

COPR

Canadian Organization of
Paramedic Regulators



OCRCP

Organisation Canadienne des
Régulateurs Paramédicaux

SECOND ANNUAL REPORT

For the fiscal period ending March 31, 2012

**Canadian Organization of Paramedic
Regulators/Organisation Canadienne des
Régulateurs Paramédicaux**

COPR/OCRCP

Edmonton, Alberta

June 6, 2012

Table of Contents

Introduction	.....	3
History of COPR/OCRCP	.....	3
Accomplishments	.....	5
Financial Summary	.....	7
Acknowledgements	.....	7
The Future	.....	8
Closing	.....	8
Appendices		
1.	Membership	9
2.	Organizational Structure	10

Introduction

I am pleased to present the second annual report of the Canadian Organization of Paramedic Regulators/Organisation Canadienne des Régulateurs Paramédicaux (COPR/OCRP).

This report will outline a brief history of COPR/OCRP, relay the accomplishments during 2011/2012, present the financial status, and speak to the short and long term goals of the organization.

COPR/OCRP History

In 2008, paramedic regulators from every Canadian province began working together informally to discuss ways to ensure compliance with the new labour mobility requirements of the Agreement on Internal Trade (AIT) that would come into effect on April 1, 2009. This group, initially labelled as the Interim Steering Committee of Canadian Paramedic Regulators agreed on a Statement of Intent that identified a strategy to enable the paramedic regulators from across the country to achieve AIT compliance in the short term.

In 2009 the new national labour mobility requirements came into effect to make it easier for paramedics from across Canada to move from one Canadian jurisdiction to another. The regulators' initial success with meeting the AIT labour mobility requirements resulted in the recognition that a national organization would be beneficial for a number of initiatives including, but not limited to, labour mobility. Human Resources Skills Development Canada (HRSDC) continued to support the informal Interim Steering Committee of Canadian Paramedic Regulators and was prepared to fund the group for the creation of tools that would contribute to long-term labour mobility. A draft Charter was completed to begin work necessary for labour mobility and outline the governance, operations and funding of a national organization of paramedic regulators into the future. Upon completion of the Charter document, work began on a Contribution Agreement to HRSDC and a sustainable plan regarding a standard scope of paramedic practice across all jurisdictions and a standard inter-provincial entry-to-practice examination.

In 2010 the federal government announced funding of \$1.2 million dollars for a two year project to improve paramedic labour mobility and prepare for foreign credentialing recognition across the country. The specific outcomes of the project included:

- A consensus on a common scope of practice and standard of competence supported by provincial regulators for each of four levels of practice of paramedicine

- Entry to practice examinations for two levels of practices representing 80% of practitioners (Primary Care Paramedic and Advanced Care Paramedic)
- A collaborative approach to research to support evidence-based decision making to maintain the competency standards and the exams, and pursue issues of common interest
- A framework for a common assessment process for internationally trained paramedics
- An operation plan for the maintenance and sustaining of the competence standards and the interprovincial exams, including the formalization of a national organization of paramedic regulators.

A project director was hired for the Labour Mobility Project (LMP) and a Labour Mobility Project Steering Committee (LMPSC) was established. The Interim Steering Committee of Paramedic Regulators undertook to establish the group as a formal organization. The creation of a single unified entity was an important initiative to facilitate a common approach to paramedic regulation.

The purpose of establishing COPR/OCRP was:

- To create a single national voice for Canadian paramedic regulators
- Create a better understanding of what regulation is and its positive impact on the paramedic profession in Canada
- Establish the potential for better sharing of information between regulators
- Support the development of best practices amongst paramedic regulators.

Membership included paramedic self regulators and paramedic government regulators from all provincial jurisdictions from across the nation (Appendix 1). Presently no Territory of Canada regulates paramedics.

Letters of support were provided by all provincial jurisdictions to confirm their support for the role and mandate of COPR/OCRP and provided funding for its' operations. Elections were held, an Executive was formed, and standing committees were established.

In 2011 the COPR/OCRP Strategic Plan was completed:

COPR/OCRP VISION

Leaders in paramedic regulatory practices that protect the Canadian public

COPR/OCRP MISSION

To facilitate collaboration of Canadian regulators in the development of a common approach to paramedic regulation

By-Laws for COPR/OCRCP were drafted, an application for incorporation was submitted, a visual identity was created, and a web site was constructed. Significant progress was made to complete the LMP project. Meetings were held between the Executive of COPR/OCRCP and the Paramedic Association of Canada (PAC) and it was agreed to work together to support an updated National Occupational Competency Profile (NOCP) for submission to the Canadian Medical Association (CMA) for the purpose of accreditation and utilize the NOCPs for blueprinting for the purpose of the national examinations.

