



**Ambulance**  
Victoria

Inter-Professional Graduate Program

# Information Manual



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# WELCOME MESSAGE

On behalf of Ambulance Victoria (AV) and [**<<insert health Service >>**], we would like to welcome you into the Inter-professional Graduate Program (IPGP). Congratulations on achieving this milestone in your career. We understand that it represents a huge commitment of your own resources and time. Well done!

The aim of the Inter-Professional Graduate Program (IPGP) is to develop your practice in both the disciplines you have studied over the same time period, rather than choose one over the other. We also hope that you will maintain your practice in both Nursing and Paramedicine once you have completed the program. This will give you the ability to be responsive to the health sector in the future. With the impending registration of Paramedics, there will be many career opportunities opening up, and a dual graduate with clinical currency in both disciplines would be at an advantage.

This is an exciting time for all of us. You represent the present and future of our organisations as you establish your career as an Ambulance Paramedic and a Registered Nurse.

We anticipate that you will have many questions about how things work within AV and the Health Service. The Induction Programs are geared towards addressing as many of these questions as possible. Our advice is simple – ask questions!

The AV Induction Program is made up of a subset of programs including the Clinical Orientation Program (COP), Driving Program and other organisational specific training days. You will learn about the many different aspects of Ambulance Victoria undertaking this Induction Program. The COP is a five day Program that spans over a two week or a three week period depending which group you have been allocated to.

It is NOT expected that you will be proficient or even an expert with your Clinical Practice Guidelines for patient treatment by the end of your Induction Program. The Clinical Orientation Program will focus heavily on the assessment aspects of your Clinical Practice Guidelines. In other words we need to ensure that everyone is ready to 'hit the road' with a good understanding of our Clinical Approach, using AV centric assessment frameworks as well as familiarisation with AV specific equipment and processes.

Specific CPGs will NOT be covered during your Induction program time here. There is also an underlying expectation that having completed an undergraduate degree in Paramedicine, you have acquired the detailed basis of the pathophysiology of various medical and traumatic conditions and syndromes, and their evidence based treatment regimes. The CPGs form a framework of how these medical and traumatic conditions and syndromes are specifically assessed and treated within the AV context. The onus is on you as an adult learner and health care professional to orientate yourself and become proficient with the AV CPGs as set out by your graduate program requirements.

The Health Service orientation program comprises of hospital orientation, and approximately four (4) professional development days to further develop practical skills, complete online learning competencies and modules and an overview of the nursing component of the IPGP with an understanding of expectations and timelines for assessments.

Once again, a warm welcome to you all and we wish you all the best in your new career path.

*Warm Regards*

*Operational Education Team (AV) & Graduate Transition Team (HS)*

# 1.PROGRAM OVERVIEW

## AIM OF THE INTER – PROFESSIONAL GRADUATE PROGRAM (IPGP)

The aim of the IPGP is to facilitate the professional and clinical development of the Graduates into an Advanced Life Support (ALS) Paramedic, and to build confidence and competence of the beginning practice of the Registered Nurse. It is designed to enable tertiary qualified graduates to consolidate their learnt theoretical concepts through professional development and integrate these into practice in clinical environments. At the successful completion of the program the Graduate will qualify and receive an Authority to Practice as an ALS Paramedic and be able to use their registered Division 1 Nurse graduate program experience to apply for nursing positions worldwide.

The program aims to build on fundamentals of a Graduate's training with further clinical study, on-road training, supervision, learning and associated study days to assist with the transition to the operational world. Clinical instructors ,clinical educators, graduate support nurses and other associated paramedical and nursing colleagues provide mentoring and supervision to guide and facilitate this process and integrate Graduates into day to day team responsibilities and activities.

The key roles who provide support in Paramedic placements are Clinical Instructors (CI), Paramedic Educators (PE), Team Managers (TM), and other AV Paramedical and administrative staff. Graduate coordinators, graduate support nurses and clinical nurse educators provide mentoring and support as necessary in the health service environment,

*Please Note:* The term “Clinical Instructor” has been used throughout this manual, and refers to a sessional Clinical Instructor, Paramedic Educator, or any Qualified Ambulance Paramedic (QAP) or MICA Paramedic working in the supervisory capacity of a CI.

A reference list of the acronyms used can be found in Appendix A.

A Graduate is required to undertake and successfully complete all stages of the theory, driving and on-road practical skill components of the AV component of the program and also complete requirements as indicated by the health service

## WHAT IS EXPECTED OF THE GRADUATE?

The expected attributes of a Graduate are as follows:

- Has a caring, empathetic nature
- Good communication skills
- Has the capacity to remain calm, think clearly and act quickly in stressful situations
- Values teamwork
- Is self-reliant
- Displays adaptability to varied situations
- Is resilient
- Has the ability to follow instructions and guidelines
- Maintains a good level of health and physical fitness
- Has the fundamental theoretical knowledge required
- Apply an appropriate ethical and professional construct as an emergency care provider to the field of community based emergency health
- Identify and respond appropriately to actual and potential health and safety matters that impact on self, colleagues, patients and members of the public

- Utilise appropriate initiative to meet learning needs and demonstrate continued personal and professional growth
- Display clinical competence in the community based emergency health setting using a patient-centric, systematic clinical approach that utilises effective interpersonal communication techniques and sound clinical problem solving skills
- Demonstrate an awareness of, and engage effectively and cooperatively with co-professional agencies and/or professional roles that support operational practice both internally and externally.
- Integrate sound application of the Clinical Practice Guidelines (CPGs), work instructions, driving standards and operational procedures applicable to Ambulance Victoria's pre-hospital emergency response

## EXPECTED CONDUCT

The following behaviours are adapted from Ambulance Victoria's Behavioural Capability Framework and the Registered Nurses' Professional Standards of Practice including the Code of Professional conduct; the Code of Ethics; the Guide to Professional Boundaries and the Standards of Practice. These professional standards form the foundation of the conduct expected of a Graduate undertaking the IPGP.

- Focuses on safety
- Achieves results
- Is collaborative
- Achieves self-set goals
- Believes that individual effort is important
- Accepts and shares responsibility
- Takes on challenging tasks
- Is insightful in diagnosing problems
- Is a creative problem solver
- Is non-defensive
- Has self-respect
- Responds maturely towards constructive criticism
- Encourages growth and development in others
- Resolves any conflicts constructively
- Is trustworthy
- Involves others in decision making
- Motivates others by serving as a role model
- Is co-operative, friendly and genuine in concern for others
- Accepts change



## GRADUATE ACCOUNTABILITIES

The key accountabilities of a Graduate are:

- The Graduate is responsible for working as per AV and the health services' policies and procedures, CPG's and CWIs
- The Graduate will attend all study days and successfully complete all assessments and course work as per the program
- The Graduate is responsible for their own professional development, for example ensuring all appropriate requirements/documentation is submitted within the prescribed timeframe
- Follow AV and the health services health and safety procedures
- To drive AV vehicles in a safe and expedient manner in accordance with AV policy and procedure
- To maintain all equipment and ensure vehicle is prepared, maintained and equipped in accordance with AV standards
- To assist the Team Managers(TM) and team members by undertaking duties to ensure the branch functions at all times, and is secure and clean
- To assist the Nurse Unit manager (NUM) and nursing team to ensure quality patients care
- Be professional at all times in complying with AV and the health service's policies and procedures in regard to professional conduct and presentation (especially when interacting with the public and other health care providers)
- Ensure patient information is confidentially maintained and protected at all times.

