



TITLE

END OF SHIFT MANAGEMENT

SCOPE

Edmonton Zone: Emergency Medical Services
Calgary Zone: Emergency Medical Services

DOCUMENT #

SWE-EMS-06

APPROVAL AUTHORITY

Vice President and Chief Operating Officer, Clinical
Operations, Primary Care & EMS

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SPONSOR

Senior Provincial Director & Chief Paramedic,
Emergency Medical Services

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Not applicable

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NOTE: The first appearance of terms in bold in the body of this document (except titles) are defined terms – please refer to the Definitions section.

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OBJECTIVES

- To efficiently utilize available resources to facilitate timely **EMS Staff** shift changes while maintaining service delivery requirements.
- To decrease late trip overtime for EMS Staff.
- To promote an environment where EMS Staff feel safe, healthy, and valued and aligns with the *AHS Our People Strategy*.
- To use data from this initiative to inform other processes and/or programs in the best interest of patient care and EMS Staff wellness.

PRINCIPLES

- Patient care must not be compromised to accommodate shift change. As such, there may be instances in which late events require a response and results in overtime. Every reasonable effort must be made based on resource availability to reduce these occurrences.
- During events where the demand for EMS resources exceeds the available resources (example: Mass Casualty Incidents) EMS Operations Management may temporarily suspend use of this procedure in the interest of patient care.

APPLICABILITY

Compliance with this document is required by all Alberta Health Services employees, members of the medical and midwifery staffs, students, volunteers, and other persons acting on behalf of Alberta Health Services (including contracted service providers as necessary).

ELEMENTS

1. Special Considerations

- 1.1 Where a Collective Agreement varies from the provisions of the procedure, the Collective Agreement prevails.

2. Logging in to the Mobile Data Terminal at the Beginning of a Scheduled Shift

- 2.1 EMS Staff must define their scheduled end of shift time when logging in to the Mobile Data Terminal (MDT). It is the responsibility of the operational area to ensure this is entered correctly.

3. EMS Staff Expectations in the Last 30 Minutes of a Scheduled Shift

- 3.1 Within 30 minutes of shift change EMS Staff must:
 - a) Consolidate patient care with another **EMS Crew** as per the *Consolidation of Patient Care in AHS Facilities Operational Protocol*. The responsibility of consolidation must be shared as equitably as possible and reciprocated by all EMS Staff.
 - (i) Complete the patient care information exchange with the **Relief EMS Crew**. Following this, the **Off-going Unit** shall promptly clear the facility and return to their start-stop location for shift change.
 - b) Not depart the facility while remaining in Transport Arrive (TA) status. If the Off-going Unit has cleared from the scene of the assigned event after the scheduled shift end, they may consult with their responsible Supervisor or delegate to determine whether a non-recommendable out-of-service code should be applied.
 - c) Update the scheduled end-of-shift time using the MDT when changes occur from the originally planned end-of-shift time. It is the responsibility of the EMS Operational area to ensure the scheduled end-of-shift time entered in the MDT is accurate. **Units** who incur unplanned overtime do not need to update this information.
 - d) Proceed immediately to their designated start-stop location to fuel, wash and, restock the vehicle. This must be reciprocated at each shift change, ensuring that **Emergency Response Vehicles** are ready for service delivery.

- (i) When the Off-going EMS Unit is already on overtime they must place in End of Shift/Rec- End of Shift (per local guidelines) Recommendable. If they require their unit to be fueled, washed and, stocked, they shall contact their responsible Supervisor for further direction.
- e) Utilize remaining time on shift to complete outstanding patient care reports, engage in employer directed on-line learning topics and/or review employer communications.

4. EMS Staff Expectations at the Beginning of a Scheduled Shift

- 4.1 A grace period shall not be provided to check the vehicle at the beginning of a shift as this task must be completed by EMS crew finishing their regularly scheduled shift.
- 4.2 Oncoming crews must immediately sign on to the MDT at the start of the shift and be available for events/redeployment.

