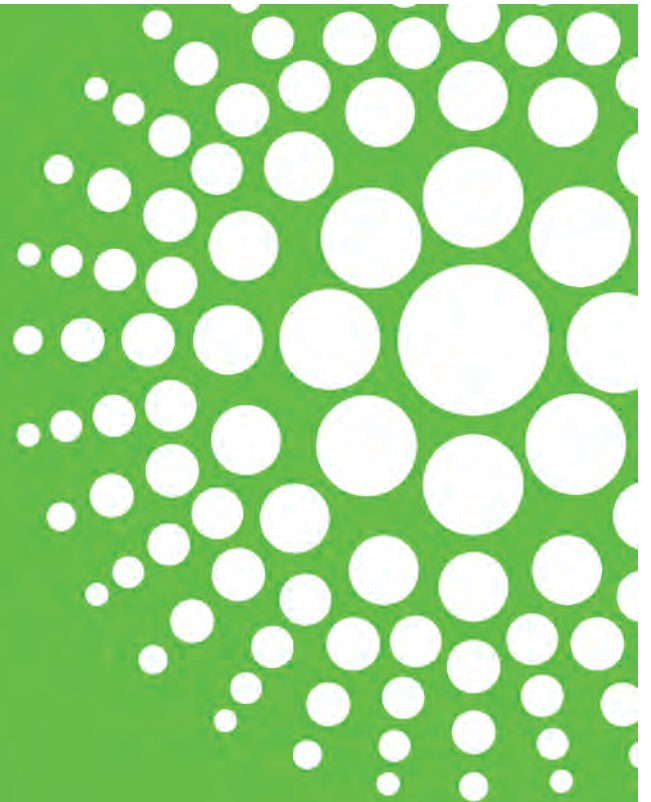




AMBULANCE HART

Hazardous Area Response Team



Applicant Information Pack

Thank you for expressing an interest in joining the Hazardous Area Response Team (HART).

This pack has been put together to provide you with the necessary information to support you in:

- A. deciding whether to apply
- B. putting your application together
- C. helping you prepare for the selection process

Contained in this pack are the following:

- 1. Information about the selection process
 - 1.1 Advertising and self-assessment for the role
 - 1.2 Application and short listing
 - 1.3 Occupational health screening (OHS)
 - 1.4 Resilience & Capability Questionnaire (RCQ-S)
 - 1.5 Physical Competence Assessment (PCA)
 - 1.6 Competency Based Interview
- 2. The HART Core Competencies
- 3. Occupational Health Assessment Rationale
- 4. Eligibility Criteria
- 5. Details of the PCA
- 6. Self Assessment Form (SAQ)
- 7. Candidate Interview Preparation Aid
- 8. HART Training outline

You will receive the following separately:

- a) Application Form
- b) Job description for HART Operative
- c) Person Specification for HART Operative
- d) Occupational Health Screening Form (OHS)
- e) Eyesight Test Form
- f) DVLA Group 2 Guidelines

