

## JOINT ROYAL COLLEGES AMBULANCE LIAISON COMMITTEE

Meeting held on Wednesday 12 March 2008

**Present:**

Dr Tom Clarke (Royal College of Anaesthetists) (Chairman)

Dr Fiona Jewkes (Royal College of Paediatrics and Child Health) (Hon Co-Secretary)

Mr Martin Flaherty (ASA) (Hon Co-Secretary)

Dr Wim Blancke	-	Royal College of Anaesthetists
Dr Helen Booth	-	Royal College of Physicians
Dr Gillian Bryce	-	Ambulance Service Association
Mrs Sue Dodd	-	Department of Health
Mr Roland Furber	-	British Paramedic Association
Dr Henry Guly	-	College of Emergency Medicine
Mr Mike Hayward	-	Royal College of Nursing
Mr Alan Howson	-	IHCD
Dr Fionna Moore	-	College of Emergency Medicine
Mr Andy Newton	-	British Paramedic Association
Mr Sam Oestreicher	-	Staff Side Ambulance Council, UNISON
Dr John Stephenson	-	Directors of Clinical Care Group
Dr Howard Swanton	-	Royal College of Physicians
Dr Darren Walter	-	College of Emergency Medicine
Professor Richard Williams	-	Royal College of Psychiatrists
Mr Mark Woolcock	-	Health Professions Council
Dr David Zideman	-	BASICS

Item		Action
<b>12/01</b>	<b>Welcomes and Apologies for absence</b>	
<b>a</b>	The Chairman, Dr Tom Clarke welcomed Dr Darren Walters (CEM).	
<b>b</b>	Apologies for absence were received from Dr Tom Evans (RCP), Professor Charles Deakin (RCA), Mr Paul Phillips (Chief Executives Group), Dr Simon Brown (ASA), Dr Iain McNeil (RCGP), Professor Tom Quinn (RCN), Dr David McManus (ASA), Ms Rachel Ryan (BNF), Dr John Scott (ASA), Mrs Claudette Reid (RCM), Mrs Fizz Thompson (RCN), Mr Phil Pimlott (ASA), Dr Simon Stockley (RCGP), Dr David Smith (RCP), Dr Quen Mok (RCPCH), Dr Alison Walker (CEM), Dr Michael Ward (RCA).	
<b>c</b>	Committee members were informed that Mr Rodney Gunn (RCS) has retired from the JRCALC Committee.	

12/02	<b>To approve the Minutes of the previous meeting, held on 26 November 2007 (circulated)</b>	
	<p>The Minutes of the Meeting held on 26 November 2007 were accepted as a true record, subject to the following amendments: -</p> <p><u>11/02 Invited presentation on Critical Care Paramedics (Keith Young, Critical Care Workforce Reference Group, Department of Health) (Doc.)</u> Dr Jewkes requested that the reference to 'neonates' be removed in relation to the need for a distinction between the CCP and the ECP.</p> <p><u>11/05 Chairman's Report</u> f) Document received "Promoting Innovative End of Life Care Practice with Ambulance Trusts" 08/08/07 'National Resuscitation Council' should read 'Resuscitation Council (UK)'.</p> <p><u>11/06 Cardiac Care Group (Howard Swanton)</u> b) Enoxaparin and Clopidogrel 'Licence' should read 'label'.</p>	
12/03	<b>Matters arising on the Minutes</b>	
a	<p><u>11/02 Feedback on Critical Care Paramedics to DH (Doc.1)</u> In Dr Simon Brown's absence, the Chairman informed members that Dr Brown on behalf of the Guidelines Sub-Committee had summarised the findings from the Critical Care Paramedics consultation. The feedback document has been forwarded to Keith Young, Department of Health (DH) Critical Care Workforce Reference Group and will be taken forward by the DH.</p>	<b>JRCALC Committee</b>
b	<p><u>11/04.c Admin/structure/relationships</u> Dr Clarke reported that the annual funding from the DH which to date has been made without a formal application from JRCALC will cease from March 2009, and principal funding costs could thereafter come from ambulance trusts. A paper has been presented at the ASN to this effect.</p> <p>The ASN structure still has to be determined and the JRCALC structure is also under review. Dr Clarke put forward the suggestion that JRCALC, BPA and DOCCS could together provide intellectual, professional and operational information respectively. Committee members were invited to comment on the future structure of JRCALC.</p> <p>Dr John Stephenson asked if JRCALC should link itself to the ambulance service instead of the ASN – this is being discussed at the Chief Executives meeting. Ambulance services may need to contribute to JRCALC funding in the future.</p> <p>Dr Fiona Jewkes informed members that the office staff at the ASN has been reduced and if JRCALC continued with the ASN, the latter would need additional resources. Dr Jewkes provided some further information on the changes at the ASN due to the merger with the NHS Confederation. This includes the appointment of a permanent director.</p>	

