



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive



## Ambulance Operations SOP/Policy

### Fitness to Practice Policy

### National Ambulance Service (NAS)

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**Table of Contents:**

<b>1.0</b>	<b>Policy</b>	<b>3</b>
<b>2.0</b>	<b>Purpose</b>	<b>3</b>
<b>3.0</b>	<b>Scope</b>	<b>4</b>
<b>4.0</b>	<b>Legislation/other related policies</b>	<b>4</b>
<b>5.0</b>	<b>Glossary of Terms and Definitions</b>	<b>4</b>
<b>6.0</b>	<b>Roles and Responsibilities</b>	<b>4</b>
<b>7.0</b>	<b>Procedure/Process</b>	<b>5</b>
<b>8.0</b>	<b>Fitness to Practise Principles</b>	<b>5</b>
<b>9.0</b>	<b>Fitness to Practice Standards</b>	<b>5</b>
<b>10.0</b>	<b>Teamwork</b>	<b>6</b>
<b>11.0</b>	<b>Honesty and Integrity</b>	<b>6</b>
<b>12.0</b>	<b>Personal Wellbeing</b>	<b>7</b>
<b>13.0</b>	<b>NAS Fitness to Practice Process</b>	<b>7</b>
<b>14.0</b>	<b>Implementation Plan</b>	<b>8</b>
<b>15.0</b>	<b>Revision and Audit</b>	<b>8</b>
<b>16.0</b>	<b>References</b>	<b>8</b>
<b>17.0</b>	<b>Appendices</b>	<b>8</b>
<b>18.0</b>	<b>Revision</b>	<b>9</b>
<b>19.0</b>	<b>Signatures of approval</b>	<b>9</b>

## **1.0 POLICY**

- 1.1 Fitness to Practise means having the skills, knowledge, health and character necessary to safely and effectively undertake and complete clinical and operational duties while fulfilling the responsibilities within the scope of practise at the appropriate level.
- 1.2 Policy – NASPO000-Fitness to Practice Policy provides detailed information on the implementation of a Fitness to Practice Policy for PHECC registered staff employed by the NAS.
- 1.2 This Policy provides operational procedures for all relevant personnel on procedures that will be applied to address issues related to Fitness to Practice requirements.
- 1.3 This Policy is intended to reflect the PHECC Fitness to Practice procedures and is intended to:
  - protect the public and practitioners
  - ensure the good name of the profession and the NAS

## **2.0 PURPOSE**

- 2.1 Clarify for staff the requirement to adhere to qualities and competencies essential to professional practise and to support and guide staff who experience issues that may affect their ability to practise;
- 2.2. Provide an appropriate framework for the effective management of Fitness to Practise issues that may arise during the execution of duties on behalf of the NAS or address any issue that may occur outside of NAS duties that may impact on the execution of NAS duties.
- 2.3 To ensure a consistent approach to dealing with such issues.
- 2.3 To maintain quality standards of service for patients and practitioners.
- 2.4 To ensure alignment with the PHECC Fitness to Practice process
- 2.5 To ensure that staff understand the level of professional attitudes and behaviour required of them in the execution of their duties

## **3.0 SCOPE**

- 3.1 This Policy applies to all PHECC registered practitioners within the National Ambulance Service.

## **4.0 LEGISLATION/ OTHER RELATED POLICIES**

- NAS Management of Adverse Clinical Events Policy
- PHECC Fitness to Practice Policy

## **5.0 GLOSSARY OF TERMS AND DEFINITIONS**

PHECC – Pre Hospital Emergency Care Council

## **6.0 ROLES AND RESPONSIBILITIES**

- 6.1 It is the responsibility of Operations Performance Managers to ensure that each Manager, Supervisor and Staff member is aware of and understands this Procedure.
- 6.2 It is the responsibility of each Manager, Supervisor and Staff member to adhere to this Procedure.
- 6.3 It is the responsibility of the Education and Competency Assurance Team to ensure appropriate information is included in any related training material.