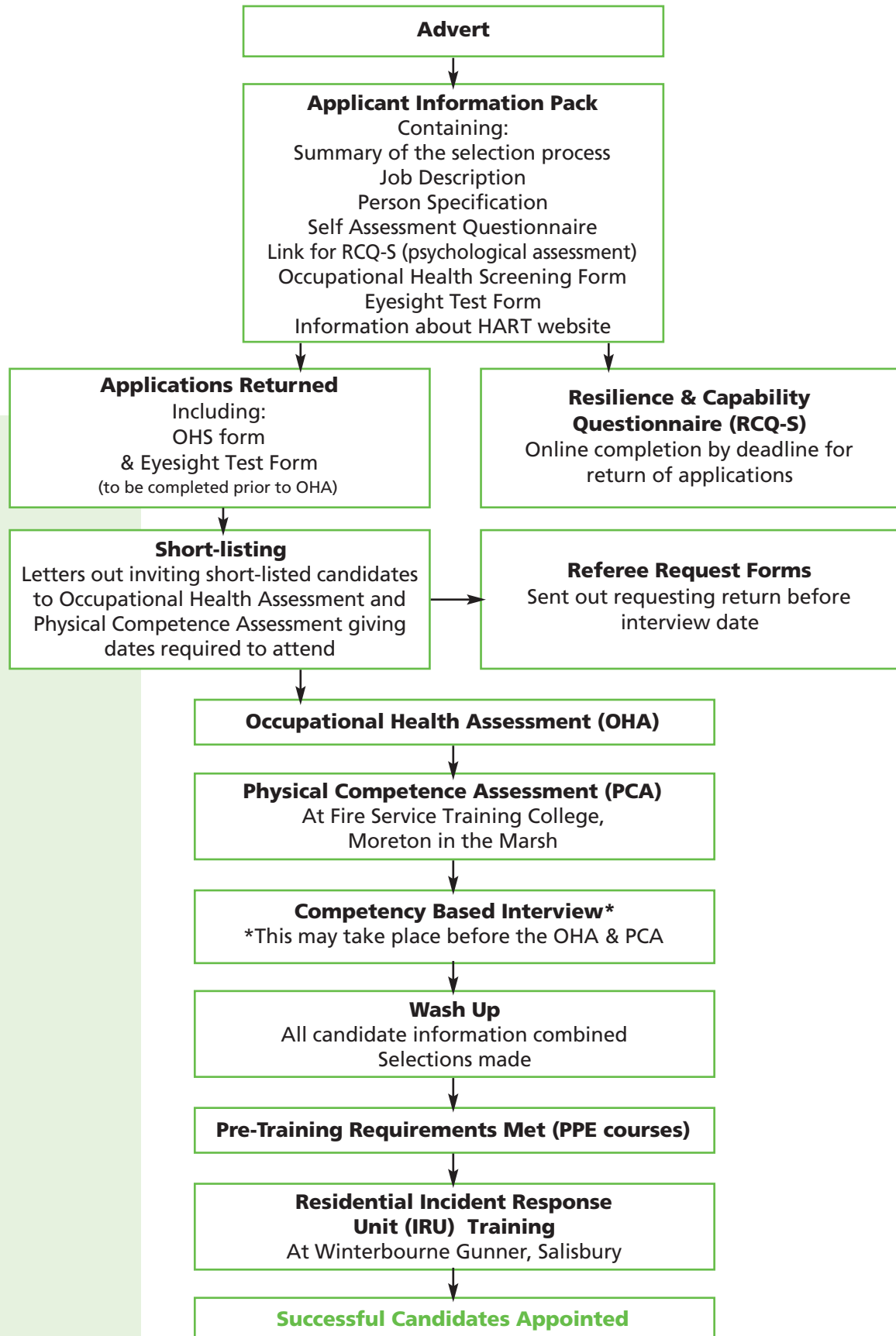
KEY DATES:

Please record your key dates below, see your job advert/HR correspondence for details.

_____	Cut off date for return of applications (with OHS form and Eyesight form if it has been possible to attend an Optician in this time)
_____	Date by which you need to have completed the online RCQ-S
_____	Dates scheduled for Occupational Health Assessment (if you are short-listed you will be asked to attend on one of these dates)
_____	Dates scheduled for Physical Competence Assessment (if you are short-listed and pass your OH assessment you will be asked to attend on one of these dates. This may involve an overnight stay if you are scheduled to be assessed in the morning)
_____	Dates scheduled for interviews



Ambulance HART Recruitment & Selection Process



1 INTRODUCTION TO THE HART SELECTION PROCESS

The recruitment and selection process is made up of seven stages:

- I. Advertising and self-assessment for the role
- II. Application and short listing
- III. Occupational health screening (OHS)
- IV. Resilience & Capability Questionnaire (RCQ-S)
- V. Physical Competence Assessment (PCA)
- VI. Competency Based Interview
- VII. Training course

With the exception of the psychological test*, all stages of selection are eliminatory i.e. if you do not successfully complete a whole stage you will not be able to continue to the next stage.

Depending on time constraints and resource availability, the interview process may take place before the OHA and PCA. However it is essential that the OHA is undertaken prior to the PCA.

** NB: You will be asked to complete a confidential online psychological test with Zeal Solutions Ltd. This test will be used to support the selection and personal development of personnel, as well as the ongoing evaluation of the HART project. It will **not** be used to screen you in or out of the selection process.*

I. Advertising and Self-assessment

You have received this information pack following your response to the advertisement placed. As part of the application process we would expect you to make efforts to find out more about HART and think carefully about whether this is a role for you. You can learn more by visiting the HART website www.ambulancehart.org or by talking to colleagues already in a HART team. We also encourage you to complete the self-assessment questionnaire (SAQ) enclosed with this pack, honestly and candidly before deciding whether to apply.

II. Application form and short listing

Make a note of the final return date for applications.

You need to return your application form (together with the Occupational Health Screening Form (OHS) and Eyesight form- see below) by the closing date.

You are also required to complete an online psychological assessment, the Resilience & Capability Questionnaire (RCQ-S) by the cut-off date for applications (see below).

Candidate application forms will be assessed against the essential and desirable criteria of the person specification. Try to give as much information about yourself and your experience in your application, and give examples to demonstrate how you meet the required criteria. Referees identified in the returned application form will be asked to provide their views as to your suitability to the role.



