten patients per year and/or the ability to demonstrate alternate experience, as approved by the Medical Director, that may involve other patient care activities, additional CME, simulated patient encounters and clinical placements.

There is a small percentage of paramedics who do not meet the ten patient contacts component of maintenance of certification each year. SWORBHP monitors patient contacts for all active paramedics in the region and notifies those who are at risk of not obtaining the ten patient contacts. This occurs at different times over the certification year that runs from February 1 to January 31. SWORBHP offers several alternates to patient care that paramedics can engage in and submit for consideration through the Paramedic Portal of Ontario (The PPO). Questions have been raised recently as to whether SWORBHP will accept Community Paramedic (CP) practice for maintenance of certification. The SWORBHP Medical Council has discussed this and supports some Community Paramedic skills and practices which would contribute to alternate 9-1-1 experiences. Our plan moving forward is to work with each Paramedic Service to identify paramedics working as CPs and determine whether their practice as a CP can be recognized for MOC for the 9-1-1 system. Another alternate to patient contacts that we have begun to offer is the ability to participate in a review of the ALS PCS with one of our Prehospital Care Specialists. This can be requested through SWORBHP@lhsc.on.ca. Our full process and list of pre-approved alternates can be found in the SWORBHP Maintenance of Certification procedure on our [website](#).

As always, our plan is to support the practice of all paramedics in the region while ensuring we are in compliance with our Ministry mandate.

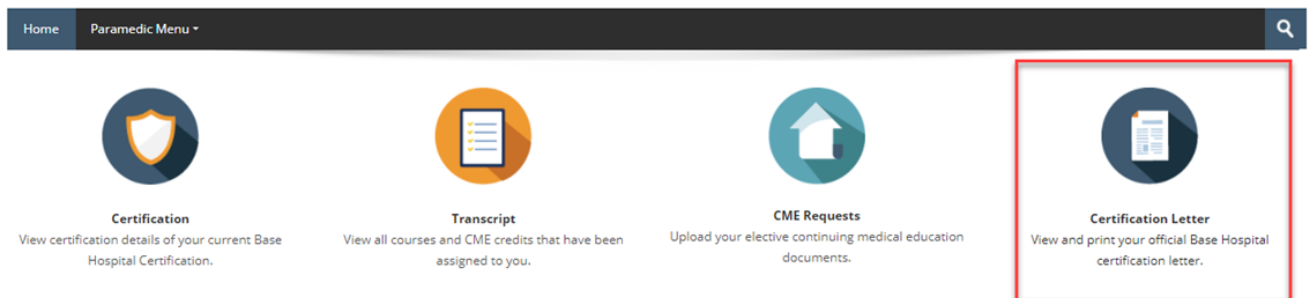
Susan Kriening, RN, BScN, MHS, ENC(C)
Regional Program Manager, SWORBHP

Paramedic Portal of Ontario:

How To Access Your Certification Letter

SWORBHP paramedics, who met the requirements for their maintenance of certification, would have received an email from the Paramedic Portal of Ontario (PPO) stating that they have been annually certified for the new certification year which takes effect February 1, 2022 until January 31, 2023. This email would have directed you to the PPO to view and/or print your updated certification letter. Below are instructions on how to access your updated certification letter.

1. Go to www.paramedicportalontario.ca and click the Certification Letter icon on the homepage.



2. Select your service and click on Print Current Certification Letter OR Download button

Certification Letter(s) for Medic TestAccount

Algonquin College (SWORBHP) A

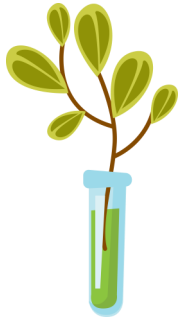
Print Current Certification Letter Download B

Certification Letter History C

Base Hospital	Service	Date	Type	Action
Southwest Ontario Regional Base Hospital Program	Algonquin College (SWORBHP)	2021-11-26	Deactivated	Download↓
Southwest Ontario Regional Base Hospital Program	Algonquin College (SWORBHP)	2021-07-06	Deactivated	Download↓
Southwest Ontario Regional Base Hospital Program	Loyalist College (SWORBHP)	2021-06-25	Authorization	Download↓
Southwest Ontario Regional Base Hospital Program	Loyalist College (SWORBHP)	2021-06-16	Authorization	Download↓

- A. If you are certified at multiple services, you will have a separate certification letter for each service. If you have multiple certification letters, click the dropdown to select the service/college.
- B. Click the Print Current Certification Letter to view it or click Download to download the PDF version.
- C. You will have access to historical versions of your certification letter. These are available under the Certification Letter History section. Click Download under the Actions column to download a PDF version.

If you have any questions or require any assistance with your certification letter, please contact SWORBHP at paramedicportalontario@lhsc.on.ca or by telephone at 519-685-8500, Option 3.



SWORBHP RESEARCH CORNER

As part of SWORBHP's commitment contributing to the prehospital literature and seek out evidenced based answers to pre-hospital questions, the purpose of this section is to highlight a current research project that is occurring in the SWORBHP region and/or one that has been completed.

