



Survey of Support for Paramedic Self-Regulation – Final Report

March 17, 2013

Conducted by *D&L* Services

Sponsored by the Ontario Paramedic Association

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Introduction

More than twenty health professions in Ontario fall under the *Regulated Health Professions Act, 1991*, which authorizes a profession to regulate itself through a College (e.g., the College of Midwives of Ontario, the College of Respiratory Therapists of Ontario). Such regulatory Colleges determine entry-to-practice requirements, administer ongoing quality assurance, and determine and enforce standards of practice and conduct. Paramedics, in contrast, are regulated under the *Ambulance Act, 1990*, by the Ministry of Health and Long-Term Care Emergency Health Services Branch, Base Hospital Programs (which provide medical oversight), and Paramedic (or Emergency Medical) Services.¹

In November 2012, the Health Professions Regulatory Advisory Council asked the Ontario Paramedic Association (OPA) to complete an application to regulate paramedics under the *Regulated Health Professions Act, 1991*, in response to a request from the Minister of Health and Long-Term Care. One component of this application asked that the OPA “describe any consultation process undertaken” to determine whether “members of the profession/association want self-regulation”. In order to determine the level of support for self-regulation among paramedics in Ontario, in 2013 the OPA conducted an online survey open to all paramedics.

Methodology

The online survey was conducted between February 26 and March 11, 2013 using FluidSurveys (Chide.it Inc.), and was publicized through the OPA’s website, through Facebook and Twitter, on the website of associated organizations such as the Professional Paramedic Association of Ottawa and the Toronto Paramedic Association, and through an email and attachment sent on February 26, 2013 by the OPA to the Chiefs of Ontario’s 51 Paramedic Services with a request to forward it to all paramedic employees (see Annex 1).

¹ This regulatory oversight only applies to paramedics in Ontario who are employed by a municipal ambulance service (i.e., a Paramedic Service or Emergency Medical Service) or Ornge, Ontario’s air ambulance service. Trained paramedics working for private patient transfer or event medical services companies are unregulated.

The survey consisted of a preliminary question asking for respondents' permission to collect personal data (name, employer, and ID numbers), followed by a series of branching validation questions relating to professional status. Three short paragraphs explaining the OPA's position introduced the single survey question, which asked the respondent to "Please indicate your level of support for paramedic self-regulation under a College of Paramedics" using a five-point Likert item from "Strongly Agree" to "Strongly Disagree" (for questionnaire, see Annex 2). Finally, respondents were asked for their comments.

This method of ascertaining the level of support was chosen rather than a series of questions on particular aspects of paramedic self-regulation for two reasons. First, given the short timeframe available, it had not been possible for the OPA to conduct any outreach and education sessions on what self-regulation might or might not entail. Second, transition to self-regulation is a lengthy process involving extensive consultation with the Ministry of Health and Long-Term Care and other stakeholders. Therefore, at this stage, it is not possible to provide definitive information about the structure and function of a future College of Paramedics. It was felt that the number of questions required to gauge levels of support for every possibility regarding such a College would have been unmanageable.

For validation purposes, respondents were asked to provide their name and either (i) paramedic service and OASIS number (for paramedics currently working for Paramedic Services), (ii) name of employer and A-EMCA number (for paramedics working for private companies), (iii) name of educational institution for paramedic educators, or (iv) name of Paramedic Service for former paramedics.

Data were exported into Microsoft Excel (Redwood, CA, USA) for validation, analysis and formatting, and charts were constructed using all data. The survey was carried out by DRL Services, Ottawa, and was commissioned by the Ontario Paramedic Association.

Responses were validated against the data requested, and inconsistent responses and duplications were also excluded. Eleven responses were excluded because they lacked sufficient validation data. Preliminary data were revised to exclude a further five responses as the preference selected was inconsistent with the comment provided, and to include one response only in the aggregate preference data (Figure 7), as the comment shifted the preference unambiguously. A total of 104 responses were found to be duplicates (i.e., 52 respondents had completed the survey twice). Analysis of the latter showed that responses of more than half of the respondents (29) could be retained, as they had reiterated their previous preference or had attached a comment indicating a change of preference. Seventeen respondents were excluded from the analysis as their duplicate responses were contradictory without comment (e.g., shifting from Neither Agree nor Disagree to Agree/Strongly Agree or to Disagree/Strongly Disagree, or from Agree/Strongly Agree to Disagree/Strongly Disagree), thus the indicated preference could not be validly determined. A further six respondents revised their responses to shift them in one direction of the scale (e.g., from Agree to Strongly Agree or from Disagree to Strongly Disagree). These responses have been included in the final total showing aggregate preferences in one direction or the other (Figure 7).

