



Clinical Education Abstraction Procedure

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Clinical Education Abstraction Procedure

1 Scope

- 1.1. This procedure applies to those in education provided by partner organisations to deliver courses such as, but not limited to, Paramedic Courses, Paramedic Practitioner Courses, Associate Ambulance Practitioner and Emergency Care Support Worker. It aims to ensure appropriate work-life balance and minimise disruption to staff and operational delivery of patient care.
- 1.2. Staff learners attending a university programme or apprenticeship programme must achieve the required ambulance and external placement hours to pass their course.
- 1.3. Rota patterns are planned six weeks in advance. South East Coast Ambulance Service (SECAMB) will be advised by the education provider of the education timetable and placement blocks in advance of this. SECAMB will produce rostered rest day patterns for learners on programmes which will aim to ensure:
 - Sufficient shifts with registered professionals and Practice Educators ('summative mentors') as part of their educational programme requirements.
 - Work-life balance: a pattern of knowing when rest days will be, to empower planning of study time, personal time, and booking of annual leave.
 - Minimising the disruption to service delivery and patient care.
- 1.4. An education rostered rest day rota, centrally produced, will ensure opportunities are available for staff learners to complete their educational hours requirement with a Practice Educator.
- 1.5. These rotas will be reviewed by the rota review panel to ensure they meet all the requirements of the Rota Parameters Policy, with the exception of staff needing to design them. This is due to the constraints and complexity of the education programme; however, sample rotas MUST be shared with staff before advertising the roles so staff are aware of the requirements of applying for the courses.

2 Responsibilities

- 2.1 The Associate Director of Operations and Head of Production and Workforce Planning have overall responsibility for the procedure and for ensuring only required and sustainable numbers and grades for each location are put into training.
- 2.2 The Consultant Paramedic assumes responsibility for the management and timeliness of rota production by the relevant senior educational manager or delegated portfolio lead, which will need to follow the same

principles of the Rota Parameters Policy, with the exception that staff working them will not also write them, as they need to be driven by the education provider. Rotas will need to be produced 90 days in advance of any course start date and loaded onto the Trust's Global Rostering System (GRS).

- 2.3 The Clinical Education Department have responsibility for liaising with external partners, Universities, and all other placement providers so these are in line with agreed parameters.
- 2.4 The Clinical Education Administration and Scheduling teams will be responsible for co-ordinating changes to abstractions for university required placements. This will be achieved through governed and limited access to the Trust's Global Rostering System (GRS) and through regular contact with the responsible scheduling officers and managers. Changes to the rota pattern to accommodate placements will be by mutual agreement of Operations and the Education department..
- 2.5 The Clinical Scheduling Team have responsibility for abstraction of the right staff as per the Abstraction Management Document.
- 2.6 The staff learners have responsibility for requesting their leave allocation requirements to ensure the ability to complete all elements of their course within the given academic period. Ordinarily annual leave must not be taken during educational taught components and therefore should be refused if requested.

3 Procedure

- 3.1 As the timetables for each programme are published at least six months prior to start dates, the Trust has the opportunity to pre-plan the staff learners' educational and operational journey well in advance. This includes all face-to-face days spent at the University / College and any placement time planned into the programme.
- 3.2 For the purposes of ensuring the best educational experience (such as clinical simulation time), as well as ensuring minimal operational disruption due to fewer students being abstracted at any one time, the process allocates staff learners to cohorts, broken down into geographical groups. It also allows for a reduction in travel expenses as well as affording learners the opportunity to practice clinical skills in their local Operating Unit (OU).
- 3.3 The student will receive an agreement outlining a written set of requirements or 'study arrangements' that are pertinent to their particular cohort, which must be signed in order to access their place at College / University. This will include the allocation onto a training line at a station where they can be assured of mentorship hours.
- 3.4 Planned at least a year in advance, the roster will consist of a specified number of weeks of relief segments to balance hours due to variety of

shift lengths from 7.5 hours to 11.5 hours and to ensure parity for all employees.