## PROGRAM SUPPLEMENTS

- The AV component of the IPGP is delivered in conjunction with the Continuing Professional Development (CPD) programs offered by AV. Therefore, the Graduate will be required to successfully complete all components of the AV Program, as well as fulfil the CPD requirements. The programs may include:
- An organisational and clinical induction program.
- Ongoing supervised clinical practice
- Continued professional development, e.g. Self-directed online learning packages
- External personal preparation, study and review
- Senior Clinician's reviews Clinical Manager (CM), Clinical Support Officer (CSO), CIs, PE's) In-Field Audits.

## IPGP AND AV POLICIES AND PROCEDURES

The program is delivered in conjunction with both AV and the health Service's policies, procedures, standards and professional development programs.

## AV POLICIES, PROCEDURES AND STANDARDS

During the program, the Graduate is assessed and measured against AV standards. The standards that a Graduate will be measured against are:

- AV CPGs and related theoretical understanding
- AV Clinical Work Instructions (CWIs) and related theoretical understanding
- AV Policies and Procedures
- AV CPD material
- Workplace Conduct Policy (POL/PAC/009)

## AV UNIFORM POLICY AND PERSONAL PRESENTATION STANDARDS

AV has strict grooming and uniform requirements which must be adhered to for the duration of your entire career as an ambulance paramedic, including the GAP induction program and the IPGP.

Graduates are required to wear AV approved uniform at all times during shift. This includes items such as AV issued undershirts, boots or shoes, and other official uniform items such as pants, belts, shirts, jumpers, coveralls and jackets. This includes the wearing of epaulettes and name badges on all required uniform. The Operational Uniform and Personal Presentation Policy can be found on the AV intranet (WIN/OPS/176). Please familiarise yourself with this policy.

**EPAULETTES:** As part of the AV uniform, Graduates wear epaulettes that denote to other paramedics the level of clinical knowledge, expectation and practice.

The Graduate epaulettes recognise that they are academically qualified, but not yet ready to practice independently. There are two distinct epaulettes worn by Graduates: a caduceus with a single stripe = practicing under direct supervision (stage 1), or a caduceus and the words "Graduate Paramedic" = practicing under indirect supervision (stage 2).



You will be provided with the appropriate epaulettes for the relevant stage of the program. On progression from Stage 1 to Stage 2, or from GAP to QAP, the Graduate must return superseded epaulettes to OPERATIONAL EDUCATION : 75 Brady Street, South Melbourne 3205 (DX 212566). Graduates must

wear the relevant epaulettes at all times on all required uniform. Please make sure that you return your epaulettes to the Operational Education Department once your new epaulettes arrive.

## HEALTH SERVICE UNIFORM POLICY INFORMATION

A copy of the health service uniform policy will be attached as an appendix to this document for your information and application

Please note that uniform is required to be worn when attending health service professional development study days.

## 2. INTER-PROFESSIONAL GRADUATE PROGRAM

### GRADUATE PARAMEDIC COMPONENTS

1. Induction
2. Stage One: Direct Supervision; and
3. Stage Two: Indirect Supervision.

Program Components	Hurdle Requirements
<b>Induction</b>	<input type="checkbox"/> 100% attendance <input type="checkbox"/> Defibrillation accreditation <input type="checkbox"/> Meets standard of driving units 1-4
<b>Stage One: Direct Supervision</b>	<input type="checkbox"/> AV familiarisation checklist <input type="checkbox"/> Branch induction checklist <input type="checkbox"/> Certified confirmation of university completion <input type="checkbox"/> Online campus activities - Ground floor, Level 1 and Level 2 <input type="checkbox"/> Meets standard of driving unit 5 <input type="checkbox"/> Achieve 'competent' in all criteria of GPR by roster block 5 <input type="checkbox"/> Completes 20 weeks on road experience
<b>Stage Two: Indirect Supervision</b>	<input type="checkbox"/> Maintain 'competent' for all milestones in GPRs for roster blocks 9 and 11 <input type="checkbox"/> Stage 2 Online learning modules <input type="checkbox"/> 100% attendance in EPA preparation day <input type="checkbox"/> TM/CSO/GM recommendation to attend EPA submitted at least 10 days prior <input type="checkbox"/> Submit driving portfolio 6 weeks after Stage 2 progression <input type="checkbox"/> EPA (week 1 of roster block 12) <input type="checkbox"/> Completes 12 weeks on-road experience

**Table 1: Depicts these components and the elements of the program that Graduates are required to complete to successfully obtain an authority to practice as an ALS Paramedic. Further information is provided for each stage thereafter.**

### HURDLE REQUIREMENTS

A hurdle requirement is a compulsory component within the paramedic component of the program that must be successfully completed in order to progress to the next stage. These hurdles aim to ensure that the Graduate is safe to practice, initially under direct supervision and then with indirect supervision. They also provide a framework that demonstrates the Graduate is progressing through the program as required and reaching the educational, driving and clinical targets within the prescribed timeframes. Not passing a hurdle requirement may ultimately result in the commencement or continuation of informal counselling and performance management as per the Counselling and Disciplinary Procedure (POL/PAC/047).

Program hurdle requirements must be successfully completed to ensure progression from Induction through to Stage 1; Stage 2; and finally, achieve qualification as an Ambulance Paramedic.

The hurdle requirements for each stage of the program will be discussed in the following sections.

## AV INDUCTION – GRADUATE AMBULANCE PARAMEDIC

AV Induction program is a hurdle requirement. Graduates must complete the following modules over a period of three or four weeks:

- Organisational module (4 days)
- Clinical Orientation (5 days)
- Ambulance driving (5 days)

Each module may not be presented in a consecutive block of days. A timetable for the induction program will be provided to Graduates prior to commencement of the program.

Attendance is compulsory and Graduates are required to attend 100% of the sessions. If a session is missed due to extenuating circumstances then they will have to attend the missed part at another time prior to the commencement of the on-road component for Stage 1.

## AV ORGANISATIONAL MODULES

The organisational component will familiarise the Graduate with the structure of Ambulance Victoria and the policies and procedures relevant to their paramedic practice. There are two components to this:

## AV CLASSROOM-BASED ACTIVITIES

The classroom-based activities include training in Emergency Management and Occupational Health and Safety areas such as Aggression and Assault Prevention (AAPT), manual handling, and fatigue risk management. There is also a regional induction day where Graduates will learn about the region they are working in and meet some of their key contacts such as TMs, CSMs, CSOs, CIs and PEs. The Graduate is required to actively participate in these sessions.

## AV ONLINE LEARNING MODULES

The online learning modules are in the form of a virtual building in which there are floor levels that you progress to. Each floor contains modules that you must complete prior to moving to the next level.