5. Dispatching Off-going Units

- 5.1 Metro Units must be recognized as approaching the end-of-shift by using the end-of-shift alert in CAD. This is a recommendable status in CAD and serves to inform the Emergency Communications Officer (ECO) of the unit's status only.
- 5.2 The ECO must:
 - a) Use the end-of-shift alert to inform the EMS unit recommendation during the pre-alert phase. When the Off-going unit is closest to an event, the next closest unit, with greater than 30 minutes left in their shift shall be pre-alerted in its place.
 - b) Confirm and fulfill the recommendation for Red and Purple events, upon event determination. When the Off-going unit is closest and the event type is of high acuity (Red or Purple), the ECO will dispatch the Off-going unit in addition to any pre-alerted, **Replacement Unit**.
 - c) Assign a Replacement Unit any time an Off-going Unit is dispatched.
 - d) Respond to requests for medical back up by utilizing the Select and Recommend function and consider units approaching the end-of-shift as an appropriate resource capable of responding to an event.

6. Off-going Units That are in Transport Arrive Status at a Hospital

- 6.1 If an Off-going Unit is in Transport Arrive status at a hospital, they may request a Replacement Unit from their responsible Supervisor provided:
 - a) Patient consolidation is not possible; and

- b) Facility Staff indicates it is unlikely that the patient will be admitted prior to EMS Staff's scheduled shift end.
- 6.2 The responsible Supervisor shall assess the request based on the available information and work with Dispatch to potentially assign a Replacement Unit.
- 6.3 When assigned, the Replacement Unit shall respond without use of lights and/or sirens (cold).
- 6.4 Once relief is facilitated, the Off-going Unit shall be expected to complete the patient care information exchange, promptly clear the facility, and return to their start-stop location for shift change.
- 6.5 The Off-going Unit should not depart the facility while in Transport Arrive status. If the Off-going unit has cleared from scene after the scheduled shift end, they may consult with their responsible Supervisor or delegate to determine whether a non-recommendable out-of-service code should be applied.

7. Evaluation

- 7.1 The responsible Supervisor shall review compliance with this procedure on a monthly basis using Key Performance Indicators (KPIs) against benchmarks from similar time frames within the past year. These KPI's may include but are not limited to:
 - a) End of shift overtime, related to providing in-hospital care and/or event responses;
 - b) Red/Purple Response Intervals by Number of Units Available by hour of day and day of week;
 - c) Red/Purple and Orange compliance reports;
 - d) Unit availability broken down by hour of day;
 - e) Early trip overtime;
 - f) Monitoring response times through Select and Recommend to ensure this initiative is not contributing to prolonged responses;
 - g) Destination Interval;
 - h) Transport Arrive to Clear compliance;.
 - i) Impact to Suburban Rural, Inter-Facility Transfer and contracted EMS system partners; and
 - j) Monitor the number of complaints and RLS reports that are generated and linked to end of shift times.

DEFINITIONS

Emergency Response Vehicles means an EMS Vehicle including, but not limited to, Ambulances and paramedic response units that are equipped with Emergency Warning Devices and used or intended to be used for providing emergency medical services.

EMS Crew means 2 or more EMS Staff who are involved in a particular kind of work or are working together.

EMS Staff means all AHS EMS direct delivery providers and contract service providers, including casual, part-time employees as well as volunteers of EMS.

Off-going Unit means a transport capable emergency response resources (Metro) that is in the last 30 minutes of their assigned shift.

Relief EMS Crew means the EMS Crew that takes over patient care at a facility for EMS Staff that are within 30 minutes of shift change.

Replacement Unit means a transport capable emergency response resources with over 30 minutes remaining in their shift.

Unit means an EMS transport capable emergency response resource.

REFERENCES

- Alberta Health Services Governance Documents:
 - *Additional Resource Request/End of Shift Transport Ambulance (GV-CGY-EMS-13)*
 - *Start of Shift Requirements (GV-CGY-EMS-15)*
 - *End of Shift Requirements (GV-CGY-EMS-16)*
 - *Event Interval Expectations (GV-CGY-EMS-20)*
 - *IFT Resource Deployment (GV-CGY-EMS-25IFT)*
 - *SCC System Status Management Plan - Calgary Metro (GV-DCD-031)*
 - *SCC System Status Management Plan - Edmonton Metro (GV-DCD-019)*
- Alberta Health Services Resources:
 - *Consolidation of Patient Care in AHS Facilities" Operational Protocol (Version 2.3)*
 - *Crew Change During a Call EDM -038.*
 - *Out of Service Units and End of Shift Responses EDM -028.*
 - *Our People Strategy*
- Non-Alberta Health Services Documents:
 - *The Health Sciences Association of Alberta (Paramedical Professional and Technical Employees) Collective Bargaining Agreement, April 1, 2014 to March 31, 2017*

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