

Pan-Canadian Essential
Regulatory Requirements **PERRs**

Introduction
2023

Contents

- 3 Pan-Canadian Essential Regulatory Requirements (PERRs) for Paramedics
- 5 Paramedic Designations in Canada
- 6 Why is PERRs Needed?
Who will use PERRs?
- 9 Acknowledgements

Pan-Canadian Essential Regulatory Requirements (PERRs) for Paramedics

The Canadian Organization of Paramedic Regulators (COPR) advances consistent and best practices in regulation, enhances public accountability, and facilitates mobility of paramedics nationally and internationally. In 2021, COPR agreed to develop a harmonized and unified approach for pan-Canadian essential requirements: competencies and standards that will reflect and specifically focus on the needs of the public and patients for safe, effective care by paramedics. COPR's members, the provincial regulators for paramedicine, are committed to facilitating the framework's use to support consistent and uniform paramedic practice, regulation, and education in Canada.



PERRs Structure

PERRs

Pan-Canadian Essential
Regulatory Requirements



The Pan-Canadian Essential Regulatory Requirements (PERRs) includes five key elements.

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 Competence Framework (CPCF)** provides a high-level list of knowledge, skills, and attitudes that contribute to performance. The CPCF describes current and actual practice, clarifies paramedics' 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 designation has its own CPCF.
3. The **Canadian Paramedic Regulatory Practice Standards (CPRPS)** document describes specific, expected outcomes that must be met by paramedics in Canada regardless of their designation, job description, or practice setting. The CPRPS focuses on both patient and paramedic outcomes and applies to the usual day-to-day work performance and tasks completed by paramedics.
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 competence area. This appendix is incorporated into each CPCF for ease of use.
5. The **Glossary of Terms** contains definitions for the terms that are presented in **bold** font within the CPCF and CPRPS. Where terms appear more than once, their definition is 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.

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)


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.

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.

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.

Each designation has specific responsibilities that reflect both the paramedic'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 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 usually not part of an educational pathway to PCP education and competencies.



PERRs describes the expectations for safe, effective, and ethical performance by paramedics 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 to ensure safe, effective patient care.

While the majority of paramedics 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 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 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' 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 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 care is important to their mandate. Both government regulators and self-regulatory organizations may adapt or adopt the competence 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' 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 attitudes 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 competence 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 to provide safe, effective paramedic care for their registered designation.

PARAMEDICS

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 returning to practice, to inform where upgrading might be necessary.

INTERNATIONALLY EDUCATED PARAMEDICS

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. For example, COPR's paramedic 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 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 and implementing systems and structures that support the health and well-being of paramedics (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 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 care.

PROFESSIONAL ASSOCIATIONS

Provincial and national associations representing the profession may use PERRs to advocate for the inclusion of paramedics 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 are deployed outside Canada, international agencies can use PERRs to provide information regarding the expectations associated with each of the paramedic designations.

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

Acknowledgements

The development of PERRs was a collaborative effort by a large number of groups and individuals. COPR gratefully acknowledges the time, commitment, and effort of the many who offered their expertise to the project:

Project Steering Committee

British Columbia EMA Licensing Branch	Wendy Vowles (as of November 2022) Eugene Johnson (prior to November 2022)
Alberta College of Paramedics	Tim Ford
Saskatchewan College of Paramedics	Jacque Messer-Lepage (Chair)
College of Paramedics of Manitoba	Trish Bergal
Ontario Ministry of Health	Carrie Hassberger
Ministère de la Santé et des Services sociaux du Québec	Robyn Marcotte (as of September 2022) Steve Legault (prior to September 2022)
College of Paramedics of Nova Scotia	Karl Kowalczyk
Newfoundland and Labrador Paramedicine Regulation	Ken Driscoll

Essential Requirements Committee

British Columbia	Annie Brothwell
Alberta	Jennifer Bacon and Ian McEwan
Saskatchewan	Len Rostotski
Ontario	Dan Countryman
Nova Scotia	Karl Kowalczyk
Newfoundland and Labrador	Shania Bugbee
COPR	Tammy Leach

Subject Matter Expert Committee

British Columbia	Oliver Oxbury
Alberta	Ian McEwan and Sheldon Thunstrom
Saskatchewan	Cari Evenson-Carleton
Manitoba	Paul Nairn
Quebec	Carole-Ann Lachance Lapierre
Nova Scotia	Ryan Brown, Laura Hirello and Karl Kowalczyk
Newfoundland and Labrador	Craig Kennedy

Critical Care Paramedic Sub-committee

British Columbia	Chris Naples and Rob Schlamp
Saskatchewan	Chris Fay
Manitoba	Melanie Vieira
Ontario	Michael Kennedy and Tegan Fletcher
Nova Scotia	Sean Teed
Newfoundland and Labrador	Chris Hollett

Health of Professional Sub-committee

Ontario	Dr. Elizabeth Donnelly and Caitlin Tavares
Newfoundland and Labrador	Craig Kennedy

Examination and Education Resource Working Group

British Columbia EMA Licensing Branch	Anna Chayba and Wendy Vowles
Alberta College of Paramedics	Tim Ford and Craig Hart
Saskatchewan College of Paramedics	Jacque Messer Lepage and Jen Williams
College of Paramedics of Manitoba	Trish Bergal and Leith Saunders
Ontario Ministry of Health	Carrie Hassberger
Ministère de la Santé et des Services sociaux du Québec	Robyn Marcotte
College of Paramedics of Nova Scotia	Karl Kowalczyk
Prince Edward Island Emergency Medical Services Board	Matthew Leyenaar
Newfoundland and Labrador Paramedicine Regulation	Ken Driscoll and Ryan Kelly
PERRs Subject Matter Experts	Ryan Brown, Michael Kennedy, Sean Teed and Melanie Vieira
Health Standards Organization	James Sullivan
Canadian Armed Forces	MWO Jean-Sébastien Morin
COPR Examination Leads	Janel Swain, Rachel Tyler and Connie Wilson

Advisory Committee

Canadian Armed Forces	MWO Jean-Sebastien Morin, LCol Monica Ott and MWO Aimee Randell (alternate)
Canadian Organization of Paramedic Regulators	Tim Ford
Government of Yukon, Community Services	Ann-Marie Paquet
Health Standards Organization	France Parisien
Indigenous Services Canada	Beverly Hamilton and Jonathan Wolfenden
Paramedic Association of Canada	Pierre Poirier
Paramedic Chiefs of Canada	Dale Weiss
Public Representative	Donna Denney
Society for Pre-Hospital Educators of Canada	Ron Bowles

COPR also acknowledges the following contributors:

- Susan Glover Takahashi, SGT & Associates, Lead Consultant (CPCF and CPRPS)
- Mary Clark, SGT & Associates, Operational and Communications Consultant
- Marnie Lamb, Ewe Editorial Services, Editor
- Eva Schausberger and Karen Luker, CAMPROF Canada, PERRs validation survey and packaging, EERs development
- The COPR staff team
 - Chelsea Wilker, Executive Director
 - Tammy Leach, Examination Manager
 - Tim Comerford, Senior Administrative and Examination Coordinator
 - Heather Aggus, Marketing, Communication, Examination and Administrative Coordinator

COPR also extends its sincere gratitude to the over 2,600 practitioners, paramedic regulators, educators, and employers who contributed to the validation of the competence framework through survey participation.

COPR acknowledges and recognizes the generosity and permission of the Royal College of Physicians and Surgeons of Canada, whose leadership with the CanMEDS competency framework has been used by many health professions across Canada and the globe.