Accomplishments 2011/2012

The second year as a national organization entailed continued collaboration amongst all ten provinces with respect to upholding COPR/OCRCP's vision and mission, refining the group's structure and function (Appendix 2), ensuring progress on the LMP, and work towards sustaining the organization's mandate.

At the second Annual General Meeting in June 2012 where we reflect upon our accomplishments, we can acknowledge we have formed as a cohesive group, continue to accomplish a formidable amount of work, have developed relationships with multiple stakeholders and paramedics across the country, and have achieved great success!

In 2011/2012 the COPR/OCRCP Council met three times and the Executive met five times. All committees of Council were active, a new committee was established, and the name of another committee was revised. One meeting between the COPR/OCRCP and PAC Executive was held in September 2011.

The primary focus of activities for COPR/OCRCP was the development of the national exam for Primary Care Paramedics (PCP) and Advanced Care Paramedics (ACP).

In 2011 the Canadian Organization of Paramedic Regulators (COPR/OCRCP) began the process of creating an interprovincial examination in order to help set common standards of practice and certification within Canada. The development of these standards will help advance the Paramedic profession in several key ways.

Common standards facilitate labour mobility- When all regions have the same certification levels and the same requirements for certification for those levels, the process of determining equivalent competence across regions is simplified.

Common standards ensure minimum requirements for certification- Fulfilling the protection of the public mandate means having confidence that the certification process is fair and defensible. Common standards ensure that no candidate is advantaged or disadvantaged by seeking certification in any particular region. Moreover, as both practice and certification standards are anchored to a Pan-Canadian consensus of best

practice, the public can have added confidence in the proficiency of their Paramedic professionals.

Common standards encourage Pan-Canadian collaboration- Before the pursuit of common standards, provinces performed all key regulatory functions independently. This included the setting of practice standards, examination development and administration, certification, appeals, and determining equivalent competence for labour mobility. With the development and adoption of common standards and the creation of a national organization of Canadian Paramedic regulators (COPR/OCRCP), many of these processes can be shared across all regions. This allows the entire profession to invest in the process more significantly, enhancing the regulation of the Paramedic profession, but also deepening the collaboration and communication among regions.

In the spring of 2011 a Request For Proposal (RFP) was developed to hire an expert testing company for paramedic exam development. The RFP award went to Yardstick. It was determined that the National Occupancy Competency Profile (NOCP) would be the foundation for the exam blueprints for a Primary Care Paramedic (PCP) and Advanced Care Paramedic (ACP) exams for the first exam offering.

An Exam Policy Group was formed that had two sub-committees; the Blueprint Development Committee and: the Exam Administration Policy Committee. Stakeholder participation for the development of the exams was extensive and their participation was very helpful and most appreciated. Stakeholders included organizations such as the Society for Pre-Hospital Educators, the EMS Chiefs of Canada, the Canadian Association of Emergency Physicians, the Canadian Medical Association, the Paramedic Association of Canada, and individual paramedics from across the country with exam item writing experience. Several meetings were held across the country to accomplish this work and in the summer of 2011 draft blueprints for the exam were created.

An on-line validation survey process occurred in the fall of 2011 to finalize the blueprints, and further stakeholder involvement was required along with face to face meetings. In early winter 2012 the draft blueprints were finalized and approved. The Exam Policy Committee determined the first offering would be June 2012 and the second offering would be September 2012 with four provinces undergoing the exams.

The COPR/OCRCP website went live in winter 2012 (www.copr.ca.) and will be a useful tool to market the national body and obtain feedback from individual paramedics and various stakeholders across the country. A communiqué of March 2012 announced the first national certification examinations for the paramedic profession in Canada.

The secondary focus of activity for COPR/OCRCP was the advertisement for an Expression of Interest (EOI) for Administrative Services. The purpose of obtaining

administrative services was to ensure adequate resources are in place to carry out the functions of COPR/OCRCP. For 2011/12 this meant administrative support to COPR/OCRCP to assist the organization to achieve its goals, by ensuring proper record keeping of its various committees and financial affairs and ensuring timely follow up with meeting decisions and projects. The EOI for Administrative Services was posted in February 2012 and the screening process occurred in March 2012 with the intent to award in April 2012. A draft contract was developed to provide to the successful bidder.

