

CGP128

Remediation Policy and Procedures



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1. INTRODUCTION

The educators and instructors in the clinical education Department are committed to student success and aspire for all students to perform well educationally. These policies and procedures, applicable to all non-experiential learning courses in the clinical education program, describe our proactive processes to promote successful “end-of-term” educational performance. Application of these policies and procedures at the course-specific level will be articulated in the course syllabus, which is the primary written contract for performance and expectations between educators, instructors and students.

2. SCOPE

The scope of this Policy includes all details necessary to plan and deliver remediation.

3. ROLES AND RESPONSIBILITIES

This policy applies to all clinical staff, operational personnel, first responders, and external parties whom may engage in education / training programmes offered by National Ambulance, or staff identified through formal review of their practices, as requiring support or corrective educational interventions. Educators, and managers are responsible for ensuring fair application of this policy, and appropriately referring staff as detailed within this policy.

4. POLICY

The purpose of this policy is to outline the procedure when a clinical staff member (or an external client undertaking training and development within NA), falls short of the expected / required clinical standards of an internal or externally accredited course.

4.1 REMEDIATION

Where students fail to meet the required expectations during CME courses, or other training and development activities deemed necessary for their registration with the Department of Health (DOH) or NA, a remediation plan shall be initiated by the educator.

The goal of an international courses is to prepare students to deliver effective resuscitation. Some students may not meet the course objectives and will need remediation in deficient areas. Educators and Instructors may provide remediation to students by monitoring and mentoring them to identify and resolve weaknesses, requesting additional skills practice, assigning additional reading, referring students to other courses, or having students retake the examination or assessment stations to the satisfaction of

the education manager or course director or lead instructor.

If remediation is unsuccessful, the education manager, course director or lead instructor may require students to repeat the entire course. (For more information on specific remediation requirements for any course, see the Instructor Manual for that course.)

If a student scores lower than 84% for AHA courses and 76% for NAMET courses on the first written exam, he or she will be remediated to the satisfaction of the education manager or course director or lead instructor or will need to take a different version of the written exam for successful course completion.

At the time of the course, some students might not be successfully remediated through particular sections of the course (or exam or test). When this happens, the student may arrange for a separate remediation session. A student must meet all course objectives to the satisfaction of the course director or lead instructor before receiving a course completion card.

Students must complete all remediation sessions, including exams, tests and skill stations, within 30 days of the last day of the original course. The remediation date will be listed as the issue date on the course completion card.

If a student does not achieve remediation within 30 days, the course is considered incomplete, and a course completion card will not be issued. Students will need to look to other external authorized training Angulo to achieve his CME course.

5. RELEVANT LEGISLATION

International, federal or local legislation and circulars relevant to this Policy. Full detail on this legislation can be found in QHP109 Legal Register.