Table 2 below is an overview for Graduate Ambulance Paramedics:

Employee Induction Course		
<b>STAGE 1</b>  These modules must be completed by Stage 1 Cycle 5	Ground Floor	<ul style="list-style-type: none"> <li>o AV Overview</li> <li>o EEO</li> <li>o HSW</li> </ul>
	First Floor	<ul style="list-style-type: none"> <li>o Professional Standards</li> <li>o Media</li> <li>o Employee Benefits (Super/Salary Packaging)</li> <li>o AAV</li> <li>o ARV</li> <li>o Single Responders</li> </ul>
	Emergency Management Unit – Stage 1	
		<ul style="list-style-type: none"> <li>o Rural RTA Scenario INDUCTION</li> </ul>
<b>STAGE 2</b>	Graduate Paramedic Induction Program – Stage 2	
		<ul style="list-style-type: none"> <li>o Fatigue – you and your safety</li> <li>o Overview of CPG's</li> <li>o AV Trauma</li> <li>o AV Medical</li> <li>o Death and Dying</li> <li>o Overdose</li> </ul>

**Table 2: Overview of Online Learning Modules.**

## AV CLINICAL ORIENTATION

- The duration of the Clinical Orientation Program is 5 days, usually split across the Induction weeks.
- The intent of the Clinical Orientation is to induct new Graduates into AV's approach to a patient, patient assessment practices and clinical treatment practices. The focus will be on:
- Clinical approach framework
- Clinical assessment frameworks
- Equipment and processes used in clinical assessment and treatment
- Structured communication approaches to clinicians and other health care professionals

The intent is not to look at specific CPGs as Graduates are not expected to achieve proficiency with these until the third roster cycle of their Supervised Stage 1.

At the completion of the Clinical Orientation, Graduates should:

Gain an understanding of the established clinical governance frameworks of Ambulance Victoria

Be familiar with practical application of AV specific equipment that are used in the clinical assessment and treatment of patients

Gain their defibrillation accreditation

The Clinical Orientation week assumes that Graduates have gained sufficient underpinning knowledge during their undergraduate degree. Hence it will not cover subject matter around anatomy, physiology or any detailed pathophysiology or pharmacology.

## AV DRIVING PROGRAM

The driving program includes units 1-4 of the low risk driving model which will prepare Graduates to drive the ambulance.

The Driving Standards Program (DSP) units 1-4 (non-emergency driving) is a five day program for new employees, providing knowledge and skill to empower inductee's to implement and continue to develop their driving for which specialised medical or transport skills are necessary.

As the inductee has a license and has met the requirement to legally drive, the DSP is specialist driver course aimed at;

Familiarising the student with a new vehicle and a new driving environment,

Giving the student mechanism to deal with the stressors of the ambulance environment whilst driving (radios, patients, alarms etc.),

Familiarising the inductee with relevant AV policy, procedure and legal requirements

Developing a driving ethos in line with the code of conduct.

## AV DAILY REQUIREMENTS FOR THE DSP;

Driver's license

Yellow safety vest

Sunscreen, hats, wet weather gear etc.

We do spend a lot of time on the road so it's not always convenient to bring meals that require heating etc.

## AV INDUCTION HURDLE REQUIREMENTS

1. 100% attendance at all sessions.

Absence from induction sessions potentially places the safety, well-being and clinical competence of the Graduate at risk, and may impact on other staff or patients.

- Process: any session that is not attended by a Graduate may require the individual to meet with the Operational Education Delivery Manager and the relevant TM to discuss their absence. A plan will be implemented for the Graduate to ensure the content is covered.
- Outcomes: This may result in the Graduate being delayed in starting on road. In some circumstances, informal counselling and performance management (POL/PAC/047) may commence where required.

2. Successful completion of defibrillation.

An outline of the defibrillation and resuscitation protocol can be found on the AV Intranet.

- Pass: Requirement achieved, progress to Stage 1: Direct Supervision
- Not pass: Not accredited to defibrillate – will have to re-sit (usually in-field) and achieve a pass.

3. Meet the standard of the Driving Program

All information regarding the criteria for successful completion of the Driver Standards Program (DSP), and the process for addressing unsatisfactory performance, are included in the DSP manuals and information sessions provided during the DSP. The DSP information must be read in conjunction with this manual. Please refer to the driving standards manual for more information.



## AV STAGE 1 DIRECT SUPERVISION

Stage 1 of the AV component of the program involves working 5 roster blocks on-road (20 weeks) under direct supervision, and completion of some online campus activities. This means that the Graduate is rostered with cycles, and practices under, the mentoring and guidance of a CI, PE or QAP (ALS or MICA). These paramedics will help the Graduate to manage their learning effectively.

## AV STAGE 1 SCOPE OF PRACTICE

During Stage 1 of the program the Graduate is eligible to apply all ALS AP skills, as indicated by the AV CPGs, under the direct supervision of a CI, PE or QAP.

## AV CLINICAL INSTRUCTORS AND GRADUATE PROGRESS REPORTS (GPRS)

A GPR is an educational tool that is used to measure and track a Graduate's development, education and progression through the program in all areas relevant to patient care and paramedic practice. GPRs assist in monitoring and reporting the learning and development activities of the Graduate. They can be found on the Operational Education website on AV Intranet.

Table 3 below outlines the recommended criteria that form the assessment requirements. Some criteria take longer to develop in and learn, and this is reflected by the recommended number of cycles it will take a Graduate to become competent in the area.

Criteria	Recommended Achievement by Roster
Dispatch	End of Block 1
At Scene	
Documentation	
Completion of case	
Team Relationship	
Relationship with patients	
Motivation and learning	
Professional appearance	
Primary Survey of Patient	End of Block 2
Initial Management	End of Block 3
Vital Signs Survey	
Patient Assessment	
Av Clinical Practice Guidelines	
Differential Diagnosis	
Patient Management	End of Block
Specific Understanding	

Ongoing Management	4
Rapport and Handover	
Scene Participation	End of Block 5
Driving	
Operational Understanding	
Operational Dispatch	
It is a HURDLE requirement that all areas be graded “Competent” by the end of Block 5	

**Table 3: Stage 1 Assessment Requirements**

Each performance criteria in the report requires one of the following judgements to be made:

- Competent
- Emerging competence
- Not competent

Whilst in Stage 1, Graduates require direct supervision. When assessing a Graduate as "competent" the expectation is that they still may require some supervision. This is outlined in the GPR document.

Unfortunately there may be roster blocks where a Graduate is not rostered with a CI or PE. If the Graduate is rostered with an ambulance paramedic then they, at the discretion of the TM, may fulfil the duties of a CI and subsequently complete the CI report or an addendum report which should be submitted to the Operational Education department by the Graduate. In rare circumstances where all of the above options are unavailable the Graduate is expected to seek regular feedback from a member of the clinical team at the branch and speak to their TM if any issues arise.

## AV STAGE 1 PROGRAM DELAYS

Direct supervision can be individualised and extended if required. Programs may be extended due to unsatisfactory completion of hurdle requirements, injury or sick leave, driving issues, no GPRs etc.

## AV ONLINE CAMPUS ACTIVITIES

During Stage 1 there are several online campus activities which need to be completed. These involve working through the 'rooms' of the Ground Floor, Level 1 and Level 2 of the 'AV Induction building'. To access the building you will need to logon to the Learning Management System (LMS). It is available through AVs Intranet, or your own computer at <http://www.ambulance.vic.gov.au/Paramedics/staff.html>



The online learning requirements are as follows:

- By the end of Roster Block 5 you need to have completed the Ground Floor, Level 1 and level 2 modules (table 2). This is a hurdle requirement and must be completed in order to proceed to Stage 2.
- 2.
- There are additional modules to be completed in Stage 2.

Each of the modules should take approximately 10-20 minutes to complete. Progress will be able to be stopped at any time and then easily picked up again later should the Graduate require an intermission. This is a really important feature and means that the activities can be self-paced. It is estimated these will take up to 8 hours in total to complete.

## ANNUAL LEAVE DURING THE PROGRAM

Annual leave has been allocated to graduates during the Inter-Professional Graduate Program

## AV STAGE 1 HURDLE REQUIREMENTS

### 1. **Completes Branch induction checklist and AV Familiarisation checklist (see Appendix B)**

- By the end of roster block 1
- The Branch induction checklist is to be completed on or soon after the Graduates first day at their allocated branch.

The aim of the checklist to ensure that all the necessary information to assist transition into AV branches has been provided. This should be completed by the CI, TM or an experienced team member from the branch. The original is to be filed at the branch and one copy must be sent to [graduates@ambulance.vic.gov.au](mailto:graduates@ambulance.vic.gov.au)

**2. Provides certified copy of confirmation of university completion**

- By the end of roster block 1
- What is required is a certified copy (DO NOT send in original document) of something that states that your award has been conferred or that you have qualified. For example an official letter of completion, your graduate certificate or academic transcripts with “award conferred on [DATE]” written at the end of your results
- This must be sent via post only. Copies, photos and scans of these documents will not be accepted.

**3. Online campus activities**

- Ground Floor, Level 1 and Level 2 to be completed by the end of roster block 5

**4. Successful completion of the Driver Standards Program (DSP)**

Code 1 emergency driving (unit 5) is conducted during Stage 1 (unless additional remedial training is required to maintain the unit 1-4 standard; this may affect the timing of the unit 5 sign-off to drive Code 1 cases).

- Unit 5 (emergency driving) follows the five day induction program - and is a skill consolidation of the units 1-4 followed by an in-field coaching and assessment to allow real time feedback in emergency response under a Driving Standards Facilitator's (DSF) guidance. It occurs after a minimum of 10 weeks of in-field experience.
- The DSP process for the Graduate year encompasses documented feedback from DSF's, TM and CI as well as self- evaluation.
- To gain an Authority to Practice the Graduate must complete the integrated driving assessments over the program period which includes units 1-4, unit 5, a driving portfolio and open book exam.
- All information regarding the criteria for successful completion of the DSP, and the process for unsatisfactory progression, are included in the DSP manuals (MAN/OPS/003) and information sessions provided during the DSP week of induction. The DSP information must be used in conjunction with this manual.

**5. Submits GPRs for Roster Blocks 1-5**

- All criteria to be graded as “competent” by the end of roster block 5
- If a grade of “competent” is not achieved in the designated timeframe, an individualised approach via a CIBoR education plan may result. Failure to meet the assessment requirement may result in the Graduate not being credentialed to progress to Stage 2. Informal counselling and performance management (POL/PAC/047) may be initiated in accordance with the policy. Additional supervised time on-road may be required along with the completion of a CIBoR.
- It is the Graduate’s responsibility to ensure GPRs are submitted to graduates@ambulance.vic.gov.au within one week after the completion of the roster cycle.

**6. Attendance – completes 20 weeks on-road experience**

- Extended time off due to illness, personal leave, injury or other prolonged absence may affect the timing of the Graduates progression
- Refer to Procedure PRO/OPS/223 – Regaining Authority to Practice Following an Absence for the prescribed requirements based on the graduate’s circumstances for extended periods of leave.
- This process will be undertaken by the Operational Education Delivery Manager in consultation with the TM, GM and other departments as required.

**In all cases of absence from duty, the Graduate must inform the Duty Manager (Metro -1300 551 624, Rural – 1300 113**

**319) as soon as possible. If the absence is extended, then the Graduate must inform their Operational Education**

**Administration team member so that it can be recorded accurately and program amendments can be made if required.**

**Notification of approval to move from Stage 1 to Stage 2 is received via letter from Operational Education.**

## **MAKING THE TRANSITION FROM AV STAGE 1 TO STAGE 2**

The transition recognises the important achievement that the Graduate has attained in successfully completing the requirements of working under direct supervision.

The experience of the transition period differs between Graduates and can be a daunting experience. During Stage 2 there is an expectation that a Graduate will develop a level of autonomy and increased confidence in their clinical knowledge and application, patient care, professionalism and overall paramedic practice. There are people available to help you to manage this transition and any uncertainty you may experience.

TMs, CSOs, CIs, PEs, Operational Education Department, Group Managers, CSMs and QAPs are all available to help the Graduate through this time and answer any questions that they may have. Peer

Support and our Employee Assistance Program (telephone: 1800 MANERS) are two other resources which can be accessed confidentially.

## AV STAGE 2: INDIRECT SUPERVISION

Stage 2 supports the Graduate in achieving their individual development needs by providing them with the opportunity to demonstrate and apply their skills in an independent but supported environment.

During Stage 2 the Graduate is practicing under indirect supervision. This means that a Graduate may practice patient care at an ALS level in a clinical setting without being directly supervised by a CI, PE or AP (ALS or MICA).

Stage 2 culminates in final assessments known as the End of Program Assessments (EPA). The Graduate must pass these assessments in order to be eligible for progression to the Credentialing Committee, who endorses the practice level of Graduates to become Qualified ALS Paramedics. More information about these assessments is provided in this manual.

## SCOPE OF PRACTICE DURING AV STAGE 2

During Stage 2, the Graduate will operate under indirect supervision. The Graduate is eligible to apply all ALS skills as indicated by the AV CPGs. and the Authority to Practice Matrix under the indirect supervision of a Clinical Instructor, Paramedic Educator or a Qualified Paramedic.

A Stage 2 Graduate should not be rostered with an Ambulance Paramedic (Basic Life Support) or an AP12 (Ambulance Paramedic with less than

12 months experience). If this occurs, the Graduate must immediately alert the DM.

## AV CLINICAL INSTRUCTORS AND GRADUATE PROGRESS REPORTS FOR GRADUATES

Cycle 6 is a review period whereby the Graduates clinical practice is monitored by a CI who then completes a GPR on their performance over the roster block. PEs, TMs, CSOs and ambulance paramedics (where appropriate at the discretion of the TM) can also complete the GPR if they are working with a Graduate in this stage of the program.

Nominally, Cycle 8 is a Pre-EPA review period which is a Graduates final month on-road before their assessments to become a credentialed paramedic. With graduates that have been delayed, when they reach this Pre-EPA review period, the same Cycle 11 requirements will apply to these graduates. A fully competent GPR is required for this roster block as well as an endorsement from their TM before they are eligible to sit the EPA.

Table 4 below outlines the recommended criteria that form the assessment requirements for Stage 2. Graduates must maintain competence in all assessment criteria outlined in Stage 1 also.

Criteria Block	Recommended Achievement by Roster
Competence must be maintained in ALL milestones from Stage 1	
Operational Safety	End of Block 8
Operational Scene Time	
Documentation / VACIS Completion	
It is a HURDLE requirement that all areas be graded “Competent” by the end of Block 8	

**Table 4: Stage 2 Assessment Requirements**

## AV END OF PROGRAM ASSESSMENT - EPA

The AV component of the Program concludes with a series of skills stations and assessments, conducted over two days (the preparation day and the assessment day). The Graduate will be required to attend both days and successfully complete all assessments to be eligible for credentialing as an ALS Ambulance Paramedic.

