



## WORK INSTRUCTION – Clinical Operations – Dual Paramedic Crewing

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<b>Contents</b>	<b>Work Instruction</b> Paramedic Rostering – Dual Paramedic Crewing
	<b>Appendices</b> Appendix One: IRC recommendation 2019/00111590 issued on 27 September 2019 Appendix Two: IRC recommendation 2019/00111590 issued on 22 April 2020
<b>Associated Policy Directive/s and/or Operating Procedures/s</b>	Paramedics and Control Centre Officers (State) Award 2019
<b>Directorate</b>	Clinical Operations
<b>Author Branch</b>	Director Operations (Sectors)
<b>Branch Contact</b>	Executive Staff Officer to Director Operations (Sectors)
<b>Summary</b>	To provide guidance for processes to avoid the rostering of single paramedics.
<b>Applies to</b>	Clinical Operations
<b>Review Date</b>	June 2022
<b>Previous Reference</b>	Nil
<b>Status</b>	Active
<b>Approved by</b>	Executive Director, Clinical Operations
<b>Related Documents</b>	Nil

**Compliance** with this work instruction is **mandatory**



## WORK INSTRUCTION – Clinical Operations – Dual Paramedic Crewing

### 1. PURPOSE

The purpose of this work instruction is to ensure sound strategic rostering is in place to avoid single paramedic responses. It does not apply to rosters of Duty Operations Managers, Extended Care Paramedics, Special Operations Paramedics, motorcycle paramedics, PICU and other approved single responder programs.

### 2. Background

This work instruction is written to give effect to the following NSW Industrial Relations Commission recommendations:

- IRC recommendation 2019/00111590 issued on 27 September 2019
- IRC recommendation 2019/00111590 issued on 22 April 2020

### 3. Roster construction

Each Sector is to work towards core rosters that do not produce single responders and enable double crew rosters to be created across the state. If a double crew roster has an unplanned absence then weekly and/or daily management will be engaged.

### 4. Roster Management

Actively managing single paramedic roster occurrences requires forward planning and daily review of rosters. Once circumstances arise that may create a single rostered paramedic, action is to be taken as soon as possible to resolve the situation.

#### Weekly

- Deployment is to review the following week's roster by Wednesday of the current week to identify single officers or the potential for a single officer, eg officer currently on worker's compensation who may not yet be fit for duties.

Normal rostering procedures will be used to team up paramedics if a single or potential single is identified. This will include the following options in line with rostering protocols and the award:

- Consult and then relocate the paramedic to another workplace to create a crew
- Consulting to roster outstanding payback shifts between paramedics
- Approving sector swaps
- Changing roster lines, ensuring balancing of hours over the roster period having regard to Award requirements
- Utilising relief staff from other stations to cover vacancies
- Use Travel Time provisions to team up with the single paramedic
- Reduced hours or permanent part time paramedics
- Rostering casuals

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- Roster overtime (to be approved in advance by Zone Manager).
- A recommendation to exceed the approved deployments to create a two paramedic crew is only to be considered where other strategies have failed. Approval in advance on each occasion by the Deputy Director, Clinical Operations (DDCO) is required. Detailed records are to be kept.
- Any changes to rosters / staff movements are to be consulted with the paramedic involved in advance and prior to commencement of shift where possible by the deployment officer or DOM

## Daily

- Deployment is to review rosters for the next day in the morning and again at 1400 to address any single rostered paramedic issues.
- The Duty DOM is to review the Daily Rosters prior to the commencement of shift.
- Daily roster amendments include:
  - Unplanned absences notified less than 12 hours prior to shift are to be actioned as soon as practically possible.
  - Bringing crews or single paramedics from other stations within one hour of the commencement of the single officer's shift.
  - 'Leap frogging' crews / paramedics where this cannot be achieved within an hour.
  - Splitting crews to meet one hour time frame must be considered if two singles are rostered up to two hours travelling distance apart to facilitate a crew of two.
  - A double crew can travel more than one hour when on shift to ensure community coverage.
- Any changes to rosters / staff movements are to be consulted with the paramedic involved
- Confirm Community First Responders availability to respond.
- Staff are to be requested to travel prior to commencement of shift for efficiency and offer the opportunity to commence in place.
- Duty DOM and Control Centre Supervisor will collaborate daily on staff movement plans.
- Control are to follow the plan of staff movements provided by the DDOM. Should the SCCO identify a more practical option, consultation between the SCCO and DDOM must occur before making any additional changes.
- Staff tasked to fluidly deployed are to depart station within 5 minutes of receiving this instruction. If staff have not deployed Control are to advise the DDOM to manage.

## On-Call

Early identification of a single on-call officer will allow for effective roster coverage and efficient fluid deployment. Any category of paramedic may be used to provide a second paramedic for the purposes of on-call. The following steps are to occur in the order presented:

- Roster an off duty officer to on-call if mutually agreed
- Deploy an available dual crew to the station.
- Should a vacancy occur due to movements, backfilling of these positions is via normal rostering processes, utilising part time, reduced hours and casual staff in the first instance, with overtime as last resort

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- Roster a casual, permanent part time officer or reduced hours officer to a shift equivalent to the on-call period
- Rostering of overtime requires the approval in advance of the Zone Manager

## 5. Reporting

A daily report is to be produced by deployments for the DDCO addressing the following:

- Number of singles rostered (this can be identified in advance when the roster is posted or a paramedic is taken off shift for a long period of time)
- Number of singles resolved and how they were achieved.
- Number of residual singles.

NSW Ambulance will consult on this reporting through the State-wide JCC process

## REVISION HISTORY

Version (Document #)	Amendment notes
12 June 2020 WI2020-070	Initial document.

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## Appendix One

### IRC recommendation 2019/00111590 issued on 27 September 2019

Where any shift vacancy is not filled, the situation is to be escalated to the DDCO. The DDCO will determine if further steps are to be taken to fill the vacancy. If the vacancy is not or cannot be filled, the DDCO will consider the extent of appropriate utilisation of any single resource, taking into account the following matters:

- a single paramedic may be dispatched to a medical emergency or trauma case if one or more other paramedics will be attending the scene in a short window of time;
- a single paramedic may stage prior to arrival at any scene where a safety risk is identified following a risk assessment. The paramedic should stage attendance in accordance with training and protocols;
- a single paramedic at any scene should not attempt to lift or carry a patient without assistance, mechanical or otherwise;
- a single paramedic should not undertake a stretcher transport of a patient without appropriate additional resourcing as approved by the DDCO.

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## Appendix Two

### IRC recommendation 2019/00111590 issued on 22 April 2020

This recommendation is to be read in conjunction with the recommendation I made on 27 September 2019. For the purposes of forming a dual paramedic response, New South Wales Ambulance must engage the most time-efficient resource available and the formation of a dual paramedic response should occur within one hour of the shift commencement time.

Should New South Wales Ambulance be unable to form the dual paramedic response within one hour of the shift commencement time, the single officer will be restricted from deployment, other than in accordance with the recommendation made by me on 27 September 2019, until such a time as the dual paramedic response team is formed.

In addition to the above, New South Wales Ambulance must give due consideration to the extension of shifts in respect of the return driving journey of paramedics back to their home station. This does not affect relief duties exceeding one day in length.

This recommendation is to be communicated to all New South Wales Ambulance staff by way of Industrial Update, with particular attention to the to the deployment managers, Duty Operations Managers and Control Centres.

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