

Urgent care handbook

Professional practice

Note

Healthcare practice and knowledge are constantly changing and developing as new research and treatments, changes in procedures, drugs and equipment become available.

The author and publishers have, as far as is possible, taken care to confirm that the information complies with the latest standards of practice and legislation.

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by

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Preface

This book is aimed at advanced healthcare professionals working in urgent and pre-hospital care settings in the UK in the following clinical areas: the pre-hospital setting, primary care, community clinics, emergency departments, walk-in centres, urgent care clinics, minor injury clinics and out-of-hours clinics. There will undoubtedly be other facilities and organisations providing care in the urgent setting; any omission is entirely mine and I apologise in advance.

The book is predominantly, although not exclusively, aimed at practitioners working as paramedics and nurses in the clinical areas identified above. These practitioners will be qualified and registered with the Health Professions Council or the Nursing and Midwifery Council and possess considerable clinical expertise. They could be nurse practitioners, emergency nurse practitioners, paramedics, advanced clinical practitioners, paramedic practitioners, consultant nurses, paramedics, and so on. However, it is important to stress that the book should be useful to all healthcare professionals at any stage in their career and irrespective of their title role or the setting in which they work.

I would urge you to read the chapters that do not reflect your professional group. The rationale for this is to encourage you to understand how the other professional groups practice and how they have developed. There are some distinct similarities and many potential opportunities for shared practice.

Section One focuses on the professional and educational development of paramedics and nurses. *Chapter 1* focuses on some of the historical developments underpinning the paramedic role with an outline of the policy and professional issues that have been associated with the development of the extended and advanced paramedic roles. The chapter also outlines the development of some of the specialist roles that have developed within the paramedic profession. *Chapter 2* is concerned with nursing practice, exploring the history and background to the developing and evolving roles of nurses.

Section Two refers to clinical leadership in clinical practice and its potential role in supporting practitioners in their professional role. Clinical leadership is further explored through the concepts of clinical supervision, mentorship and reflective practice.

Section Three focuses on the key legal and ethical issues in relation to urgent healthcare. The five ethical principles of autonomy, nonmaleficence, beneficence, dignity and justice are discussed, highlighting some key issues relevant to urgent and pre-hospital care.

The Handbook aims to act as a reference guide and to promote and generate discussion. As in all good and progressing practice, feedback and comments are welcome.

Lynda Sibson

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Finally, to my wonderful children, Hannah and Jacob, and my husband Jay, for his everlasting love and support whilst I have embarked on my unique and much loved career in nursing.

Section One

Professional practice

This section focuses on the development of paramedic and nursing practice. As a precursor to pre-hospital care, many nursing and paramedic roles were defined by, and evolved from, military conflict, when care lacked both professional and regulatory guidance.

Paramedic practice developed from the military battlefields with the transport of wounded soldiers to field hospitals for trauma care. There followed an initial patchy adoption in civilian life for the transfer of patients to hospital. The paramedic role today involves a much greater range of care provision within the pre-hospital setting, with great strides having been made in the delivery of clinical care at the scene and en route to hospital. This continues to evolve with the specialisation of the paramedic role into a paramedic practitioner managing patients in the urgent and primary care setting, autonomously, without the need for referral or transfer to hospital. This has often been achieved with the collaboration of other healthcare professionals, such as primary care nurses working in GP surgeries or with district nurses in the community. The preparation for paramedic practice is changing from the traditional didactic training model to a more adult-orientated academic programme of study in a higher educational institute setting. This is in preparation for the development of these roles and to underpin the evolving profession.

The role of the nurse has changed dramatically over the years as the profession has evolved, with many nurses retaining a “general” role in hospital. Others have specialised in community and primary care settings, for example as nurse practitioners and specialist clinical nurses whose work has focused on specific area such as cardiac medicine, respiratory medicine and diabetes. These new roles have required nurses to assume some of the traditional roles of doctors, namely examination of and prescribing for the patient. As the profession grew and the nature of urgent care changed, the need for greater professional requirements emerged. This has also led to the development of professional guidelines and advanced research practices.