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## CPD profile

- 1.1 Full name:** Paramedic
- 1.2 Profession:** Paramedic
- 1.3 Registration number:** PA1234

### 2. Summary of recent work/practice

I work for a large metropolitan ambulance service based in a central city station. I am employed full-time as a front-line paramedic and have been for the last five years. I work a rotating shift pattern with a trainee ambulance technician (student). I also carry out regular shifts as a single responder in a first response car.

My professional contact includes the general public, patients, relatives and other health professionals. I work with a students and a proportion of my professional contact is spent mentoring my trainee colleague and reporting to the local clinical practice manager on progress.

I outline below elements of my job description which summarise my professional responsibilities:

- Attend cases of accident, sudden illness, urgent, special and planned patient journeys. In each case select and apply the appropriate patient resuscitative / treatment procedures in accordance with the Joint Royal College Ambulance Liaison Committee (JRCALC) National Clinical Guidelines (2006) and local ambulance service procedures. I perform advanced resuscitation and interventions, when appropriate, in accordance with the latest European Resuscitation Council Guidelines (2006).
- Undertake the driving of all vehicle types operated by the Service in accordance with the Highway Code and Road Traffic Law. I operate appropriate vehicles under urgent and emergency conditions, to the scene of an emergency and to hospital as required, in accordance with the IHCD Advanced Driver Training Manual.
- Ensure that the Ambulance is hygienically clean, fully equipped and that all equipment is functioning and ready for use each shift. Undertake vehicle daily inspections (VDI's) ensuring that all defects and accident damage are reported.

- Complete all documentation relating to patients attended and journeys undertaken in accordance with national guidelines, legislation, Service Procedures and the Data Protection Act.
- Undertake duties in relation to major incidents including exercises, that may require call out when off duty, in accordance with the Service major incident procedure.
- Prescribe, administer and ensure the security of non prescription, prescription only medicines (POMS) and controlled drugs, in accordance with the POMS order, JRCALC guidelines and local clinical steering committee guidelines.
- Operate communication equipment in accordance with radio procedures.
- Apply clinical skills and diagnostic techniques currently outside of national guidelines as required (e.g. Interpretation of 12 lead ECG and administration of thrombolytic therapy or administration of 'repapro' and track / transfer to a cath lab at a Cardiac Care Unit for primary angioplasty).
- Liaise, communicate and co-operate with Service colleagues, Health Care / Medical professionals, other emergency Service staff, patients, relatives and members of the public to ensure the delivery of the highest standard of patient care.
- Undertake supervisory and coaching duties of less qualified staff as and when necessary within the scope of my practice.

Total words: 451  
(Maximum 500 words)

### **3. Personal statement**

To record my CPD I use the professional body College of Paramedics online CPD scheme. I use this on at least a monthly basis to record my activities and reflective notes on my actions.

Using the online diary system I record all my activities to ensure I have an up-to-date record of my continuing development as a professional. I have outlined below how my online portfolio and activities ensure that I consistently meet each of the HCPC standards for CPD.

## **Standard 1:**

### **'A registrant must maintain a continuous, up-to-date and accurate record of their CPD activity'**

I use my professional body's online CPD system to meet standard one (see evidence 1), as it has a record of my continuous CPD for the past three years. The College of Paramedics system is accessible 24 hours a day and allows me easy access to keep my personal portfolio up-to-date with regular and timely updates. Evidence one shows my participation in the online CPD scheme and includes a summary of all activity over the previous two years embracing the five types of activity in line with the HCPC's categories of work based learning, professional activity, formal/educational, self directed learning and others.

## **Standard 2:**

### **'A registrant must identify that their CPD activities are a mixture of learning activities relevant to current or future practice'**

The CPD scheme I participate in requires that I undertake a mixture of learning activities from each of the five groups listed above (Evidence 1). For me this has included mentoring, discussions with colleagues, secondments, and course and conference attendance.

I annually undertake a personal development appraisal with my employing ambulance trust and use this as a clear opportunity to guide my choice of activities throughout the year (Evidence 8). I have also started recording informal discussions with colleagues as a means of reflection on both clinical issues and mentoring of students. I have found this has encouraged me to identify a variety of new learning outcomes (Evidence 4).

One example of a discussion focused on the administration of pain relief to paediatrics. Until recently the choice of analgesia for children was limited and although I was aware that morphine was now approved for use in paediatrics I had not used the skill. My initial contribution to the discussion was in line with the majority view amongst my peers, that children should be transported quickly to hospital where the pain relief could be given. However on reflection, following the discussion, I have learnt that pain relief is often neglected in the pre-hospital environment, which may have an adverse effect on the child's psychology, recovery and extent of injury. My opinion has evolved and I now see these informal discussions as the basis for starting to review my practice. subsequently I now have a greater willingness to administer the appropriate analgesia in paediatric cases.

