Title	Demonstrate knowledge of processes to support patient safety and comply with legislation in an ambulance context		
Level	5	Credits	10

Purpose	This unit standard is intended for people who are working in an ambulance context, making appropriate decisions, and who need to be able to do this independently.	
	People credited with this unit standard are able to demonstrate knowledge of: - infection control in an ambulance context; - legislation, regulations, codes of practice, and consumer rights in an ambulance context; - human factors in an ambulance context; - system processes to improve patient outcomes; and - responsibilities when dealing with a deceased person in an ambulance context.	

Classification	Emergency Services > Ambulance	
Available grade	Achieved	

Guidance Information

1 Definitions

Ambulance context – situations where emergency care is delivered in a variety of out-of-hospital environments. Out-of-hospital environments refer to any situation in which people require medical assistance outside of a controlled medical environment. These out-of-hospital environments include situations both in and away from an ambulance vehicle.

Best practice – for the purposes of this standard, a clinical technique or methodology that has proven to be most effective at delivering a desired outcome and is actively promoted across the ambulance and/or emergency care sector.

Clinical procedures and guidelines – the written procedures particular to each ambulance service and endorsed by Ambulance New Zealand.

Standing orders – written instructions issued by a medical practitioner that authorise individuals engaged in the delivery of health services to supply and administer certain medicines without a prescription in circumstances specified in the instruction.

2 References

Children, Young Persons, and Their Families (Vulnerable Children) Amendment Act 2014:

Crimes Act 1961;

Hazardous Substances and New Organisms Act 1996;

Health (Retention of Health Information) Regulations 1996;

Health and Disability Commissioner Act 1994;

Health and Disability Commissioner (Code of Health and Disability Services

Consumers' Rights) Regulations 1996;

Health Information Privacy Code 1994;

Health Practitioners Competence Assurance Act 2003;

Health and Safety at Work Act 2015 and relevant related regulations;

Human Rights Act 1993;

Medicines Act 1981;

Medicines Regulations 1984;

Mental Health (Compulsory Assessment and Treatment) Act 1992;

Misuse of Drugs Act 1975;

Misuse of Drugs Regulations 1977;

Official Information Act 1982;

Oranga Tamariki Act 1989;

Privacy Act 1993;

Te Tiriti o Waitangi /Treaty of Waitangi;

and other published health sector and ambulance sector standards which may include but are not limited to codes of ethics and codes of professional practice; and all subsequent amendments and replacements.

3 Range

Performance in relation to the outcomes in this unit standard is to comply with current clinical procedures and guidelines and/or standing orders and/or current best practice and be appropriate to the patient's condition.

Outcomes and performance criteria

Outcome 1

Demonstrate knowledge of infection control in an ambulance context.

Performance criteria

1.1 Describe communicable diseases, pathogens, and routes of transmission.

Range may include but is not limited to – Hepatitis, MRSA, HIV,

Pertussis, Meningitis, Varicella.

- 1.2 Describe standard precautions in relation to body substance isolation.
- 1.3 Describe decontamination or disinfecting non-disposable equipment according to organisational policies and procedures.
- 1.4 Describe requirements for reporting risks of infection according to organisational policies and procedures.

Range includes but is not limited to – needle sticks, exposure to

pathogens.

Outcome 2

Demonstrate knowledge of legislation, regulations, codes of practice, and consumer rights in an ambulance context.

Performance criteria

2.1 Outline health-related legislation, regulations, and codes of practice and their intent in accordance with an ambulance context.

Range includes – standard operating procedures, clinical practice

guidelines, HDC, Medicines Act 1981;

may include but is not limited to – ISO, AS/NZS, Occupational

Health and Safety standards.

2.2 Describe consumer rights in the provision of health services in relation to an ambulance context.

Range includes but is not limited to – confidentiality, legal protection,

rights to information, informed consent.

- 2.3 Describe compliance with legislation, regulations, and codes of practice in an ambulance context.
- 2.4 Explain the application of the Principles of the Treaty of Waitangi in practice in the provision of culturally safe healthcare in an ambulance context.

Range evidence is required of the application of partnership, protection,

participation.

2.5 Describe the responsibilities of an EMT relating to vulnerable people.

Range includes but is not limited to – abuse, non-accidental injuries (NAI).

Outcome 3

Demonstrate knowledge of human factors in an ambulance context.

Performance criteria

3.1 Describe key communication concepts in accordance with organisational procedures.

Range may include but is not limited to – read-back, feedback, barriers to

communication, closed loop communication, graded

assertiveness.

- 3.2 Describe cultural sensitivity and safety in dealing with patient, whānau, family and other healthcare professionals in an ambulance context.
- 3.3 Describe how communication and decision-making impacts on teamwork and evaluation processes used in an ambulance context.

3.4 Describe tasks involving more than one crew member and how to carry them out efficiently and effectively in accordance with organisational policy and procedures.

Range

may include but is not limited to – physical tasks, emergency situations, crew resource management; evidence is required for two situations – one situation involving one other crew member, one situation involving several crew members.

Outcome 4

Demonstrate knowledge of system processes to improve patient outcomes.

Performance criteria

4.1 Describe processes according to organisational policies and procedures, and explain how they improve patient outcomes, mitigate health and safety risks and HDC risks.

Range audit, reportable event, and clinical review.

- 4.2 Discuss how the current clinical procedures and guidelines are formulated and linked to research, to improve patient outcomes.
- 4.3 Analyse a current clinical procedures and guidelines and find research that support the guideline.
- 4.4 Describe precepting activities used in an ambulance context and its potential to improve practice.

Outcome 5

Demonstrate knowledge of responsibilities when dealing with a deceased person in an ambulance context.

Performance criteria

5.1 Describe responsibilities when dealing with a deceased person in accordance with organisational requirements.

Range

may include but is not limited to – contacting Police and/or General Practitioner, completion of documentation, do not resuscitate (DNR) orders.

Planned review date	31 December 2021

NZQA unit standard

Status information and last date for assessment for superseded versions

Process	Version	Date	Last Date for Assessment
Registration	1	5 May 2016	N/A
Revision	2	25 July 2019	N/A

Consent and Moderation Requirements (CMR) reference	0121
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This CMR can be accessed at http://www.nzqa.govt.nz/framework/search/index.do.

Comments on this unit standard

Please contact The Skills Organisation reviewcomments@skills.org.nz if you wish to suggest changes to the content of this unit standard.