### AV- THE PR-EPA - RATION DAY

Day 1 of the EPA process is a preparation and study day which is held 4 weeks prior to the EPA during the pre-EPA CI month. This day consists of review, discussions, skills stations and scenarios in preparation for the final assessments.

If a TM determines that a Graduate is not ready to attend the EPA preparation then they must contact Operational Education via ([graduates@ambulance.vic.gov.au](mailto:graduates@ambulance.vic.gov.au)) stating this and the reason(s) for delay. Any Graduate who does not attend the preparation day will not be eligible to sit the EPA the following month. They will be scheduled into the next available EPA preparation day.

## AV STAGE 2 HURDLE REQUIREMENTS: PROGRESSION TO THE EPA

The following are hurdle requirements that must be met in order to progress to the EPA.

**1. Two GPRs completed during the CI review roster cycles in Stage 2. The Graduate must maintain competence in all areas of the reports.**

- Competent: Recommendation from the Graduate's TM that they can progress to the End of Program Assessment.
- Emerging Competence / Not Competent: Where a Graduate fails to reach competence, a MAG may be provided. If the Graduate is not competent in all areas in the final GPR prior to the EPA, this may result in informal counselling, the commencement or continuation of the performance management process in accordance with AV policy (POL/PAC/047).

**2. Attendance – Completes 12 weeks on-road experience**

- Extended time off due to illness, personal leave, injury or other prolonged absence will affect the timing of the Graduates progression to the EPA and hence, their final credentialing date.
- Refer to Procedure PRO/OPS/223 – Regaining Authority to Practice Following an absence for the prescribed requirements based on the graduate's circumstances.
- This process will be undertaken by the Operational Education Delivery Manager in consultation with the TM, GM and other departments as required.
- The Graduate must be recommended/endorsed to attend the EPA by their TM, following the submission of a "competent" GPR.
- Email endorsements for the EPA must be provided at least 10 days prior to: [graduates@ambulance.vic.gov.au](mailto:graduates@ambulance.vic.gov.au)

**3. Pr-EPA-ration day:**

- 100% attendance for the day
- Not Present: Graduate is unable to progress to EPA without attending the preparation day. Graduate will work on road for an additional month with further support and education. The Graduate will return the following month to complete study day followed by the EPA as deemed appropriate by their TM.

**4. Recommendation to attend EPA**

- Submitted by TM/CSO/GM
- Must be submitted at least 10 days prior to the EPA
- The Graduate must be able to fulfil full operational duties.
- If the Graduate has an unresolved Clinical Review the Clinical Support Manager will need to clear the Graduate to attend EPA if appropriate.



**5. Completion and submission of driving portfolio**

- To be submitted by week 2 of Stage 2, you will not be rostered into your Pr-EPA-ration (Study) day until this is receipted by Operational Education.
- It is the Graduates responsibility to keep a copy of the relevant pages for their own records

**6. Online campus activities**

- Stage 2 online Learning Modules are to be completed by the end of roster block 7.

**Whilst every effort will be made to allow the Graduate to progress to the EPA, the Graduate MUST be operating at the standard of a safe and competent ALS Paramedic for the CI and TM Endorsement to occur.**

If an assessment is delayed, the Graduate will be scheduled into the next available EPA once requirements have been met.

Where it is revealed there are significant performance gaps then an individual Milestone Achievement Guide (MAG) is developed with specific requirements and timeframes that must be met. This may form part of the performance management process and include additional time on- road with AP supervision.

## AV - THE EPA FORMAT

The EPA consists of multiple assessment points (stations) which require the Graduate to demonstrate their ability to perform a systematic assessment, apply their CPG knowledge, their competence at clinical skills, their underlying knowledge base and their clinical reasoning.

Details of the assessments will be provided to individuals closer to the time of attendance, however will involve:

- Verbal Panel scenarios
- Skills Stations
- Defibrillation accreditation including resuscitation and airway management for adult and paediatric patients

Every CPG and CWI is a potential examination question. There will be no 'practice' questions offered to Graduates, as the CPGs and CWI's provide guidance on every practice question available. In addition, the purpose of the EPA is not to "learn an answer". It is an examination of understanding, expertise and clinical decision-making. Graduates will need to receive a score of satisfactory in all EPA stations to successfully pass the assessment.

## AV - THE PANEL OF ASSESSORS AND MODERATION

Assessments will be conducted by a 2-person panel consisting of Educators, CSOs, TMs, PEs and/or CIs, subject to operational availability. In this case the assessments may be audio and/or video recorded. In the event that there is a 1 person panel, then these WILL be audio and/or video recorded. This is to ensure assessments can be moderated and fairly reviewed should the need arise.

## AV RESULTS

- **Successful:** Graduates who successfully complete EPA will be recommended to the Credentialing Committee for change of status to the Ambulance Paramedic level at the beginning of the next roster cycle.
- **Not Successful:**
  - o **Not Competent Verbal Panel Scenario-** If a Graduate has failed their EPA panel assessment Operational Education recommends they complete a minimum of three FULL roster cycles on road (not including the roster cycle the graduate sat the EPA), with a CI or appropriate ALS paramedic. However if deemed appropriate by the Team Manager for the Graduate to attempt a resit earlier than this, a written agreement must be reached between the TM, CI and the Graduate that this can occur. This written agreement is to be communicated to Operational Education at least 10 working days prior to the scheduled resit, to allow for the appropriate planning of resources. A fully competent Progress Report and Team Manager endorsement must be received for the Graduate to be able to attempt a reassessment of the Verbal Panel Scenarios.

Once proficient, the Graduate will then be recommended for credentialing and will be qualified as of the beginning of the following roster cycle.

**If the Graduate fails their second attempt** at the Verbal Panel Scenarios a minimum of one FULL roster cycle must be completed with a CI or appropriate ALS paramedic. (This is NOT inclusive of the roster cycle the graduate has undertaken their assessment in). Again, a fully competent Progress Report and Team Manager endorsement must be received before the Graduate can attempt a further Verbal Panel Scenario reassessment.

- o **Not Proficient CWI Skills**-The Graduate is required to complete a reassessment of 4 CWIs from a list of 20 (including any they were deemed not proficient in). This reassessment will be completed on road with a CSO within 4 weeks of returning to on-road duties. Once proficient the Graduate will then be recommended for credentialing and will be qualified at the beginning of the following roster cycle.
- o **Not Proficient Defibrillation Accreditation** (Written and/or Scenario)-The Graduate is required re-sit the Defibrillation Accreditation infield with a CSO within 2 weeks of returning to on-road duties. Once proficient the Graduate will then be recommended for credentialing and will be qualified as of the beginning of the following roster cycle.