What's Been Done

Evaluation of the Uptake of a Prehospital Cardiac Arrest Termination of Resuscitation Rule

John Teefy, MD, Natalie Cram, MD, Theunis Van Zyl, MD, BSc, Kristine Van Aarsen, MSc, Shelley McLeod, MSc, PhD(c), Adam Dukelow, MD, MHSc

Dr. Cram (former SWORBHP fellow) and Dr. Dukelow (former SWORBHP Local Medical Director) helped lead this study examining the Medical Cardiac Arrest Termination of Resuscitation (TOR) Rule. This study was published in January 2020 within the Journal of Emergency Medicine.

Previous research has focused on creation and validation of a basic life support rule for TOR in nontraumatic out-of-hospital cardiac arrest (OHCA) to identify patients who will not be successfully resuscitated or will not have a favorable outcome. Although now widely implemented, translational research regarding in-field compliance with TOR criteria and barriers to use is scarce.

The objective of this study aimed to assess compliance rates, barriers to use, and effect on ambulance transport rates after implementing TOR criteria for OHCA. This was done through a retrospective chart review of patients ≥ 18 years with OHCA. Data from regional Emergency Medical Services agencies were collected to determine TOR rule compliance for patients meeting criteria, barriers to use, and effect of a TOR rule on ambulance transport.

There were 552 patients with OHCA identified. Ninety-one patients met TOR criteria, with paramedics requesting TOR in 81 (89%) cases and physicians granting requests in 65 (80.2%) cases. Perceived barriers to TOR compliance included distraught families, nearby advanced-care paramedics, and unusual circumstances. Reasons for physician refusal of TOR requests included hospital proximity, patient not receiving epinephrine, and poor communication connection to paramedics. Total high priority transports decreased 15.6% after implementation of a TOR rule.

The study found high compliance after implementation of a TOR rule within the SWORBHP region and identified potentially addressable barriers to TOR use. Appropriate application of a TOR rule led to reduction in high-priority ambulance transports, potentially reducing futile use of health care resources and risk of ambulance motor vehicle collisions.

Dr. Matthew Davis, MD, MSc, FRCPC
Regional Medical Director, SWORBHP

SWORBHP Joint Council Update

After a six-month hiatus, our Joint Council are able to reconvene virtually on December 3, 2021. The council welcomed our new Co-Chair, Gabrielle Willems, SWORBHP's new Education Coordinator as well as two new Paramedic representatives; Erik Natvik, ACP with Middlesex-London PS, representing our Central Paramedic Services and Collin Rose, PCP from Medavie Chatham-Kent EMS, representing our Western Paramedic Services. Along with Collin Young, who has been Joint Councils' Northern Paramedic Service Representative for the past two years, we are happy to announce that we now have Paramedic representation from all regions.

Given the time lapse since the last meeting, there was a significant number of updates provided and great dialogue had. Dr. Matt Davis provided the council with a provincial update along with discussion regarding the 2021/22 certification year, ending January 31, 2022. Several questions were raised regarding Community Paramedicine and if/how these skills could translate to credit towards maintenance of Paramedic Certification. Susan Kriening had informed the council that this topic was discussed at the Regional Program Advisory Committee meeting held in October 2021 and again during each individual service meeting. Paramedic Service Leads were asked to submit a listing of procedures their Community Paramedics are involved in so they can be reviewed to identify if some can be used for Maintenance of Certification for the 911 system as alternates to patient care under the Certification Standard in the ALS PCS.

In late 2020, SWORBHP had trialed a standardized Return to Practice registration and scheduling process. The process was refined throughout the trial and well received by Service Leads. Both SWORBHP staff and Service Leads noted that the new process was a welcomed enhancement to the education portfolio. SWORBHP staff have been working behind the scenes to expand the process to include standardized registration and scheduling processes for all education training and testing. Gabrielle Willems presented the proposal to council members and received a great deal of valuable feedback and suggestions. The new process will continue to be refined, with a trial launch that began March 1, 2022.

In December 2019, Joint Council members established three key objectives to be worked on in 2020: Legal Importance of Documentation, Determining Capacity in Patients and Documentation and Interventions. Due to COVID and the subsequent strain on resourcing, these objectives had to be put on hold. After a lot of discussion and strategizing over the past several months, the Co-Chairs had presented the option of amalgamating the initial three objectives into two; restructuring the members of each to allow for additional resourcing and to introduce Nicole Saunders, QA Specialist, SWORBHP, as the Project Facilitator for both initiatives. Nicole Saunders presented a proposed timeline that was endorsed by the committee.

The council is looking forward to a new 2022!

Debra Janssen, BMOS
Coordinator, Quality Assurance & Business
Functions, SWORBHP



Ontario Base Hospital Group UPDATES

The Prequel and Sequel—ALS PCS 4.9 and ALS PCS 5.0

The ALS PCS 4.9 came in to force February 1st 2022. These changes came about as part of the Comprehensive Medical Directive Review and this batch of directives were grouped together for release as the ALS PCS versio 4.9 as these updates did not require extensive training. As such, the next batch of directives that will be released as the ALS PCS version 5.0 have been deemed to require more in-depth education training, with some requiring hands on skills teaching and evaluation.

