



Scope of Practice Policy

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Version	Date	Comments (i.e., viewed, or reviewed, amended approved by person or committee)
V3.0	19 April 2022	Compliance & Risk Group

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Part of Trust's publication scheme	Yes

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The East of England Ambulance Service NHS Trust has made every effort to ensure this policy does not have the effect of unlawful discrimination on the grounds of the protected characteristics of: age, disability, gender reassignment, race, religion/belief, gender, sexual orientation, marriage/civil partnership, pregnancy/maternity. The Trust will not tolerate unfair discrimination on the basis of spent criminal convictions, Trade Union membership or non-membership. In addition, the Trust will have due regard to advancing equality of opportunity between people from different groups and foster good relations between people from different groups. This policy applies to all individuals working at all levels and grades for the Trust, including senior managers, officers, directors, non-executive directors, employees (whether permanent, fixed-term or temporary), consultants, governors, contractors, trainees, seconded staff, homeworkers, casual workers and agency staff, volunteers, interns, agents, sponsors, or any other person associated with the Trust.

All Trust policies can be provided in alternative formats.

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1. Introduction

Scope of practice is the procedures, actions and processes in which a clinical staff member can operate at any clinical grade, limited by the areas in which that person has relevant and appropriate education and competency. Competency reflects contemporaneous knowledge, skills and behaviours.

For EEAST this includes all service areas where we have a clinical workforce, including permanent, bank, and honorary contracts, as well as volunteer responders or student paramedics undertaking development with EEAST.

2. Purpose

This document defines the approach EEAST will apply to the scope of practice of our patient-facing workforce. This policy describes the defined approach EEAST mandates that our clinical staff follow. It frames a clear assurance, governance, and oversight process. For the purpose of this policy, scope of practice pertains to EEAST clinical activity and it is recognised that it augments that of professional and regulatory standards where applicable and is an overriding employment requirement and clinical concordance is benchmarked against this policy.

3. Duties

3.1 Chief Executive

The Chief Executive has overall accountability for clinical care delivered at EEAST. They are responsible for having an effective risk management system in place within the Trust, for meeting all statutory legal requirements and adhering to guidance issued from the Department of Health and other relevant authorities.

3.2 Medical Director

The Medical Director will authorise the scope of clinical practice for our workforce and is the accountable executive for the way our staff deliver all clinical care.

3.3 Deputy Clinical Director (Clinical Effectiveness)

The Deputy Clinical Director – Clinical Effectiveness is responsible for the clinical scope of practice strategy and trust wide implementation.

3.4 Chief Operating Officer

The Chief Operating Officer is responsible for the strategic regional oversight of operational performance, ensuring the trust approach to deployment of the clinical workforce within their defined scope of practice to provide a safe and effective response model to patients.

3.4 Head of Sector Operations

The Head of Operations are responsible for the operationalisation of the scope of practice policy. They must ensure that the operational leadership team(s) in each of their sectors implement and practice within the scope of practice policy.

3.5 Clinical Lead for Education and Clinical Practice

The Clinical Lead for Education and Clinical Practice is responsible for the educational oversight of all learners, preceptors and those undertaking clinical supervision and will provide expert strategic guidance to the clinical directorate.

3.6 Clinical Practice Specialists

The Sector Clinical Practice Specialists are a source of expert educational support for students, preceptors and staff undertaking clinical supervision and can provide guidance about their scope of practice.

3.7 Sector Clinical Leads

The Sector Clinical Leads are the senior clinical leadership in each sector. They will be a source of expertise on all clinical matters and can provide leadership and support for workforce about the clinical elements of scope of practice.

3.8 All Clinical Staff, Volunteers and Learners

All clinical staff, volunteers and learners are responsible for their concordance with the scope of practice policy.

4. Definitions

Roles		Definitions
ACA	Ambulance Care Assistant	A non-registered healthcare worker trained in non-emergency patient transport care.
ACA+	Ambulance Care Assistant – Urgent Care Tier	An ACA who has undertaken additional education to support urgent GP/HCP admission calls, including emergency responses to admissions.
AEMT	Apprentice Emergency Medical Technician	A learner on a development pathway to become qualify as the non-registered healthcare worker ‘Emergency Medical Technician’. This role primarily works on double staffed ambulances as part of a two-person crew to respond to calls, as dispatched by AOC.

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Roles		Definitions
AAP	Associate Ambulance Practitioner	A non-registered healthcare worker who predominantly forms part of a two-person crew to respond to calls, as dispatched by AOC. They are trained in technical ambulance skills, assessment techniques and emergency medical care. This role is equivalent to an EMT.
AN	Ambulance Nurse	An autonomous registered healthcare professional with the Nursing & Midwifery Council who has undertaken additional education in ambulance-based care and responds to calls, as dispatched by AOC.
APCC	Advanced Paramedic in Critical Care	An autonomous registered healthcare professional who has advanced clinical competency in trauma and critical care.
APUC	Advanced Paramedic / Practitioner in Urgent Care	An autonomous registered healthcare professional who has advanced clinical competency in urgent and primary care.
CCP	Critical Care Paramedic / Practitioner	An autonomous registered healthcare professional who has specialist competency in trauma and critical care.
CFR	Community First Responder	A volunteer who has completed training to respond to life threatening presentations on behalf of EEAST.

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Roles		Definitions
CPRAC	Community Paramedic / Practitioner	An autonomous registered healthcare professional who has undertaken community paramedicine education to work in a rotational model across primary care networks.
CS	Clinical Supervisor	An autonomous registered healthcare professional who is a local manager in ambulance operations or who holds responsibility for.
ECP	Emergency Care Practitioner	An autonomous registered healthcare professional who has specialist competency in urgent and primary care.
EMT	Emergency Medical Technician	A non-registered healthcare worker who predominantly forms part of a two-person crew to respond to calls, as dispatched by AOC. They are trained in technical ambulance skills, assessment techniques and emergency medical care.
ECA	Emergency Care Assistant	A non-registered healthcare worker who forms part of a two-person crew to respond to calls, as dispatched by AOC. This role is designed to work alongside another clinician.
ECSW	Emergency Care Support Worker	A non-registered healthcare worker who forms part of a two-person crew to respond to calls, as dispatched by AOC. This role is designed to work alongside another clinician.

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Roles		Definitions
AOC	Ambulance Operations Centre	The health-based control room responsible for receiving urgent, unscheduled, routine and emergency calls and allocation of resources.
FREC4	First Response Emergency Care – Level 4	A non-registered healthcare worker who forms part of a two-person crew to respond to calls, as dispatched by AOC. This role is designed to work alongside another clinician. The role is equivalent to an ECSW.
FREC5	First Response Emergency Care – Level 5	A non-registered healthcare worker who forms part of a two-person crew to respond to calls, as dispatched by AOC. This role predominantly works on a double staffed ambulance. They are trained in technical ambulance skills, assessment techniques and emergency medical care.
HCRT	Healthcare Referral Tier	An ACA who has undertaken additional education to support urgent GP/HCP admission calls, excluding emergency responses to admissions.
IAP	Intermediate Ambulance Practitioner	A non-registered healthcare worker who forms part of a two-person crew to respond to calls, as dispatched by AOC. This role is designed to work alongside another clinician. This is equivalent to an ECSW.
LOM	Leading Operations Manager	An autonomous registered healthcare professional who is a local manager within ambulance operations.

