

SPECIALIST PRACTITIONER POLICY AND PROCEDURES

DOCUMENT INFORMATION 2 1. SCOPE OF THE POLICY 3 2. POLICY STATEMENT 3 3. ACCOUNTABILITY 3 4. SPECIALIST PRACTITIONER DUTIES 4 5. RECRUITMENT 4 6. SCOPE OF SPECIALIST PRACTITIONER PRACTICE 4

PATIENT ASSESSMENT, DIAGNOSIS, TREATMENT AND REFERRAL......5

EDUCATION AND PERSONAL DEVELOPMENT......7

11. MONITORING.......7 12. OTHER RELATED DOCUMENTS7

DOCUMENT INFORMATION

TABLE OF CONTENTS

7. 8.

9.

10.

Author: John Ayling on behalf of the SP Management Team

Original Author: Mark Ainsworth-Smith, Consultant Pre-Hospital Care Practitioner

Edited & Reviewed by: Karen Skillicorn-Aston, Clinical governance Lead

Consultation & Approval:

Staff Consultation Process: (21 days) ends:

Clinical Review Group

This document replaces: Nil

Notification of Policy / Strategy Release:

- All Recipients e-mail:
- Staff Notice Boards
- Intranet/Hub
- SCAS Internet

Original Date of Issue: November 2020

Next Review: January 2025

Version: v12

SOUTH CENTRAL AMBULANCE SERVICE NHS FOUNDATION TRUST SPECIALIST PRACTITIONER POLICY AND PROCEDURES

1. SCOPE OF THE POLICY

1.1 The scope of this policy is to formalise the arrangements within South Central Ambulance Service NHS Foundation Trust for the recruitment, training, clinical practice and monitoring of the Trust's Specialist Practitioners.

2. POLICY STATEMENT

2.1 South Central Ambulance Service NHS Foundation Trust is committed to the development of the role of the Specialist Practitioner as a model to deliver health care to the patient as outlined in Urgent and Emergency Care Review (Keogh Report 2013). The Trust is committed to providing a modern and mobile health care service, meeting the needs of our service users 'Right Care First Time'. The trust provides professional and safe care for patients by providing the excellent education, clinical practice and monitoring, in order to maintain and improve the role of Specialist Practitioners.

3. ACCOUNTABILITY

3.1 Accountability for compliance with this policy is ultimately with the Trusts Chief Executive; however, this can be devolved within the Trust Board to a clinical director appropriate.

3.2 Executive Director of Patient Care and Service Transformation

The Executive Director of Patient Care and Service Transformation has Board level responsibility for compliance of this policy within South Central Ambulance Service NHS Trust. The Executive Director of Patient Care and Service Transformation also chairs the Patient Safety Group with all Medical Directors as membership which forms the Committee with responsibility for ensuring that this policy represents best practice.

3.3 Assistant Director of Operations/ Head of Specialist Practice

The Senior Operations Manager has management responsibility for ensuring this policy is implemented throughout the Trust. The role also has a co-ordinating function between departments to ensure the policy is embedded into practice.

3.4 **Specialist Practitioner Managers**

The Specialist Practitioner Managers have a day to day management responsibility for ensuring this policy is implemented throughout the trust. The role also has a coordinating function between departments to ensure the policy is embedded into practice.

3.5 Patient Safety

The Patient Safety Group will monitor the effectiveness of this policy and produce a gap analysis and action plans for the Quality and Safety Committee to resolve any highlighted issues.

3.6 Quality and Safety Committee

The Quality & Safety Committee will monitor the implementation and effectiveness of the policy via the Patient Safety Group, and the implementation of action plans, within the Trust's clinical governance structure.

4. SPECIALIST PRACTITIONER DUTIES

4.1 **Specialist Practitioner**

A Specialist Practitioner may be defined as a healthcare professional who works to a medical model, with the attitude, skills and knowledge base to deliver holistic care and treatment within the pre-hospital, primary and acute care settings with a broadly defined level of autonomy.

