

**June 20, 2022**

**EMALB Position Statement on EMA Conduct in Crisis**

The Emergency Medical Assistants Licensing Board (the Board) was created to ensure that Emergency Medical Assistants (EMAs) perform their duties with competence and conduct in accordance with regulated standards regarding patient care and safety. The Board operates with a mandate to always act in the best interest of the public.

With ongoing pressures from the opioid crisis and the management of pandemic/endemic infectious disease coupled with a growing and aging population, the demands on all our health and public safety systems have never been higher. Extraordinary events such as wildfires and volatile weather events can severely tax the ability of public safety systems to meet the surging demand. The last few years have shown a pattern of these events occurring with increased frequency and greater intensity.

When our public safety systems are pushed to the edge by unprecedented events, front line responders that include our registered EMAs are sometimes left without the support for the patient that our EMS and healthcare systems normally provide.

These extraordinary situations create crises that can put EMAs in the position of dealing with severe resource limitations, few patient management options and significant moral distress. As previous events have demonstrated, EMAs may find themselves dealing with an overwhelming volume of critical situations, large delays in accessing patients in need and few options to manage those patients.

When reviewing the actions of an EMA in the course of their duties, the EMALB must evaluate those actions within the framework of the Emergency Medical Assistants Regulation (the Regulation). The wording of the Regulation is quite prescriptive and allows for little deviation in practice or patient management options for the various levels of EMA licensure.

The Board recognizes that extraordinary crisis situations present challenges often not anticipated in regulatory language. The Board maintains awareness of how institutional constraints and resource limitations affect individual EMA practice. In evaluating any situation, the Board must consider not only the actions of the EMA but also all contributing or mitigating factors. The Board's assessment of any given EMA's clinical care is not based on a standard of perfection, but rather on the standard of care that might reasonably be applied by an equally licensed colleague in similar circumstances. The Board would not have an expectation of an EMA to provide care which is unavailable or impracticable due to resource limitations. However, the Board does expect that an EMA, within those resource constraints, do the best they can for the patient and act reasonably under such circumstances.

The EMA code of ethics begins with the first clause that the EMA *must consider, above all, the well-being of the patient in the exercise of their duties and responsibilities*. In accordance with our own mandate, the Board keeps this ethical code in mind, first and foremost, when called upon to evaluate the actions and intent of any EMA operating in an extraordinary crisis situation that critically stresses the capacity of the public safety system.

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