## **7.0 PROCEDURE/PROCESS**

- 7.1 NAS staff will work within the limits of their competence with regard to their respective level of registration and training. This includes seeking and accepting supervision as deemed appropriate.
- 7.2 Respect the rights of patients and their families, which includes respecting diversity and refraining from discrimination against any patient or their significant others;
- 7.3 Clearly identify themselves as NAS staff whilst providing care and ensure patients have given consent before proceeding to engage with them whenever possible.

## **8.0 FITNESS TO PRACTICE PRINCIPLES**

Four core principles underpin the NAS's Fitness to Practise Policy:

- 8.1. The primacy of the patient experience is central to the provision of care; making patient care and that of their significant others the primary concern, treating patients with respect and ensuring their autonomy, dignity and confidentiality is addressed appropriately.
- 8.2. Working with others in a spirit of mutual respect, collegiality and partnership to protect and promote the health and wellbeing of those receiving care, their families, carers and the wider community.
- 8.3. Providing a high standard of practise and care at all times.
- 8.4. Being open and honest, acting with integrity and upholding the reputation of the profession.

## **9.0 FITNESS TO PRACTICE STANDARDS**

The following standards of conduct and comporment provide the basis for determining Fitness to Practise:

- 9.1. NAS staff will:
  - 9.1.1. Work within the limits of their competence and their respective scope of practice as indicated in the Letter of Authorisation issued by the NAS Medical Director.
  - 9.1.2. Respect the rights of patients and their families, which includes respecting diversity and refraining from discrimination against any patient or their significant others.
  - 9.1.3. Having identified themselves to patients and their significant other ensure that patients have given consent before proceeding to engage with and provide care to them.
  - 9.1.4. Maintain the safety, autonomy and dignity of patients at all times.
  - 9.1.5. Respect the patients' rights to confidentiality.

## **10.0 TEAMWORK**

### **10.1 NAS staff will:**

- 10.1.1 Work in an open, positive, constructive collaborative manner with patients and their significant others, other healthcare providers and the public.
- 10.1.2 Work effectively and appropriately within a team based setting.
- 10.1.3 Be aware and respectful of the work and contributions of others in the healthcare environment.
- 10.1.4 Have a responsible attitude towards facilities, equipment, punctuality and respect for colleagues.
- 10.1.5 Demonstrate positive team working skills whilst respecting personal and professional boundaries.
- 10.1.6 Adhere to the NAS Uniform Policy in projecting team membership.

## **11.0 HONESTY AND INTEGRITY**

### **11.1 NAS staff will:**

- 11.1.1 Be honest and trustworthy in recording all patient interactions using approved methods such as PCRs/ePCRs and patient monitors etc.
- 11.1.2 Respect and uphold NAS and HSE policies.
- 11.1.3 Respect and uphold the law, and demonstrate such a position by informing their immediate Line Manager within the NAS immediately if they accrue any criminal conviction.
- 11.1.4 Engage in appropriate conduct and behaviour as a positive societal role model outside of the NAS, for example on social media or in other forms of ethical behaviour.
- 11.1.5 Take responsibility for their clinical practice and learning ensuring compliance with CPC requirements as stipulated by PHECC and/or mandated by Law.
- 11.1.6 Ensure that they possess appropriate licences to execute their duties e.g. driving or PHECC licence.

## **12.0 PERSONAL WELLBEING**

### **12.1 NAS staff will:**

- 12.1.1 Seek medical help if they have a concern about their personal health.
- 12.1.2 Not place colleagues or patients at risk because of personal health problems.
- 12.1.3 In the interest of patient safety comply with medical advice if diagnosed with a particular health problem.
- 12.1.4 Not engage in the misuse of alcohol and/or drugs, placing others at risk.
- 12.1.5 Fulfil all health immunisation requirements
- 12.1.6 Demonstrate appropriate communication with peers, patients and families, clinical colleagues and staff of the NAS.

### **13.0 NAS FITNESS TO PRACTICE PROCESS**

- 13.1 This policy is developed to clarify the requirements of the NAS obligation as a PHECC CPG approved organisation in relation to Fitness to Practice for registered practitioners.
- 13.2 The NAS recognises the primacy of the PHECC Fitness to Practice Policy and Process.
- 13.3 The NAS reserve the right to notify the PHECC of concerns in relation to the practice of a registered practitioner that fall within the guidance of this policy and/or the PHECC Fitness to Practice Policy.
- 13.4 The NAS will inform a staff member of its intention to forward an issue to PHECC for consideration by the PHECC Fitness to Practice Process.
- 13.5 This policy is not intended to replace or impede existing NAS or HSE processes e.g. Dignity at Work Policy, Disciplinary Policy and practices etc.
- 13.6 The NAS will implement this Fitness to Practice process which is reflective of the current NAS and, HSEPHECC policies. While the HSE Policy on the Management of Professional Registers does not include the PHECC Registers within the terms of its definition of professional registration the NAS will adhere to the guidance that is outlined in Section 1.2 of that HSE Policy, pending future recognition should that occur.
- 13.7 Current PHECC Fitness to Practice Processes may advise, admonish or censure a registrant as the result of a Fitness to Practice hearing therefore the NAS must address PHECC recommendations as they affect a practitioners practice. Any PHECC Fitness to Practice hearing findings that do not fall within the scope of the HSE Policy on Management of Professional Registers therefore will be considered by a NAS group to include representation of the Medical Directorate, Human Resources, Education and Competency Assurance Team and Operational Management, where appropriate and relevant. Such a group will make recommendations to the Director of NAS. Following such consideration the Director will make recommendations that are in line with Employment Law and HSE HR Guidelines.

### **14.0 IMPLEMENTATION PLAN**

- 14.1 On approval, this Policy will be circulated electronically to all Managers, Supervisors and Staff
- 14.2 This Policy will be available electronically on the NAS website for ease of retrieval and reference
- 14.3 Each AOM will ensure that the Confirmation Form is returned to NAS Headquarters to confirm document circulation to all staff.

### **15.0 REVISION AND AUDIT**

- 15.1 This Policy will remain under constant review and may be subject to change to facilitate any changes/developments in Service requirements.
- 15.2 The Workforce Support Manager will review the effectiveness of this Policy and propose amendments where deemed necessary.

**16.0 REFERENCES**

- 16.1 NAS Management of Adverse Clinical Events Policy
- 16.2 [www.phecit.ie/PHECC/.../Fitness\\_to\\_practice/PHECC/](http://www.phecit.ie/PHECC/.../Fitness_to_practice/PHECC/)
- 16.3 HSE Policy on the Management of Professional Registers and Amendments to such Registers

**17.0 APPENDICES**

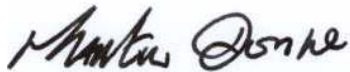
Appendix I – Policy Acknowledgement Form – (Attached to Policy)

**18.0 REVISION HISTORY:**

No	Revision No	Date	Section Amended	Approved by

**19.0 SIGNATURES OF APPROVAL**

All persons must sign and date this page after they have read and understood the Standard Operation Procedure/Policy.



\_\_\_\_\_  
Director, National Ambulance Service  
On Behalf of the National Ambulance Service

Date 17<sup>th</sup> February 2016 \_\_\_\_\_



\_\_\_\_\_  
National Ambulance Service Medical Director  
On Behalf of the National Ambulance Service

Date \_\_\_\_\_ 17<sup>th</sup> February 2016



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive



National Ambulance Service

### Acknowledgement of receipt of SOP/Policy

Please print & return this acknowledgement sheet to the National Ambulance Service Headquarters  
(Author of the Policy) within 10 working days of receiving the document

**SOP/Policy Name:**

**Author:**

**SOP/Policy Number:**

**Revision number:**

**Approval Date:**

**Please tick box as appropriate:**

A.  I have received a copy of the **new** SOP/Policy as named above; I have informed all relevant staff of this document.

**Or**

B.  Note: Tick as appropriate within B  
I have received a new version of the Policy above, I **have attached the previous version of this SOP/Policy to this acknowledgement sheet** and I have informed all relevant staff of the new version of this Policy.

**Or**

I have **destroyed the previous version of this SOP/Policy** and I have informed all relevant staff of the new version of this Policy.

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Please Print Name:** \_\_\_\_\_

**Please return to:** Niamh Murphy



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