

## GWAS Competency Mapping Levels of Medical Support Within GWAS

Great Western Ambulance Service NHS Trust is pleased to be able to work with a range of doctors in delivering effective pre-hospital care. In order to improve this working relationship, it is helpful to define the skills that a doctor at scene is able to provide, over and above those delivered by ambulance paramedics. In this way, individuals at a pre-hospital scene can readily gauge the skills of any doctor who may be present, and can also request the assistance of a doctor with a defined set of pre-hospital competencies. Furthermore, the adoption of an agreed and transparent framework allows individuals who wish to develop and improve their pre-hospital care skills to identify and work towards recognised competencies and qualifications.

There are three proposed levels of medical support (numbered 2, 3 and 4), and the requirements of each are listed below:

### Level Two

- Full and current registration with the General Medical Council
- Understanding of scene safety and the principles of pre-hospital care
- Patient assessment skills using an ABCD approach
- Basic airway manoeuvres and use of simple adjuncts (e.g. naso-pharyngeal and oro-pharyngeal airways)
- Delivery of oxygen
- Peripheral intravenous cannulation
- Simple haemorrhage control
- Delivery of drugs relevant to pre-hospital care, but **not** midazolam, ketamine, anaesthetic induction drugs or neuromuscular blockers
- Use of simple splints and dressings

### Level Three

- As level two, plus the following
- Previous experience of pre-hospital care, including team-working with other services, and handing over patient care
- Use of supra-glottic airway devices
- Surgical airway training
- Thoracostomy and chest drain insertion
- Use of tourniquets and advanced haemorrhage control
- Use of local and regional anaesthetic techniques (e.g. femoral nerve block)
- Intraosseous access (children)
- Delivery of midazolam and ketamine
- Pelvic and traction splinting

### Level Four

- As level three, plus the following
- Regular experience of pre-hospital care, including aeromedical work and team leadership
- Rapid sequence induction of anaesthesia and tracheal intubation
- Pre-hospital thoracotomy
- Intraosseous access (adults)
- Delivery of anaesthetic induction drugs and neuromuscular blockers

When a doctor expresses an interest in working with GWAS they will be asked to attend an initial meeting and appraisal with the GWAS Clinical Director, Air Operations Medical Advisor or Chairman of local BASICS scheme to match previous experience, skills and training courses/qualifications with the above framework.

Where possible this will be based on documentary evidence. The doctor will then be issued with an identification badge indicating their name, status and agreed level of medical support.

Medical staff are required to work within their level of competence and always in the best interests of the patient. They are also required to keep their knowledge and skills up to date, and to maintain a complete record of their pre-hospital work, making this available to the Clinical Director of GWAS on request. All medical staff are required to join a recognised pre-hospital care organisation (e.g. BASICS) and participate in local arrangements for clinical governance and audit.

For those individuals who wish to develop their pre-hospital experience and competency this will be facilitated by GWAS and the air operations team.

In general, GWAS ambulance staff will work only with those doctors able to produce valid identification as outlined above, though this will be at the discretion of the senior ambulance staff member at scene.

# Level Two Competencies

<b>Topic</b>	<b>Date</b>	<b>Instructor/ Evidence</b>	<b>Signed</b>
Full registration with GMC/NMC/HPC			
Safety at scene			
Personal protective equipment			
Assessment and initial approach			
Basic scene management			
Blunt trauma: principles			
Penetrating trauma: principles			
Oxygen delivery			
Use of suction			
OP airways (adults and children)			
Nasopharyngeal airways			
Bag valve mask ventilation			
Intravenous canulation			
Use of IV fluids pre-hospital			
Haemorrhage control – pressure & elevation			
IO access in children with IO needle			
Basic life support training			
Paediatric life support training			
Manual defibrillation			
Adrenaline (cardiac arrest & anaphylaxis)			
Amiodarone in cardiac arrest			
Atropine in peri-arrest & cardiac arrest			
Morphine for analgesia			
Cervical spine collar			
Long extrication (spine) board			
Scoop stretcher			
Monitoring carried on ambulances			
Application of splints – Vacuum, box			

# Level Three Competencies

<b>Topic</b>	<b>Date</b>	<b>Instructor / Evidence</b>	<b>Signed</b>
Extrication techniques and airbags			
Sizing and insertion of supra-glottic airway devices			
Surgical airway			
Thoracostomy and chest drain insertion			
Use of combat application tourniquet			
Use of quikclot or other haemostatic agents			
IV access: FAST1 and BIG			
Splints - Sager Traction and SAM			
Advanced life support provider (or equivalent)			
Advanced paediatric life support provider			
Communication, use of radio and mobile phone			
Documentation			
Complex scene management			
Team leadership			
Triage - sieve and sort			
Major incidents and role of MIO			
Pronouncing life extinct			
Drugs – Midazolam			
Drugs – Ketamine			
Management of myocardial infarction			
Management of head injuries			
Management of facial injuries			
Management of pelvic trauma			
Management of limb trauma			
Management of spine injuries			
Management of burns			
Management of near drowning			
Management of electrocution			
Complications of pregnancy			
Neonatal care			
Discontinuing resuscitation			
Structured handover			

# Level Four Competencies

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## Section A – Pre-hospital care and aeromedical transport

Topic	Date	Instructor / Evidence	Signed
Aircraft familiarisation			
HEMS medical passenger training			
Dispatch policies and procedures			
GWAA SOPs			
Packs and drug bags			
Daily checks, stock and ordering			
Medical equipment and monitors			
Use of ventilators			
Chemical incidents			
Critical incident reporting			
Police statement and attendance at coroners court			
Telephone calls and verbal authorisation			
Dealing with the media			
Audit and research			
CPD and portfolios			
Clinical governance meetings			

## Section B – Immediate care clinical skills

Topic	Date	Instructor / Evidence	Signed
Thoracotomy			
Emergency amputation			
Emergency Caesarean section			

## Section C – Advanced airway management

Topic	Date	Instructor / Evidence	Signed
Airway algorithms			
RSI – Indication and assessment			
RSI – Drugs			
RSI – Equipment			
RSI – Monitoring			
RSI – Tracheal intubation			
ETCO <sub>2</sub> monitoring			
Failed intubation drill			
Post-intubation management			