

Principles of the Newly Qualified Paramedic Consolidation of Learning Programme

1. Aims

To provide a structured programme to properly integrate and support Newly Qualified Paramedics into the ambulance service workplace, enabling time to consistently apply academic knowledge, skills and placement experience into confident practice.

This programme aims to support the newly qualified paramedic in their transition to an effective, confident and fully autonomous clinician, providing the foundations for a journey of lifelong learning.

2. Scope

A Consolidation of Learning period will apply to all Newly Qualified Paramedics who are recruited into one of the ten ambulance Trusts in England (and ambulance services at Isle of Wight NHS Trust) as a paramedic on or after 1 September 2016. These staff will be expected to remain in pay band 5 in their consolidation role for a maximum period of two years.

Employers will:	Newly qualified paramedics will:
<ul style="list-style-type: none"> • Provide a local induction 	<ul style="list-style-type: none"> • Reflect on their clinical practice and behaviours and seek guidance when required
<ul style="list-style-type: none"> • Provide a local preceptorship programme, including a committed period of time working alongside an experienced paramedic to provide peer support 	<ul style="list-style-type: none"> • Develop a portfolio of practice in line with HCPC guidance to demonstrate competence against the programme themes
<ul style="list-style-type: none"> • Provide a dedicated clinical mentor or practice educator (or equivalent person) who is suitably qualified to provide further support and guidance as necessary as required by the NQP 	<ul style="list-style-type: none"> • Be open to constructive feedback and take steps to develop practice in response to feedback
<ul style="list-style-type: none"> • Undertake a formal review of progress against the programme themes and expectations set at a minimum of every 6 months 	<ul style="list-style-type: none"> • Maintain a good relationship with their mentor and others engaged in their learning
<ul style="list-style-type: none"> • Work with NQPs to identify and create individual development plans to support required areas of development 	<ul style="list-style-type: none"> • Be prepared to raise constructive concerns regarding progress, support or experience
<ul style="list-style-type: none"> • Provide constructive feedback 	<ul style="list-style-type: none"> • Behave as an ambassador for the trust displaying trust values and professionalism in all engagements
<ul style="list-style-type: none"> • Provide required input to develop necessary skills, required locally or to support achievement of competences 	<ul style="list-style-type: none"> • Work within scope of practice and limits of professional competence

<ul style="list-style-type: none"> Identify gaps in learning and seek to provide experiences to enable application of all skills 	<ul style="list-style-type: none"> Engage with CPD opportunities
<ul style="list-style-type: none"> Provide access to clinical support on each shift to support decision making 	<ul style="list-style-type: none"> Take ownership of their personal development journey
<ul style="list-style-type: none"> Provide access to health and wellbeing support 	<ul style="list-style-type: none"> Undertake Trust SME training
	<ul style="list-style-type: none"> Attend progress review sessions
	<ul style="list-style-type: none"> Exercise duty of candour, be open when mistakes may have been made (accountability culture),

3. Principles of Programme

- 3.1. NQPs are registered practitioners in their own right working to HCPC standards.
- 3.2. This programme will ordinarily be for a maximum period of 24 months. Completion of the programme will be conditional upon individuals demonstrating they have the requisite knowledge, skills/competencies for their role and that they have demonstrated the required level of performance and delivery during the programme period, as determined locally.
- 3.3. Ambulance service employers commit to deliver the Newly Qualified Paramedic Consolidation of Learning programme, adhering to the national principles set out in this framework. This programme needs to be meaningful, deliverable and transparent and it must have the support and buy in from all departments within each Trust to ensure it is a success.
- 3.4. The programme is designed to empower the individual to develop their practice and to demonstrate their transition from novice to expert. Ideally, this will be front loaded with 300 hours period of supervised support working alongside another experienced paramedic at the outset.
- 3.5. The employer will commit to providing preceptorship, clinical support and review progress. The NQP will do their part to participate fully in the process. The employer will create an environment in which the NQP can practice their skills safely. The operational line manager will create the conditions in which the NQP can flourish.
- 3.6. The programme will provide thematic milestones, which describe the anticipated progress of the NQP over the 24 month period, and reviews will be undertaken at a minimum of six monthly intervals. The NQP will be responsible for collating evidence against the thematic milestones and completing necessary review documentation.
- 3.7. The review process and progress against milestones will be fully transferable between ambulance services. This commonality will give paramedics a 'passport to practice' and removes the need to duplicate reviews if they go to another employer.