III. Occupational Health Screening (OHS)

You will be expected to complete an Occupational Health Screening form which needs to be returned with your application. If you are able to attend for an eyesight test with an Optician before the closing date, please also send in this form with your application. If you are unable to get this completed in the timeframe you will need to have this done by the time of the scheduled Occupational Health Assessment.

If you are short-listed following application you will be required to attend the Occupational Health Department for a medical assessment. It is essential that you declare any pre-existing injuries or conditions known to you prior to undertaking the fitness tests in the Physical Competence Assessment. If necessary you will be released from duties to attend the OH Medical Assessment.

IV. Physical Competence Assessment (PCA)

Candidates will be required to demonstrate a good level of physical fitness to undertake this stage and the level of fitness required for the assessment centre reflects the level of fitness required to undertake the role. This is mainly because of the potential to be working in extreme, sometimes protracted, conditions wearing PPE such as Gas Tight Chemical Suits and Breathing Apparatus (weighing 35kg). It also assesses your ability to operate at height (testing for vertigo) and in confined and dark environments (testing for claustrophobia).

The PCA will be arranged centrally by the Department of Health (DH) and will take place at the Fire Service Training College at Moreton in the Marsh. You will need to be released from duties to attend the PCA. The length of the assessment should require no more than one day out of work, but may require an overnight stay for those being assessed in the morning. In these circumstances accommodation will be arranged on site for you.

Details of the PCA can be found below.

The PCA standard has been designed and set by a multi-disciplinary panel of subject matter experts, facilitated by Optimal Performance Ltd who have extensive experience in this field. The exercises simulate a cross-section of realistic key tasks and sub-tasks expected of the role. An authentic trial circuit was conducted under strict conditions with a group of volunteers; the results of which have set the standard of performance for selection to the role. The standards have subsequently been reviewed following use of the PCA in recruitment for London AS and Yorkshire AS, and have been revised accordingly. The standard will be subject to ongoing evaluation and validation.



V. Resilience & Capability Questionnaire

As part of the application stage, all applicants will be required to complete an online, confidential psychological assessment - The Resilience and Capability Questionnaire (Selection) (RCQ-S). The RCQ-S is designed to give a profile of your perceptions of your behaviour at work. This provides information about your preferred 'work style'. From this, assumptions can be made about how you will react in certain situations and what kind of work environment is likely to suit you best.

Only experienced, qualified psychologists within Zeal Solutions Ltd will have access to the raw data returned. The RCQ-S is used to provide further information on the core competencies, to support and clarify information collected through the other selection methods. It will not be used to screen you in or out of the selection process but will be used to support the competency based interview and the ongoing evaluation and validation of the HART selection and training processes. Information from the psychological tests will be securely stored with Zeal Solutions Ltd a psychological consultancy.

All data from the psychological tests will be interpreted by a qualified psychologist. At this stage of the process individual applicants will not be offered individual feedback on their test results.

THE RCQ-S will also be used to track successful candidates over time so that its predictive properties (i.e. how it predicts future health, performance and resilience in the HART role) can be determined and improved.

If you apply for a HART role you need to ensure you have completed the RCQ-S by the closing date for applications.

To access the questionnaire (which needs to be completed by the application closing date) you need to go to this link and follow the instructions on screen:
<http://www.zealsolutions.co.uk/surveys/HARTRCQS.htm>

VI. Competency Based Interviews

If you successfully complete the PCA you will be required to attend a competency based interview. The interview will require you to give examples of situations in which you have demonstrated behaviours relevant to core competencies considered critical for effective performance in the HART role. The interview will also allow interviewers to further assess you against the essential and desirable criteria of the person specification and to challenge or probe further any issues and findings from the previous selection stages. The interview is likely to last about 1 hour. You will not be required to give a presentation. An interview preparation aid is provided in section 7 of this pack.

An outline of the core competencies for the HART Operatives and Team Leaders are shown below in Table 1.

The competency approach was developed to be able to establish more precisely 'against what criteria should we select and develop HART personnel?' This was one of the key aims of the evaluation project. In addition to identifying common criteria against which HART members can be selected, developed and managed, the identification of competencies also provides an opportunity to agree a common language for describing effectiveness. This means that those who manage or deliver HART in different settings will have a common understanding of what an effective Operative and/or TL 'looks like' and what it means to be effective when delivering within the HART role.



2 THE HART CORE COMPETENCIES

Following the Job, Task & Role Review (JTRR) a number of core competencies were identified and are shown below in Table 1. The competency based interview has been designed on the basis of these competencies, and the Behaviourally Anchored Rating Scales (BARS) have been written so that the assessors and instructors will be able to more accurately assess the potential of candidates both during selection and throughout training.