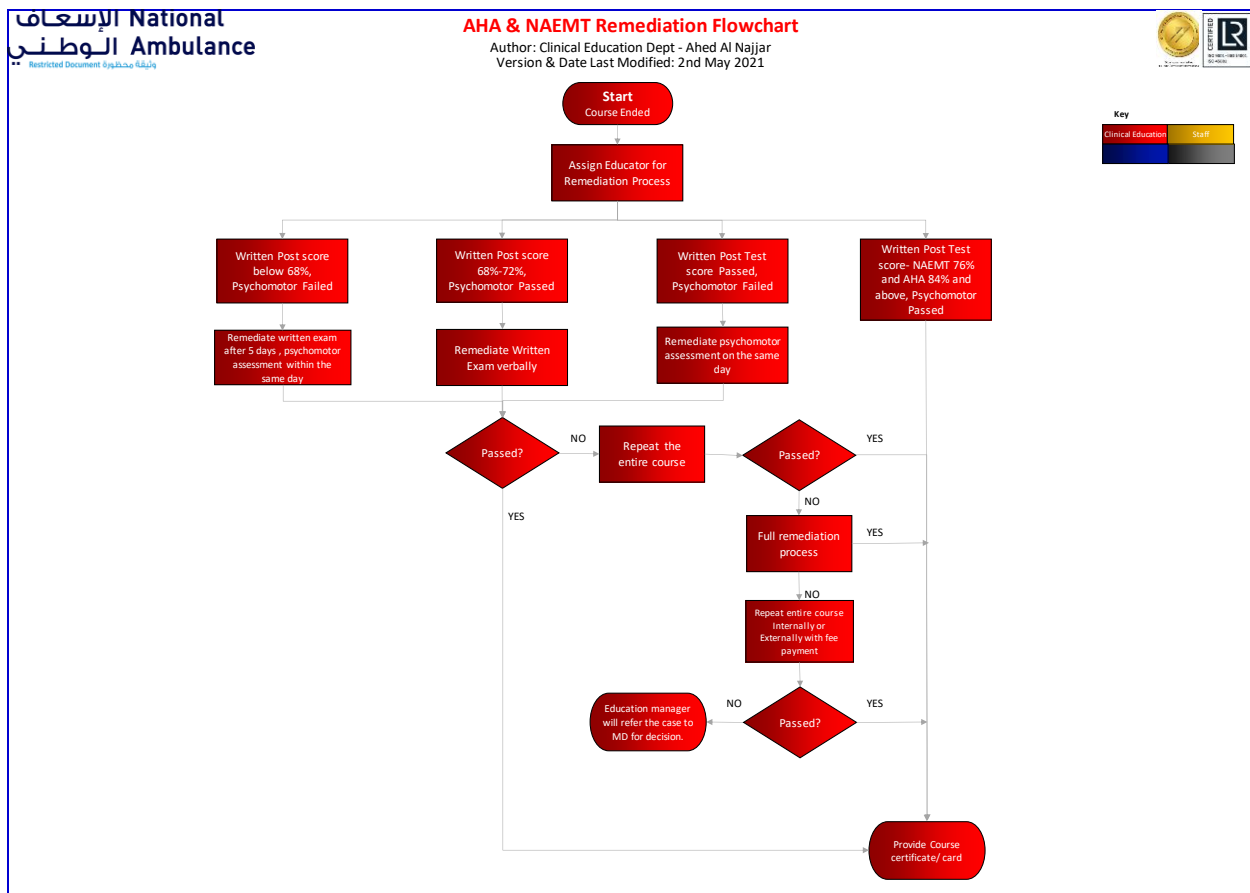
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6. PROCESS

Table 1

This flowchart is used to establish the remediation process



7. RELATED POLICIES AND FORMS

List related policies and procedures to the created/updated policy.

Policy & Procedure /Form

8. FEEDBACK

Any feedback or suggestions for improvement to this Policy, Processes or Procedures can be submitted to ghse@nationalambulance.ae

9. DOCUMENT CONTROL AND OWNERSHIP

A review and update of this document will take place as necessary, when changes occur that identify the need to revise this Policy such as changes in roles and responsibilities, release of new legislative or technical guidance, or identification of a new policy area.

This document ownership for editing is identified as:

Medical Director

This controlled document is managed / overseen by [Procurement and Tendering Committee and/or Audit and Risk Management Committee and/or HR and Compensation Committee].

Change Brief

Version No.	Date	Changes
1	August 2016	First Draft of policy altered from clinical bridging and remediation policy. To make applicable with CPG 203, clinical complaints and investigations, and education department quality assurance plans. Adapted to bring into alignment with Fitness to Practice, Privileging and Clinical Incident Reporting and Investigation
2	December 2018	Expired policy amendments & Policy Update Change in Medical Director title Minor editing of terminology and sentence construction. Diagrams also amended to be in line with NA Policy & Corporate image guidelines.
3	July 2021	Revised the whole policy to comply with the international accreditation of AHA and NAEMT Remediation flowchart was developed to unify the process Changed name to Academic Intervention and Remediation Policy and Procedures Change name of the document from Remediation & Independent Training Plan Policy to Remediation Policy and Procedure After policy review committee Revised the Process map “ 3rd time failed offer to have options for the training “ Option 1 to do

		in house training paid by the EMT or Option 2 to go outside the training and exam paid by EMT" 4 th time failed need to sit down with MD for discussion
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Review & Approval: _____

Date: _____

Dr Ayman Ahmad
Medical Director
National Ambulance

Official Stamp: