London Health Sciences Centre
Southwest Ontario Regional Base Hospital Program

Procedure:	SWORBHP Advanced Care Paramedic (ACP) Consolidation	
Owner:	Education Manager, Southwest Centre for Prehospital Medicine	
Department:	Southwest Ontario Regional Base Hospital Program	
Endorsed By:	Director, Southwest Centre for Prehospital Medicine	**Endorsement Date**: April 2026
Original Effective Date:	April 2026	**Date Reviewed:** May 2026

PURPOSE

This procedure outlines the standards, requirements, and expectations governing the consolidation period for newly certified Advanced Care Paramedics (ACPs) practicing under the authorization of the Southwest Ontario Regional Base Hospital Program (SWORBHP). The consolidation process ensures that ACPs demonstrate safe, competent, and independent clinical practice in accordance with the Advanced Life Support Patient Care Standards (ALS PCS), the Basic Life Support Patient Care Standards (BLS PCS), and all applicable legislation, including Ontario Regulation 257/00 under the Ambulance Act, which governs paramedic qualifications, controlled acts delegation, and Base Hospital program responsibilities.

During consolidation, ACPs must safely perform controlled acts and advanced medical procedures as delegated by the Regional Medical Director (RMD) or designate and as defined in the ALS PCS. ACPs must maintain compliance with the **Certification Standard** (ALS PCS, Section 5) and all relevant SWORBHP policies.

Non-adherence to the requirements of this procedure will result in appropriate supportive measures—such as remediation, extension of consolidation hours, or temporary adjustment of authorization—to ensure safe and competent practice, as determined by the RMD or designate.

PROCEDURE:

1. **The Employer** shall provide written confirmation to SWORBHP at the earliest opportunity to confirm any new ACPs requiring consolidation.

2. **ACP Consolidation Initiation**
   - Once an ACP is approved to begin their consolidation, the Application Support Associate (ASA) will send the ACP an email (see Appendix A) which includes the:

     1. Consolidation requirements and due dates
     2. ACP Consolidation Form (see Appendix A)
     3. ACP Consolidation Checklist (see Appendix B)

3. **Documentation Requirement**
   - During the consolidation period, the ACP will document calls on the ACP Consolidation Form. These calls must demonstrate meaningful use of ACP-level clinical judgment and interventions. BLS calls do not meet the criteria.

4. **Midpoint Submission**
   - The ACP must submit their consolidation form to sworbhp@lhsc.on.ca at the midpoint (day 45 or 84 hours, whichever comes first).
   - The ASA will forward the consolidation form to the appropriate Local Medical Director (LMD) for a midpoint review.

     The Midpoint Review ensures the ACP is progressing appropriately toward independent practice. It includes a review of:
     • The number and type of ACP calls submitted
     • Evidence of appropriate use of ACP medical directives
     • Any early concerns noted by the preceptor or Employer
     • Any self-reports or flagged calls submitted to date

     Follow-up occurs only if concerns are identified.

5. Final Submission

- The ACP must submit their consolidation form and checklist to sworbhp@lhsc.on.ca by their assigned due date or at 164 hours, whichever comes first.
- The ASA will forward the consolidation form to the Prehospital Quality Consultant to audit the calls listed on the form and inform the ASA once these are completed.
- Once the calls have been audited, the ASA will forward the consolidation form and checklist to the appropriate LMD for final review and approval.
- All calls listed on the ACP's consolidation form will be audited, and the ASA will compile and forward to the LMD. This includes:
    - Any self-reports
    - Calls flagged for audit
    - Audit results for consolidation-form calls

6. LMD Final Review

The LMD will review the consolidation form and checklist to determine whether the criteria are met.

The LMD must assess:

6.1 Robust Call Requirement

The consolidation form includes as many as 7 or more robust ACP calls.