Table 1: The HART competencies

COMPETENCY TITLE	BROAD DESCRIPTION	NHS KSF	TL	OPERATIVE
Team Orientation	The ability to work as part of a team and being supportive of others	G1, G6, G7, CD2	I	I
Self Discipline and Regulation	The ability to work under instruction and to seek performance improvements	CD5, EF1		I
Communication	The ability to communicate with people at all levels	CD 1	I	I
Adaptability	The ability to adapt, be flexible and tolerate change	CD5, G2	I	I
Capability (Confidence)	The ability to develop oneself, motivate others and instil a sense of capability	G1, G6, G7, C2	I	I
Planning Orientation	The ability to plan and be organised	G5, IK3	I	I
Decision Making	The ability to make effective judgements and decisions	Embedded	I	

Assessed during the competency based interview



3 OCCUPATIONAL HEALTH ASSESSMENT RATIONALE

In order to assess the physical and psychological suitability of a candidate for a HART role, even though you are a current employee of the organisation, an Occupational Health Screening form (OHS) must be completed for assessment by the Occupational Health Department. This is to ensure there is updated health information about you so that informed fitness advice can be given if required.

This section outlines the rationale for the questions asked on the OHS form. If there are any queries in respect of your responses these will be picked up by the Occupational Health Nurse in your medical assessment so they can assess the significance in relation to your application.

Questions in the OHS Form

The following health issues are covered to ascertain if there are any current or previous ill health issues that may affect your ability to do the role required of you, physically and psychologically, and to ascertain if the Disability Discrimination Act (DDA) applies and if additional resources are required to enable employment, where this is reasonably practicable to do so.

Question	Rationale
1) Any long term medical condition(s)	To ascertain if there are any medical conditions which may have an adverse effect, or may be adversely affected by the HART role
2) Any restriction/disability that may require specialised support and/or equipment to enable work	As per DDA guidance so that advice and support may be given accordingly. To ascertain if this is conducive with requirements of a HART role as normal 'reasonable adjustments' may not be possible due to unpredictable and hazardous working environments
3) Any health problems that resulted in a change or restriction in what you could do at work	To ascertain if previous restrictions applied and/or redeployment occurred and if the health problem continues or is resolved
4) Been denied a driving licence on ill health grounds	To ascertain if there has been any previous episodes of illness that led to a temporary ban on driving and to ensure these have elapsed as per DVLA Group 2 guidance
5) Ill health retirement from any previous job	To ascertain if there has been any previous ill health that resulted in retirement and if these are resolved, ongoing and/or if likely to have any impact on the HART role
6) Heart Disease: <ul style="list-style-type: none"> ● Congenital ● Heart Valve Disease ● Transient Ischemic Attack ● Palpitations or Irregular pulse 	DVLA guidance Group 2 applies. To be considered against physical and psychological demands of proposed role. If DDA applies adaptations to role/environment may be indicated if reasonably practicable. Associated time off work may be required if ongoing condition. OH Physician opinion required



Question	Rationale
7) Respiratory condition: ● Asthma ● Bronchitis ● Lung condition ● Breathlessness	May adversely affect ability to meet physical demands of role; potential exposure risk (dust, fumes) may exacerbate existing condition(s). It is not possible to use an inhaler when wearing the required PPE. Requires OH Physician medical opinion. Spirometry required prior to commencement in role. DVLA Group 2 applies
8) In the last 6 months: a persistent cough, night sweats, unexplained weight loss	To ascertain if any symptoms of Tuberculosis - would need further assessment if positive response
9) Stroke (Cardio Vascular Accident/Incident)	To ensure full recovery and fitness for role, Medical opinion from OH Physician required
10) Brain Surgery/Head Injury	As above (no: 9)
11) Recurrent or persistent problems with ears, nose or throat	Implications for attendance, may be susceptible to cross infection from patients
12) Hearing impairment	Safety at work especially in noisy, hazardous working environments and wearing PPE. DDA may apply so reasonable adjustments may be indicated if reasonably practicable.
13) Vision problems not corrected by glasses or contact lenses	DVLA Group 2 regulations for standard of visual acuity required. PPE and the operational environment does not allow use of contact lenses
14) Vertigo/Dizziness	DVLA Group 2 guidance applies. Influence on attendance to be considered – role requires working at height. Assess current treatment / investigations and affects on ability to work.
15) Epilepsy/fits/faints/blackouts	As above (Q: 14)
16) Jaundice or other blood disorders	EEP role, possible indication of a blood borne virus (hepatitis) or other blood disorders, e.g. pernicious anaemia which may adversely affect availability for role due to treatment requirements and adverse effects from condition.
17) Diabetes or other endocrine disorders	DVLA Group 2 guidance applies, reasonable adjustments for meal breaks etc may not be possible due to nature of role
18) Mental ill health, e.g. stress, depression or anxiety	To ascertain if psychologically fit for post. Reasonable adjustments under DDA may not be possible. Obtain Medical/Psychological report if required
19) Episodes of psychosis	As above (Q: 18)
20) Any phobias	As above (Q: 18) also to offer support to overcome these if possible and consider if likely to impact on role
21) Pathological sleep disorders, e.g. apnoea, cataplexy, narcolepsy	May have impact on attendance and alertness for role, safety of self and others e.g. driving. Medical information and opinion required



Question	Rationale
22) Musculo-skeletal disorder/injury now or in the past	To ascertain if physically fit for the role, any recurring problems likely to adversely affect fitness, to ensure where reasonably practicable that individual is not knowingly put at risk of further injury. Highest level of PPE includes Breathing Apparatus carried on back weighing 35kg. Medical report may be required
23) Any current difficulty with prolonged: <ul style="list-style-type: none"> ● Standing ● Kneeling ● Sitting ● Squatting ● Walking ● Crawling 	Role physically demanding and may entail working in restricted space/walking distances/being in one position for long periods of time - any difficulty in these areas may preclude selection. Further information required, medical report may be required
24) Any current problems with: <ul style="list-style-type: none"> ● Lifting ● Moving/pushing/pulling heavy objects 	As above (Q: 23) – moving and handling requirement for equipment and patients - any restriction may preclude selection
25) Any current limitations in movement of your: <ul style="list-style-type: none"> ● Arms ● Legs ● Neck ● Back ● Shoulders 	As above (Q:23 & 24)
26) Have you ever been treated for drug/substance misuse or alcohol dependency? If 'yes' please state the substance and when	To ensure no current dependency, can adversely affect ability to drive/concentration, may involve illegal substance use, may show psychological pattern. Would require further information, possible psychologist/specialist report and medical opinion. Testing may be an option according to policy and procedures
27) Are you presently taking any medication? If 'yes' state what	To ascertain if any medication being taken may have an affect on ability to work and/or tasks at work e.g. driving Also to ascertain if this is a temporary or long term treatment and any effect on ability to attend work
28) Allergies to dusts, chemicals, foods, drugs or other substances	Ability to use PPE (chemical content), chemicals in workplace may adversely affect. Spirometry indicated due to potential exposure risks in role (COSHH). Severe allergy, especially if adversely affects ability to work, or requires inhaler treatment will preclude selection.
29) Allergy to latex/rubber or any other skin related dermatitis / eczema type condition or other skin disease	May not be able to use PPE, may be adversely affected in workplace. Reasonable adjustments may not be possible as work area unpredictable.



Question	Rationale
30) What is your average weekly consumption of alcohol?	DVLA Group 2 guidance Indication for health promotion, referral
31) If you are a smoker would you like support to stop smoking?	Trust No Smoking Policy and Health Promotion
32) Height and weight	Although no current Trust policy, procedure or legal guidance on this, as the role requires the physical ability to enter confined spaces and climb using rope work, weight to height ratio is applicable for consideration. Physical strength also required so underweight can be a factor. May initially preclude selection but can be revoked if normal weight range achieved. PPE sizing restrictions re boot size



4 ELIGIBILITY CRITERIA

Physical restrictions and other disqualifiers

Prospective candidates should read the following information carefully. Unless all the criteria below are met candidates should not apply as they may put themselves at undue risk of incurring or exacerbating an injury or condition and will have difficulty completing the Physical Competence Assessment centre and training. They would therefore not be eligible to undertake the role.

These criteria will be confirmed through the Occupational Health Screening and Assessment.

Candidates should not:

- Suffer from any skin allergies and irritants, including eczema and heat/sweat rash
- Suffer from any lung function difficulties or breathing conditions including asthma which is inhaler dependent for treatment
- Suffer from claustrophobia or experience any other confinement-related difficulties
- Suffer from vertigo
- Wear contact lenses. Glasses are acceptable provided both Distance and Intermediate Vision requirements are met wearing the same pair of glasses (see Eyesight Test Form)

Candidates should:

- Be clean shaven below lip level and facially shave every 24 hours
- Fall within the minimum and maximum sizing categories as stipulate in the enclosed sizing chart
- Wear size 3 -14 boots
- Be prepared where necessary to respond to national incidents in other areas of the country which may involve being away from home for protracted periods.

All candidates will need to be able to demonstrate at least three years recent operational experience within the NHS Ambulance Service. In some exceptional cases, candidates with equivalent experience in other organisations, e.g. military, will be considered.



