Bulletin 250121

To: Nova Scotia Regulator of Paramedicine Registrants

Date: January 21, 2025 (update to December 3, 2024)

Re: Fee Increases/Professional Liability Insurance/Currency of Practice Changes for the February 1

to March 31, 2025, Annual Licence Renewal/Intermediate Care Paramedic Migration to PCP

Licence Category with additional approved activities

The Nova Scotia Regulator of Paramedicine (the Regulator) is keen to share important updates with all Registrants regarding four key items impacting the annual licence renewal process from February 1 to March 31, 2025. Embedded in this bulletin are hyperlinks, shaded in blue, to other documents which pertain to these topics.

Fee Increases

Increasing Registrant fees is always a challenging decision. However, ensuring we fulfil our mandate to serve and protect the public interest is essential. As a self-regulated profession, our work focuses on maintaining high safety, quality, and accountability standards. Registrant fees are the only source of revenue to support core regulatory functions, including licensing, professional conduct, and developing regulatory tools to safeguard the public.

The Regulator increases fees only when necessary to remain financially sustainable. Several factors, including inflation, the ongoing transfer to a new legislative regime under the *Regulated Health Professions Act (RHPA)* mandated by the Government, and the new Emergency Medical Responder (EMR) licence category, have necessitated this change.

Despite our best efforts to control costs continuously, without a fee change, operating costs for regulatory functions are increasing faster than revenues, thus impacting our ability to fulfil our public protection mandate.

While we recognize that fee increases may not always be welcome, this adjustment enables us to sustain the rigorous processes and resources necessary for upholding trust in our profession. By strengthening our capacity to deliver on these responsibilities, we affirm our commitment to the public and ensure that the profession meets its obligations with integrity and excellence.

The fee increases include:

- New to practice application \$175
- Labour mobility/registrant from another jurisdiction application \$175
- Expired license application \$175
- International practitioner application \$250
- Initial registration/Licensing \$575
- Annual licence renewal \$575
- Change in category of licence \$60
- Verification of registration/licensing fee \$60

Reinstatement of registration or licensing application fee - \$400

Professional Liability Insurance Requirements

Requiring licenced registrants to have Professional liability insurance is a vital measure that reflects the highest standards of professionalism, accountability, and commitment to public protection. It underscores the regulator's dedication to upholding trust and transparency while reinforcing its initiative-taking approach to risk management in two significant ways.

First, it ensures that members of the public have a reliable avenue for financial compensation in the rare event of harm caused by a registrant's conduct.

Second, it also safeguards registrants by providing essential coverage for defence costs in regulatory or civil proceedings, relieving them of the significant personal financial burden that could arise from such situations.

As the Regulator migrated under the *Regulated Health Professions Act (RHPA)*, it became clear that all licenced registrants would require professional liability insurance in which they were the "named insured" and that the insurance must be independent of the Regulator.

Therefore, between February 1 and March 31, 2025, and in all future licence renewal periods, licenced registrants will be required to provide proof of professional liability insurance that:

- specifically names the registrant in the policy,
- provides professional liability coverage for the individual in the amount of \$5,000,000 per occurrence and a \$10,000,000 aggregate limit,
- the aggregate limit of which should not be associated with occurrences involving more than one individual,
- provides defence costs,
- provides continuous individual insurance in the registrant's name (neither practice-specific nor employer-provided insurance will be acceptable) and
- an extended reporting period endorsement.

This prioritizes individual coverage to ensure that registrants are directly protected, independent of their employer's arrangements. It enhances registrants' professional autonomy and ensures uninterrupted protection throughout their careers, further strengthening public confidence in paramedicine.

Requiring proof of professional liability insurance as part of the annual license renewal process ensures consistency, fairness, and diligence, thereby fostering excellence and trust within the profession. The NSRoP does not provide registrants with professional liability insurance because it must maintain impartiality and protect the public interest.

One of the NSRoP's primary roles is to ensure registrants comply with professional standards and address professional conduct matters impartially. Therefore, providing liability insurance to its

registrants may create a perceived or actual conflict of interest because the NSRoP may have a financial stake in the outcome of claims.

Additionally, requiring registrants to secure their own liability insurance reinforces the principles of self-regulation by ensuring that registrants take personal responsibility for their practice. Individual registrants are accountable for meeting their legal and professional obligations.