A robust ACP call must include:

- A patient presentation requiring ACP-level clinical judgment
- Use of at least one ACP medical directive
- Documentation demonstrating assessment, rationale, and decision-making
- Preceptor confirmation that the ACP led or contributed meaningfully

Non-robust calls include BLS only, transport only, or calls fully managed by the preceptor.

6.2 Telephone Interview Requirement

If fewer than 7 robust calls are documented, a telephone interview with the LMD is required.

The LMD telephone interview includes:

1. Purpose + introduction
2. Review of 2–3 ACP calls
3. Competency review (airway, pharmacology, complex decisions)
4. ACP self-assessment and identification of learning needs
5. Determination of next steps (approval, remediation, or additional hours).

6.3 Checklist Review

A review of the SWORBHP ACP Consolidation Checklist (Appendix B) is done to ensure there are no educational gaps.

If educational gaps are identified, the LMD may require:

- Additional consolidation hours focused on the gaps
- SWORBHP remediation (simulation, case reviews, skills refreshers)
- Additional preceptor-guided shifts
- Follow-up assessment to confirm competency

The Education Manager will coordinate required remediation and communicate expectations to the ACP and Employer.

6.4 Audit Review

A review of self-reports, calls flagged for audits, and calls identified on the consolidation form.

7. Approval

- The LMD will notify the ASA, Education Manager, and Prehospital Quality Consultant regarding approval or extension.
- If approved, the ASA updates the Paramedic Portal of Ontario and sends the Consolidation Approved email (Appendix C) to the ACP and Employer leads.

REFERENCES

Advance Life Support Patient Care Standards Version 5.4
Emergency Health Services Branch, Ministry of Health

Ambulance Act, R.S.O. 1990, c. A.19

Basic Life Support Patient Care Standards (BLS PCS)

Ontario Regulation 257/00, Ambulance Act, R.S.O. 1990, c. A. 19

Paramedic Portal of Ontario (www.paramedicportalontario.ca)

Appendix A – Consolidation Form

SWORBHP
Consolidation Form

Paramedic Information	
Full Name:	
EHS #:	
Service Employer:	
Phone Contact:	
Email:	

Consolidation Information			
Call Number	**Call Date**	**Call Type**	**Preceptor Name**

Upon completion of your consolidation, please email the completed form to: sworbhp@lhsc.on.ca

Appendix B - SWORBHP ACP Consolidation Checklist

Paramedic Information	
Full Name:	
EHS #:	
Service Employer:	
Phone Contact:	
Email:	

Preceptor Name:	

Delegated Procedures

Please review the list below and check off the topics you discussed or reviewed with your preceptor during your consolidation.

☐ 12-lead ECG acquisition and interpretation	☐ Medication administration: nebulizer
☐ AED/SAED/manual defibrillation	☐ Medication administration: oral
☐ Breech delivery	☐ Medication administration: subcutaneous injection
☐ Cardiopulmonary resuscitation	☐ Medication administration: sublingual
☐ Central vascular access device access	☐ Nasopharyngeal/nasal/pharyngeal swab
☐ Continuous positive airway pressure	☐ Nasotracheal intubation
☐ Cricothyrotomy	☐ Needle thoracostomy
☐ Delivery of neonate	☐ Orotracheal intubation
☐ Double sequential external defibrillation	☐ Patellar reduction
☐ Emergency tracheostomy reinsertion	☐ Positive pressure ventilation of newborn
☐ Endotracheal/tracheal suctioning	☐ Prolapsed cord delivery
☐ External bimanual compression of uterus	☐ Shoulder dystocia delivery
☐ External jugular venous cannulation	☐ Special event: release from care
☐ External uterine massage	☐ Supraglottic airway gastric port suctioning - to end of SGA
☐ Glucometry	☐ Supraglottic airway gastric port suctioning - to stomach
☐ Home dialysis emergency disconnect	☐ Supraglottic airway insertion
☐ Intraosseous access: adult	☐ Synchronized cardioversion
☐ Intraosseous access: pediatric	☐ Termination of resuscitation: medical
☐ Intravenous cannulation	☐ Termination of resuscitation: trauma
☐ Medication administration: buccal	☐ Transcutaneous pacing
☐ Medication administration: endotracheal tube	☐ Treat and discharge: hypoglycemia
☐ Medication administration: intramuscular injection	☐ Treat and discharge: seizure
☐ Medication administration: intranasal	☐ Treat and discharge: tachydysrhythmia
☐ Medication administration: intraosseous	☐ Umbilical cord management
☐ Medication administration: intravenous	☐ Valsalva maneuver
☐ Medication administration: metered dose inhaler	☐ Vector change defibrillation