Results

Valid responses were received at an average rate of 130 per day during the two-week period the survey was live. 1,815 unambiguous valid responses were received, 1,730 (95.3%) from paramedics working for EMS, 34 (1.9%) from paramedics not working for EMS, 14 (0.8%) from paramedic educators and 37 (2.0%) from former paramedics. Of this total, 987 (54.4%) indicated Strongly Agree, 363 (20.0%) Agree, 132 (7.3%) indicated Neither Agree nor Disagree, 95 (5.2%) indicated Disagree and 238 (13.1%) indicated Strongly Disagree (Figure 1). Figures 2 – 5 show the survey responses by each category of respondent.

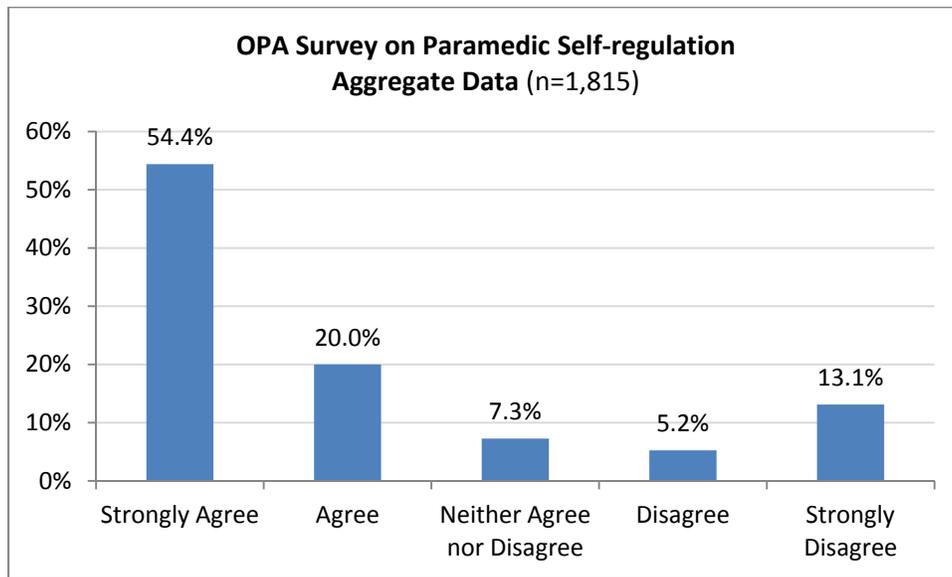


Figure 1. Ontario Paramedic Association 2013 Survey of Support for Self-Regulation – All Responses (n=1,815)