We have long anticipated the release of these updated directives. At the time of writing, the Ministry has not provided a timeline as to when these updated directives will be released. That being said, I would like to let you know about some of the updates, changes and additions to the directives that will be part of the ALS PCS 5.0. The below is not an exhaustive list, but rather a sneak peak. More information will be conveyed when these will be covered in our Mandatory CME.

New Medications

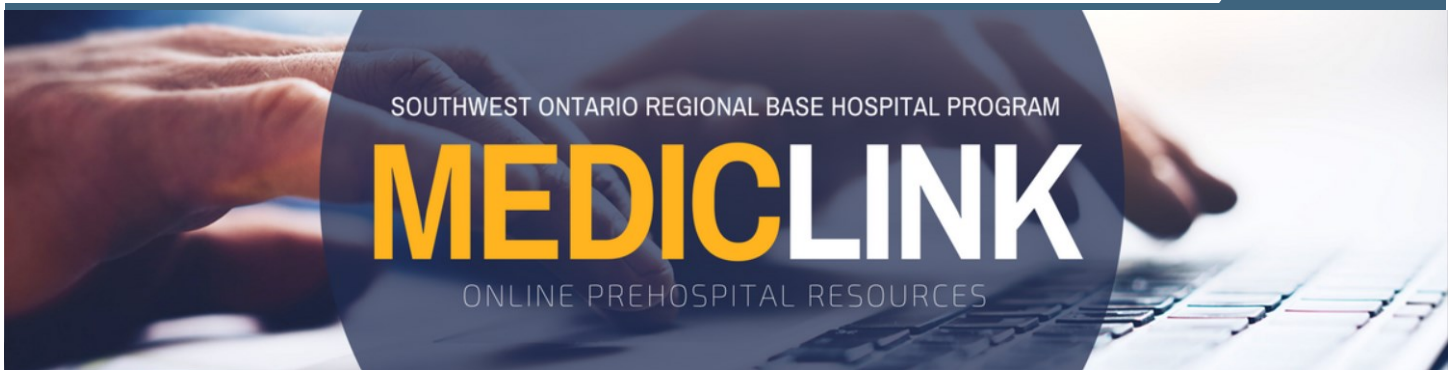
Ondansetron – Nausea and Vomiting Medical Directive
Oxytocin – Emergency Childbirth Medical Directive
Dexamethasone – Bronchoconstriction and Croup Medical Directives
Ketamine – Combative Patient Medical Directive
Lidocaine dose changes within Medical Cardiac Arrest Directive
Inclusion of fentanyl within the Procedural Sedation Medical Directive

Procedures

New location for needle thoracostomy
Removal of patch points for Hyperkalemia, Bradycardia, Combative Patient
New timing of mandatory patch point within PCP and ACP Medical Cardiac Arrest Directive
Updates to Trauma TOR criteria
Movement of Supraglottic Airway Medical Directive from Auxiliary to Core Directives
Movement of Central Venous Access Medical Device Medical Directive from Auxiliary to Core Directives

These are some of the larger changes that will be released with the next iteration of directives. In addition to this, there will be some changes to some of the conditions, contraindications and clinical considerations within the ALS PCS version 5.0. SWORBHP eagerly awaits the release so that we can incorporate these changes in to our fall MCME

Dr. Matthew Davis, MD, MSc, FRCPC
Regional Medical Director, SWORBHP



SWORBHP Tips of the Week Highlights

Follow us on social media where we advertise when new Ask MAC, TOTW and other educational content is posted.

You can also subscribe to our website updates to receive an email when we post new content.

Askmac.sworbhp.ca

D10 Administration

February 4, 2022

D10W can be given EITHER by IV slow push or infusion. Consider available equipment, patient condition and competing treatment priorities when choosing your management strategy.

For example: If your patient is obtunded, you may consider giving it via IV push. If the patient is confused but alert (and you have available resources), you may consider giving it via infusion. The method of D10 delivery is a clinical judgment decision.

RSR Pattern Explained

January 21, 2022

From your 2021 MCME Online module on Bundle Branch Blocks:

A question came up regarding what is RSR.

RSR is a “QRS” complex with an R-wave (upward deflection), followed by an S-wave (downward deflection), followed by another R-wave (upward deflection). This pattern is seen in lead V1 in Right Bundle Branch Blocks.

Check out the 2021 MCME Precourse on Bundle Branch Block for a deeper dive on this ECG finding.



Lead V1 with RsR Pattern

STAY CONNECTED WITH SWORBHP:



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COMMENTS OR SUGGESTIONS

SWORBHP LINKS is a Newsletter developed by the Southwest Ontario Regional Base Hospital Program.

If you have comments or feedback on the newsletter, or have an article you would like to have considered for publication in a future edition of **LINKS**, please send to:

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