Delegated Medications

Please review the list below and check off the medications you discussed or reviewed with your preceptor during your consolidation.

☐ 0.9% normal saline	☐ Hydroxocobalamin

☐ Acetaminophen	☐ Ibuprofen
☐ Acetylsalicylic acid	☐ Ketamine
☐ Adenosine	☐ Ketorolac
☐ Amiodarone	☐ Lidocaine
☐ Atropine	☐ Midazolam
☐ Buprenorphine/naloxone	☐ Morphine
☐ Calcium gluconate	☐ Naloxone
☐ Dexamethasone	☐ Nitroglycerin
☐ Dextrose	☐ Ondansetron
☐ Dimenhydrinate	☐ Oxytocin
☐ Diphenhydramine	☐ Salbutamol
☐ Dopamine	☐ Sodium thiosulfate
☐ Epinephrine	☐ Suboxone
☐ Fentanyl	☐ Topical antibiotic ointment
☐ Glucagon	☐ Tranexamic acid
☐ Hydrocortisone	☐ Xylometazoline spray

Are there specific medical directives and/or skills where you would benefit from additional review or hands-on practice before practicing independently as an ACP?

Do you feel confident in your ability to practice independently within your full ACP scope of practice?

☐ Yes
☐ No

If you selected "No," please describe any areas where you feel additional support or education from SWORBHP would be beneficial.

Appendix C – Email Template

From: SWORBHP Email
To: Paramedic's Work Email
Cc: SWORBHP, Education Manager, Local Medical Directive, Employer Lead(s)

Subject: SWORBHP Return to Practice - ACP Consolidation [Paramedic Name]

Hello [Paramedic Name],

Please carefully read the information and requirements outlined below regarding our consolidation process.

As a newly certified Advanced Care Paramedic (ACP), you are required to complete **168 hours of consolidation**. The maximum time allowed to complete your consolidation is 90 days. You may practice to the level of your certification and authorization only when you are partnered with a Paramedic of the same or higher level of certification and authorization who also has a minimum of six (6) months of full-time equivalent experience.

Your consolidation period commences **[DATE]**; therefore, you have until **[DATE]** to complete your consolidation.

In addition to the above, you are required to complete the **SWORBHP Consolidation Form – see attached.**

1. Use this form to track all ALS PCS calls you attend where you performed an ACP skill during your consolidation. Do not include BLS calls.

2. When completing the form, please specify, under Call Type, which medical directive you performed – e.g., cardiac ischemia, hyperkalemia.

3. Submit a copy of your form to sworbhp@lhsc.on.ca at the **halfway mark (DATE)** OR when you **reach 84 hours of consolidation**.

4. The form will be reviewed by your Local Medical Director (LMD), and follow-up will occur only if needed.

5. Once your 168 hours of consolidation are complete, please submit a final copy of your form to sworbhp@lhsc.on.ca.

6. The form will be reviewed by your LMD for approval.

7. Once your LMD approves your consolidation, **you will be notified via email that you can practice independently as an ACP.**

Thanks in advance, and please don't hesitate to contact us if you have any questions or concerns.

Sincerely,

Southwest Ontario Regional Base Hospital Program
Telephone: 1-866-544-9882
Emails: sworbhp@lhsc.on.ca