The settings where a Specialist Practitioner could be employed include:

- Walk-in-Centres
- General Practice
- Primary Care
- Out-of-Hours provision
- SCAS Frontline Ambulance provision
- SCAS Clinical Co-ordination Centre
- Collaborative HCP Projects such as the Falls and Frailty Service
- Custody Suites
- Emergency Departments
- Urgent Care Centres
- Night-time Economy Projects

Specialist Practitioners are jointly answerable to their immediate line manager (Specialist PracticeTeam Leader) and their Specialist Practitioner Manager.

5. RECRUITMENT

- 5.1 Specialist Practitioners are recruited in line with the Trusts recruitment policy and procedures.
- 5.2 Specialist Practitioners may be selected from either a Paramedic or Emergency Nurse background but must have successfully achieved an approved level 7 qualification.
- 5.3 It is the aim of SCAS to ensure that all new Specialist Practitioners employed within the Trust will have, or be working towards, a Specialist Practitioner masters level qualification. This is in line with the College of Paramedics (CoP), Health Education England (HEE) and NHS England recommendations for Specialist Practitioners. Many existing Specialist Practitioners will hold equivalent qualifications through other recognised accreditation schemes, which are also appropriate to their role.

6. SCOPE OF SPECIALIST PRACTITIONER PRACTICE

6.1 The Specialist Practitioner will:

- Work across current and future organisational and professional boundaries
- Deliver care that is patient focused
- Deliver the most appropriate care in the most appropriate place and/or ensure that the patient is referred to the most appropriate health and social care professional within the context of individual patient characteristics, background and circumstances.
- Deliver care to patients in the most convenient and appropriate place for the patient
- Provide an appropriate pathway for the provision of unscheduled care
- Provide appropriate healthcare advice to support shared decision making and a person-centred approach, working in partnership with patients, families and communities
- Use interactions with patients to encourage changes in their behaviour that can have a positive impact on their health and wellbeing
- Undertake physical examinations based on a whole systems approach, taking a full and appropriate patient history using a medical model
- Assess the social and mental status of a patient
- Treat less serious illness and injury in pre-hospital, primary care and acute settings
- Request appropriate investigations, including pathological and radiological investigations, in accordance with established procedures.
- Ensure fewer inter-professional transfers for patients by drawing on the expertise of all members of the multi-disciplinary team and social support to meet people's best interests and optimise the integration of their care.
- Administer and supply medication in line with local Patient Group Directions.
- 6.2 The scope of practice reflecting an educational pathway in Appendix 1 lists the skills sets and learning outcomes in more detail.

7. PATIENT ASSESSMENT, DIAGNOSIS, TREATMENT AND REFERRAL

- 7.1 All Specialist Practitioners within the Trust will work in accordance of the professional standards of their registering body (NMC/HCPC)
- 7.2 Decision making, patient assessment, diagnosis, treatment and referrals are all associated with evidence based practice, in conjunction with a number of national guidelines and frameworks (NICE, JRCALC, BTS, RCGP, RCEM etc).
- 7.3 Practise in accordance with legislation, SCAS policies and procedures relevant to Safeguarding, Speaking Up, Equality, Diversity and Human Rights, Consent and Mental Capacity, Children and Young People, Duties of Candour and Care, Confidentiality and Caldicott Principles, Data protection and Information Governance, wider healthcare regulation
- 7.4 Specialist Practitioners will apply a range of physical assessment techniques appropriately, systematically and effectively. Exercise clinical judgement and select the most likely diagnosis in relation to all information obtained.
- 7.5 Specialist Practitioners will record information gathered concisely and accurately for clinical management, and in compliance with local protocols, legal and professional requirements for confidentiality, data protection and information governance

- 7.6 Specialist Practitioners will adapt verbal and non-verbal communication styles in ways that are empathetic and responsive to people's communication and language needs and preferences, making use of accessible information as needed.
- 7.7 Specialist Practitioners will adapt clinical practice to non-face to face practice environments e.g. phone or video consultation.
- 7.8 Specialist Practitioners will respect and draw on the full range of colleagues' knowledge and expertise within the multi-disciplinary team to serve peoples' best interests, signposting where appropriate.