	<p>Dr Henry Guly said that it might be more sensible from a medical perspective for JRCALC to sit with the Academy of Royal Colleges. However Professor Richard Williams said that he would not advise this route as JRCALC may find itself superseded by the other colleges.</p> <p>Mr Martin Flaherty also emphasised that a strong relationship with ambulance services is important and that the services could contribute towards some of the funding for JRCALC. He informed Committee members that Mr Paul Phillips, Chief Executive of East Midlands Ambulance Service and Mr Peter Bradley Chief Executive of London Ambulance Service are considering this issue.</p> <p>Dr Wim Blancke proposed that JRCALC should do things independently rather than link itself to other bodies to resolve its funding. Dr Tom Clarke concurred that JRCALC needed to maintain its independence yet as it depends on administrative support and funding from other organisations, this was difficult to achieve, however professional independence has to be maintained.</p> <p>Responding to a query from Mr Mike Hayward on the operational cost of JRCALC, the Chairman informed the Committee that the administrative cost is £35,000 and the cost of the guidelines process is £75,000 a year.</p> <p>Mr Hayward raised his concern on the reduction of funding by the DH for JRCALC. In response, Mrs Sue Dodd said that the DH is not refusing funds, its budget has been reduced and funds are being made towards specific objectives and it was unable to fund the Clinical Guidelines.</p> <p>Dr Clarke reported that the DH has made a grant of £30,000 for 2008/09. Mr Martin Flaherty proposed that the funding issue should be taken to the Chief Executives Group to be resolved.</p> <p>On the issue of Committee members who represent the ASA, which had now merged with the NHS Confederation, Dr Clarke said that ASA representation would continue until the name issue is resolved.</p>	
c	<p><u>11/04.d Fire &amp; Rescue National Framework (A Walker)</u> In Dr Alison Walker's absence Dr John Stephenson reported that Dr Walker is arranging a meeting with the relevant parties to proceed with this issue.</p>	Dr Alison Walker
d	<p><u>11/04.e Call to Scene (A Walker)</u> Dr Walker will do a review and send the document to DOCCS. The Committee agreed that this item would be taken off the agenda.</p>	Dr Alison Walker
e	<p><u>11/04.f Prehospital Airway Management Review (Docs. 2,3,4,5) (Chair)</u> Remarking on premature and vociferous response to the subject of airway management, Dr Tom Clarke provided the Committee with the background to the review on intubation as currently practiced by ambulance services. The review by the JRCALC Airway Management Group focused on three areas: -</p> <ul style="list-style-type: none"> <li>(i) The increasing body of evidence that endotracheal intubation without the use of drugs did not appear to improve patient outcome and may in some circumstances do the opposite;</li> </ul>	

- (ii) The increasing difficulty for paramedics to get the requisite (but arbitrary) number of intubations during hospital training because of the reduction in the number of patients being intubated and the lack of training for paramedics on intubation;
- (iii) The increasing concern over practice exposure and the maintenance of ongoing skill-competence.

These areas were considered along with ensuring the best outcome for patients.

The Airway Management Group submitted a document with recommendations on intubation to the JRCALC Committee.

Dr Clarke informed Committee members that the document had been produced as a confidential publication and remained so however it had intentionally been sent to DOCCS first because of meeting dates. Dr Clarke then invited comments from the Committee on the document.

Mr Sam Oestreicher expressed a number of concerns about the document. These included that the Airway Management Group had looked at the evidence on intubation and had reached a decision but had bypassed the Committee; the document had also been out in the public domain before the JRCALC Committee were able to view it; the document should have been a discussion document rather than making recommendations and that ambulance staff should not be deskilled as what they do relates to their salary. A call was made for stricter guidelines on how JRCALC sub-groups operated.

Mr Andy Newton said that he found the document confusing and was not happy with its current form. Evidence based information is needed in terms of how to proceed.

Mr Roland Furber said that the subject is complex. DOCCS were asked to offer amendments to the November 2007 version of the document however these were not included in the February 2008 document. Mr Furber asked if the report could be put on hold until the amendments are included. He also suggested a meeting between JRCALC, BPA and DOCCS with the Airway Management Group to look at ways of addressing the issue and going forward together. The core factor is to consider what is best for the patient.

Dr David Zideman also raised his concerns about how the paper went out. He acknowledged that it is difficult to provide paramedics with training on intubation and was concerned about the risks involved in intubation. Dr Zideman expressed that the document should not be withdrawn.