I also use a model (Jones/STARR) that is suggested by my professional body, this encourages me to identify my learning needs and then identify an appropriate activity, followed with a systematic review. If I am unsure about which activities to undertake for future and current practice development I

have consistent and easy access to my professional body, my education department and my line managers.

**Standard 3:**

**'A registrant must seek to ensure that their CPD has contributed to the quality of their practice and service delivery'**

It is my belief that all my CPD activities have contributed to improving the quality of the service I deliver. I have chosen two examples to demonstrate how my CPD has specifically enhanced the quality of my service delivery.

*Example 1:*

I have recently attended a useful post proficiency update course (Evidence 6) provided by my employing ambulance service. The course program is attached and outlines the sessions and associated objectives / learning outcomes which were covered. Some of the sessions such as Crime Scene Awareness I have never had any formal training in and as such my approach to future situations has changed and improved.

As part of the course I was reassessed on my advanced life support and airway management techniques. Feedback was provided on the assessments and provided reassurance that my standard of care was of a high quality. The course also included the most recent updates to national clinical guidelines. Cumulatively the development that I have undertaken allows me to introduce evidence based practice into my delivery in a measured way and to consolidate the essential techniques in resuscitation that ensure effective application in the emergency scenario.

*Example 2:*

This year I have also mentored a student, see page one for further detail. (Evidence 2). This has challenged my health care and service delivery as I have been required to check my own knowledge and skills in response to the student's questions. The student has undertaken recent training and is fully aware of the evolving scope of practice for paramedics, and has challenged me on numerous matters. In response I have chosen to investigate and understand the current and emerging issues within the profession to maintain my credibility as a mentor, to improve my knowledge base and to inform my own practice. A typical example of this is when I was questioned regarding the reforms to the Mental Health Act. (See evidence 3) I was unaware that such reforms were in progress, and although it does not have immediate implications for my practice as it is still in the consultation period, it will have in the future. Mentoring others has challenged me to keep up-to-date so that my practice can evolve in response to patient needs.

**Standard 4:**

**'A registrant must seek to ensure that their CPD benefits the service user'**

As part of my online CPD scheme I am required to submit a brief explanation or reflective journal with each activity recorded of how the activity benefited

the service user/s. The examples I have included with this profile have benefited the service user i.e. the patients and my student in the following ways.

**Evidence 1:** The College of Paramedics certificate from my online CPD scheme demonstrates that I have carried out a number of activities in the past 2 years and have also recorded how each activity benefited the service user.

**Evidence 2:** By mentoring a student and sharing best practice I have benefited both their and my own personal development and also the experience of the patients that the student is subsequently called upon to treat. We make regular time following clinical incidents/calls to evaluate the issues which inform the students practice. I also use such opportunities to evaluate my own performance and practice, reflecting on actions to improve my delivery of care.

**Evidence 3:** Informal reflection has led me to question and research some of my own actions. The result has been a change in practice on a number of occasions which has directly led to improved patient care. (e.g. change in perception with regard to analgesia for children) directly improving the range of pain management delivered.

**Evidence 4:** The seconded position to station clinical supervisor allowed me time to benefit another service group, my colleagues, whilst acting in a supervisory capacity. This ensured that I supported them in their practice and resolved any issues which impacted on the ability to respond to emergency and urgent calls.

**Evidence 5:** The post proficiency course outline shows that the general background to the course is a refresher including assessments of key competencies and also information on innovations within my practice. This will benefit service users as it shows recent assessment of my competency in established techniques and also a good understanding of the latest innovations in my service and profession. As a result I am more confident in practise and able to respond to time critical situations in methodical and consistent manner.

**Evidence 6:** The College of Paramedics conference that I attended included discussion covering key issues relevant to the profession. The knowledge gained will directly improve my patient care. The topics covered included resuscitation, thrombolysis v angioplasty and ECP developments. The networking and general discussions with paramedics from around the UK in the break out sessions was extremely helpful in crosschecking my practice against national trends and developments. This meets standards 3 and 4.

Total words: 1370  
(Maximum 1500 words)

#### 4. Summary of supporting evidence submitted

Evidence number	Brief description of evidence	Number of pages, or description of evidence format	CPD Standards that this evidence relates to
1	Certificate from professional body online CPD scheme Summary of previous two years activities	1 certificate 5 pages	1, 2
2	Mentoring diary and statement from trainee	1 yearly diary 2 page statement	3, 4
3	Notes from research into Mental Health Act	1 page	3,4
4	Informal notes from discussion with colleagues in crew room	2 pages	3, 4
5	Letter from my line manager showing evidence of secondment to position of station supervisor	1 letter	3, 4
6	Certificate and course objectives from Ambulance Service post proficiency course	1 certificate 10 pages	3, 4
7	Attendance certificate from the College of Paramedics to the national conference	1 certificate 1 programme	3, 4
8	Copy of my personal development plan	4 pages	4