8. MEDICINE ARRANGEMENTS AND PHARMACOTHERAPY

8.1 **Medicine Arrangements**

Specialist Practitioners have a responsibility to maintain their competency in the management of medicines and to ensure their familiarity with changes to therapeutic guidelines as they are adopted by the Trust. Staff will adhere to the Trust Medicines Management Policy and any relevant policy applicable within a rotational placement environment

8.2 Specific arrangements for Specialist Practitioners

There are 3 arrangements for Specialist Practitioners working within SCAS:

- Paramedic Specialist Practitioner's registered with the HCPC use the AACE / JRCALC guidelines. In addition, they may, after additional training and after being deemed competent (see PGD exam), administer and supply medication according to the Specialist Practitioner Patient Group Directions within the Trust.
- For Nurse's registered with the NMC but without the Independent prescribing qualification, they may, after being deemed competent, use the Specialist Practitioner Patient Group Directions used within the Trust.
- For Nurses or Paramedics that have successfully completed the Independent Prescribing Course they may prescribe according to the Trust guidelines set out in the Medicines Management Policy.

8.3 Assessment Process

All Specialist Practitioners working within SCAS receive training on the use of Patient Group Directions to ensure that only fully competent, qualified and trained professionals operate within the directions. The training is performed during the Specialist Practitioner's training course, with ongoing training and in a bi-yearly review. Each Specialist Practitioner will be assessed as competent by means of a PGD exam (see evidence).

9. PROCESS FOR COLLABORATION

- 9.1 Specialist Practitioner work in collaboration with other healthcare providers in environments such as detailed in section 4.1.
- 9.2 Specialist Practitioners are expected to role model the values of their organisation/place of work, demonstrating a person-centred approach to service

delivery and development.

9.3 The Specialist Practitioner Manager (SPM) attends Emergency Care Network meetings and other specialist care networks to establish appropriate patient pathways and foster new ways of working which benefit service users. The SPM has close links with the Clinical Pathway Team to ensure collaboration takes place wherever possible.

10. EDUCATION AND PERSONAL DEVELOPMENT

- 10.1 Specialist Practitioners are expected to engage in self-directed learning and critically reflect upon their own practice to maximise clinical skills and knowledge
- 10.2 SCAS will commit to providing circa 40 hours of Clinical Training time per year, Specialist Practitioners are required to keep a recorded of their training and present it for audit when requested Training is self-directed and may include but is not limited to seminars, courses, research, webinars, peer review and shift reporting.

11. MONITORING

- 11.1 For the monitoring of Specialist Practitioners competence, there will be regular assessments.

 These assessments will include:
 - Direct observation of the Specialist Practitioners communication and interpersonal skills
 - Direct observation of the Specialist Practitioners clinical and procedural skills in practice
 - Evidence provided by other healthcare practitioners regarding the performance of the Specialist Practitioners
 - Direct questioning by an assessor to check understanding of patient centred care, health and safety procedures, technological interventions and interpretation of results, in addition to demonstrating core knowledge.
 - A portfolio of evidence maintained by the Specialist Practitioners. This will include a record of progress as well as reflective accounts of critical learning encounters. This will inform the assessment process and its outcome.
 - Specialist Practitioners will be able to access their own notes and Portfolio by means of the Trust's CARS skills analysis system.
 - Ongoing, and random examination of individual case notes which will be evaluated using a tool devised specifically for the assessment of clinical notes constructed around the medical model
 - SCAS wide and local audit performed to assess the effectiveness of Specialist Practitioners initiatives within the region.

12. OTHER RELATED DOCUMENTS

- 1. South Central Ambulance Service NHS Trust Risk Management Policy
- 2. Competence and Curriculum Framework for the Advanced Clinical Practitioners
- 3. Integrated Urgent Care / NHS 111 Workforce blueprint (HEE & NHSE)
- 4. South Central Ambulance Service NHS Trust Medicines Management Policy
- 5. CSPP 4 SCAS Patient Clinical Record Completion Policy
- 6. South Central Ambulance Service NHS Trust Patient advice leaflets
- 7. CSPP 7 SCAS Care Pathway Policy