

## **APPROVAL & ACCREDITATION PROCEDURE FOR NEW BASICS RESPONDERS**

### **1.0 Introduction**

BASICS South West is committed to increasingly the availability of appropriately trained and experienced volunteer immediate care clinicians across the South West Ambulance Service footprint, to support and enhance the organisation's capabilities. Increasingly, doctors are coming to immediate care work from a range of disciplines, specialities and clinical backgrounds, the diversity of which ensures a positive, complementary blend of experience and knowledge 'at scene'.

There are a range of challenges and complexities of working in the immediate care setting. As well as a sound clinical knowledge-base specific to the immediate care arena, there are wider inter-professional and decision-making skills required to practice effectively as an autonomous immediate care practitioner.

Whilst extremely rewarding work, it is likely that individual practitioners will need to invest considerable time and effort into the on-going governance processes and continuous personal development activities that a volunteering role in the immediate care setting will entail. In order to ensure that (a) individuals have a realistic appreciation of the demands and requirements of the role and (b) high standards of clinical care and governance are upheld, it is important to define a baseline of attributes required by all-comers embarking on this aspect of their career. Until these standards are achieved, it is inappropriate for new doctors to begin practicing as a lone clinician in this clinical environment.

### **2.0 The Approval Process**

The process for approving new Medical Responders has been agreed by the BASICS South West Committee in conjunction with the Medical Director of the South West Ambulance Service Foundation Trust. It seeks to balance the operational needs of the service and the local population with the individual clinician's skills, experiences and volunteering aspirations. It reflects, and should be read in conjunction with, the Honorary Contract. That process is as follows:

- Prospective doctors are likely to declare their interest via a variety of routes e.g. other BASICS Drs, the Medical Director, Community Engagement Officers etc. These expressions of interest should be forwarded to the head of the individual's local BASICS Scheme in the first instance.
- The prospective responder would be expected to make contact with the local scheme, and demonstrate a genuine commitment to a voluntary immediate care role by regularly attending local scheme meetings and participating in scheme development activities.
- The local scheme undertakes to provide advice on professional development and, where practicable, opportunities for supervised clinical experience (e.g. observer shifts on call-outs where appropriate).

- The prospective responder undertakes to achieve the necessary knowledge/skills as detailed below under the 'Minimum Requirements for Approval' during this time.
- If after this introductory period (typically 6 to 12 months, but potentially significantly longer) the scheme agrees that to support the individual's application for an independent responding immediate care role, the scheme will submit an application to the BASICS South West Committee for consideration as outlined below.
- In making this application, the scheme will need to agree that (a) there are adequate scheme-level support mechanisms in place to support the potential new responder through the initial process (b) there is a local need, considering where the individual works/lives (c) the scheme can financially support a new responder to become (and stay) active, through the provision of any non-SWAST funded necessary items or training.
- The BASICS South West committee will provide an objective assessment of the evidence submitted with the application, which should include:
  - A completed BASICS South West New Responder application form, with certificates where indicated;
  - An up-to-date curriculum vitae;
  - A brief development summary highlighting relevant skills, experience or courses which the individual has undertaken, perhaps as part of their introductory period;
  - A written reference from the Chairperson of the local scheme, particularly pertaining to the temperament, communication, teamwork and other non-technical skills as relevant to their suitability for work in the field. This should expressly comment on attendance at (and contribution to) the scheme's local CPD activities.
  - A written reference from a current (or most recent) employer, supporting the clinician to embark on voluntary immediate care activities.
- The committee meeting will comprise, as a minimum, representatives of at least 2 schemes and a representative of SWAST's Community Responder Team.
- If the committee agrees the doctor is ready for independent responding and the need exists, they will support the application and forward it to the Medical Director for final consideration and processing.
- If the committee feels the doctor is not yet ready for independent responding, the reasons will be sent confidentially to the doctor with development suggestions on how to improve their application.
- The committee will summarise their recommendation(s) on the relevant section of the BASICS South West New Responder application form.
- The committee may, by exception, make recommendations to the Medical Director that would help support an applicant with 'genuine potential' for a role other than independent responding (for example, a period of directly supervised and accompanied practice), or for a restricted role that serves a genuine, specific local need (for example, a reduced scope of practice role for an individual in a very remote or isolated area). These cases will be exceptional, will need to be accompanied by a fully reasoned case and stipulations, and will remain at the Medical Director's sole discretion. Such cases will, by definition, need to have a clear review plan. This outcome is not intended to be used routinely for individuals who do not meet the current requirements for anything other than exceptional reasons.

### **3.0 Process following BASICS South West Committee Approval**

Following written approval by the Medical Director, the new responder will be required to attend a face-to-face meeting with representatives of HR and/or the Responder Department – arranged by mutual convenience – in order to complete the necessary SWAST HR checks and processes for the preparation an Honorary Contract. This meeting will include, amongst other items, confirmation of identity documents, driving licence and vehicle document checks, GMC checks, occupational health declarations, DBS checks, and completion of the necessary paperwork for SWAST ID badge/IT account set-up etc. This meeting will also serve as an opportunity for the new clinician to meet with key members of the Responder Department and Medical Directorate.

Once the above checks are complete, a 'go live' meeting will be arranged whereby the new responder can collect all SWAST issued clinical equipment, PPE, pagers / radios, and an ID badge, and receive a full briefing regarding processes such as 'booking on', liaising with the Response Desk etc. Only once this meeting has taken place, and once the new responder has confirmed that: (1) a full set of kit as per the 'minimum equipment list' is held (2) any vehicle inspections have been completed (3) access to all current versions of relevant policies and clinical guidelines has been achieved, will the responder's call-sign be activated on the system.

### **4.0 Minimum Requirements for Approval as a BASICS South West Responding Doctor:**

- Full GMC registration and valid licence to practice;
- Hold a Certificate of Completion of specialist training (CCT) in a recognised specialism (including General Practice) or equivalent certificate permitting fully independent practice in a recognised specialism (e.g. a CESR);
  - In exceptional circumstances, the Committee may consider an application from an individual who does not hold one of the above, but who can demonstrate significant relevant clinical experience commensurate with the holder of such certification. In these circumstances, the Committee will likely need to seek extensive assurances regarding autonomous practice capabilities, and may need to draw up personalised arrangements.
- Minimum clinical qualifications consisting of either of the following:
  - Full, current accreditation with the British Association for Immediate Care (BASICS)
  - A practitioner with a pre-hospital emergency qualification (to at least the level of the Pre-Hospital Emergency Care Certificate of the Royal college of Surgeons of Edinburgh, or equivalent) who is working towards accreditation with BASICS, within an accredited local immediate care scheme, and with a nominated mentor approved by the Medical Director.
- Active, recent and sustained engagement in the clinical governance programme of one of the immediate care schemes within BASICS South West;
- A realistic appreciation of the role of volunteering in the immediate care arena within the SWAST footprint, evidenced through a least one observer /ride-along shift with an active BASICS Doctor (or other appropriate SWAST clinician, such as an Operational Officer), and ideally a visit to one of the Clinical Hubs.

- Appropriate interpersonal and non-technical skills for work within this field, evidenced via a supportive Scheme reference and a supportive reference from a current (or most recent) employer;
- IAM or RoSPA gold/silver pass to promote safer driving while responding; (a prerequisite to attend a blue light driving course)

## 5.0 Document details

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