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Roles		Definitions
MCR	Military Co-responder	Ministry of Defence personnel of respond as enhanced level community first responders.
NQP	Newly Qualified Paramedic	An autonomous registered healthcare professional with the Health & Care Professionals Council within their preceptorship period as a new registrant.
NQT	Newly Qualified Technician	A technician equivalent role that is in the first 24 months post qualification.
PARA	Paramedic	An autonomous registered healthcare professional with the Health & Care Professions Council.
SAP1	Student Ambulance Paramedic (Year 1)	A learner on the development pathway to become the registered healthcare professional role of a paramedic. They are within their first year of development.
SAP2	Student Ambulance Paramedic (Year 2)	A learner on the development pathway to become the registered healthcare professional role of a paramedic. They are within their second year of development.
SEMT	Senior Emergency Medical Technician	An experienced non-registered healthcare worker who predominantly forms part of a two-person crew to respond to calls, as dispatched by AOC. They are trained in technical ambulance skills and assessment techniques. At this grade they may undertake mentoring.

Roles		Definitions
SNR. PARA	Senior Paramedic	A registered healthcare professional with the Health & Care Professions Council who is outside of their newly qualified phase of practice.
SPCC	Specialist Paramedic in Critical Care	A registered healthcare professional who has specialist competency in trauma and critical care.
SPUC	Specialist Paramedic / Practitioner in Urgent Care	A registered healthcare professional who has specialist competency in urgent and primary care.

5. Principles of Scope of Practice

- 5.1 In order to practice in a clinical role, staff and volunteers must have successfully completed a programme of education and training for the role in which they practice.
- 5.2 Where staff have qualification and evidenced competency, they should be employed or volunteering in a role which allows them to practice this accordingly. Where they are not employed or volunteering in such role, they must limit their scope of practice to the role in which they are engaged.
- 5.3 For students on placement, the scope of practice is aligned to their direct supervisor and only whilst supervised (limited by this policy). Practice should be supported and matched against their curricular progress and learner journey.
- 5.4 Where the staff member is employed as a Paramedic, Nurse, Midwife, Doctor, or other healthcare registrant of a national body, they will hold registration with that relevant regulating professional body and be subject to their statutory obligations as a registrant.

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- 5.5 Where ongoing currency or validation is required of a registrant, the individual staff member is responsible for ensuring this is maintained. Staff or volunteers must desist from practice where they are not permitted to practice by their registering body (e.g., professional suspension or removal from their registering body).
- 5.6 Staff, students and volunteers must work within their scope of practice and ensure that their scope of practice is not exceeded when engaged in EEAST duties.
- 5.7 Staff, students and volunteers must ensure that their care does not fall below what is expected for their clinical grade.
- 5.8 Each staff member, student or volunteer should ensure that they are able to fulfil their duties by completion and maintaining in-date mandatory training. Where mandatory training has expired, the person must desist from clinical practice until resolved. Staff must also engage in the mandatory updates for role where required.
- 5.9 Staff should engage in continued professional development and be able to evidence this through the annual appraisal process.
- 5.10 For registrants and students on a journey to registration as a healthcare professional, they must maintain a portfolio of clinical professional development, which may be reviewed as part of the clinical supervision approach, or if requested for inspection by a senior education or clinical lead.
- 5.11 In the event where a staff member, volunteer or learner cannot comply with the scope of practice policy, it is that persons responsibility to notify and raise this with their line manager or supervisor.
- 5.12 This policy is to be read in conjunction with other related EEAST policies.

6. Alignment of Clinical Roles

A number of different pathways or similar job role titles have evolved over the years. For the purpose of enhancing the approach to deployment, the following roles have been aligned to the same scope of practice:

Role	Definition
CFR	Community First Responder
ACA	Ambulance Care Assistant
ACA+	Ambulance Care Assistant – Urgent Care Tier, Healthcare Referral Tier, FREC3
ECSW	Emergency Care Support Worker, Emergency Care Assistant, Military Co-Responders, FREC4, Apprentice Emergency Medical Technician (non-supervised), Intermediate Ambulance Practitioner, Student Ambulance Paramedic (Year 1)
EMT	Emergency Medical Technicians, Senior Emergency Medical Technicians, Associate Ambulance Practitioner, FREC5, Apprentice Emergency Medical Technician (supervised), Student Ambulance Paramedic 2.
Paramedic	Newly Qualified Paramedic, Paramedic, Senior Paramedic, Ambulance Nurse, Clinical Supervisor, Leading Operations Manager.
Community Paramedic	Community Paramedic
APUC	Emergency Care Practitioner, Specialist Paramedic / Practitioner in Urgent Care, Advanced Paramedic / Practitioner in Urgent Care
APCC	Critical Care Practitioner, Specialist Paramedic / Practitioner in Critical Care, Advanced Paramedic / Practitioner in Critical Care

7. Clinical Seniority

Clinical seniority falls to the most senior healthcare worker / professional involved in the patient care episode. The seniority is aligned to the Skills for Health career framework descriptors. These are described from the most senior to the least senior:

Level	Role
Level 8	Consultant Paramedic / Practitioner
Level 7	Advanced Paramedic / Practitioner
Level 6	Specialist Paramedic / Practitioner
Level 5	Registered Healthcare Professional (outside newly qualified phase of practice)
Level 5	Registered Healthcare Professional (within newly qualified phase of practice)
Level 4	Emergency Medical Technician (outside of newly qualified phase of practice)
Level 4	Emergency Medical Technician (within newly qualified phase of practice)
Level 3	Emergency Care Support Worker
Level 2	Ambulance Care Assistants
Level 1	Community First Responders

8. Care Planning

Care planning is a way of capturing and recording conversations, decisions and agreed outcomes in a way that is clear and understandable. Care plans should be proportionate, flexible and coordinated and adaptable to a person's health condition, situation and care and support needs.

- 8.1 Patient care planning should be agreed with a registered healthcare professional. This could be:

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- A pre assessment by a registered healthcare professional, such as an urgent admission after a patient has been assessed before you arrive at scene.
- With a registered healthcare professional at the scene.
- With a registered healthcare professional on the Clinical Advice Line.
- By transfer to a registered healthcare professional as part of a forward referral in the patient care journey.

Every patient care record must record the care decisions and name of the registered healthcare professional who is accepting accountability for oversight of that patients care plan. All members of the team can contribute to informing that plan or delivering the care.

9. Limitations on Scope of Practice

Where staff members are within a newly qualified phase of practice, there will be further limitations on their scope of practice.

Newly Qualified Paramedic (NQP)	Will be subject to scope of practice restrictions for the first 24-months post registration. This may expire sooner where a EEAST approved fast track competency appraisal has taken place.
Newly Qualified Technician (NQT)	Will be subject to scope of practice restrictions for the first 24-months post qualification.

9.1 EEAST recognise Newly Qualified Paramedics as registered healthcare professionals: A professional conversation about the patient care planning for specific patient characteristics must be held with a clinical senior (detailed in section 7), documenting their name, clinical grade and advice. Restrictions are detailed in the safe non-conveyance and discharge policy.

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- 9.2 For Newly Qualified Technicians (NQT's), a professional conversation about the patient care plan for specific patient characteristics must be held with a clinical senior (detailed in section 7), documenting their name, clinical grade and their authorisation decision. Restrictions are detailed further in the safe non-conveyance and discharge policy.
- 9.3 Clinical staff where possible must have the option of delivering the full scope of clinical care or the option to transport a patient to hospital. Working on a rapid response vehicle (RRV) should therefore be limited to registered healthcare professionals as a routine operating model, but specifically:

Level	Scope
Staff at Level 5 or above (as detailed in section 7)	Can be scheduled to work on rapid response vehicles.
Staff at Level 4 (as detailed in section 7)	<p>May crew a rapid response vehicle if an individual exceptional and justifiable need arises, but that person must not be utilised if they are within the first six months post completion of their technician level qualification.</p> <p>They may solo crew an ambulance, but if within the first six months post completion of their technician level qualification this may only be for a category one calls (to make a first response), backing up other resources or under normal road conditions for logistical purposes.</p>

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Level	Scope
Staff at Level 3 or below (as detailed in section 7)	<p>They may not crew an RRV, however where authorised to drive EEAST vehicles may do so under normal road conditions for logistical purposes.</p> <p>They should not solo crew an ambulance, unless it is a category one call (to make a first response), backing up other senior resources or under normal road conditions for logistical purposes</p>
Volunteer CFR / Co-responders / Enhanced CFR's	May utilise schemes cars or EEAST vehicles to respond (as per ESOP25)

9.4 Where a crew is staffed by a Healthcare Referral Tier (HCRT), that crew must be dispatched to calls in-line the scope of practice of HCRT only.

10. Identification of Scope of Practice

There are legal and human factors justification for clear identification of scope of practice. It is also important to clearly identify staff in junior clinical grades, learners and those who are early career healthcare professionals who may still be consolidating their professional knowledge, skills and attributes, thus requiring supportive practice. Accordingly, all staff must clearly identify themselves with correctly displayed uniform markings:

10.1 All staff must be clearly identified by scope of practice including wearing the correct epaulettes and coat badges whilst undertaking patient care.

- 10.2 Staff should refer to the Uniform and Personal Standards Policy for guidance on how to correctly identify themselves with uniform markings.

11. Variations in Clinical Practice

All staff, volunteers, learners, and student paramedics on placement at EEAST should work within the scope of practice as defined by this policy.

- 11.1 Workforce who do not hold registration as a healthcare professional, and those who are within a preceptorship phase as newly qualified **must** not work outside of the defined scope of practice including preceptor limitations.
- 11.2 Registered healthcare professionals **should** not work outside of the defined scope of practice, and where they do will be required to make a professional justification for such actions.
- 11.3 Where staff fail to deliver care in line with their scope of practice, they may be managed within the EEAST Variations in Clinical Practice and Clinical Competency Policy.
- 11.4 Where it is deemed that a staff member wilfully violated the Scope of Practice Policy (beyond the Variations in Clinical Practice and Clinical Competency Policy process, or associated action plans), managers should manage staff under the Disciplinary Policy (managing conduct and performance).
- 11.5 Where fitness to practice is compromised, it may be necessary for EEAST to make a referral to a Professional Regulator, which will be authorised through the senior clinical directorate.

12. Amendments to the Scope of Practice

As well as routine periodic review, EEAST will undertake continuous review of national best practice recommendations and policy updates will be amended accordingly.

- EEAST will undertake reviews based on the outcome of audit and policy updates will be amended accordingly.
- EEAST will undertake review based on risk, significant incidents and complaints and policy updates will be amended accordingly.
- All proposed changes to scope of practice will go through the relevant governance group of the organisation.

13. Professional Standards

The EEAST values are care, honesty, quality, respect, and teamwork. These are the cornerstone of our professional behaviours and attitudes. All staff are expected to abide by the values of EEAST as well as its policies and procedures.

- 13.1 All staff responding to routine, urgent, unscheduled, and emergency ambulance calls or delivering aligned clinical services will be benchmarked against the professional code of conduct, performance, and ethics (or equivalent). For non-registered staff, they will be benchmarked against the Skills for Health Code of Conduct for Healthcare Support Workers [\[here\]](#)
- 13.2 All registered healthcare professionals within EEAST must practice within the statutory requirements of their profession as detailed by their regulatory bodies.
- 13.3 All staff, students and volunteers engaged in healthcare must undertake training as defined in the Score Skills Training Framework (CSTF) from [Skills for Health](#), and all certifications must be renewed before they expire, including:
- Conflict resolution
 - Equality, diversity and human rights
 - Fire safety

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- Health, safety and welfare
- Infection prevention and control
- Information governance and data security
- Moving and handling
- Preventing Radicalisation
- Resuscitation
- Safeguarding adults
- Safeguarding children

13.4 Patient-facing staff must engage with the annual mandatory training for role update programme offered by EEAST, including associated on-line learning or documentation.

13.4 Staff (excluding HEI students and volunteers) must engage in clinical supervision of their clinical practice, benchmarked at a minimum of two periods of practice supervision per 12-month period.

14.0 - Scope of Practice Grids

It should be noted that HART have an increased scope of practice as defined by the national specification for HART by NARU. Ambulance staff may assist a patient in taking their own prescribed and supplied medications, examples include the use of an Adrenaline Auto-Injector Pen (i.e. EpiPen) and Glyceryl Trinitrate (GTN).

Those registered healthcare professionals annotated as a prescriber may utilise prescribing, subject to the EEAST prescribing policy when approved.

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14.1 - Response Driving

<table border="1"> <tr> <td>Autonomous</td> <td>A</td> </tr> <tr> <td>Restricted (if trained autonomous)</td> <td>R</td> </tr> <tr> <td>Not within scope</td> <td>N</td> </tr> </table>	Autonomous	A	Restricted (if trained autonomous)	R	Not within scope	N	Non-Clinical Drivers (NCD)																					
	Autonomous	A																										
	Restricted (if trained autonomous)	R																										
	Not within scope	N																										
	Community First Responder																											
	Co-Responder/Enhanced CFR																											
	Ambulance Care Assistant																											
	Healthcare Referral Tier																											
	ACA – Intermediate Tier																											
	Emergency Care Assistant / Support Worker																											
	Emergency Medical Technician (NQT)																											
	Emergency Medical Technician																											
	Year 1 HEI Student (Placement)*																											
Year 2 HEI Student (Placement)*																												
Year 3 HEI Student (Placement)*																												
Paramedic (NQP)																												
Paramedic																												
Community Paramedic / AHP																												
Ambulance Nurse																												
SP / AHP – Urgent & Primary Care																												
AP / AHP – Urgent & Primary Care																												
SP / AHP – Critical Care																												
AP / AHP – Critical Care																												
PHEM Doctor																												
Response																												
Non-Emergency Response	A	A	A	A	A	A	A	A	A	A	N	N	N	A	A	A	A	A	A	A	A	A						
Emergency Response	A	N	R	R	R	R	R	R	R	R	N	N	N	R	R	R	R	R	R	R	R	R						