5 PHYSICAL COMPETENCE ASSESSMENT (PCA)



If at any stage in any and all of the following exercises, the supervising instructors think that a candidate is experiencing difficulty, distress or discomfort they will intervene and may instruct the candidate to end the exercise.

Reference: Review of Physical Selection Tests and Standards for Ambulance Personnel Operating in Hazardous Area Response Teams (HART) – Optimal Performance Ltd. 24 September 2007

The role of the Hazardous Area Response Team Paramedic is new and is therefore being carefully developed and evaluated. In these new roles Paramedics are required to operate alongside their Fire and Rescue, and Police counterparts within the inner cordon of hazardous incidents. It is recognised that for Paramedics to perform their normal medical duties within these environments, wearing high levels of Personal Protective Equipment, the physical demands and stress of their role will be substantially increased. Ensuring there is a match between the capabilities of the Paramedic and the physical demands of the HART-IRU and USAR roles - by developing and implementing physical selection criteria - will help to optimise safe operating procedures for the workforce, while ensuring a minimum standard of operational effectiveness.

The PCA standard has been designed and set by a multi-disciplinary panel of subject matter experts, facilitated by Optimal Performance Ltd who have extensive experience in this field. The exercises simulate a cross-section of realistic key tasks and sub-tasks expected of the role. An authentic trial circuit was conducted under strict conditions with a group of volunteers; the results of which have set the standard of performance for selection to the role. The standards have subsequently been reviewed following use of the PCA in recruitment for London AS and Yorkshire AS, and have been revised accordingly. The standard will be subject to ongoing evaluation and validation. HART personnel will also be required to undertake an Ongoing Fitness Assessment (OFA) on a regular basis after being operational for six months in order to ensure fitness levels are maintained. The OFA is made up of a different series of exercises to the PCA which has been designed specifically for the selection stage.



TEST:
Circuit

DETAILS:

- Distance = 1200 m.
- Weight carried = 35 kg.
- Initial stair climb of one flight of stairs (15 steps)
- 9 circuits, including one flight of stairs (15 steps), duck under (1.5 m), step over (42 and 58 cm) and walk between 2 benches (31 cm apart) per circuit.
- Dummy drag at end of 9 circuits (75 kg, 15 m around 3 cones).
- Manual dexterity.



STANDARD:

Maximum 24 minutes.

- Candidates completing the circuit between 24 and 25 minutes, might be permitted to enter training, as risk candidates. The decision to allow these candidates into training would be left with the facilitators once they had conducted the next round of testing and had evidence of the distribution of scores.

Criteria for failure:

- If the candidate is deemed unsafe to continue by the safety staff
- Self withdrawal
- The candidate is not able to finish within the time limit
- Failure to stand up at the end of the manual dexterity task



CORE TASKS:

- This test reflects (partially) the physical demands of a reasonable worst case scenario – e.g. walking 3.2 km in an underground tunnel to rescue casualties; wearing EDDBA and Gas Tight Suit, with obstacles to navigate.
- The manual dexterity reflects the ability to perform fine motor skills when tired and stressed (eg. triage and treatment once the casualty was reached, following penetration into the cordon area to the incident), whilst wearing PPE.





TEST:

Enclosed Space

DETAILS:

- Distance = 80 m.
- Negotiate at least 6 obstacles including small apertures, enclosed tunnels and triangle shapes to climb through.
- The candidate uses their head torch to half way point, when the light must be turned off and the candidate must retrace their route to the start.

STANDARD:

- Maximum 12 minutes.

CORE TASKS:

- This test reflects the ability to work in dark, enclosed spaces.



TEST:

Ladder Climb and Descent

DETAILS:

- Climb 13.5 m ladder to the fourth floor.
- No specified size for the aperture to climb through.
- Descend a rope from the third floor.
- Perform confidence test half way down.

STANDARD:

- No time limit but candidates are scored on a three point scale;
0 = fail
1 = pass but lacked confidence
2 = passed with confidence.

CORE TASKS:

- This test assesses the candidates' ability to work at height.



6 HART SELF-ASSESSMENT QUESTIONNAIRE (SAQ)



As part of the application process we would expect you to make efforts to find out more about HART and think carefully about whether this is a role for you.

You can learn more by visiting the HART website www.ambulancehart.org or by talking to colleagues already in a HART team. We also encourage you to complete this Self-Assessment Questionnaire (SAQ), honestly and candidly before deciding whether to apply.

RESULTS

If you have answered no to any of these statements you need to consider seriously whether working in the HART Team is the right decision for you.