As of the publication of this bulletin, the Regulator was aware of two professional liability insurance providers that meet the requirements. Both options offer the necessary coverage, and registrants can choose the one that best suits their preferences:

- <u>LloydSadd National Paramedic Program</u>. This program does not require the Registrant to pay a
 membership fee, allowing them to access professional liability insurance directly through
 LloydSadd.
- ProLink This program is available through the <u>Nova Scotia Paramedic Professional Association</u>
 (<u>NSPPA</u>). Registrants who choose this option will first pay a membership fee to join the NSPPA
 and then an additional fee to purchase professional liability insurance from Prolink.

The Regulator welcomes information about other insurers that may offer professional liability insurance that meets its requirements. If you are aware of such options, please feel free to notify the Regulator.

Currency of Practice Requirements

Effective the annual licence renewal period of February 1 to March 31, 2025, all registrants seeking a licence must prove their currency to practice. This requirement is described in the NSRoP Bylaw Article 24.1(c), which may be accessed via this hyperlink NSRoP Bylaws.

In short, registrants are required to have engaged in the practice of paramedicine for a minimum of one of the following:

- 75 hours within the previous 12 licensing months before applying to the Regulator.
- 225 hours within the previous 3 licensing years before applying to the Regulator.
- 375 hours within the previous 5 licensing years, with no continuous absence from practice for two consecutive years, before applying to the Regulator ("with no continuous absence from practice" means you did not hold a license with NSRoP).

The practice of paramedicine is more than working with clients. It includes roles like research, education, interprofessional collaboration, consultation, management, administration, advocacy, regulation, and system development relevant to the activities and application of specialized and evidence-based paramedicine knowledge, skills, and judgement as described in Paramedicine Regulation 6 (1) and (2).

Practice hours are not limited to clinical practice only. Practice hours must involve activities (paid or unpaid) where the Registrant uses their specialized paramedicine knowledge, skills and judgement. To qualify:

- The activity must match the Registrant's current scope (e.g. EMR, PCP, ACP, CCP).
- It must align with approved education, competencies and standards.

• The role must involve applying paramedicine knowledge in meaningful ways.

For more details regarding how the Regulator views practice hours as they apply to the currency of practice, please see the attached Registration and Licensing Policy 15.1 Practice Hours for Currency of Practice Requirements.

Intermediate Care Paramedic Migration to the PCP Licence Category with additional approved activities

The Regulator deeply appreciates the invaluable contributions the Intermediate Care Paramedics (ICPs) have made to Nova Scotia's healthcare system. For decades, ICPs have been instrumental in addressing critical health system needs and providing exceptional care to clients.

Recognizing this legacy, the Regulator has consulted extensively with registrants and other interested parties over the past several months regarding migrating ICPs to the Primary Care Paramedic (PCP) licence category with additional approved activities. These discussions were informed by multiple factors outlined in the memorandum dated April 17, 2024, sent to all ICP registrants. A copy of that memorandum regarding the Regulated Health Professions Act (RHPA) implications for the Intermediate Care Paramedic (ICP) Designation is attached to this bulletin.

The RHPA introduces a modern regulatory framework that enables expanded scopes of practice within the profession. This important development allows the Regulator to adapt and evolve in a way that is responsive to the healthcare system's needs and forward-thinking in serving the public interest.

The decision to migrate ICPs to the PCP licence category with additional approved activities reflects this natural evolution in paramedicine. By modernizing regulatory processes under the RHPA, we are preserving the skills and experience of ICPs and positioning the profession to meet the dynamic needs of Nova Scotians in the years to come.

As ICPs renew their licences from February 1 to March 31, 2025, they will continue to use that title until April 1, 2025. Then, on April 1, 2025, the Regulator will automatically migrate all ICP to the PCP designation with several additional approved activities, including:

- Suctioning beyond the oropharynx.
- Utilizing endotracheal airway devices.
- Performing manual defibrillation.
- Administering medications rectally.

Additionally, nothing will restrict ICPs who migrate to the PCP licence category with additional approved activities from administering the medications they administered as an ICP.

The additional approved activities will be annotated on the appropriate Register, allowing the Registrant to continue performing procedures that reflect their existing knowledge, skills and judgement.

A copy of Registration and Licensing Policy 3.4 Migration of Intermediate Care Paramedic Registrants to the Primary Care Paramedic Register(s) with additional approved activities is attached to this bulletin for your review.