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14.2 – Patient Assessment

		Non-Clinical Driver (NCD)	Community First Responder	Co-Responder/Enhanced CFR	Ambulance Care Assistant	Healthcare Referral Tier	ACA – Intermediate Tier	Emergency Care Assistant / Support Worker	Emergency Medical Technician (NQT)	Emergency Medical Technician	Year 1 HEI Student (Placement)*	Year 2 HEI Student (Placement)*	Year 3 HEI Student (Placement)*	Paramedic (NOP)	Paramedic	Community Paramedic / AHP	Ambulance Nurse	SP / AHP – Urgent & Primary Care	AP / AHP – Urgent & Primary Care	SP/ AHP – Critical Care	AP / AHP – Critical Care	PHEM Doctor	
		Assessment																					
Autonomous	A	N	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Restricted (if trained autonomous)	R	N	N	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Not within scope	N	N	N	R	N	N	R	R	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
		N	N	R	N	N	R	R	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A

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Autonomous	A																						
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	Not within scope																						
		Non-Clinical Driver (NCD)	Community First Responder	Co-Responder/Enhanced CFR	Ambulance Care Assistant	Healthcare Referral Tier	ACA – Intermediate Tier	Emergency Care Assistant / Support Worker	Emergency Medical Technician (NQT)	Emergency Medical Technician	Year 1 HEI Student (Placement)*	Year 2 HEI Student (Placement)*	Year 3 HEI Student (Placement)*	Paramedic (NOP)	Paramedic	Community Paramedic / AHP	Ambulance Nurse	SP / AHP – Urgent & Primary Care	AP / AHP – Urgent & Primary Care	SP / AHP – Critical Care	AP / AHP – Critical Care	PHEM Doctor	
Systems Assessment – Musculoskeletal System		N	N	R	N	N	R	R	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Systems Assessment – Neurological System		N	N	R	N	N	R	R	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Systems Assessment – Respiratory System		N	N	R	N	N	R	R	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
System Assessments – Ear, Nose & Throat		N	N	N	N	N	N	N	N	N	N	R	R	R	R	R	R	A	A	R	R	A	A

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<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">Autonomous</td> <td style="width: 20%; text-align: center;">A</td> </tr> <tr> <td>Restricted (if trained autonomous)</td> <td style="text-align: center;">R</td> </tr> <tr> <td>Not within scope</td> <td style="text-align: center;">N</td> </tr> </table>	Autonomous	A	Restricted (if trained autonomous)	R	Not within scope	N	PHEM Doctor	AP / AHP – Critical Care	SP/ AHP – Critical Care	AP / AHP – Urgent & Primary Care	SP / AHP – Urgent & Primary Care	Ambulance Nurse	Community Paramedic / AHP	Paramedic	Paramedic (NOP)	Year 3 HEI Student (Placement)*	Year 2 HEI Student (Placement)*	Year 1 HEI Student (Placement)*	Emergency Medical Technician	Emergency Medical Technician (NQT)	Emergency Care Assistant / Support Worker	ACA – Intermediate Tier	Healthcare Referral Tier	Ambulance Care Assistant	Co-Responder/Enhanced CFR	Community First Responder	Non-Clinical Driver (NCD)
	Autonomous	A																									
	Restricted (if trained autonomous)	R																									
	Not within scope	N																									
Non-Invasive Blood Pressure (automatic)	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	R	A	A	R	N						
Non-Invasive Blood Pressure (manual)	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	N	A	N	N						
Oxygen Saturations	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	R	A	A	N						

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	<table border="1" style="float: left; margin-right: 10px;"> <tr> <td>Autonomous</td> <td style="background-color: #28a745; color: white;">A</td> </tr> <tr> <td>Restricted (if trained autonomous)</td> <td style="background-color: #ffc107;">R</td> </tr> <tr> <td>Not within scope</td> <td style="background-color: #dc3545; color: white;">N</td> </tr> </table>			Autonomous	A	Restricted (if trained autonomous)	R	Not within scope	N	Non-Clinical Drivers (NCD)	Community First Responder	Co-Responder/Enhanced CFR	Ambulance Care Assistant	Healthcare Referral Tier	ACA – Intermediate Tier <i>Worlcar</i>	Emergency Care Assistant / Support	Emergency Medical Technician (NQT)	Emergency Medical Technician	Year 1 HEI Student (Placement)*	Year 2 HEI Student (Placement)*	Year 3 HEI Student (Placement)*	Paramedic (NQP)	Paramedic	Community Paramedic / AHP	Ambulance Nurse	SP / AHP – Urgent & Primary Care	AP / AHP – Urgent & Primary Care	SP / AHP – Critical Care	AP / AHP – Critical Care	PHEM Doctor
	Autonomous	A																												
Restricted (if trained autonomous)	R																													
Not within scope	N																													
End-tidal Carbon Dioxide (ETCO ₂) monitoring		N	N	N	N	N	N	A	A	A	A	A	A	A	R	R	R	R	A	A	A	A								
AVPU Neurological Assessment		N	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A								
Glasgow Coma Scale		N	N	R	N	N	R	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A								
National Early Warning System Score		N	A	A	A	N	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A								
Capillary Blood Glucose Measurement		N	N	A	N	A	R	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A								
Peak Expiratory Flow Rate		N	N	A	N	A	R	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A								
Tympanic Thermometry		N	A	A	R	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A								

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<table border="1" style="float: left; margin-right: 10px;"> <tr> <td>Autonomous</td> <td style="background-color: #28a745; color: white;">A</td> </tr> <tr> <td>Restricted (if trained autonomous)</td> <td style="background-color: #ffc107;">R</td> </tr> <tr> <td>Not within scope</td> <td style="background-color: #dc3545; color: white;">N</td> </tr> </table>		Autonomous	A	Restricted (if trained autonomous)	R	Not within scope	N	PHEM Doctor	AP / AHP – Critical Care	SP / AHP – Critical Care	AP / AHP – Urgent & Primary Care	SP / AHP – Urgent & Primary Care	Ambulance Nurse	Community Paramedic / AHP	Paramedic	Paramedic (NQP)	Year 3 HEI Student (Placement)*	Year 2 HEI Student (Placement)*	Year 1 HEI Student (Placement)*	Emergency Medical Technician	Emergency Medical Technician (NQT)	Emergency Care Assistant / Support Worker	ACA – Intermediate Tier	Healthcare Referral Tier	Ambulance Care Assistant	Co-Responder/Enhanced CFR	Community First Responder	Non-Clinical Drivers (NCD)
		Autonomous	A																									
Restricted (if trained autonomous)	R																											
Not within scope	N																											
Pain Score (visual or numeric)		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	N						
Cardiac monitoring		A	A	A	A	A	A	A	A	A	A	A	A	A	A	R	N	N	N	N	N	N	N					
12-lead ECG acquisition		A	A	A	A	A	A	A	A	A	A	A	A	A	A	R	N	N	N	R	N	N	N					
12-lead ECG interpretation		A	A	A	A	A	A	A	A	A	A	A	A	A	A	N	N	N	N	N	N	N	N					

