

	A11 - NON ERS HEALTH CARE PROVIDER ON SCENE	
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A paramedic has a professional obligation to not follow a direction or carry out an order that they reasonably believe to be inaccurate, incorrect, or inappropriate to the patient and situation.

NOTES
<p>1. An individual at the scene may self-identify as a prescribing health care provider (HCP) such as a physician (MD), nurse practitioner (NP), or physician assistant (PA); a nonprescribing HCP such as a registered nurse (RN) or respiratory therapist (RT); a paramedic employed by ERS or one of its service purchase agreement (SPA) providers, but not currently on duty; or a paramedic not employed by ERS or one of its SPA providers.</p> <p>Some of these individuals may have appropriate training, experience, and the practice / work scope to <u>assist</u> with life-saving care.</p> <p>A paramedic is not required to verify the credentials or competency of the individual, but may accept their claim on a good-faith basis.</p> <p>2. A paramedic may collaborate with the individual in the best interests of the patient, but the responding paramedics remain in charge of the scene and must continue to adhere to all ERS clinical documents (i.e. policy / procedure, patient care map, medication standing order, destination protocol)</p> <p>3. As a member of the College of Paramedics of Manitoba (CPMB) a paramedic cannot exceed their professional scope of practice, regardless of an order by a prescribing HCP.</p> <p>As an employee of Shared Health Emergency Response Service (ERS) a paramedic cannot exceed their work scope or deviate from the ERS clinical documents without authorization from an ERS or ERS-affiliated physician (A08).</p> <p>If requested to exceed their practice or work scope, a paramedic must contact the Virtual Emergency Care & Transport Resource Service (VECTRS) and request assistance from the VECTRS emergency physician (EP). The VECTRS EP can liaise with HCP, and can involve an ERS medical director as necessary.</p> <p>4. If the HCP performs a reserved act that is beyond the scope or competency of the responding paramedics, they remain responsible for the ongoing care of the patient related to the act itself, and the paramedic cannot accept a transfer of care. <u>This may require them to directly accompany the patient in the ambulance during transport.</u></p> <p>5. If the individual performs a reserved act that falls within the scope and competency of the paramedic, the paramedic can accept a transfer of care if appropriate (A06.1, A06.3).</p>

LINKS / REFERENCES
<ul style="list-style-type: none"> • A06.1 - EMS WORK SCOPE (MEDICAL FUNCTIONS & PROCEDURES) • A06.3 - EMS WORK SCOPE (ESTABLISHED INFUSIONS) • A08 - MEDICATION ORDERS • CPMB PRACTICE DIRECTION - DELEGATION OF RESERVED ACTS

APPROVED BY	
	
EMS Medical Director	EMS Associate Medical Director

VERSION CHANGES (refer to X01 for change tracking)
<ul style="list-style-type: none"> • New (extracted from A08) • Revised notes for greater clarity and ease of use