GUIDANCE

This self assessment is designed to allow prospective candidates an opportunity to evaluate their suitability for appointment to the HART team. The aim of this questionnaire is to help you to think about aspects of the HART role that you may not have initially considered. It is therefore important that you respond honestly to the statements.

Prospective applicants should complete this questionnaire and also consider the Eligibility Criteria and other information found in the Applicant Information Pack available from your Trust's HR department, in conjunction with the job description and person specification.



DISCUSSION TOPIC		
I have read, understood and comply with all of the physical restrictions and other eligibility criteria found in the information pack	YES	NO
It will be possible for me to be away from home for extended periods in response to national incidents (it is not expected that this will be a regular or usual feature of the role)	YES	NO
I understand that I may have to work for extended periods throughout a protracted incident	YES	NO
I believe I have the physical fitness to deal with the demands of the role – and will endeavour to maintain that level on an ongoing basis	YES	NO
I believe I have the mental fitness to deal with the demands of the role	YES	NO
I do not suffer any phobia that would prevent me from working in the dark	YES	NO
I do not experience any difficulties that would prevent me from working in confined spaces	YES	NO
I do not suffer any phobia that would prevent me working at height	YES	NO
I do not suffer from claustrophobia	YES	NO
I would be prepared to have vaccinations and boosters if directed by/on advice from the Occupational Health Department	YES	NO
I am prepared to undertake any HART training required that might take me away from home	YES	NO
I recognise the heightened risks associated with undertaking a HART role	YES	NO
I recognise that I will be interacting with people who are extremely distressed	YES	NO
I recognise that some of the circumstances I could experience will be highly unpleasant, such as multiple bodies, putrid smells and dealing with body parts	YES	NO



7 CANDIDATE INTERVIEW PREPARATION AID

The following has been designed to assist you in preparing for the competency based interview. Although it is not a requirement of the application process that you complete this exercise, it is recommended that you work through the following questions as they have been designed to support your development and preparation.

The following questions will help you to think about your work attitudes and preferred style of working. There are no right and wrong answers so please complete these questions as frankly and honestly as you possibly can.

To assist you in making a judgement rate yourself first by thinking about the various work situations that you have been involved in that might relate to this statement. Rate yourself against the statement using the scale below (1-9) in terms of how characteristic this is of you. Then for each scored statement write down a piece of behavioural/circumstantial evidence that supports your decision.

Q1. I CAN KEEP GOING WHEN THINGS GET TOUGH IN MY JOB								
Very Characteristic					Very Uncharacteristic			
9	8	7	6	5	4	3	2	1
Evidence: Please give an example that supports your answer/decision.								

Q2. I HAVE NO FEARS ABOUT EXPRESSING MYSELF WHEN IN A GROUP SITUATION								
Very Characteristic					Very Uncharacteristic			
9	8	7	6	5	4	3	2	1
Evidence: Please give an example that supports your answer/decision.								



Q3. I LIKE TO WORK WITH PEOPLE WHO HAVE DIFFERENT INTERESTS TO ME								
Very Characteristic					Very Uncharacteristic			
9	8	7	6	5	4	3	2	1
Evidence: Please give an example that supports your answer/decision.								

Q4. I CAN ADAPT QUICKLY TO DIFFERENT SITUATIONS								
Very Characteristic					Very Uncharacteristic			
9	8	7	6	5	4	3	2	1
Evidence: Please give an example that supports your answer/decision.								



8 HART TRAINING OUTLINES

HART training will be broken down in to modules:

- Pre-course learning
- Personal Protective Equipment training
- Residential Incident Response Unit course (IRU)
- Residential Urban Search And Rescue course (USAR)
- Residential Inland Water Operations course (IWO)
- Post learning and Continuous Professional Development (CPD).

Training HART Operatives and Team leaders will involve residential modules. Such training will be team based and ensure that theory sessions are exercised in realistic practical scenarios. It is essential for staff to attend training as a six person team as this will replicate operations and enhance learning. HART education is blended in concept with an emphasis on Socratic (student involvement) rather than Didactic (lecture based) learning. Candidates will be required to think on their feet, be innovative and adapt to challenging situations.

A copy of the candidates charter is available on request as well as an example programme. Trusts are encouraged to visit staff attending training and also to ensure that Trust Strategic and Tactical commanders take up the opportunity to view their staff during the intensive practical exercises.

The residential module will be competency based using a continuous process of assessment. The modules will be subject to continuous evaluation and where necessary modification.

It is essential that either the HART manager for the Trusts sending candidates or the Trust Trainer liaises closely with the respective faculty leads. Both the USAR and IRU training lead are able to assist with the many queries raised by candidates and Trusts. This is particularly important when planning PPE training prior to attendance on the residential modules.