Mr Sam Oestreicher said that the document argued that if intubation is not being done properly, it should be taken away rather than considering ways to improve the practice. The document requires more work before it goes out for public consultation and it should result in a document which everyone from JRCALC has signed to.

Dr Wim Blancke said that there is concern from the hospital perspective and that a focus should be placed on the use of intubation aids such as the

	<p>intubating bougie and CO2 devices. Dr Blancke proposed that the issue on intubation is resolved as soon as possible as hospitals may proceed along the lines of the report.</p> <p>Mr Alan Howson said that the IHCD would not approve a reduction in the number of intubations which paramedics are required to do, currently at 25. A reference to the curriculum guidelines was also missing from the document.</p> <p>The Chair summarised the discussion on the document and undertook to release an interim explanatory statement, summing up the current JRCALC position.</p> <p>The BPA had submitted an audit (document 5) as a proposed way forward but it was agreed that this required further design.</p> <p>Dr Clarke concluded by thanking the JRCALC Airway Management Group for looking at the issue of airway management and bringing an important clinical discussion to the fore. Further deliberations would take place before the release of a final document.</p> <p><b>f</b> <u>11/04.h CRB Checks on ECPs (M Flaherty)</u> Mr Martin Flaherty reported that the issue of multiple CRB checks which arise when paramedics move post to other locations has been raised through Mr Peter Bradley at the DH and at the National HR Forum. Guidance has been requested from the DH. This work was still in progress.</p> <p><b>g</b> <u>11/05.c BMA Safe Transport 19/12/07</u> A draft document has been produced and this is still work in progress.</p>	<p><b>Chairman</b></p> <p><b>BPA</b></p>
<b>12/04</b>	<b>Chairman's Report</b>	
<b>a</b>	<p><u>Consultations</u> Dr Clarke informed the Committee that he receives a large number of consultations and that it is difficult to know whether to circulate these to members or if they should continue to go initially to the Guidelines Sub-Committee as agreed.</p> <p>Mr Sam Oestreicher said that it would be useful for Committee members to be copied into the consultation responses.</p>	<p><b>Guidelines Sub-Committee</b></p>
<b>b</b>	<p><u>Paramedic Group Authority for CDs 29/11/07</u> The Chairman informed the Committee about a query received on paramedics working in private organisations using morphine to treat patients. The Home Office were not happy with paramedics outside of their own Trust environment using the controlled drugs, as the legal requirements are not in place. Dr Clarke will forward the email concerning this issue to the Committee.</p>	<p><b>Chairman</b></p>
<b>c</b>	<p><u>Emergency Treatment for Anaphylactic Reactions 29/02/08 (Docs. 6,7)</u> Dr Fiona Jewkes reported that she is a representative on the working group of the Resuscitation Council (UK). The document on emergency treatment for anaphylactic reactions had been written with a view to enabling healthcare providers to identify their own particular level of skills for treating anaphylactic</p>	

<p><b>d</b></p>	<p>reactions.  <u>BTS Guidelines for Emergency O2 use in Adult Patients 28/02/08 (Endorsement)</u>  Dr Clarke reported that Dr Fionna Moore and Mr David Whitmore from London Ambulance Service were on the panel and that the JRCALC Guidelines Sub-Committee is preparing a response to the guidelines. There was some question of the JRCALC endorsement due to disagreements around trauma. Dr Clarke intends to raise queries on the guidelines with Sally Welham.</p> <p>Concerns were also expressed about the process involved in producing the guidelines and the short period of consultation. Dr Clarke reported that he would look at the pathway to deal with consultations and procedures.</p>	<p><b>Chairman</b></p> <p><b>Chairman</b></p>
<p><b>e</b></p>	<p><u>New Products: Laerdal Medicoool, Zoll Autopulse® Rapydan® Patch</u>  Dr Wim Blancke expressed his concern that products which are brought to the attention of the JRCALC committee may be misinterpreted that JRCALC is supporting the product. Dr David Zideman suggested that JRCALC should inform companies forwarding information on products that this is not within its remit.</p>	<p><b>JRCALC Committee</b></p>
<p><b>f</b></p>	<p><u>NAHCC Paeds Feedback (Doc.8)</u>  Dr Fiona Jewkes reported that this document includes pre-hospital care of children and that she had written the comments and not the questions. The Committee were invited to comment on the document.</p>	<p><b>JRCALC Committee</b></p>
<p><b>g</b></p>	<p><u>AMBEX 2008</u>  Dr Clarke informed the Committee that he has suggested speakers on airway management for AMBEX however this has not been taken up as yet. Dr Fiona Jewkes will raise this with the AMBEX Committee.</p> <p>Dr Jewkes said that there would be another AMBEX meeting on 18<sup>th</sup> March with the Chief Executives from the ASN Board. A topical issue is needed for the conference and ideas were requested.</p>	<p><b>Dr Fiona Jewkes</b></p>
<p><b>12/05</b></p>	<p><b>Cardiac Care Group (Howard Swanton)</b></p>	
	<p>Dr Clarke informed the Committee that the continuing role of the Cardiac Care Group had been questioned and that JRCALC responses on cardiac issues could be made via the Guidelines Sub-Committee. Dr Howard Swanton (Chair of the Cardiac Care Committee) was not in attendance for this discussion and therefore it was agreed that this issue would be discussed outside.</p>	
<p><b>12/06</b></p>	<p><b>Guidelines Sub-Committee (Docs. 9,10,11,12) (Simon Brown)</b></p>	
	<p>In Dr Simon Brown's absence, a Guidelines Sub-Committee report had been circulated.  Dr Fiona Jewkes also informed members that she had been to the Stroke Implementation meeting. It had been acknowledged that it is usually impossible to distinguish between stroke and transient ischaemic attack at the time the ambulance service or other primary care provider arrives and that the term 'brain attack' may be a better description initially, covering both cerebral</p>	