Financial Summary

All provincial paramedic regulators and/or government paramedic regulators continue to financially support the organization in order to develop a common approach to provincial and federal obligations that impact regulator function. COPR's revenue for 2011/12 was \$56,550, and expenses were \$28,610. The surplus was related to in-kind contribution of the Board members, delays with the process of Incorporation and not awarding the contract for administrative services during 2011/12. This funding in combination with HRSDC funding has allowed COPR/OCRCP to achieve its goals. COPR/OCRCP has achieved a balanced budget for 2011/2012.

Acknowledgements

Each of the Board members has been supported by their organizations (Colleges or provincial government) to fulfill the mission of COPR/OCRCP via funding or in-kind contributions, and the Council is very grateful for this support.

The work of Ben Maartman as the Project Coordinator for the LMP is gratefully acknowledged during 2011/2012. The expertise of Dr. Greg Sadesky of Yardstick throughout the exam development has been sincerely appreciated. Dr. David Cane has assisted our Council towards completing its mandate by facilitating the LMP meetings.

Special thanks to the Executive members of Cathy Francis (Ontario), Tammy Leach (Alberta), Derek Dagenais (Saskatchewan), Dale Broemeling (Past Chair), Bud Avery (Nova Scotia) and Judy Thompson (British Columbia) for their wisdom and leadership over the past year.

Each of the COPR/OCRCP Board members' contributions has been substantive. Thank you to Corey Banks (Newfoundland) and Dr. Colette Lachaine and Raymond Bissonnette (Quebec) for their insightful contributions, participation, and hard work for supporting the mandate of COPR/OCRCP. We bid farewell to Norma Hicks and welcome Libby Maskos (New Brunswick) and also saw the departure of April Mills (Prince Edward Island).

The Future

As we come to the close of COPR/OCRCP's second year, we look forward to the upcoming year. It is anticipated the process of Incorporation and the acceptance of the By-Laws will be complete early in 2012/2013. COPR/OCRCP expects the LMP work will be complete in the fall of 2012 and exam maintenance and delivery will be transitioned to COPR/OCRCP.

There will be continued work on a collaborative approach with stakeholders for research, to support evidence-based decision making to maintain the competency standards and the exams, and pursue issues of common interest.

Developing a framework for a common assessment process for internationally trained paramedics will also be a focus for the organization in the future.

Finally, as outlined as one of several goals of the COPR/OCRCP Strategic Plan, the organization will look forward to developing a collective action plan to ensure consistent approaches to continued competence of paramedics across the nation, and develop a standardized process for regulators to share information regarding non-compliant license holders.

Closing

COPR/OCRCP will continue to work with stakeholders to strengthen paramedic regulatory practices that protect the Canadian public. This is complex and important work and requires the expertise and dedication of multiple organizations across this vast nation.

In closing, it has been a pleasure to work over the past few years with the wonderful and committed people of the COPR/OCRCP and to serve as Chair for the past two years. After two years, I relinquish the position of Chair person with great confidence to Cathy Francis of Ontario, and look forward to another year of serving the organization in another capacity.

Brenda Gregory

2011/2012 Chair COPR/OCRCP

Canadian Organization of Paramedic Regulators/Canadienne des Régulateurs Paramédicaux

COPR/OCRCP MEMBERSHIP

Dale Broemeling	Past Chair/ British Columbia
Judy Thompson	Ministry of Health, British Columbia
Tammy Leach	Alberta College of Paramedics
Derek Dagenais	Saskatchewan College of Paramedics
Brenda Gregory	Ministry of Health, Manitoba
Cathy Francis	Ministry of Health and Long Term Care, Ontario
Dr. Colette Lachaine	Ministère de la Santé et des Services Sociaux du Québec
Norma Hicks 2011	Paramedic Association of New Brunswick
Libby Maskos 2012	Paramedic Association of New Brunswick
Bud Avery	Emergency Health Services, Nova Scotia
April Mills	Ministry of Health, Prince Edward Island
Corey Banks	Ministry of Health, Newfoundland and Labrador

Appendix (2)

COPR/OCRP Organizational Structure

The COPR/OCRP Board consists of all provincial jurisdictions who regulate paramedics for which there is one member representing each jurisdiction. There are ten members on the Board.