The content of the modules is defined as the following.

Pre Course Learning

- Standard Operating Procedures
- JRCALC revision - Paramedic training to JRCALC 2006
- National guidance
- Abbreviations and common terms
- MANCONOPS
- Health Protection Agency Guidance
- Trust Major Incident Response Plan



PPE Training

A specific HART CR1 users course has been developed in association with PNCBRNC. This is available on request from the IRU training lead. Advice and guidance on the course requirements for EDDBA and GTCPS training for HART is available from the IRU training lead and the project FRS liaison officer.

PPE training is either provided in house by the Trust, or by other agencies as indicated below. Training with local police or fire colleagues is beneficial in building working relationships and confidence between the Services, however, if the training is not available locally there are a number of Services around the country who can undertake this training for any trust. Advice and guidance re selecting a provider is available from the HART Training Faculty.

- PRPS and ASA decontamination provider training (Trust – 2 days)
- EH20 and EPD training (Trust – 1 day)
- CR1 (Police – 1 week)
- Breathing Apparatus and Gas tight Suit Training (FRS – 2 weeks)

Residential IRU module (3 weeks)

The residential course will consist of the following modules:

- a) Clinical
- b) CBRNE
- c) Equipment and Vehicles
- d) Team Building
- e) Welfare & HR
- f) Command and Control
- g) Miscellaneous sessions

a) Clinical

Revision of relevant sections of JRCALC guidelines, as identified by the HART Clinical Subgroup.

Clinical procedures as identified by the HART Clinical subgroup, such as: IO access, Trauma care, Triage (CBRN and conventional), CBRN countermeasures, Blast and Bomb injuries, Blunt and Penetrating Trauma, Gunshot injuries, Airway management, Control of Major Haemorrhage, Recognition of Life Extinct (ROLE).

b) CBRNE

This will look at current Ambulance and NHS procedures and guidance to enhance awareness of agencies that will respond to a confirmed CBRN incident. This module will consist of lectures from subject matter experts (SME) from the following agencies.

Atomic Weapons Establishment (AWE); Defence Science and Technology Laboratory (DSTL); Technical Response Force (TRF); Health Protection Agency (HPA); Fire and Rescue service (FRS); Police Operational Response Programme (PORP); Dept of Health Emergency Preparedness Division (EPD).



c) Equipment and Vehicles

- Clinical Equipment such as Multiple Oxygen Delivery System, CBRN PODS
- Communications and IT equipment.
- Generators and vehicle storage, user maintenance
- Vehicle familiarisation
- Detection Identification Monitoring Equipment.
- Night Vision and Meteorological station.

d) Team Building

Practical scenarios will be team based providing an opportunity to train in a realistic environment using the knowledge gained and building confidence in equipment.

Examples of scenarios to be conducted as follows;

CBRN response, HAZMA T response, Explosion both terrorist in origin and accidental, Major transport infrastructure incident (rail crash), Pre planned operations, Police support operations, Large fires and fire and rescue support operations.

e) Welfare and HR

Counselling, Team Building, Personal Development, Occupational Health procedures, Post incident procedures.

f) Command and Control

Briefings to both team members and other agencies, Logging and reporting, Legal aspects, Multi Agency Liaison, Standard Operating Procedures.

g) Miscellaneous Sessions

Media awareness, Navigation, Forensic awareness, Team building assignments, Trust specific issues, Major incident plans and local response.

HART Residential Urban Search & Rescue Training

The 3 weeks residential training programme will include the following:

- Safe Working at Height – set external programme
- Clinical – The clinical component is spread throughout the 3 weeks in the classroom and practically and includes: triage, blast injuries, confined space medicine, suspension trauma, crush injury / syndrome. This may involve the introduction of new equipment.
- Equipment – Throughout the course, training will cover PPE, USAR equipment and stretchers.
- Practical scenarios – The course has a strong practical content, and will involve realistic scenario-based training involving confined spaces, working at height, clinical interventions, and difficult terrain.
- Welfare – Welfare of self and team is covered as it relates to USAR working.



- Health and Safety – This forms an important part of the 3 weeks, and is covered both theoretically and practically, particularly the process of dynamic risk assessment.

HART Residential IWO Training

After completing a supported pre-learning programme, candidates attend a 3 day residential course covering the following elements:

- Flood theory and water hydrology
- Water incident organisation and multi agency working
- Self rescue techniques and bank based rescues
- River crossing including wading techniques
- Working within boats
- Practical exercises including clinical considerations specific to the environment

Post Course – Ongoing Training & Recertification

Ongoing PPE training and refreshers; Statutory recertification requirements; Reflective practice; CPD (as defined by clinical subgroup for clinical skills).