14.3 – Resuscitation and Airway Approaches

Autonomous		A																						
Restricted (if trained autonomous)		R																						
Not within scope		N																						
			PHEM Doctor	AP / AHP – Critical Care	SP/ AHP – Critical Care	AP / AHP – Urgent & Primary Care	SP / AHP – Urgent & Primary Care	Ambulance Nurse	Community Paramedic / AHP	Paramedic	Paramedic (NOP)	Year 3 HEI Student (Placement)*	Year 2 HEI Student (Placement)*	Year 1 HEI Student (Placement)*	Emergency Medical Technician	Emergency Medical Technician (NQT)	Emergency Care Assistant / Support Worker	ACA – Intermediate Tier	Healthcare Referral Tier	Ambulance Care Assistant	Co-Responder/Enhanced CFR	Community First Responder	Non-Clinical Drivers (NCD)	
Resuscitation / Critically Unwell Patients																								
Chest Compressions			A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Ventilation with a bag-valve mask (adult)			N	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Ventilation with a bag-valve mask (paediatrics)			N	R	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
						Over 12																		

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		Autonomous	A																									
Restricted (if trained autonomous)	R																											
Not within scope	N																											
Use of automated external defibrillation (AED)		N	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A						
Use of manual defibrillation		N	N	R	N	N	R	R	A	A	A	A	A	A	A	A	A	A	A	A	A	A						
Use of oral airways		N	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A						
Use if nasal airways		N	R	A	N	N	R	A	A	A	A	A	A	A	R	A	R	R	R	A	A	A						
Use of supraglottic airways		N	N	A	N	N	N	A	A	A	A	A	A	A	R	A	R	R	R	A	A	A						

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	Autonomous			Non-Emergency Driver (NCD)	Community First Responder	Co-Responder/Enhanced CFR	Ambulance Care Assistant	Healthcare Referral Tier	ACA – Intermediate Tier	Emergency Care Assistant / Support Worker	Emergency Medical Technician (NQT)	Emergency Medical Technician	Year 1 HEI Student (Placement)*	Year 2 HEI Student (Placement)*	Year 3 HEI Student (Placement)*	Paramedic (NQP)	Paramedic	Community Paramedic / AHP	Ambulance Nurse	SP / AHP – Urgent & Primary Care	AP / AHP – Urgent & Primary Care	SP/ AHP – Critical Care	AP / AHP – Critical Care	PHEM Doctor
	A	R	N																					
Use of endotracheal airways	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	A	A	A
Needle cricothyroidotomy	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	A	A	R	R	R	R	A	A	A
Surgical front of neck access (FONA)	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	A	A
Oxygen masks and nasal cannula (all types)	N	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Nebuliser masks and t-piece	N	R	A	A	N	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Mechanical ventilators	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	R	R	R
Laryngoscopy	N	N	N	N	N	N	R	R	R	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A

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	Autonomous			Non-Emergency Driver (NCD)	Community First Responder	Co-Responder/Enhanced CFR	Ambulance Care Assistant	Healthcare Referral Tier	ACA – Intermediate Tier	Emergency Care Assistant / Support Worker	Emergency Medical Technician (NQT)	Emergency Medical Technician	Year 1 HEI Student (Placement)*	Year 2 HEI Student (Placement)*	Year 3 HEI Student (Placement)*	Paramedic (NQP)	Paramedic	Community Paramedic / AHP	Ambulance Nurse	SP / AHP – Urgent & Primary Care	AP / AHP – Urgent & Primary Care	SP/ AHP – Critical Care	AP / AHP – Critical Care	PHEM Doctor
	A	R	N																					
Adult choking	N	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Paediatric choking	N	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Forceps removal of airway foreign bodies (adults)	N	N	N	N	N	N	N	N	N	R	R	N	A	A	A	A	R	R	R	R	A	A	A	A
Manual Suction Aspirators	N	R	R	R	R	R	R	R	R	R	R	N	A	A	A	A	A	A	A	A	A	A	A	A
Electronic Suction Aspirators	N	R	R	R	R	R	R	R	R	R	R	N	A	A	A	A	A	A	A	A	A	A	A	A

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Autonomous	A																						
	Restricted (if trained autonomous)	R																					
		Not within scope	N																				
				Non-Emergency Drivers (NCD)	Community First Responder	Co-Responder/Enhanced CFR	Ambulance Care Assistant	Healthcare Referral Tier	ACA – Intermediate Tier	Emergency Care Assistant / Support Worker	Emergency Medical Technician (NQT)	Emergency Medical Technician	Year 1 HEI Student (Placement)*	Year 2 HEI Student (Placement)*	Year 3 HEI Student (Placement)*	Paramedic (NOP)	Paramedic	Community Paramedic / AHP	Ambulance Nurse	SP / AHP – Urgent & Primary Care	AP / AHP – Urgent & Primary Care	SP/ AHP – Critical Care	AP / AHP – Critical Care
Forceps removal of airway foreign bodies (paeds)		N	N	N	N	N	N	N	N	N	N	N	N	N	A	A	R	R	R	R	A	A	A
Paediatric life support (BLS + AED)		N	R	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Paediatric advanced life support		N	N	N	N	N	N	N	N	N	N	N	N	N	A	A	R	A	R	R	A	A	A
New-born life support		N	N	A	N	A	N	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
New-born advanced life support		N	N	N	N	N	N	N	N	N	N	N	N	N	A	A	R	A	R	R	A	A	A

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	Autonomous	A																									
	Restricted (if trained autonomous)	R																									
	Not within scope	N																									
Recognition of Life Extinct (Outside unequivocal signs)	A	A	A	A	A	A	A	A	A	N	N	N	N	N	N	N	N	N	N	N	N	N					
Mechanical chest compression device	A	A	A	R	R	A	R	A	A	A	R	R	R	N	N	N	N	N	N	N	N	N					
Synchronized cardioversion	R	R	R	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N					
Transcutaneous pacing	R	R	R	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N					
Needle thoracocentesis	A	A	A	R	R	A	R	A	A	A	A	A	N	N	N	N	N	N	N	N	N	N					