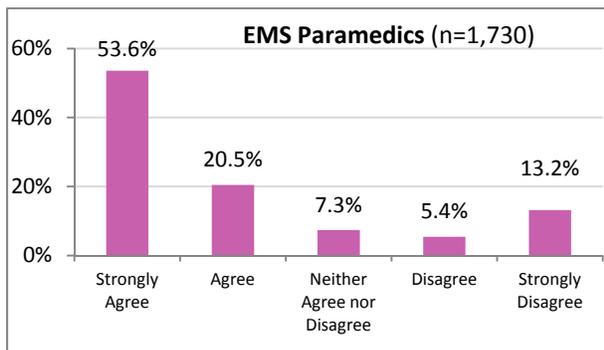


Figure 2

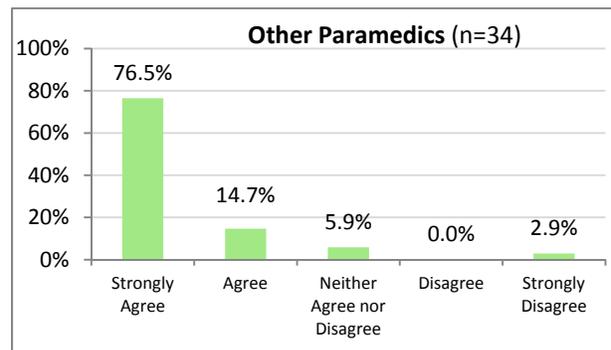


Figure 3

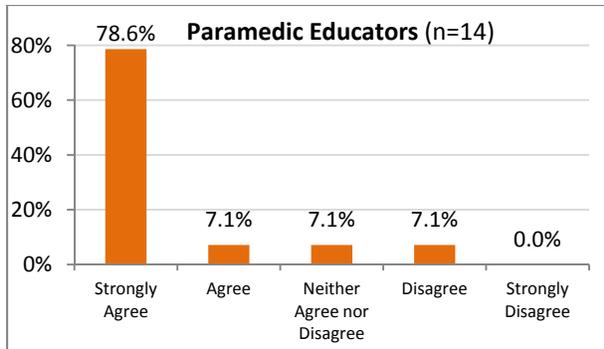


Figure 4

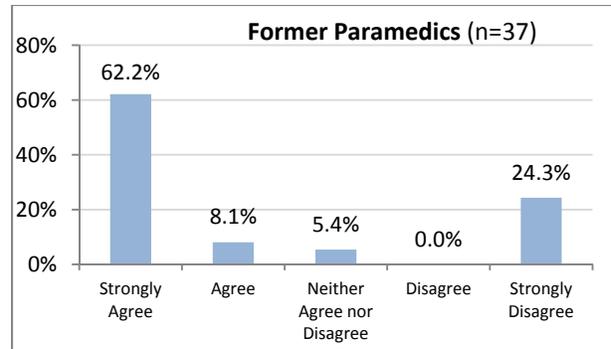


Figure 5

Figure 6 shows the aggregate data by response category. Given the ratio of responses, the paramedic category dominates the others.

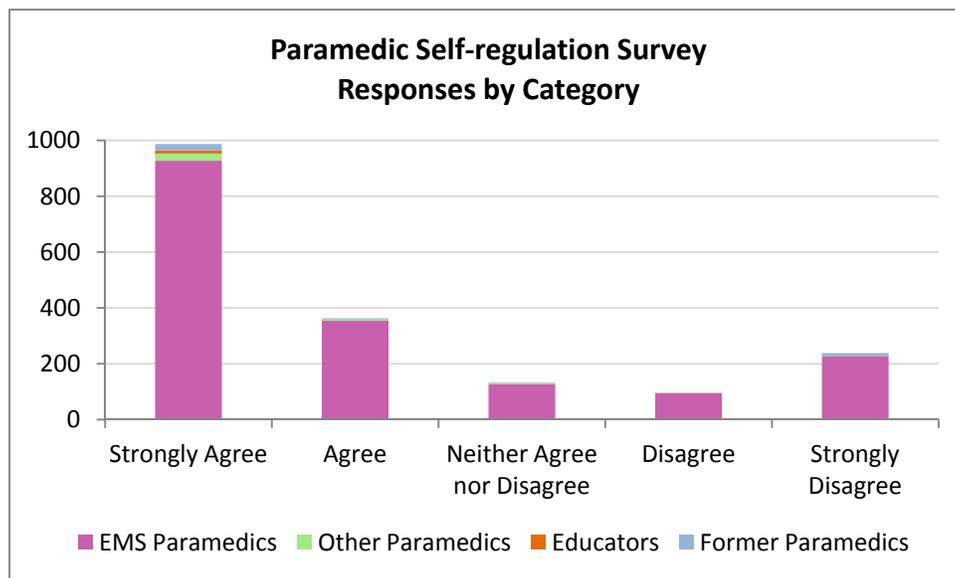


Figure 6

Figure 7 shows the survey responses aggregated in terms of those in favour (Agree/Strongly Agree), those neutral (Neither Agree nor Disagree) and those not in favour (Disagree/Strongly Disagree). (Note that for this aggregation, seven responses have been included that were excluded from the above analyses, i.e., n=1822).

