

Guidance For Crewing of Newly Qualified Paramedics.

Newly Qualified Paramedics (NQPs) have completed their Paramedic education and are registered with the Health and Care Professions Council (HCPC).

To support their transition from student to confident and capable, registered health professional in their first year of practice they complete a development program. They are supported by other health care professionals to develop their confidence, explore their values and behaviours, and increase their knowledge and skills. In the Scottish Ambulance Service (SAS), this is currently a program over 12-18 months supported by other Paramedics. This program is currently under review.

During the first 6 months, the NQP should work with another experienced Paramedic or registered professional. In the second 6 months of the program they should work with any qualified member of staff

It is recognised that there may be occasions when it is not been possible to crew a NQP with the appropriate member of staff on their program. In these exceptional circumstances, the following principles should be followed:

1. All operational swaps and reorganisations have been exhausted to crew the NQP with the appropriate staff member.
2. NQPs should be crewed with the next possible level of qualified staff, in this order of preference:
 - Qualified Technician (Including a Dip HE Student)
 - Another NQP who has completed their first six months with the Service
 - Another NQP in their first six months with the Service
 - VQ level 4 Technician
 - D2 Driver/ACA*
 - Emergency Driver (SFRS, etc.)*
 - Military Driver*

* Consideration should be given to NQPs in their early stages of practice (first six months) being used for lower acuity calls if they are crewed with a D2/ACA/SFRS/Military Driver

3. NQPs should work within their scope of practice in which they have knowledge, skills and experience to practice lawfully, safely and effectively, in a way that meets set standards and does not pose any danger to the public or them as a registrant. This scope of practice aligns with their clinical education, position within the organisation and operational guidelines and procedures. NQPs must know the limits of their practice and when to seek advice and/or refer to another professional¹. Working within the:
 - UK Clinical Practice Guidelines (JRCALC)
 - SAS Clinical Guidelines
 - SAS Scope of Practice Framework
 - Health & Care Professions Council (HCPC) Standards of Conduct, Performance and Ethics
 - Health & Care Professions Council Standards of Proficiency

4. NQPs should not discharge on scene, or PLE (Pronounce Life Extinct) once CPR has commenced, without professional-to-professional guidance from a suitably experienced Paramedic or Doctor. If choosing alternative pathways, or where a professional-to-professional discussion has taken place, this should be robustly documented in the Electronic Patient Report Form including points of discussion, agreed pathway and who was involved in the discussion.

5. Local arrangements should be identified and communicated to the NQP to provide them with remote clinical support to allow real time clinical decision making. This could be through another Paramedic on shift, via the Clinical Team Leader, or (in collaboration with the ACC clinical manager) a control room clinician.

¹ SAS National Clinical Bulletin 001/2022 – Clinical Decision Making Framework 2022

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