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		A	R	N									
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Autonomous</td> <td style="width: 33%; background-color: #008000; color: white;">A</td> <td style="width: 33%;"></td> </tr> <tr> <td>Restricted (if trained autonomous)</td> <td style="background-color: #FFD700; color: black;">R</td> <td></td> </tr> <tr> <td>Not within scope</td> <td style="background-color: #FF0000; color: white;">N</td> <td></td> </tr> </table>	Autonomous	A		Restricted (if trained autonomous)	R		Not within scope	N		PHEM Doctor	A		
	Autonomous	A											
	Restricted (if trained autonomous)	R											
	Not within scope	N											
	AP / AHP – Critical Care	A											
	SP/ AHP – Critical Care	A											
	AP / AHP – Urgent & Primary Care	R											
	SP / AHP – Urgent & Primary Care	R											
	Ambulance Nurse	A											
	Community Paramedic / AHP	R											
	Paramedic	A											
	Paramedic (NOP)	A											
	Year 3 HEI Student (Placement)*	A											
	Year 2 HEI Student (Placement)*	A											
	Year 1 HEI Student (Placement)*	N											
	Emergency Medical Technician	N											
	Emergency Medical Technician (NQT)	N											
	Emergency Care Assistant / Support Worker	N											
	ACA – Intermediate Tier	N											
	Healthcare Referral Tier	N											
Ambulance Care Assistant	N												
Co-Responder/Enhanced CFR	N												
Community First Responder	N												
Non-Clinical Drivers (NCD)	N												
Needle thoracocentesis	N												

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14.4 – Discharge and Non-Conveyance

		Non-Clinical Drivers	Community First Responder	Co-Responder/Enhanced CFR	Ambulance Care Assistant	Healthcare Referral Tier	ACA – Intermediate Tier	Emergency Care Assistant / Support Worker	Emergency Medical Technician (NQT)	Emergency Medical Technician	Year 1 HEI Student (Placement)*	Year 2 HEI Student (Placement)*	Year 3 HEI Student (Placement)*	Paramedic (NOP)	Paramedic	Community Paramedic / AHP	Ambulance Nurse	SP / AHP – Urgent & Primary Care	AP / AHP – Urgent & Primary Care	SP/ AHP – Critical Care	AP / AHP – Critical Care	PHEM Doctor	
Autonomous	A																						
Must refer to another registered healthcare professional.	R																						
Not within scope	N																						
Discharge and Non-Conveyance																							
Discharged with authorisation of Clinical Advice Line Healthcare Professional ^[3 = for falls only]	N	R	R	R	R	R	R	R	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Autonomous non-conveyance (outside newly qualified)	N	N	N	N	N	N	N	N	R	R	N	N	N	R	A	A	A	A	A	A	A	A	A
Backup requests (emergency conditions)	N	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Back up request (non-emergency / urgent conditions)	N	N	N	N	A	N	N	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Single Point of Contact Referrals	N	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A

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14.5 – Trauma Care

		A	W	R	N	Trauma Care															
Autonomous		A	W	R	N																
Where Trained		W																			
Must refer to another registered healthcare professional.		R																			
Not within scope		N																			
	PHEM Doctor																				
	AP / AHP – Critical Care																				
	SP/ AHP – Critical Care																				
	AP / AHP – Urgent & Primary Care																				
	SP / AHP – Urgent & Primary Care																				
	Ambulance Nurse																				
	Community Paramedic / AHP																				
	Paramedic																				
	Paramedic (NOP)																				
	Year 3 HEI Student (Placement)*																				
	Year 2 HEI Student (Placement)*																				
	Year 1 HEI Student (Placement)*																				
	Emergency Medical Technician																				
	Emergency Medical Technician (NQT)																				
	Emergency Care Assistant / Support Worker																				
	ACA – Intermediate Tier																				
	Healthcare Referral Tier																				
	Ambulance Care Assistant																				
	Co-Responder/Enhanced CFR																				
	Community First Responder																				
	Non-Clinical Drivers (NCD)																				
Trauma Primary Survey		N	N	A	N	N	N	A	A	A	A	A	A	A	W	A	W	W	A	A	A
Cervical Spinal Injury Assessment		N	N	N	N	N	N	N	A	A	A	A	A	A	W	A	W	W	A	A	A
Cervical Collar		N	N	R	N	N	N	A	A	A	A	A	A	A	W	A	W	W	A	A	A
Chest Seal (Russel or equivalent)		N	N	N	N	N	N	A	A	A	A	A	A	A	W	A	W	W	A	A	A

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<table border="1"> <tr> <td>Autonomous</td> <td>A</td> </tr> <tr> <td>Where Trained</td> <td>W</td> </tr> <tr> <td>Must refer to another registered healthcare professional.</td> <td>R</td> </tr> <tr> <td>Not within scope</td> <td>N</td> </tr> </table>		Autonomous	A	Where Trained	W	Must refer to another registered healthcare professional.	R	Not within scope	N	Non-Clinical Drivers (NCD)	Community First Responder	Co-Responder/Enhanced CFR	Ambulance Care Assistant	Healthcare Referral Tier	ACA – Intermediate Tier	Emergency Care Assistant / Support	Emergency Medical Technician (NQT)	Emergency Medical Technician	Year 1 HEI Student (Placement)*	Year 2 HEI Student (Placement)*	Year 3 HEI Student (Placement)*	Paramedic (NOP)	Paramedic	Community Paramedic / AHP	Ambulance Nurse	SP / AHP – Urgent & Primary Care	AP / AHP – Urgent & Primary Care	SP/ AHP – Critical Care	AP / AHP – Critical Care	PHEM Doctor
Autonomous	A																													
Where Trained	W																													
Must refer to another registered healthcare professional.	R																													
Not within scope	N																													
Catastrophic Haemorrhage Tourniquet	N	A	A	N	A	W	A	A	A	A	A	A	A	A	W	A	W	W	A	A	A									
Traction Splint	N	N	N	N	N	W	A	A	A	A	A	A	A	A	W	A	W	W	A	A	A									
Box Splint	N	N	R	R	A	W	A	A	A	A	A	A	A	A	W	A	W	W	A	A	A									
Orthopaedic (Scoop Stretcher)	N	N	R	R	A	W	A	A	A	A	A	A	A	A	W	A	W	W	A	A	A									
Extrication Board	N	N	N	N	A	W	A	A	A	A	A	A	A	A	W	A	W	W	A	A	A									
Trauma Extrication Vest (e.g. KED)	N	N	R	N	N	W	A	A	A	A	A	A	A	A	W	A	W	W	A	A	A									
Motorcycle Helmet Removal	N	N	N	N	A	W	A	A	A	A	A	A	A	A	W	A	W	W	A	A	A									

14.6 – Moving & Handling

				PHEM Doctor	AP / AHP – Critical Care	SP / AHP – Critical Care	AP / AHP – Urgent & Primary Care	SP / AHP – Urgent & Primary Care	Ambulance Nurse	Community Paramedic / AHP	Paramedic	Paramedic (NQP)	Year 3 HEI Student (Placement)*	Year 2 HEI Student (Placement)*	Year 1 HEI Student (Placement)*	Emergency Medical Technician	Emergency Medical Technician (NQT)	Emergency Care Assistant / Support Worker	ACA – Intermediate Tier	Healthcare Referral Tier	Ambulance Care Assistant	Co-Responder/Enhanced CFR	Community First Responder	Non-Clinical Drivers (NCD)		
Autonomous																										
Where Trained																										
Must refer to another registered healthcare professional.																										
Not within scope																										
Moving & Handling																										
Mangar Elk / Camel Lifting Cushion																										
Raiser Chair																										
Small Handling Aids (handling belts, turntables etc)																										

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		PHEM Doctor	AP / AHP – Critical Care	SP/ AHP – Critical Care	AP / AHP – Urgent & Primary Care	SP / AHP – Urgent & Primary Care	Ambulance Nurse	Community Paramedic / AHP	Paramedic	Paramedic (NQP)	Year 3 HEI Student (Placement)*	Year 2 HEI Student (Placement)*	Year 1 HEI Student (Placement)*	Emergency Medical Technician	Emergency Medical Technician (NQT)	Emergency Care Assistant / Support Worker	ACA – Intermediate Tier	Healthcare Referral Tier	Ambulance Care Assistant	Co-Responders /Enhanced CFR	Community First Responder	Non-Clinical Driver (NCD)	
Autonomous	A																						
Where Trained	W																						
Must refer to another registered healthcare professional.	R																						
Not within scope	N																						
Otoscopy		A	W	W	A	A	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
Reflexes		A	W	W	A	A	W	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
Urine Analysis		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Pregnancy Tests		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A

14.8 – Medications

<table border="1"> <tr> <td>PGD / Legal Exemption Available</td> <td style="background-color: green; color: white; text-align: center;">P</td> </tr> <tr> <td>If Prescriber (or If paramedic)</td> <td style="background-color: orange; color: white; text-align: center;">I</td> </tr> <tr> <td>Not within scope</td> <td style="background-color: red; color: white; text-align: center;">N</td> </tr> <tr> <td>IM = Intramuscular only</td> <td></td> </tr> </table>	PGD / Legal Exemption Available	P	If Prescriber (or If paramedic)	I	Not within scope	N	IM = Intramuscular only		Non-registered healthcare workers / student paramedics on placement may not administer any IV/IO medications. Student paramedics must have IM medications authorised by their supervising practice educator.	Non-Clinical Drivers	Community First Responder	Co-Responder/Enhanced CFR	Ambulance Care Assistant	Healthcare Referral Tier	ACA – Intermediate Tier	Emergency Care Assistant / Support Worker	Emergency Medical Technician (NQT)	Emergency Medical Technician	Year 1 HEI Student (Placement)*	Year 2 HEI Student (Placement)*	Year 3 HEI Student (Placement)*	Paramedic (NOP)	Paramedic	Community Paramedic / AHP	Ambulance Nurse	SP / AHP – Urgent & Primary Care	AP / AHP – Urgent & Primary Care	SP/ AHP – Critical Care	AP / AHP – Critical Care	PHEM Doctor
	PGD / Legal Exemption Available	P																												
	If Prescriber (or If paramedic)	I																												
	Not within scope	N																												
IM = Intramuscular only																														
Routes of Administration																														
Oral route of medication administration	N	N	I	N	P	N	N	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P							
Nasal Route of medication administration	N	N	I	N	P	N	N	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P							
Rectal route of medication administration	N	N	N	N	N	N	N	N	N	P	P	P	P	P	P	P	P	P	P	P	P	P	P							

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PGD / Legal Exemption Available		P																							
If Prescriber (or If paramedic)		I																							
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Subcutaneous / intramuscular administration			N	N	N	N	N	N	N	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	
Intravenous / Intraosseous administration			N	N	N	N	N	N	N	N	N	N	N	N	P	P	P	P	P	P	P	P	P	P	
Sublingual route of medication administration			N	N	N	N	N	N	N	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	
Medications																									
Adrenaline 1:1,000 (injection) ^[1 = Anaphylaxis Only]			N	N	N	N	N	N	N	IM ₁	IM ₁	IM ₁	IM ₁	IM ₁	IM	IM	IM	IM	IM	IM	IM	IM	I M	IM	
Adrenaline 1:10,000 (injection)			N	N	N	N	N	N	N	N	N	N	N	N	P	P	P	P	P	P	P	P	P	P	I

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Ceftriaxone (injection)	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N							
Chlorphenamine (Injection)	N	N	N	N	N	N	N	N	N	P	IM	IM	I	N	N	N	N	N	N	N	N	N							
Clopidogrel (tablets)	N	N	N	N	N	N	N	N	N	P	P	P	P	N	N	N	N	N	N	N	N	N							
Co-Amoxiclav (tablets)	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N							
Co-Amoxiclav (Injection)	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N							
Codeine Phosphate (tablets)	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N							

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Furosemide (injection)		I	I	I	I	I	P	P	P	N	N	N	N	N	N	N	N	N	N	N	N									
Glucose Oral Gel		I	I	I	I	I	P	P	P	P	P	P	P	P	P	P	P	P	P	P	N									

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Glucagon (injection)	N	N	N	N	N	N	N	N	N	N	IM	IM	IM	IM	IM	IM	IM	IM	IM	IM	I	M	IM	I	M	I	M	
Glucose 10% (infusion)	N	N	N	N	N	N	N	N	N	N	N	N	N	P	P	P	P	P	P	P	P	P	P	P	P	P	P	
Glyceryl Trinitrate (GTN) (sublingual)	N	N	N	N	N	N	N	N	N	N	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	
Hydrocortisone (injection) ^[1 = Addison's Crisis Only]	N	N	N	N	N	N	N	N	N	N	IM ¹	IM ¹	IM ¹	P	P	P	P	P	P	P	P	P	P	P	P	P	P	
Hyoscine Butylbromide	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	P	P	I	N	N	N	P	I	
Ibuprofen (tablets)	N	N	N	N	N	N	N	N	N	N	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	
Ipratropium Bromide (neb)	N	N	N	N	N	N	N	N	N	N	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	

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Ketamine (injection)	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	P	P	I	P	I	
Lansoprazole	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	P	P	I	N	N	N	P	I
Lactulose	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	P	P	I	N	N	N	P	I
Lidocaine 1%	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	P	P	I	N	N	N	P	I

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Lidocaine (Intraosseous) 2%			N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	P	P	I	P	I	
Loperamide (tablets)			N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	P	P	I	N	N	P	I	
Magnesium Sulphate (injection)			N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	P	P	I	P	I	
Methoxyfluroethane (Pentrox) (inhaled)			N	N	I	N	N	N	I	P	P	P	P	P	P	P	P	P	P	P	I	P	P	I	P	I
Metronidazole (tablets)			N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	P	P	I	N	N	P	I	
Midazolam (injection)			N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	P	P	I	P	I
Misoprostol (tablets)			N	N	N	N	N	N	N	N	N	P	P	P	P	P	P	P	P	P	P	P	P	I	P	I

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Nitrofurantoin (tablets)	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	P	P	I	N	N	P	I	
Ondansetron (injection)	N	N	N	N	N	N	N	N	N	N	N	N	P	P	P	P	P	P	I	P	P	I	P	I
Oxygen (inhaled)	N	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	I	P	P	I	P	I
Paracetamol (tablets / capsules / caplets)	N	N	N	N	N	N	N	P	P	P	P	P	P	P	P	P	P	P	I	P	P	I	P	I
Paracetamol (suspension)	N	N	N	N	N	N	N	P	P	P	P	P	P	P	P	P	P	P	I	P	P	I	P	I
Paracetamol (infusion)	N	N	N	N	N	N	N	N	N	N	N	N	P	P	P	P	P	P	I	P	P	I	P	I
Prednisolone (tablets)	N	N	N	N	N	N	N	N	N	N	N	N	N	N	P	N	P	P	I	N	N	P	I	