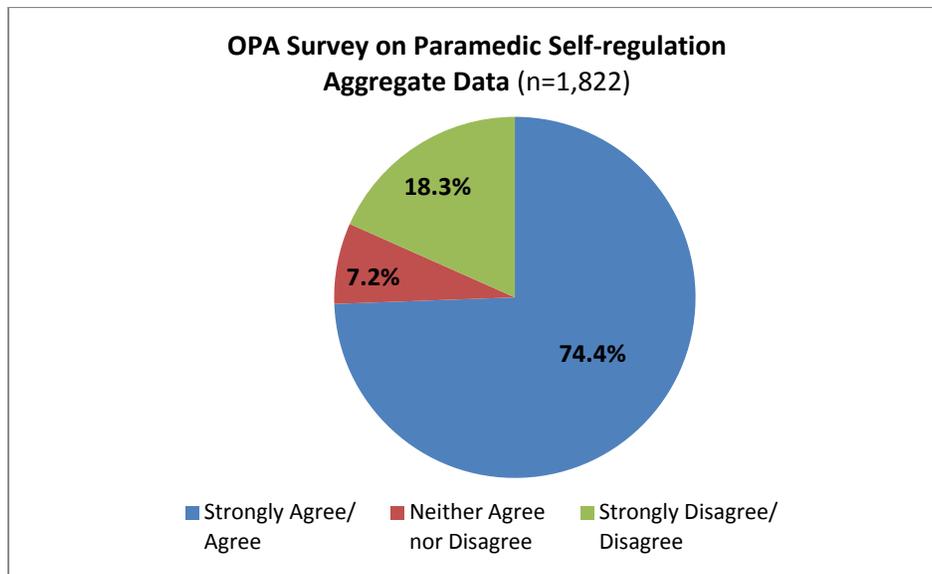


Figure 7

Discussion

Although the survey results show strong support for the question asked by the OPA (74.4% Strongly Agree and Agree), there are limitations to the data. First, a list of contacts for private patient transfer and medical event services companies was not readily available and could not easily be gathered in the timeframe in which the survey was constructed and deployed. Therefore, it was not possible to distribute the call letter to paramedics working solely for these companies, nor was there any other simple way of directing them to the survey. As the number of such paramedics in Ontario is thought to be around 3,000, the 34 responses received constitute a response rate of slightly more than 1%, and therefore cannot be interpreted as representative of this cohort, particularly as it is believed that the survey addresses an issue of some interest to this group.

Second, a list of contacts for paramedic educators at the institutions with paramedic education programs (e.g., Ontario's Colleges of Applied Arts and Technology), was also not readily available. The number of such educators is thought to comprise around 70 full-time and 350 part-time. If so, the 14 responses received would constitute a response rate of slightly over 3%. However, it is believed that most part-time paramedic educators also work for Paramedic Services, and are highly likely to have responded under that category. Therefore, it is not possible to draw conclusions as to how representative paramedic educators' responses are.

Finally, it is not known how many individuals there might be who formerly worked as paramedics for Paramedic Services in Ontario. Nor is there any obvious way in which this cohort could have been targeted. Hence, the 37 responses in this category also cannot be considered representative.

Annex 1. OPA Letter to EMS



February 26, 2013
Attention: paramedics

Dear Colleagues,

As many of you are aware, the Ontario Paramedic Association (OPA) has been asked to submit an application for paramedics in Ontario to be regulated under the *Regulated Health Professions Act 1991* (RHPA). It has been the goal of the OPA and its members to seek professional status and protection of the title of “paramedic” for paramedics since 1995. Self-regulation of paramedics under the Regulated Health Professions Act has been an issue for many years. A 1998 report from the *Land Ambulance Transition Task Force* recommended this step “to address the key deficiencies of the ambulance service regulatory framework”. The OPA proposes a streamlined system with a single regulatory body under which paramedics will be responsible for their own scope of practice.

As described by the Health Professions Regulatory Advisory Council, the regulatory framework of the RHPA is a “regulatory system that enables each of Ontario’s thousands of health professionals to contribute to patient care to the full extent of their training and abilities, to collaborate with each other so that the efforts of all are deployed to produce the best possible results for patients, and to respond with up-to-date skills and a deep sensitivity to the rising expectations of today’s health care consumers”. At present there are over 20 health professions that have transitioned under this legislation including nurses, pharmacists, respiratory therapists and physicians, just to name a few.

You can visit the OPA’s website to learn more about how self-regulation will affect paramedics:
http://www.ontarioparamedic.ca/professional_self-regulatio/paramedic_faqs/

To respond to the Minister’s request, and to help our profession take the next step in establishing credibility in the health care system and in the public eye, we need to hear from you. We need to hear from as many paramedics as possible to indicate the profession’s support for the formation of a new regulatory College. Please complete the OPA’s online survey at:
<http://fluidsurveys.com/s/opa-self-regulation/survey/>

The survey will be available until **March 11, 2103 at 12:00 noon**.

Thank you for your participation.



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1-800-OPA-LINE

Annex 2. OPA Survey Questionnaire

Ontario Paramedic Association - Survey about Paramedic Self-Regulation

Welcome

Welcome to the Ontario Paramedic Association's survey about paramedic self-regulation in Ontario. We are interested in the opinions of all paramedics and paramedic graduates in Ontario.

Privacy Statement

In order to collect valid data, this survey asks for three pieces of personal information: your name, your OASIS # or AEMCA # (if not currently working for a paramedic service), and your employer. The Ontario Paramedic Association (OPA) is committed to keeping your personal information confidential, secure and private. This information will only be used to ensure that each response is valid, and will not be used for any other purpose or disclosed to any third parties. The data will be retained by the OPA using a secure password protected electronic file storage system until the Ministry of Health and Long-Term Care (MOHLTC) reaches a decision on the OPA's application or as necessary to comply with any legislative requirements, whichever is longer, after which time it will be destroyed.

Permission

I agree to allow the Ontario Paramedic Association to collect my personal information for the purposes of validating this survey. ("No" terminates the survey.)

- Yes
- No

Name (required)

First Name

Last Name

Employment information for validation purposes

Employment

Do you currently work for an Ontario paramedic service?

- Yes
- No

Name of Paramedic Service

Please provide the name(s) of the paramedic services for which you work.

Primary Paramedic Service (required)

Second Paramedic Service (optional)

Third Paramedic Service (optional)

OASIS Number

Please provide your OASIS number.

Other Paramedic Employment

Do you currently work for a private company that employs people with paramedic training (e.g., non-emergency medical transportation services, event medical services, etc.)?

- Yes
 No

Private Medical Services

Please provide the name of the company you work for and, if available, your A-EMCA number.

Name of Company

A-EMCA Number

Educational Institution

Do you currently work for an educational institution providing paramedic education?

- Yes
 No

Name of Educational Institution

Please provide the name of the educational institution you work for.

Other

Are you a former paramedic?

- Yes
- No

Previous Employment

Please provide the name of the Paramedic Service for which you used to work.

About Paramedic Self-Regulation

Dear Colleague, As many of you are aware, the Ontario Paramedic Association (OPA) has been asked to submit an application for paramedics in Ontario to be regulated under the Regulated Health Professions Act 1991 (RHPA). It has been the goal of the OPA and its members to seek professional status and protection of the title of "paramedic" for paramedics since 1995. Self-regulation of paramedics under the Regulated Health Professions Act has been an issue for many years. A 1998 report from the Land Ambulance Transition Task Force recommended this step "to address the key deficiencies of the ambulance service regulatory framework". The OPA proposes a streamlined system with a single regulatory body under which paramedics will be responsible for their own scope of practice. As described by the Health Professions Regulatory Advisory Council, the regulatory framework of the RHPA is a "regulatory system that enables each of Ontario's thousands of health professionals to contribute to patient care to the full extent of their training and abilities, to collaborate with each other so that the efforts of all are deployed to produce the best possible results for patients, and to respond with up-to-date skills and a deep sensitivity to the rising expectations of today's health care consumers". At present there are over 20 health professions that have transitioned under this legislation including nurses, pharmacists, respiratory therapists and physicians, just to name a few. To respond to the Minister's request, and to help our profession take the next step in establishing credibility in the health care system and in the public eye, we need to hear from you. We need to hear from as many paramedics as possible to indicate the profession's support for the formation of a new regulatory College.

Please indicate your level of support for paramedic self-regulation under a College of Paramedics

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

Do you have any comments?

Thank you for taking the time to look at our survey.
