Conseil des Services du District de
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District Services Board

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September 17, 2013

Mr. Steve O'Neil
MOHLTC Emergency Health Services Branch
199 Larch St, Suite 1004
Sudbury, ON
P3E 5P9

Mr. O'Neil:

RE: Investigation report – Occurrence File Number 13IS-05-141

I am in receipt of your letter dated August 27, 2013 regarding Investigation Report – Occurrence File Number 131S-05-141. Within your letter I am to respond within 10 business days of receipt of this report. As you know I was on vacation without internet access and did receive this report until September 3, 2013, which is the date that my review and action regarding this investigation began.

There are 4 noted areas of concern. Please see the details of our plans on how to deal with each of these concerns below.

1. *Failure to complete the Patient Refusal Section of the ACR for patient refusals of patient care and or assessments*
   - Training to all staff in terms of the requirements of the Patient Refusal section as detailed within the Ontario Documentation Standards, ACR Completion Manual and the Basic Life Support Patient Care Standards.
   - Education delivered to all employees in a monthly training module with associated test to be completed by October 5, 2013.

2. *Failure to provide the required patient care and or errors in administration of medication or questionable assessment*
   - Documentation sent to Base Hospital for medical review.
   - Internal audit to additionally be completed.
   - Direct remedial training/education with the paramedics involved based upon the Base Hospital/Service findings.

3. *Return Code 3 for acute cardiac chest pain*
   - Documentation sent to Base Hospital for medical review.
   - Internal audit to additionally be completed.

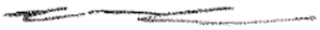
- Direct remedial training/education with the paramedics involved based upon the Base Hospital/Service findings.
- Education delivered to all staff. Within the September monthly training module, a portion deals with the topic of proper selection of codes based on specific medical conditions i.e. Basic Life Support Patient Care Load & Go Standard.

4. *Documented use of warning systems to the scene when according to AVL data none were used*
    - Direct remedial training/education/discipline with the paramedics involved dependent upon the answers they provide to us in relation to this call.
    - Education delivered to all staff. Falsification of documentation in specific relation to this issue has been included in the September monthly training module.

You will receive a follow up letter detailing the completion of our plan as listed above, as well as, any additional details we proceed with within 40 business days of receipt of this investigation; Monday, October 28, 2013.

Please understand that we take our obligations in terms of delivering exceptional patient care very seriously. We thank the Ministry of Health & Long Term Care for bringing these items to our attention. We aim to continually improve and look forward to working with you in the future.

Thank you,



Michael MacIsaac
Chief of EMS
Manitoulin-Sudbury DSB

cc: Mr. Fern Dominelli, CAO, Manitoulin-Sudbury DSB
Mr. Rick Brady, Manager Investigation Services
Ms. Gail Donnelly, Senior Program Analyst