



NOVA SCOTIA REGULATOR OF PARAMEDICINE

PARAMEDICINE COMPETENCY FRAMEWORK

Introduction

2024



PROPERTY OF:

Nova Scotia Regulator of Paramedicine
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ACKNOWLEDGEMENT

The Nova Scotia Regulator of Paramedicine (NSRoP) acknowledges that we are in Mi'kma'ki, the ancestral and unceded territory of the Mi'kmaq People and pays respect to the Indigenous knowledges held by the Mi'kmaq People, and to the wisdom of their Elders past and present. The Mi'kmaq People signed Peace and Friendship Treaties with the Crown, and section 35 of the Constitution Act, 1982 recognizes and affirms Aboriginal and Treaty rights. We are all Treaty people.

NSRoP also acknowledges the histories, contributions, and legacies of African Nova Scotians, who have been here for over 400 years.

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Essential Regulatory Requirements (PERRs) for Paramedics

The Nova Scotia Regulator of Paramedicine (NSRoP) Board of Directors (Board) approved with modifications, the Canadian Organization of Paramedic Regulators Pan-Canadian Essential Regulatory Requirements (PERRs) for Paramedics and Emergency Medical Responders competency frameworks for implementation in Nova Scotia.

The Canadian Organization of Paramedic Regulators (COPR) advances consistent and best practices in regulation, enhances public accountability, and facilitates mobility of paramedicine professionals nationally and internationally.

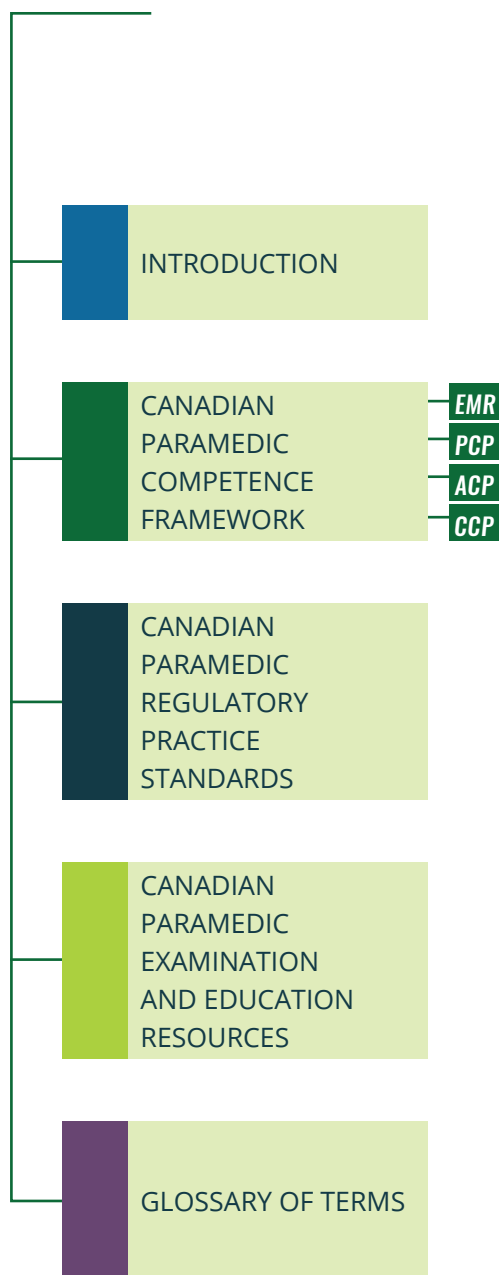
In 2021, COPR agreed to develop a harmonized and unified approach for pan-Canadian essential requirements: competencies and standards that would reflect and specifically focus on the needs of the public and patients for safe, effective care by paramedics and Emergency Medical Responders (EMRs).

As a member of COPR, the NSRoP adopted, the COPR PERRs for Paramedics documents and adapted them for use in Nova Scotia.

This document is based on the original COPR PERRs framework and has been specifically adapted to meet the regulatory requirements for paramedicine in Nova Scotia.

PERRs

Pan-Canadian Essential Regulatory Requirements



The COPR Pan-Canadian Essential Regulatory Requirements (PERRs) includes five key elements that have been modified to the NSRoP needs. They include:

1. The **Introduction** consists of key concepts that apply to all designations, as well as a list of those who contributed to the development of PERRs.
2. The **Canadian Paramedic Competency Framework (CPCF)** provides a high-level list of knowledge, skills, and judgement that contribute to performance. The CPCF describes current and actual practice, clarifies paramedic’s/EMR’s roles and responsibilities, and promotes consistency in measuring competence with a focus on patient safety and desired patient care outcomes. It is aligned with the Paramedic Chiefs of Canada’s 10 Principles to Guide the Future of Paramedicine in Canada (2023). Each paramedic/EMR designation has its own CPCF.
3. The **Canadian Paramedic Regulatory Practice Standards (CPRPS)** document describes specific, expected outcomes that must be met by paramedics/EMRs in Canada regardless of their designation, job description, or practice setting. The NSRoP has modified the CPRPS name to “Standards of Practice” which focus on patient outcomes that apply to the usual day-to-day work performance and tasks completed by paramedics/EMRs.
4. COPR’s **Examination and Education Resources (EERs)** is a supplement to the CPCF. It is written with COPR’s examination writers and Canadian educators in mind. Appendix A is an expanded list of foundational knowledge and minimum entry to practice skills for the Care Along a Health and Social Continuum competency area. This appendix is incorporated into each CPCF for ease of use.
5. The **Glossary of Terms** has been modified by NSRoP to include definitions frequently used within its regulatory framework, as well as the definitions for terms within the CPCF and CPRPS. Definitions for the terms within the CPCF and CPRPS that are used with NSRoPs regulatory environment are **bold** and consistent across competencies, standards and documents.


Paramedic Designations in Canada

PERRs was developed for the four designations currently regulated, via registration, licensure, or certification by provincial regulatory authorities in Canada. Nine of the provincial regulatory authorities are COPR members. The Nova Scotia Regulator of Paramedicine regulates each of the designations identified by COPR.

Emergency Medical Responder (EMR)	EMRs have basic training, including resuscitation and theoretical and practical training in life-saving and patient assessment skills. EMRs provide fundamental out-of-hospital care, working with other health care providers in a wide variety of settings or providing care at events or in remote locations.
Primary Care Paramedic (PCP)	PCPs have paramedic-specific education and provide context-specific basic life support and patient care in a wide variety of settings. They collaborate with other health care providers. When appropriate, PCPs hand over care to other team members in a clinical setting or at transfer of care, or discharge following assessment and treatment.
Advanced Care Paramedic (ACP)	ACPs have enhanced paramedic-specific education that builds on PCP education. ACPs provide context-specific, advanced life support and patient care for medically complex patients. They collaborate with other health care providers. When appropriate, ACPs hand over care to other team members or engage in transfer of care or discharge patients following assessment and treatment.
Critical Care Paramedic (CCP)	<p>CCPs have specialized and multidisciplinary education that builds on PCP and ACP education so that they can provide context-specific, tertiary-level care for medically complex and undifferentiated patients.</p> <p>CCPs are expected to work autonomously in the provision of complex care to high-acuity patients. CCPs might have enhanced independent practice because they have few other health care providers who are immediately able to assist in patient care.</p> <p>CCPs often work in or lead highly specialized teams within the health care or public safety systems or as independent practitioners. They provide sophisticated handover of care to other specialized health team members.</p>

Each designation has specific responsibilities that reflect both the paramedic's/EMR's education and the needs of the patients for whom they provide care. Each designation has greater complexity than the previous level, and builds on previous education and experience. CCPs need sophisticated skills in order to provide care for medically complex patients for prolonged periods of time when transferring care from one location to the other, compared with the practice of many EMRs, PCPs, and ACPs, where patient care is more time-limited.

Paramedic/EMR education is modular. ACPs must have PCP education before moving to ACP education. CCPs need ACP and PCP training before becoming educated and registered as CCPs. However, EMR education, which is more general, is not mandatory to complete before attending a PCP educational program.



PERRs describes the expectations for safe, effective, and ethical performance by paramedics/EMRs to inform provincial regulatory practice standards and support its use by educators, employers, and other interested parties.

Why is PERRs Needed?

Development in paramedicine comes with the responsibility to clearly describe what the public and patients can expect from a regulated paramedic/EMR to ensure safe, effective patient care.

While the majority of paramedics/EMRs work in emergency services roles, the profession is seeing an increasing diversity of practice settings and employment roles (for example, provincial and private air ambulances, palliative care teams, community health care, and immunization centres). Some of these settings and roles have additional voluntary or mandatory education.

As the regulation of paramedicine practice evolves, PERRs will be updated to ensure that it accurately reflects current paramedic/EMR practice in Canada.

Who will use PERRs?

COPR

COPR administers entry to practice examinations for three of the four designations: EMR, PCP, and ACP. PERRs informs the COPR examination blueprints—that is, what to test on the exams and what to assess for credentialing purposes. Additionally, COPR uses the content of PERRs to assess the credentials of internationally educated paramedics/EMRs prior to their completion of provincial regulatory requirements. Finally, COPR uses PERRs to respond to national (pan-Canadian) and federal (government) health issues related to health professional regulations, standards, and labour mobility. Labour mobility refers to paramedics'/EMRs' ability to practise in more than one province. Through its committees, COPR advocates for and coordinates national labour mobility activities.

NATIONAL AGENCIES AND ORGANIZATIONS

Although health care is a provincial mandate, national agencies and organizations regularly seek a national resource on the paramedic/EMR profession as it relates to such areas as regulation, education, labour mobility, and practice. PERRs enables federal and national policy-makers to reference clearly articulated scopes of practice and standards for each of the designations, while promoting consistency of entry to practice requirements across Canada and supporting labour mobility.

PARAMEDIC REGULATORS

Public safety is paramount to regulators, so clarity about safe, effective paramedic/EMR care is important to their mandate. Both government regulators and self-regulatory organizations may adapt or adopt the competency framework and regulatory practice standards in their provincial jurisdiction as appropriate. This may include referencing PERRs to establish requirements for entry into the profession, monitoring registered paramedics'/EMR's continuing competence throughout their career, and investigating complaints.

GOVERNMENT DEPARTMENTS AND MINISTRIES OF HEALTH

For government regulators, PERRs provides further structure. Self-regulating bodies accountable to ministries affirm to the government that they are regulating consistently, fairly, and with transparency. Additionally, PERRs serves to inform governments when amendments to provincial regulations are being considered. Government agencies can be assured that amending existing legislation to align with their provincial counterparts supports consistent entry to practice requirements, resulting in safe, competent patient care.

EDUCATORS

Entry to practice education programs can use PERRs to develop curricula for students to achieve desired outcomes. PERRs ensures that students graduate with the knowledge, skills, and judgement necessary to provide safe, effective paramedic care. Seven of the 10 provinces require graduates to complete one of COPR's three entry to practice examinations, the content of which is blueprinted to the competency framework (the CPCF) and the regulatory practice standards (the CPRPS). Finally, continuing education providers may also use PERRs to focus course content for upgrading or remediation.

EDUCATION PROGRAM ACCREDITORS

Accreditors can use PERRs to confirm that the content and processes delivered by education providers address the essential regulatory requirements, most notably the competencies and standards necessary for paramedics/EMRs to provide safe, effective paramedic/EMR care for their registered designation.

PARAMEDICS/EMRS

PERRs describes the requirements for practising in each of the four designations. The transparency of the competencies and standards clarifies expectations in practice for:

- students to have a clear picture of what is needed to practise safely and appropriately
- paramedics/EMRs returning to practice, to inform where upgrading might be necessary.

INTERNATIONALLY EDUCATED PARAMEDICS/EMRS

PERRs assists individuals from other countries to compare regulatory requirements with their country's practice standards. This is of particular interest to individuals wishing to move to Canada and work as paramedics/EMRs. For example, COPR's paramedic/EMR equivalency self-assessment tool is based on the competencies and standards contained in PERRs; it can therefore help international applicants assess their readiness for registration in Canada. Because PERRs also informs the blueprints of the COPR examinations and details what might be tested on them, PERRs is useful for internationally educated paramedics/EMRs who decide to challenge one of the examinations.

EMPLOYERS AND SERVICE PLANNERS

Employers and service or policy planners are also responsible for the provision of safe, effective care. This includes attending to the recruitment and retention of competent paramedics/EMRs and implementing systems and structures that support the health and well-being of paramedics/EMRs (CSA Group, 2018).¹ Employers and organizations can use PERRs to structure job descriptions and individual performance reviews, recommend training, and better understand what is needed at each level of practice to deliver the required services.

OTHER HEALTH PROFESSIONALS

In the world of growing interprofessional care teams, PERRs helps other health professionals understand the roles paramedics/EMR can play and where they are accountable to their provincial regulator.

CANADIANS NEEDING PARAMEDIC SERVICES

The public may learn about the profession by reviewing PERRs so that when using services, they will have informed expectations for safe, effective paramedic/EMR care.

PROFESSIONAL ASSOCIATIONS

Provincial and national associations representing the profession may use PERRs to advocate for the inclusion of paramedics/EMRs in health care delivery systems and to support efforts to advance excellence in paramedicine.

RESEARCHERS

Given that PERRs was developed using rigorous and evidence-based methods, researchers can confidently pose research questions knowing that the documents contained therein accurately reflect current paramedic practice.

INTERNATIONAL AGENCIES

When paramedics/EMRs are deployed outside Canada, international agencies can use PERRs to provide information regarding the expectations associated with each of the paramedic/EMR designations.

¹ CSA Group. (2018) CSA Z1003.1:18 (R2022). Psychological health and safety in the paramedic service organization.

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