- 3.5 During the specified placement windows, there may be a requirement to move hours as well as meeting the staff learners' requirements. Therefore, any moving of placement within the rota will be by mutual agreement of local scheduling, the learner, and the placement provider.
- 3.6 Staff learners have a requirement to meet a set number of clinically supervised hours for every year of their programme. (See Appendix A for programme requirements).
- 3.7 Some staff may need reasonable adjustments to the rota pattern which will be addressed by flexible working applications and individual rostered rest day or relief patterns. It will not be possible to remain on or return to a normal rota line until all of the educational components are completed.
- 3.8 As the successful outcome of completion of a course is promotion to a higher grade, rota lines will not be routinely protected for staff to go back onto, however, the scheduling and operational leadership teams will endeavour to support the ethos of the base rotas the individual worked before applying for the role.
- 3.9 Upon successful completion the leadership team for the learner's base OU will meet with the individual staff member to discuss rota line allocation and will look to support colleagues securing a new line on a rota of choice, subject to availability.

4 Audit and Review (evaluating effectiveness)

- 4.1 All procedures have their effectiveness audited by the responsible management group at regular intervals, and initially six months after a new policy is approved and disseminated.
- 4.2 Effectiveness will be reviewed using the tools set out in the Trust's Policy and Procedure for the Development and Management of Trust Policies and Procedures (also known as the Policy on Policies).
- 4.3 This document will be reviewed in its entirety every three years or sooner if new legislation, codes of practice or national standards are introduced, or if feedback from employees indicates that the policy is not working effectively.
- 4.4 All changes made to this procedure will go through the governance route for development and approval as set out in the Policy on Policies.
- 4.5 Education administration will monitor the availability of students for placements from information supplied by each of the supporting educational providers. This can then be planned weeks in advance and slotted into the placement element of the rota.

- 4.6 The line manager (OMs, OTLs) will monitor the student's compliance and progress with the course in the same way as they do for Key Skills. However, the Clinical Education department will monitor attendance compliance through records sent through by each provider. Any breach in attendance will be jointly managed by the relevant Operations Manager and by the Clinical Education Lead.
- 4.7 Scheduling will monitor that the right number of hours are allocated to each student to meet their individual educational requirements.

Appendix A: annual clinically supervised hours by programme

Information in this appendix is correct as of 14th February 2024. It is subject to changes initiated by Professional, Statutory and Regulatory Bodies (PSRBs) and/or by Education Providers.

Crawley College - Emergency Care Support Worker Apprenticeship

ECSW Level 3	Level 3 modules
Off the job training hours	384
Placement hours	n/a
<i>Additional abstracted hours for EPA (3 Days)</i>	22.5

Crawley College - Associate Ambulance Practitioner Apprenticeship

AAP Level 4	Level 4 modules
Off the job training hours	514.3
Placement hours	n/a
<i>Additional abstracted hours for EPA (3 Days)</i>	22.5

University of Cumbria - Bridging Course

	Level 4 modules
Clinical (Paramedic) hours	375
Placement hours	n/a
Additional abstracted hours for tutorials	8 (4 x 2 hours)

St George's, University of London - Paramedic Science

	Level 4 (year 1) modules	Level 5 (year 2) modules	Level 6 (year 3) modules
Clinical (Paramedic) hours	375	375	375
External placement hours	n/a	150	150

University of Cumbria - Paramedic Science Apprenticeship

	Level 5 (year 1) modules	Level 6 (year 2) modules
Clinical (<i>Paramedic</i>) hours	400	400
Placement hours (5 x 11.5)	57.5	57.5
<i>Additional abstracted hours for self-study</i>	115	115

St George's, University of London - Advanced Clinical Practice (Urgent and Emergency Care)

Abstraction	Hours	Notes	
Preceptorship Phase 1	37.5	Abstraction over 3 years	Year 1
Preceptorship Phase 2	37.5		Year 1
Preceptorship Phase 3	37.5		Year 2
Preceptorship Phase 4	37.5		Year 3
Preceptorship Phase 5	37.5		Year 3
Minor Injuries	75	Over 2 weeks	Year 2
Minor Health	75	Over 2 weeks	Year 2
GP Placement	589	1 shift per week for 52 weeks	Across year 2 and 3
Mental Health	75	Over 2 weeks	Year 3
Palliative Care	75	Over 2 weeks	Year 3

5 Equality Impact Assessment