

Manitoulin-Sudbury District Services Board POLICY & PROCEDURES MANUAL	
Section: G. Emergency Medical Services	Effective Date: July 1, 2004
Topic: 7. Administrative Directives	Replaces: New
Subject: 6. Mandatory Training/Remedial Training	
Policy No. G.7.6.	Page 1 of 2

PURPOSE

All training shall meet the directives as set out by the Ministry of Health and Long-Term Care, our Base Hospital Program(s) and our internal requirements.

APPLICATION

Paramedics, EMAs, Quality Assurance Manager

PROCEDURE

- 1) MOHLTC Mandatory Training
 - a) Shall be carried out in accordance with MOHLTC or Base Hospital guidelines.
 - b) Staff shall be given two chances to attend mandatory training. Should a staff member not attend the scheduled mandatory training, it will become his/her responsibility to arrange for this training at their own expense. Staff that do not complete mandatory training within the training time frame, may be suspended from duty until such training is completed.
 - c) Copies of all training rosters for all employees shall be placed on the master training file with a note on all personnel files to check the master file.
- 2) ABSENCES OF => THAN 90 DAYS:
 - a) Each employee shall participate in a patient care equipment evaluation, training and orientation program upon return to work. The Quality Assurance Manager shall ensure that all programs are current and the ALS/BLS patient care is being provided to the appropriate standards.
 - b) Documentation of evaluation, training and orientation shall be placed on the employees file and the master training file.
- 3) REMEDIAL TRAINING:
 - a) If an employee is not performing his/her duties in accordance with the standard(s) as documented by either an ACR Audit or a service ride along he/she shall be subject to remedial training.
 - b) Remedial Training Programs shall be developed on a case by case basis addressing the immediate concerns noted.
 - c) Remedial Training may consist of one or more of the following:
 - i) Practical Examination
 - ii) Written Examination
 - d) Review of Policy or Procedures

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- e) Review of BLS Standard
 - f) Review of ALS Standard
 - g) Review of ACR Procedure and Documentation
 - h) Base Hospital Protocols
- 4) Documentation of remedial training shall be placed on employee files.

NOTE: A signed letter from the Regional Training Coordinator or Base Hospital Program may be utilized to summarize employee qualifications and certifications, provided it clearly indicates courses satisfactorily completed.

REFERENCE

Ambulance Act
 Ontario Regulations 257/00 (General Regulations)
 Patient Care and Transportation Standards
 Communicable Disease Standards
 Basic Life Support Standards 1.0
 Advanced Life Support Standards July 2000
 Base Hospital Protocols