

SCOPE OF PRACTICE FOR PHYSIOTHERAPISTS WITHIN ST JOHN AMBULANCE

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What is the purpose of having Physiotherapists in SJA uniform?

We currently provide medical cover to around 21,500 events per year. A large number of patients have musculoskeletal injuries, some of which can be treated by first aiders on scene. However, with a significant number of cases an FA/AFA will not have the skill set to be able to fully assess, treat, and advise. This means referral to another care setting whether that be a Minor Injuries Unit or Emergency Department. A Physiotherapist within the team should be able to reduce the numbers that are needed to be conveyed elsewhere. This will improve the experience for the patient and reduce pressure on the NHS.

What is the expectation of the role?

SJA Physiotherapists will be expected to treat all those who seek help with musculoskeletal injuries at events and refer on as appropriate. It will be a 'see, treat and advise/refer' protocol with patients referred to another medical setting or advised to see their GP for onward referral if required. A PRF will be completed and a copy given to the patient in the standard way.

It is not anticipated that they will treat professional athletes. The aim is not to replace the professional pitch side Physiotherapist.

What are the requirements for the role?

All Physiotherapists must hold a current HCPC registration and provide their PIN to SJA on application/appointment. Membership of the Chartered Society of Physiotherapy is optional but preferred. Anyone being currently investigated by the HCPC will not be allowed to join as a Physiotherapist. Anyone referred to the HCPC once in their role should inform their SJA line manager at the earliest opportunity. Newly qualified Physiotherapists are welcome to apply.

How would the role fit into the current SJA structure on events?

When a Physiotherapist is written into the medical plan this would be a standalone role and therefore would not be included in the numbers of first aiders/ambulance crew on the event. However, they would be permitted to treat patients working within their AFA/ETA/EMT role.

If attending an event as an AFA (or above) and there is a requirement to see, treat and advise for musculoskeletal injuries then this can be given as long they include their pin number on the PRF.

Additional training should be given at unit level to all members to explain the expertise and additional skills that Physiotherapists possess. Alongside the musculoskeletal background, they are often involved in the treatment of seriously ill patients and their skills at recognising the requirement for enhanced care should be respected. This, along with the MSK component of the role, is dependent on the individual Physiotherapist's background and clinical experience and should be considered by other clinicians on the event as is the case with all HCPs in SJA.

What additional training/resources would be required?

There is no additional training needed to initiate the role however any Physiotherapists wishing to volunteer for SJA should be fast tracked to AFA level. An externally recognised advanced first aid course will enhance recruitment.

In order to encourage recruitment SJA will look to subsidise specific CPD such as taping courses and ILS course.

It is anticipated that there will be the requirement for additional equipment however this is minimal. The additional equipment is:

1. K Tape
2. Sports Tape
3. Ice packs
4. Heat packs
5. Freeze spray
6. Baby wipes
7. Massage/baby oil
8. Talcum powder

If all physiotherapists are at least AFAs then they can wear physiotherapist role bars even if attending an event as an AFA which will recognise their additional skillset.