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Prochlorperazine	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	P	P	I	N	N	P	I
Salbutamol (inhaler)	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	P	P	I	N	N	P	I
Salbutamol (nebule)	N	N	N	N	N	N	N	P	P	P	P	P	P	P	P	P	P	P	I	P	I	P	I
Sodium Chloride 0.9% (injection/infusion) [2 = pre-filled syringe only]	N	N	N	N	N	N	N	N	N	N	2	2	P	P	P	P	P	P	I	P	I	P	I

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Sodium Chloride 5% (infusion)		N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	P	P	I	P	I		
Tranexamic Acid (injection)		N	N	N	N	N	N	N	N	N	N	N	N	P	P	P	P	P	P	I	P	P	I	P	I	
Trimethoprim		N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	P	P	I	N	N	P	I	P	I
Water for Injection ^[2 = pre-filled syringe only]		N	N	N	N	N	N	N	N	N	N	2	2	P	P	P	P	P	P	I	P	P	I	P	I	
Administration of prescribed anticipatory medication		N	N	N	N	N	N	N	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	

Appendix A - Monitoring Table

What	Who	How	Frequency	Evidence	Reporting arrangements	Acting on recommendations	Change in practice and lessons to be shared
					The lead or committee is expected to read and interrogate any report to identify deficiencies in the system and act upon them	Required actions will be identified and completed in a specified timeframe.	Required changes to practice will be identified and actioned within a specific time frame. A lead member of the team will be identified to take each change forward where appropriate. Lessons will be shared with all the relevant stakeholders.
Format and delivery of Professional Update for Role training / CPD	Clinical Lead for Education & Clinical Practice Head of Organisational Development	Annual review / compliance reports	Annual / cyclical	Compliance reports	Workforce and Quality Governance Committee	Clinical Lead of Education and Clinical Practice to act upon content needs and creation / Head of Operations team to act	New programmes Accountability reviews

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What	Who	How	Frequency	Evidence	Reporting arrangements	Acting on recommendations	Change in practice and lessons to be shared
						upon compliance against post qualification updates	
Defined scope of practice for EEAST	Clinical Lead for Education & Clinical Practice Sector Clinical Leads Clinical Best Practice Group Education & Learning Group	Changes in national or local clinical guidelines Changes in Career/Service Delivery Model Annual review of scope of practice aligned to CLIPS report	Adhoc but formal review at least 6 monthly	National Guidance Audit and Research activity	Quality Governance Committee	Clinical Lead of Education and Sector Clinical Leads and wider Medical Directorate	By clinical instruction, update to policy

Equality Impact Assessment

EIA Cover Sheet	
Name of process/policy	Scope of Practice Policy
Is the process new or existing? If existing, state policy reference number	POL092
Person responsible for process/policy	Deputy Clinical Director – Clinical Effectiveness
Directorate and department/section	Medical Directorate
Name of assessment lead or EIA assessment team members	Clinical Lead for Education & Clinical Practice
Has consultation taken place? Was consultation internal or external? (please state below):	Yes

The assessment is being made on:	Guidelines	
	Written policy involving staff and patients	x
	Strategy	
	Changes in practice	x
	Department changes	
	Project plan	
	Action plan	
	Other (please state)	
	Training programme.	

Equality Analysis	
<p>What is the aim of the policy/procedure/practice/event?</p> <p>The Scope of Practice policy looks to provide the organisation with a mechanism to develop, review and manage scope of practice within the clinical workforce of the organisation. This should also be used in conjunction with other policies that will guide the management of staff in the event of wilful policy violation or issues surrounding clinical practice.</p>	
<p>Who does the policy/procedure/practice/event impact on?</p> <p> Race <input type="checkbox"/> Religion/belief <input type="checkbox"/> Marriage/Civil Partnership <input type="checkbox"/> Gender <input type="checkbox"/> Disability <input type="checkbox"/> Sexual orientation <input type="checkbox"/> Age <input type="checkbox"/> Gender re-assignment <input type="checkbox"/> Pregnancy/maternity <input type="checkbox"/> </p>	
<p>Who is responsible for monitoring the policy/procedure/practice/event?</p> <p>Ownership of the policy sits with the Medical Directorate but led by the Clinical Lead for Education and Clinical Practice. Clinical and Operational leadership teams are responsible for day to day monitoring of compliance and management in line with the policy, reporting back to policy ownership if there are any requirements for policy review.</p>	

What information is currently available on the impact of this policy/procedure/practice/event?

The Trust has had for many years defined scopes of practice for its clinical workforce, the impact of scope of practice definition is supportive to the clinician and has been used in the assessment of clinical practice undertaken and supported actions of the organisation to support patient safety, staff and public confidence in the organisation. Whilst there has not been a scope of practice policy before, other policies such as the 'Variations to clinical practice and clinical competency policy' has been used as a surrogate when making decisions surrounding scope of practice. Again, this has been supportive in providing support to patient safety, staff and maintaining organisational and public confidence. Including use within formal processes such as serious incidents and external regulatory activity such as Health and Care Professions Council fitness to practice hearings.

Do you need more guidance before you can make an assessment about this policy/procedure/ practice/event? Yes

Do you have any examples that show that this policy/procedure/practice/event is having a positive impact on any of the following protected characteristics? Yes/No, If yes please provide evidence/examples:

- | | | | | | |
|---------------|--------------------------|-----------------------------|--------------------------|-----------------------------------|--------------------------|
| Race | <input type="checkbox"/> | Religion/belief | <input type="checkbox"/> | Marriage/Civil Partnership | <input type="checkbox"/> |
| Gender | <input type="checkbox"/> | Disability | <input type="checkbox"/> | Sexual orientation | <input type="checkbox"/> |
| Age | <input type="checkbox"/> | Gender re-assignment | <input type="checkbox"/> | Pregnancy/maternity | <input type="checkbox"/> |

Please provide evidence: No concerns of negative impact

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Are there any concerns that this policy/procedure/practice/event could have a negative impact on any of the following characteristics? Yes/No, if so please provide evidence/examples:

Race	<input type="checkbox"/>	Religion/belief	<input type="checkbox"/>	Marriage/Civil Partnership	<input type="checkbox"/>
Gender	<input type="checkbox"/>	Disability	<input type="checkbox"/>	Sexual orientation	<input type="checkbox"/>
Age	<input type="checkbox"/>	Gender re-assignment	<input type="checkbox"/>	Pregnancy/maternity	<input type="checkbox"/>

Please provide evidence:

Action Plan/Plans - SMART

Specific

Evaluation Monitoring Plan/how will this be monitored?

Who: All staff members

How: in application of policy

By: Deputy Clinical Director – Clinical Effectiveness

Reported to: Compliance and Risk Group