Graduates that are unsuccessful in completing any component of their EPA may need remedial strategies developed to identify and correct any issues with their clinical knowledge and/or practice. This may include a period of direct supervision with a suitable clinician and/or re-assessment of skills and expected level of paramedic knowledge. This may be delivered as a CIBoR or MAG if considered appropriate. After completion, they will then return for a re-assessment. Graduates are reminded that this can be a stressful period and that staff support services can be accessed on 1800 MANERS

## CHEATING, COLLUSION AND PLAGIARISM

Cheating, Collusion or Plagiarism is considered a serious matter within AV. If any incident of Cheating, Collusion or Plagiarism is suspected, it will be referred to the relevant Cheating, Collusion and Plagiarism policy and the POL/PAC/047 Counselling and Disciplinary Policy.

## ASSESSMENTS TO BE SHARED BY AV AND THE HEALTH SERVICE

During the IPGP, the following assessments at either AV or the Health Service will be shared assessments and documented as complete.

It **will not** be necessary to repeat these in each service.

- Baby Friendly Health Initiative
- Hand Hygiene
- Manual tasks for Workers  
(NB. this does not include Safe Patient Handling and Mobility Assessment)
- Bullying and Harassment
- Work Place Conduct
- Open Disclosure
- Person Centred Care
- Mandatory reporting of Elder Abuse
- Protecting Vulnerable Children
- Management of Clinical Aggression (MOCA)
- Basic Life Support
- Advanced Life Support
- Intravenous Cannulation

## COMPLETION OF THE PARAMEDIC COMPONENT OF THE IPGP

A Graduate has successfully completed the Graduate Ambulance paramedic (GAP) Program after they have achieved and obtained the following:

- Completed all the hurdle requirements of the graduate paramedic;
- Been deemed to be practicing at the level of a competent, and therefore independent, ambulance paramedic through the successful completion of the EPA;
- Received an endorsement from the Credentialing Committee; and
- Received an Authority to Practice as an ALS Ambulance Paramedic.

## COMPLETION OF THE HEALTH SERVICE COMPONENT OF THE IPGP

- Attendance and participation at required professional development days
- Satisfactory clinical performance reviews from all allocated clinical areas during the program
- Completion of all allocated health service competencies (both mandatory and organizational specific), skill checks and training requirements
- Completed requirements of the medication learning activity
- Successful completion and presentation of a Case study

## SUPPORT FOR GRADUATES WHO ARE NOT PROGRESSING AS EXPECTED

If a Graduate isn't progressing as planned through the program according to the schedule or if their program is delayed for any reason, assistance is available

Both AV and the Health Service has various support systems that assist the Graduate in developing their potential and reaching proficiency.

Please be aware that these services are available not only to graduates but to all staff at any time throughout their career.

## SUPPORT SERVICES AVAILABLE FROM AV AND THE HEALTH SERVICE

Various services are available to provide additional support and assistance to Graduates who would either like to access the services themselves or whose colleagues contact them on their behalf. They aim to promote the wellbeing of ambulance and health service staff and minimise the adverse effects of vocational stressors by providing education, counselling and support for stress and trauma.

AV has a range of services including the following:

- 24 hour counselling line (Victorian Ambulance Counselling Unit – VACU)
- Peer Support
- Up to 6 face-to-face counselling sessions per person per financial year
- Group debriefing facilitated by psychologists
- Referral, facilitation of short-term hospitalisation where necessary
- Consultation with management and support for staff wellbeing issues

***All services can be contacted on 1800 MANERS.***

Peer Support services are available 24 hours a day, 7 days a week. They will be able to assist with a broad range of issues including concerns about a case attended, accumulated stress, interpersonal conflict,

clinical skills concerns, performance management issues, seeking advice for others, adjusting to a new work location or role etc.

Peer Support members include including paramedics, MICA paramedics, Team Managers, community officers, CERTS and representatives from administration and ancillary Services.

The Health Service has allocated contact officers to give staff an opportunity to talk informally and confidentially. Support may also be discussed informally and confidentially with the Co-ordinator of Graduate Nurses and members of the Graduate Support team

The Graduate can also speak to their TM or another member of their clinical team as well as the Operational Education Administration team member allocated to their group.

Any discussion with a Peer Support Team Member, Health Service Contact Officers, Graduate coordinator or Graduate Support Team is confidential.

### **3. TAILORED PARAMEDIC EDUCATION PROGRAMS**

AV offers two styles of education plan which can assist Graduate Paramedics to improve their performance to meet the required standard within the identified timeframe.

#### **MILESTONE ACHIEVEMENT GUIDE (MAG) – FORMERLY KNOWN AS A TEP**

A MAG is an educational tool that is provided to Graduates and their TMs and CIs to be used as a guide for study and scenario work whilst on the road. It is designed to be a reference point for the areas that the Graduate needs to focus on to achieve competence in a particular area, and is recommended to be used as a proactive tool, rather than to only address milestones not met, after they are assessed. It is not a disciplinary procedure and does not necessarily indicate that your program will be delayed.

A MAG includes:

- Identification of a practice or knowledge gap
- Learning goals / objectives
- Strategies to reach these objectives
- Evidence that will be presented to demonstrate the objectives have been achieved
- A time frame for completion
- An outcome

#### **CLINICAL INDUCTION, BRIDGING OR REMEDIAL PROGRAM (CIBOR)**

The purpose of CIBoR is to assist new and current AV operational employees identify gaps in their clinical knowledge, competency and/or clinical skills. The program is conducted in a timely manner utilising adult learning principles within a co-operative environment supporting the AV employee to bridge any identified gaps by utilising an individually structured program so they can practice at the accepted standard.

A CIBoR may be issued when a hurdle requirement is not met. It is conducted in accordance with the policy

## CIBOR COMPETENCY CHECKLIST PROCESS

The CIBoR process is essentially split into 3 components

- CIBoR Competency Checklist
- CIBoR Education Plan
- CIBoR Sign off

The CIBoR Competency Checklist is used to measure a paramedic's knowledge, experience, skills and practical proficiencies. It may not be necessary to complete the checklist in all circumstances, the Clinical Operations Team assess the necessity of this component on an individual bases and will provide guidance through this part of the process.

If this component of the process is required, the checklist lists current equipment, practice guidelines and skills utilised clinically within AV. The

Graduate is to rate their experience with AV equipment, skills and Clinical Practice Guidelines as Proficient, Familiar or Unfamiliar.

### ***Proficient (P)***

- Equipment/skill - have had formal training and routine practice in its use.
- CPG - is identical or very similar to that previously learnt and practiced.

### ***Familiar (F)***

- Equipment/skill - have had some operational or training experience with its use or equipment similar in operation or concept.
- CPG - is similar to that previously learnt and practiced.

### ***Unfamiliar (U)***

- Have little or no knowledge or use of the specified equipment, skill or CPG.

In addition, the Medications Accreditations checklist assists to identify exactly which medications the Graduate paramedic is proficient with and assists to assess CPG competency.

The Competency Checklist is verified by a member of the Clinical Operations Team (CSO, TM, PE) who then develops an education plan based on the results and outcome of the assessment. The Education Plan may include a clinical practicum supervised by an appropriately qualified paramedic or Clinical Instructor as well as activities and assessments that will measure the paramedics' abilities in these areas. The period of practicum will be determined by the CSO in collaboration with the Operational Education Delivery Manager, Operational Education Department.

## IMPLEMENTATION OF THE EDUCATION PLAN

The CIBoR program will be delivered as a structured program within the agreed timelines that are included in the education plan. Support and assistance will be provided to the Graduate as appropriate by a CI, Paramedic Educator, CSO, TM or other member of the clinical team.