- 3.8. The programme will be for a maximum period of 24 months, however some NQPs will have existing skills, experience and education allowing them to access an accelerated pathway with a clearly defined set of guidelines. This is currently in development.
- 3.9. Stages of the process will be fully documented and transparent so that individuals and employers can be assured regarding the consistent application of the programme. The programme needs to be meaningful and patient facing. Having the right preceptors, practice educators and line management support will be a key element of ensuring success for the NQP. The emphasis is on a supportive period not a pass/fail testing period.
- 3.10. Every attempt should be made to support the NQP. They should be working under a high level of support in the first part of the programme moving to greater autonomy later in the programme, but always having reference back to an experienced practitioner.
- 3.11. The transition from B5 NQP to B6 Paramedic will be automatic unless in exceptional circumstances where issues are being dealt with under formal capability procedures and highlighted to the NQP in advance. Such issues should be identified early on and progressed within the consolidation of learning period. Trust procedures should not commence at the end of the period.

4. Review process

- 4.1. Progress reviews will happen at regular intervals; e.g. 6, 12, 18 and 24 months with a suitable person e.g. line manager, clinical supervisor, mentor etc.

5. Roles of Trust education and leadership teams in the development of the NQP

5.1. Education team (preceptors, practice educators)

Provide learning facilities and environment for 'safe' practice of skills; library services; simulation; skills refresher; facilitate CPD events; review consistency and quality of review/portfolio documents; facilities available outside of 'office' hours; celebrating good practice; use of technologies to enhance learning.

5.2. Operational/Line manager

Provide an environment in which the NQP can flourish; encourage NQP to seek opportunities for CPD; undertake timely and meaningful appraisals/PDR; be visible and available to support NQP.

5.3. Clinical lead/mentor

Provide clinical mentorship and support to NQP, supporting development of NQP through ride-outs, support and sign-off preceptorship period; provide advice and guidance on development of portfolio; early identification of additional

education/supportive needs; complete/review PDR/appraisal; assume clinical primacy during NQP ride-outs.

5.4. NQP Individual responsibility

Reflect on their clinical practice and behaviours and seek guidance when required; develop a portfolio of practice in line with HCPC guidance to demonstrate competence against the programme themes; be open to constructive feedback and take steps to develop practice in response to feedback; work within scope of practice and limits of professional competence; engage with CPD opportunities; undertake Trust statutory, mandatory and essential training and attend progress review sessions.

Exercise duty of candour, be open when mistakes may have been made (no blame culture).

Others:

5.5. Specialist Paramedic (ECP) other clinical leads (within or external to the Trust)

Resource for NQP to access to help develop their skills and confidence. Be available for discussion, shadowing, ride-outs etc.

5.6. Remote clinical support/clinical desks/clinical hubs

Decision making support for the no decision in isolation element, available via telephone 24/7 for NQP to access during shifts, whilst at scene.

Note on clinical supervision:

Clinical supervision means 'a formal process of professional support and learning which enables individual practitioners to develop knowledge and competence, assume responsibility for their own practice and enhance consumer protection and safety of care in complex clinical situations' (DH 1993).

Under clinical supervision, a newly qualified paramedic will be able to refer to a more experienced practitioner at all times.

Definition of advice and/or support:

A person undertaking this role will always have access to clinical advice and support but MUST take clinical advice and/or support from an identified source clinical support desk/hub or other Health Care Professional, whenever they consider it may be necessary to deviate from protocols, procedures, SOPs and clinical guidelines.