	events. This would take any perceived pressure off the healthcare professional who may feel they have to try and manage the two differently, as clearly all those with neurological deficit will have to be managed as stroke in the first instance.	
<b>12/07</b>	<b>Equipment Provision for Out of Hospital Paediatric Cardiac Arrest (Mark Woolcock) (Docs. 13,14)</b>	
	<p>Mr Mark Woolcock requested the Committee's comments on the circulated document he had drawn up setting out the proposed recommended minimum equipment required for out of hospital paediatric resuscitation. Dr David Zideman voiced his concern about using an in-hospital list of equipment for pre-hospital however some Committee members also expressed that it would be helpful to have such a document – Dr Gillian Bryce said her Ambulance Trust is waiting for a decision on this issue. Mr Woolcock said the objective is to have a standardised list.</p> <p>Dr Tom Clarke asked that Committee members forward their comments to Mr Mark Woolcock on the proposed list of equipment.</p> <p>Mr Mark Woolcock will provide an update at the next JRCALC Committee meeting.</p>	<p><b>JRCALC Committee</b></p> <p><b>Mr Mark Woolcock</b></p>
<b>12/08</b>	<b>NHS Confederation (Fiona Jewkes)</b>	
	This item was not discussed as Dr Jewkes had given an update at the beginning of the meeting –agenda item 12/03b.	
<b>12/09</b>	<b>Health Professions Council (Mark Woolcock)</b>	
	Mr Mark Woolcock reported that a meeting had been held between the Health Professions Council (HPC) and Mr Andy Newton about the annotation of the register for CCPs. The HPC were aware that the CCP consultation document had mentioned that registration of CCPs with the HPC would be obtained however Mr Mark Woolcock informed the Committee that this could not be assumed as an annotation to the register for this title would only occur if public protection issues arose.	
<b>12/10</b>	<b>British Paramedic Association (Roland Furber)</b>	
	<p>Mr Roland Furber provided an update on some of the work recently undertaken by the British Paramedic Association (BPA). This included: -</p> <ul style="list-style-type: none"> <li>(i) the Curriculum Framework document (2008) which includes a career framework reference;</li> <li>(ii) the online Continuing Professional Development scheme and access to the JRCALC guidelines;</li> <li>(iii) Conferences – the BPA Spring conference will take place at the University of Hertfordshire on 28<sup>th</sup> March. The BPA will also be organising the exhibition theatre at AMBEX 2008 and will have an exhibition stand which JRCALC are welcomed to share as last</li> </ul>	

	<p>year;</p> <p>(iv) Consultations – it was suggested that the BPA and JRCALC could coordinate their consultation responses to the Department of Health and other clinical documents relating to the ambulance profession;</p> <p>(v) Health Professions Council changes – the College of Paramedics will be the lead title rather than the BPA;</p> <p>(vi) BPA council – new council members have now been elected and a request was made for an observer member from JRCALC.</p>	<b>JRCALC</b>
<b>12/11</b>	<b>HEADG (Henry Guly)</b>	
	Dr Guly informed the Committee that there was nothing new to report.	
<b>12/12</b>	<b>JRCALC Conference 2008</b>	
	Dr Tom Clarke reported that it would be challenging to organise the JRCALC conference this year and in particular to get an adequate number of delegates. Dr Clarke suggested a joint conference between the BPA and JRCALC as an alternative – this will be taken to the BPA Council.	<b>BPA</b>
<b>12/14</b>	<b>Dates of next meetings:</b>	
	Wednesday 9 July 2008 (Committee) at the Royal College of Anaesthetists, London	