1. **Policy Rationale & Purpose:**
   The EMA Licensing Board has a duty to assess “good character” and “fitness to work” as an EMA when issuing or reinstating an EMA licence. EMAs in BC have a special relationship with the members of the public, rooted in mutual trust, confidence, and respect, that is critical to effective practice.

   Considering the age and vulnerable condition of many patients and the circumstances in which and EMA provides services, a criminal record check is an integral part of the assessment of good character and fitness to work as an EMA.

   Good character and fitness to work assessments will focus on whether an applicant for a licence has acted, or there is reason to believe they are liable in the future to act:
   - in such a way that puts at risk the health, safety, and/or well-being of a patient or other member of the public;
   - in such a way that the applicant’s registration would undermine public confidence in EMAs;
   - in such a way that indicates an unwillingness to act in accordance with the Act, the Regulations, and/or the EMA Code of Ethics; and/or
   - in a dishonest manner.

   See Appendix A for a non-exhaustive list of examples of evidence of a lack of good character and examples of evidence that an applicant is not fit to work as an EMA. These are provided solely for informational purposes and are not to be taken as an indication that the existence of one or more of these circumstances will result in a finding that an applicant lacks good character or is not fit to work as an EMA.

2. **Policy Scope**
   This policy applies to all initial applicants for a BC EMA licence and all EMAs seeking to reinstate a previous licence.
3. **Policy Statement:**

**Initial Licenses and Licence Reinstatement**

To obtain an initial EMA licence, or to reinstate a previous licence in BC, all applicants must:

- Answer a series of application questions ([Appendix B](#)) and make acknowledgements and declarations ([Appendix C](#)) each time the EMA applies for a new licence, or a licence reinstatement.

- Undergo a criminal record check, paid for by the applicant, each time they apply for a new licence, or a licence reinstatement. Criminal record checks can be obtained from:
  - A local police force and/or the RCMP, or
  - Online at [Sterling Talent Solutions](#)

If an applicant’s criminal record check reveals that the applicant has had, within the last five years, one or more convictions or the applicant is currently on probation, the branch will seek further information from the applicant to determine if the charges were related to drugs, sexual assault, other violence, theft, fraud, weapons, criminal negligence, or any other serious criminal activity. If so, the applicant will be:
  - asked to supply three (3) character references, and
  - given the opportunity to present their case, including evidence/details of rehabilitation, in a written submission to the Registrar.

The Registrar will review the results of the criminal record check, the answers to the application questions, and any additional submissions or evidence that the applicant may have provided in relation to the criminal record check. In doing so, the Registrar will consider the following factors:

- The applicant’s age at the time of the action(s) in question
- The recency of the action(s) in question
- The reliability of the information
- The number of action(s) in question
- The severity of the action(s) in question
- Any factors underlying the conduct (i.e. health issues)
- Evidence of
  - Rehabilitation
  - Positive social contribution since the action(s) in question
- The applicant’s candour during the application process
- Any omission or misrepresentation of material during the application process
- The relevance of the action(s) in question to the practice of an EMA
- The applicant’s competence to practice as an EMA

If the Registrar determines that the applicant may lack good character or may not be fit to work as an EMA, the file will be forwarded to the Board for review and the applicant will be given the opportunity to provide a written submission to the Board to present their case. When reviewing the applicant’s file, the Board will consider the factors noted above and any written submissions provided by the applicant and make a determination of whether the applicant lacks good character and/or is not fit to work as an EMA.
4. Legal Authority:
   Emergency Medical Assistants Regulation

5. Key Stakeholders:
   • The public of BC
   • Applicants for an EMA licence in BC

6. Resources:

   Reviewed by the EMA Licensing Board on: April 7, 2020

   Approved:

   [Signature]

   Date approved: April 7, 2020

   Drafted by: Kim Fiege
Appendix A

Examples of evidence of a lack of good character and evidence that an applicant is not fit to work as an EMA include but are not limited to:

- Charges or findings of guilt related to conduct involving dishonesty, violence, or breach of public trust
- Academic penalties, findings or actions of any kind made or taken by an academic institution arising from academic misconduct or unprofessional behaviour;
- Conduct that demonstrates disregard for honesty, integrity and trustworthiness, including providing inaccurate, untruthful or misleading information in the application for registration and/or licensure.
- Behaviour which demonstrates a lack of respect for others, including conduct which demeans others based on sex, race or colour, religious beliefs, or any prohibited ground of discrimination pursuant to the BC Human Rights Code;
- Disciplinary findings made by a regulatory authority in another jurisdiction based upon incompetence, unprofessional or unethical behaviour;
- A physical or mental disability, condition or disorder which would impair the applicant’s ability to practice safely and competently, or which, if left untreated, would impair the applicant’s ability to practice safely and competently.
- A termination or suspension of prior employment for alleged cause;
- A denial of registration and/or licensure in another jurisdiction based on failure to meet the good character requirement.
Appendix B

APPLICATION QUESTIONS

When completing the questions that follow, the applicant should read the questions carefully and answer the questions truthfully. If the applicant has any questions regarding how to respond, they are strongly encouraged to contact the Branch for clarification. Should the applicant provide any inaccurate, false or misleading information or omit any required information, their application may be immediately cancelled, and the Board may use this information when making a determination of good character on future applications.

- Have you been convicted of a criminal offence by a court in, or out of, Canada? Yes/No
- Are you currently under investigation by any health profession registration/licensing authority in Canada? Yes/No
- Have you ever been disciplined by a registration/licensing authority for any regulated health occupation/profession in or out of Canada? Yes/No
- Have you ever had any conditions and/or restrictions on any licence issued by any registration/licensing authority for any health occupation/profession in or out of Canada? Yes/No
- Have you ever been denied or had revoked any registration, licence, or permit with another regulated health occupation/profession, in or out of Canada? Yes/No
- If you responded with “yes” to any of the questions above, please provide a brief description of what occurred in the space provided.
- If you responded with “yes” to any of the questions above, you are required to provide official documentation such as court or regulatory authority documentation, etc. Please indicate whether you will be uploading this official documentation with your application. Yes/No/N/A
- Do you currently hold a licence with any regulated health profession (other than emergency health services) in Canada? Yes/No
- Please indicate which province(s) - Checkboxes listing provinces and territories
- Please indicate which health profession(s). – Fill in Box
- Do you currently hold a licence with any regulated health profession (other than emergency health services) outside of Canada? Yes/No
- Please indicate which health profession(s). – Fill in Box
- Please indicate which country(s) – Fill in Box
- Do you currently hold a licence with another emergency health services or paramedic regulator in Canada? Yes/No
- Please indicate which province(s) - Checkboxes listing provinces and territories
- Do you currently hold a licence with another emergency health services or paramedic regulator outside of Canada? Yes/No
- Please indicate which country(s) – Fill in Box
ACKNOWLEDGEMENTS AND DECLARATIONS

As an applicant to the Board, I acknowledge that:

- Email is the primary communications means utilized by the Board and as such, it is my responsibility to monitor, and respond to, emails from the Board. Any evidence the Board possesses of an email that was sent to me by the Board serves as sufficient evidence that I have received the same email communication from the Board. Failure on my part to respond to any communication from the Board that results in a delay in the processing of my application is my responsibility;
- I am responsible for ensuring that the Board receives my completed application which includes all supporting documentation requested by the Board;
- It is not the Board’s responsibility to ensure that it receives all the documentation required for my application to be considered complete;
- I am legally obligated under the EMA regulation to ensure my contact information with the Board is always updated. Failure on my part to make necessary changes to my contact information may result in my file being forwarded to the Board for disciplinary action;
- I have read and understood all the questions presented in this application and responded to them accurately and completely.

I also hereby acknowledge that the information I have provided is true and valid and if it should be determined by the Board that I have provided any inaccurate, false or misleading information or omitted any required information, my application may be immediately cancelled, and the Board may use this information when making a determination of good character on future applications. I fully understand that the Board has the authority to deny my application for registration and/or licensure based upon the information I have provided. I also acknowledge and agree that by submitting this document electronically and typing/inserting my name below it is equivalent to my original ink signature.