Policy Name: Migration of Intermediate Care Paramedic Registrants to the Primary

Care Paramedic Register(s) with additional approved activities

Policy Number: Registration and Licensing – 3.4

Version Number:1Date first Approved:01/18/2025Approved by:BoardEffective Date:02/01/2025Version Date:01/18/2025Next Review Date:MM/DD/YYYY

DEFINITIONS

1. TBA

POLICY STATEMENT

- 2. Per the Nova Scotia Regulator of Paramedicine (NSRoP) Bylaws, as of April 1, 2025, no person shall be eligible for the Intermediate Care Paramedic (ICP) licence category.
- 3. On April 1, 2025, the ED/Registrar will migrate any paramedic registered as an ICP to a corresponding Primary Care Paramedic (PCP) register with additional aspects of the practice of paramedicine.
- 4. The additional aspects of the practice of paramedicine approved by the Board include the following specific skills:
 - 4.1. Suctioning beyond the oropharynx.
 - 4.2. Utilizing airway devices introduced endotracheally.
 - 4.3. Perform manual defibrillation.
 - 4.4. Administer mediations rectally.
- 5. Nothing in this policy will restrict an individual who migrates to the PCP licence category with additional approved activities from administering the medications they administered as an ICP.
- 6. On April 1, 2025, a Registrant who became registered as a PCP with additional aspects of the practice of paramedicine, pursuant to paragraph 2 above, and who meets the licencing criteria established in Paramedicine Regulations and NSRoP Bylaws will be licensed as PCP with additional approved activities.
 - 6.1. The additional approved activities will be annotated on the corresponding Register.
- 7. All Registrants possessing the PCP licence category with additional approved activities identified in this policy must ensure they maintain competence with respect to those additional approved activities for as long as they hold a licence.

PROCEDURE

8. TBD

RELATED DOCUMENTS

- 9. Regulated Health Professions Act (RHPA)
- 10. RHPA Regulations Respecting Paramedicine
- 11. Nova Scotia Regulator of Paramedicine Bylaws

DOCUMENT HISTORY ((Date of Reviews. Revisions, etc)

12. Not applicable.

Policy Name: Practice Hours for Currency of Practice Requirements

Policy Number: Registration and Licensing 15.1

Version Number:1Date first Approved:01/18/2025Approved by:BoardEffective Date:02/01/2025Version Date:01/18/2025Next Review Date:MM/DD/YYYY

DEFINITIONS

1. N/A

POLICY STATEMENT

- 1. All applicants for licensing (including those applying for renewal) must meet the currency of practice requirements set out in the Nova Scotia Regulator of Paramedicine (NSRoP) Bylaws, including, where applicable, the minimum number of practice hours.
- 2. The practice of paramedicine is not limited to engaging with clients; it also includes research, education, interprofessional collaboration, consultation, management, administration, advocacy, regulation or system development related to the activities and application of specialized and evidence-based paramedicine knowledge, skills and judgement.
- 3. Practice hours must involve a paid or unpaid activity where the Registrant applies specialized and evidence-based paramedicine knowledge, skills, and judgment. For the activity to qualify as practice, it must:
 - 3.1. Reflect the registrant's current scope of practice (i.e., EMR, PCP, ACP or CCP);
 - 3.2. Must have been taught in an approved education program or comply with the competency framework, standards of practice and practice guidelines approved by the Board; and
 - 3.3. Relate to a role where the Registrant utilizes and applies specialized and evidence-based paramedicine knowledge, skills and judgment.
- 4. Hours obtained in a role which does not specifically require registration as a paramedic/EMR may only be used as practice hours if the activities performed by the Registrant support paramedic/EMR practice and actively involve utilizing and applying specialized and evidence-based paramedicine knowledge, skills and judgment in a way which enhances the fundamental duties of that role, and which are within the Registrant's current scope of practice.
- 5. Practice hours may only be accrued while the Registrant holds a current NSRoP licence.

- 6. Practice hours must be verifiable. A registration and licencing decision-maker may require confirmation (i.e., by an employer, whether paid or volunteer).
- 7. The calculation of practice hours may include:
 - 7.1. Hours accrued in orientation, and
 - 7.2. Actual hours paid or unpaid while engaged in paramedic/EMR practice as described above.
 - 7.2.1. One hour of overtime in paramedic/EMR practice constitutes one practice hour.
- 8. Hours that shall not be included in a calculation of practice hours include:
 - 8.1. Vacation or any other type of leave,
 - 8.2. Working as another healthcare provider (RN, Counselling Therapist, LPN, Athletic Therapist, etc.)
 - 8.3. Non-paramedic/EMR first responder (i.e., firefighter); and
 - 8.4. Paramedicine education a licensed registrant attended.

PROCEDURE

9. N/A

RELATED DOCUMENTS

- 10. Regulated Health Professions Act (RHPA)
- 11. RHPA Regulations Respecting Paramedicine
- 12. Nova Scotia Regulator of Paramedicine Bylaws

DOCUMENT HISTORY (Date of Reviews. Revisions, etc.)

13. Not applicable.