## COMPLETION OF THE CIBOR PROGRAM

**Successful:** Operational personnel successfully complete CIBoR program and commence/continue to practice with an improved understanding of

AV practice and/or competency. An Authority to Practice will be issued, maintained or upgraded.

**Unsuccessful:** If the operational personnel are unable, or did not successfully complete the CIBoR program, immediate action must be considered to restrict and/or determine a safe level of practice for the person. This may include removal of the operational person from practice, restriction of practice and/or placement into practice where the operational person will work under appropriate supervision. This may also initiate the Performance Management Process. The operational person may be required to re-enrol into the CIBoR Program with an aim to achieve successful completion of the Education Plan.

Upon completion of the program, a final assessment will be conducted where appropriate. A CIBoR Program Sign-off Form (FOR/OPS/028) must be filled in and emailed to Operational Education Graduates with all of the CIBoR documentation.

## 4. ROSTERING

### AV ALS ROSTERING COMPATIBILITY GRID

	GAP	RSDP1	RSDP2	AP12	AP#	APN	AP	API	AP ED	CASAP
GAP	✗	✗	✗	✗*	✗	✗*	✓	✓	✓	✓
RSDP1	✗	✗	✗	✗	✗	✗	✗	✓	✓	✗
RSDP2	✗	✗	✗	✗*	✗	✗*	✓	✓	✓	✓
AP12	✗*	✗	✗*	✓	✓	✓	✓	✓	✓	✓
AP#	✗	✗	✗	✓	✗	✓	✓	✓	✓	✓
APN	✗	✗	✗	✓	✓	✓	✓	✓	✓	✓
AP	✓	✗	✓	✓	✓	✓	✓	✓	✓	✓
API	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
AP ED	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
CASAP	✓	✗	✓	✓	✓	✓	✓	✓	✓	✓

\* Can work single overtime shifts but not be Rostered for the month with this qualification.

Key	
<b>GAP</b>	Graduate Ambulance Paramedic
<b>RSDP1</b>	Rural Sponsored Degree Program Stage 1
<b>RSDP2</b>	Rural Sponsored Degree Program Stage 1
<b>AP 12</b>	Ambulance Paramedic – Qualified for less than 12 months
<b>APN</b>	Ambulance Paramedic New – A qualified paramedic's first three months with AV
<b>AP#</b>	Ambulance Paramedic (unable to work with non-qualified paramedics)
<b>AP</b>	Ambulance Paramedic
<b>API</b>	Ambulance Paramedic Clinical Instructor
<b>AP ED</b>	Ambulance Paramedic Educator
<b>CASAP</b>	Casual Ambulance Paramedic



## GRADUATE PARAMEDICS AS SINGLE FIRST RESPONDERS

AV may allow Graduates in the indirect supervision phase of the Inter-professional graduate program to be dispatched on time-critical emergencies (priority 0, code 1) as single first responders in exceptional circumstances.

All Graduates will receive education during the program to ensure a complete understanding of the actions required if requested to respond to a time critical case as single first responders. Under no circumstances will a graduate in the “direct supervision” phase of their graduate program be responded to an event as a single responder.

In addition to the induction program the graduate should refer to the following AV Procedure: Responding Graduate Paramedics as Single First Responder PRO/OPS/010.

## ALLOWANCES AND PROVISIONS

The following outlines the policy and process for Graduates regarding pay, accommodation, meals, travel time and incidental expenses.

### AV PAY SCALES AND CLASSIFICATIONS

All information regarding the Pay Scales and Classifications can be found in the Ambulance Victoria Enterprise Agreement 2009, or its successors. In particular, the Graduate should refer to “APPENDIX 2 - GRADUATE AMBULANCE PARAMEDIC PROVISIONS” of the Agreement. All Graduates commence employment under direct supervision at GAP Level 2, and then move to GAP Level 3 status from the first pay period following commencement of indirect supervision (Stage 2 of the IPGP).

### AV ACCOMMODATION

AV may provide accommodation for Graduates attending induction, AV study days, panel assessments, or clinical placement outside of their Region as approved by the Manager Operational Education. Accommodation for induction will be considered for employees where the training location is more than 45 kilometres from their rostered branch or residence, whichever is the closer.

The account for all approved accommodation will be forwarded directly to AV for payment. AV will provide payment only for those aspects confirmed, which will include the room rate, and may include some meals. Notification of inclusions will form part of the confirmation by OPERATIONAL EDUCATION that accommodation has been approved. All other expenses incurred during the stay at the accommodation will be the responsibility of the employee, and must be settled individually prior to check-out.

### AV ACCOMMODATION BOOKING

Accommodation can only be booked by the Operational Education Department. Request forms for accommodation at approved AV education courses are available on the AV Intranet. It is the

responsibility of the Graduate to apply for all accommodation utilising this form. Accommodation will not automatically be arranged for any component of the Graduate program, and all accommodation must be requested.

Requests for accommodation require a minimum of 4 weeks' notice. All requests received outside this timeframe will be denied. Accommodation will be confirmed via email to the Graduates AV email address within 2 weeks of receipt of request. Completion of the Request for Accommodation form is also acceptance by the individual to the Terms and Conditions for receiving accommodation from AV.

## AV MEALS

Wherever possible, breakfast is provided with the accommodation booking. In addition, all efforts are made to provide easy access to facilities for meal preparation. Where this cannot be accommodated, AV will provide meal allowances; those meals not covered by on-shift meal allowance (received as part of the aggregated rate of pay) or in conjunction with the accommodation. Where applicable, breakfast and dinner should be claimed on the Graduates time-sheet and annotated in the usual manner. Note that meal allowances cannot be claimed for on-shift meals, and will only be provided in conjunction with approved accommodation as per the relevant AV Enterprise Agreement.

## AV TRAVEL TIME

Travel to and from induction, study days, educational facilities, clinical placement sites, and other Graduate program training days do not attract remuneration, as per your relevant AV Enterprise Agreement.

## AV TRAVEL RE-IMBURSEMENT

Where applicable, the Graduate should enquire about the availability of a service vehicle to travel between AV places of business. Application for a service vehicle should be through the appropriate Group Manager. Where a Service vehicle is available for Graduates in the same Region travelling to the same site, those Graduates should travel together where it is practicable. The onus is on the Graduate to enquire about the use of a Service vehicle, and reimbursement of travel costs associated with the Graduate using their own vehicle, as per below, may be denied if the request for a Service vehicle did not occur.

Where a Service vehicle is not available, AV will reimburse the running costs incurred by the Graduate for the use of their own vehicle on a once per block of accommodation (round trip) travel basis, as per the current AV Enterprise Agreement. Any extra travel to or from the facility per block will be at the Graduates own cost. Reimbursement will be calculated as per the relevant AV Enterprise Agreement, for travel in excess of 45km each way. Claiming travel kilometres is via the AV Expenses Claim Form (available on the intranet). Kilometres should be calculated from the Graduates residence as listed on Chris21.

We acknowledge our partners in the initiative of the development of the Inter-Professional Graduate Program (IPGP) (Nursing /paramedicine)



**Department of  
Health & Human Services**

**Ambulance  
Victoria**



**Ballarat Health Services**  
**Putting your health first®**

## APPENDICES

### APPENDIX A – AV ACRONYMS

Acronym	Meaning
A/L	Annual Leave
ALS	Advanced Life Support
ATP	Authority to Practice
AV	Ambulance Victoria
BLS	Basic Life Support
OEDM	Operational Training Delivery Manager
CI	Clinical Instructor
CIBoR	Clinical Induction, Bridging or Remedial program
CPE	Continuing Professional Education
CPG	Clinical Practice Guideline
CSM	Clinical Support Manager
CSO	Clinical Support Officer
CWI	Clinical Work Instruction
DSP	Driver Standards Program
DM	Duty Manager
EPA	End of Program Assessment
GAP	Graduate Ambulance Paramedic
GAPv	Graduate Ambulance Paramedic (Variation)
GM	Group Manager
GPR	Graduate Progress Report
HR	Human Resources
MOE	Manager Operational Training
MICA	Mobile Intensive Care Ambulance Paramedic
OSCE	Objective Structured Clinical Examination
PE	Paramedic Educator
PPE	Personal Protective Equipment
QAP	Qualified Ambulance Paramedic
OED	Operational Education Department
MAG	Milestone achievement guide
TM	Team Manager

## APPENDIX B – BRANCH INDUCTION CHECKLIST

- This form is for the new Employees, Student and Graduate Paramedics, Ambulance Community Officers, CERTs, Observers and Contractors to complete on the day of commencement at their allocated Branch. The aim of the checklist is to ensure that all the necessary information to assist transition into Ambulance Victoria Branches has been provided.
- This induction should be completed by the Clinical Instructor, Team Manager or an experienced member or staff from the branch.
- Please print this form out as it will need to be signed upon completion.

### STAFF MEMBER DETAILS:

Name:	
Service number:	
Branch:	
Location:	
Position:	

INDUCTION CHECKLIST (Please tick either "Yes" or "N/A")		
Items: Branch Specific	Yes	N/A
<input type="checkbox"/> Tour of branch provided		
<input type="checkbox"/> Access/egress from branch		
<input type="checkbox"/> Branch security issues and restricted areas		
<input type="checkbox"/> Parking		
<input type="checkbox"/> Location of toilets, hand washing facilities, meals area		
<input type="checkbox"/> Branch medication storage		
<input type="checkbox"/> Access keys issued and recorded in register		
<input type="checkbox"/> Admin procedures – Email/Mail/Fax/Rosters		
<input type="checkbox"/> Deliveries – Linen/Oxygen/Stores		
<input type="checkbox"/> Local branch duties and arrangements		
<input type="checkbox"/> Familiarisation with local area e.g. directions to hospital, airport etc.		
<input type="checkbox"/> Stores process		
<input type="checkbox"/> Radio / pager use and allocation		
<input type="checkbox"/> Duress system		
<input type="checkbox"/> Level D AV approved PPE provided		
<b>Items: Vehicle and Equipment Familiarisation</b>		

<input type="checkbox"/> Employee, student/graduate, ACO or CERT to demonstrate safe use of F50E stretcher		
<input type="checkbox"/> Compulsory use of harnesses discussed		
<input type="checkbox"/> Psychiatric restraints & use		
<input type="checkbox"/> Baby capsule placement & attachment		
<b>Items: Procedures</b>		
<input type="checkbox"/> Incident report form location (Part A book)		
<input type="checkbox"/> Identify location of Infection Control Manual		
<input type="checkbox"/> Identify location of Material Safety Data Sheet (MSDS) folder		
<b>Items: Emergency Information</b>		
<input type="checkbox"/> Emergency floor plan /exits/ assembly area		
<input type="checkbox"/> Location of fire extinguishers		
<input type="checkbox"/> Location of first aid kit		
<input type="checkbox"/> Emergency/ Security Alarm System explained (if fitted)		
<b>Items: OHS Noticeboard</b>		
<input type="checkbox"/> Identify HSR name		
<input type="checkbox"/> "If you are injured" poster		
<b>Items: Other</b>		
<input type="checkbox"/> Key staff names and contact numbers		

**INDUCTION COMPLETED BY Team Manager:**

Team Manager Name:	
Service number:	
Signature and Date:	

Please scan signed copy and email to OPERATIONAL EDUCATION at: [graduates@ambulance.vic.gov.au](mailto:graduates@ambulance.vic.gov.au)

## APPENDIX C - AV FAMILIARISATION CHECKLIST

Return to [graduates@ambulance.vic.gov.au](mailto:graduates@ambulance.vic.gov.au) by end of first 4-week on-road roster block

### STAFF MEMBER DETAILS:

Name:	
Service number:	

ITEM	LINK	FAMILIARISED (Initials)	
		Graduate	CI / PE / TM / CSO
Adult Retrieval Victoria	AV INTRANET – Departments and Teams > Adult Retrieval Victoria		
Advantage Salary Packaging	<a href="http://www.salary.com.au">www.salary.com.au</a>		
AEA	<a href="http://unitedvoice.org.au/">http://unitedvoice.org.au/</a>		
Air Ambulance Victoria	AV INTRANET – Departments and Teams Air Ambulance Victoria		
Bushfire Awareness Training	AV Intranet <input type="checkbox"/> Contacts and Locations <input type="checkbox"/> Departments and Teams <input type="checkbox"/>		
Medication Policy	AV Medication Management Policy and Procedures		
PEER / Student Welfare / VACU	AV Intranet <input type="checkbox"/> Contacts and Locations <input type="checkbox"/> Departments and Teams <input type="checkbox"/> VACU		
Health, Safety and Wellbeing	AV Intranet <input type="checkbox"/> Contacts and Locations <input type="checkbox"/> Departments and Teams <input type="checkbox"/> Health, Safety and Wellbeing		
Equal Employment	AV Intranet <input type="checkbox"/> Contacts and Locations <input type="checkbox"/> Departments and Teams		
ESS Super	<a href="http://www.esssuper.com.au">www.esssuper.com.au</a>		
FOI and Privacy	AV Intranet - > Departments and Teams <input type="checkbox"/> Finance and Corporate		
Graduate Ambulance Paramedics learning material	AV intranet -> Procedures and Training <input type="checkbox"/> Learning Management System <input type="checkbox"/> Sign in <input type="checkbox"/> Library List <input type="checkbox"/> Operational Employees <input type="checkbox"/> Graduate		
Local Manual-handling Equipment	E.g.: Vacmat, Mangar Elk lifting cushion, Stair Chair		
Overview of Roles within AV - GM, CSO, PE, etc.	Employee Handbook		
Paramedics Australasia	<a href="http://www.paramedics.org.au">www.paramedics.org.au</a>		
Payroll Department	AV Intranet <input type="checkbox"/> Contacts and Locations <input type="checkbox"/> Departments and Teams		
Quality Processes - Clinical Review, LOS	CSO / CI		
MDT, Radios and	Learning Management System / CI		

Rosters Department	AV Intranet☐Contacts and Locations☐Departments and Teams		
Vehicle and Equipment	CI / Branch / Region		
Local area	CI / Branch / Region		
Branch Induction Checklist	GAP Manual / AV Intranet		

Return to [graduates@ambulance.vic.gov.au](mailto:graduates@ambulance.vic.gov.au) by end of first 4-week on-road roster block



## APPENDIX D HEALTH SERVICE UNIFORM POLICY