

**Manitoulin-Sudbury District Services Board
POLICY & PROCEDURES MANUAL**

Section: G. Emergency Medical Services	Effective Date: June 10, 2013
Topic: 7. Administrative Directives	Replaces: July 1, 2004
Subject: 2. Patient Care Report Audits	
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PURPOSE

All PCR audits will meet standards as set out by the Ministry of Health and Long-Term Care

APPLICATION

Paramedics, EMS Management

PROCEDURE

- 1) The Commander of QA will compare Ambulance Dispatch Information System records with Manitoulin Sudbury EMS Patient Care Records to ensure that an ambulance call is done for each request for ambulance service where a patient was assessed whether or not care was provided or the person was transported by ambulance or emergency response vehicle.
- 2) The Commander of QA will ensure that completed Patient Care Records will be distributed within 48 hours of completion of the call to:
 - a) Receiving hospital staff
 - b) Base hospital
 - c) Billing
 - d) Manitoulin Sudbury EMS
- 3) The Commander of QA will Audits PCR's and consider the following fields:
 - a) Administration – Surname, Given Name, Address, DOB, Date, Call #, CACC, Warning System, Service Name, Service #, Station #, Status, Vehicle #, Mileages, UTM Code, Pickup Location, Pickup Code, Dispatch Problem Code, Dispatch Sent Code, Return Code, Patient #, Sequence, Event Times, Driver #, Driver Name, Driver Signature, Attendant #, Attendant Name, Attendant Signature, No Patient Carried name and signatures, No Patient Carried witnesses and signature, travel conditions, Offload Delay, Personal Effects
 - b) Patient Care –Chief Complaint, Primary and Secondary Problem Codes, , Time of Occurrence, Incident History, Past History, Traumatic Injury Site/Type, Medications, Allergies, Treatment prior to ambulance arrival, Cardiac Arrest Information, Age, Gender, Weight CTAS, General Appearance, Physical Findings, Vital Signs, Procedures, Remarks, Final Primary Problem, Final Status, Receiving Location, Receiving Signature.

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- 4) Any PCR's that do not meet standards will be forward back to paramedic for comment.
- 5) PCR's that do not meet standards may be actioned as follows:
 - a) remedial education
 - b) discipline
- 6) Any Manager may request a written Paramedic response including follow-up actions taken or agreed upon to correct any items not completed to standard. This documentation shall be placed on the employees' personnel file. All remedial training shall be documented in accordance to the training policy.

REFERENCE

Ambulance Act
 Ontario Regulations 257/00 (General Regulation)
 Patient Care and Transportation Standards
 Communicable Disease Standards
 Basic Life Support Standards 1.1
 Advanced Life Support Standards July 2000