

ARNI Regulations

July 2019 Version 1.1

1. General

- 1.1 All Course Directors, Co-Directors, Instructors and Instructor Candidates must abide by the [Resuscitation Council \(UK\) Code of Conduct](#).
- 1.2 Any profit made from ARNI provider courses should be used only for purposes directly related to resuscitation.
- 1.3 Instructors must be aware of and follow the recommendations in the statement [Equal opportunities policy](#).
- 1.4 Instructors must be aware of and follow the recommendations in [Guidance for managing a candidate whose performance raises serious concerns for patient safety](#). This provides guidance on how to assist course Medical Directors and faculty where there are concerns about a candidate's clinical safety, to the extent that they may be a danger to patients.
- 1.5 The Resuscitation Council (UK) [RC (UK)] discourages the payment of honoraria and advises that, in the interests of probity, any such payment should be made through the organisation's finance department. For further guidance please see the [Payment of Honoraria to Resuscitation Council \(UK\) Instructors](#) statement

2. ARNI Course Centres

2.1 General Information

- 2.1.1 Only Course Centres approved by the Resuscitation Council (UK) may run the ARNI course.
- 2.1.2 ARNI Centres must be existing NLS centres abiding by the regulations governing that course ([NLS regulations](#)).

2.2 Data Protection

- 2.2.1 All Course Centres **must** comply with Data Protection regulations and local policies with regards to the handling, storage and disposal of personal details (e.g. addresses, payment details and photographs etc). These should ideally be disposed of or securely stored as per local policy after the course returns have been completed.

2.3 New centres

- 2.3.1 Applications to become a Course Centre should be made in writing to the RC (UK) using the 'Course Centre application form'.
- 2.3.2 Applications will be reviewed by the ARNI Subcommittee

- 2.3.3 The first course run by any Course Centre must be assessed by a subcommittee appointed visiting assessor who will be present for the entire course.
- 2.3.4 The assessor will be a member of the ARNI Subcommittee or an experienced Course Director appointed by the subcommittee.
- 2.3.5 The date of the centre's first course must be set in liaison with the Resuscitation Council (UK). A full faculty list (submitted via the LMS) and programme must be sent to the ARNI Co-ordinator for this first course at least twelve weeks prior to the start date of the course.

2.4 *Centre reassessment*

- 2.4.1 A Course Centres must be reassessed **every four years**. The process of Course Centre review is a table-top exercise during which the subcommittee reviews a course using the documentation provided by the Course Centre (paper and electronic documentation).
- 2.4.2 If during the process serious issues are raised, the subcommittee may appoint an ARNI course assessor for a face-to-face inspection.
- 2.4.3 If a Course Centre fails to have the required assessment by the end of its four year term, a new Course Centre application must be submitted to the ARNI Subcommittee.
- 2.4.4 On completion of an ARNI course assessment, the centre will receive the outcome and a detailed report, including recommendations for future courses. The Course Centre is expected to acknowledge receipt of the report and agree implementation of recommendations.
- 2.4.5 The RC (UK) will pay all reasonable expenses for ARNI course assessors. The ARNI assessor should claim these from the RC (UK) rather than the Course Centre.

3 **Course Organisation**

3.1 *Pre-course organisation*

- 3.1.1 The maximum number of candidates is 16 candidates, provided there are sufficient Instructors, equipment and space, and the recommended minimum is 12.
- 3.1.2 Each ARNI Provider course date must be registered with the RC (UK). All Course Centres must upload and complete the course approval form on the LMS at least **six weeks** in advance of the proposed course date. Only courses with a fully completed course approval form will be processed (e.g. Medical/Course Director/valid purchase order number). Courses will not be approved if these criteria are not met. Late applications will not be granted approval, except in exception circumstances.
- 3.1.3 The Course Administrator must complete the course notification form on the LMS thereby confirming and accepting responsibility that the centre will run the course in accordance with the criteria set out in these regulations. Manuals will be dispatched once the course has been approved

- 3.1.4 A registration fee is payable for each candidate in addition to the cost of the course materials.
- 3.1.5 The RC (UK) will not provide refunds or credit on unused registrations. If a whole course is cancelled registrations may be transferred to a future course. Course Centres must notify the RC (UK) of cancelled courses as soon as possible and make arrangements to use the registrations at the earliest possible juncture. Registrations are not transferrable between courses (e.g. EPALS to ALS).
- 3.1.6 Transferred registration can only be used once. Any registrations not used on subsequent courses cannot be carried forward.
- 3.1.7 Course fees are set locally. These should take into account costs of running the course but also the current financial climate within the health system and the availability of funding.
- 3.1.8 It is the Course Director's responsibility to ensure that all Instructors are registered with the RC (UK) and have a valid ARNI Instructor certificate.
- 3.1.9 Course Directors must ensure that faculty are enrolled prior to the commencement of the course and have access to the LMS and course materials.
- 3.1.10 If, on any occasion the course criteria are not met, future courses at that centre may have their registration withdrawn or future registrations may not be accepted.
- 3.1.11 Course Administrators should only enrol a candidate on the LMS once they are confident that the candidate will be attending that course and anticipate no changes.
- 3.1.12 Course administrators must only create new accounts after checking there are no existing profile for the candidate. Course administrators are also responsible for ensuring that all candidate information is entered correctly when creating their accounts on the LMS
- 3.1.13 **At least four weeks** before the course start date candidates must also be given:
- the ARNI course manual
 - pre-course materials (inclusive of assessment tool)
 - local centre information and provisional programme
- 3.1.14 The Course Administrator must ensure a supply of rabbits for the chest drain skill station. The Trusts 'Use of animal tissue in training' and 'Sharps policy' must be followed. Any person attending the course can choose not to handle animal tissue. Such a decision will not prejudice their outcome including any consideration relating to Instructor Potential status.
- 3.2 ***Candidate eligibility***
- 3.2.1 The ARNI Provider course is designed for NLS Providers involved in deliveries and care of the newborn in a role more advanced than that of first responder. Candidates will usually be experienced medical and nursing staff, but may include midwives, paramedics and resuscitation officers. (See [appendix](#) for details of suggested eligible candidates)

- 3.2.2 All candidates must have a current Resuscitation Council (UK) NLS Provider course certificate or equivalent. It is the responsibility of the Course Centres to check this before accepting candidates on to the course. Any exceptions must be discussed with the Resuscitation Council (UK) prior to the course.
- 3.2.3 Candidates cannot successfully complete the course unless they are present throughout. Candidates must be reminded of their [responsibilities](#) when attending any Resuscitation Council (UK) courses.
- 3.2.4 Candidates who have successfully completed the assessments and attended the entire course will receive a Resuscitation Council (UK) ARNI Provider certificate valid for four year
- 3.2.5 Candidates with a disability are eligible to undertake the RC (UK) ALS course. Please refer to the [Equal Opportunities Policy](#) for further guidance.

4 Candidate preparation:

- 4.1 *Course Centres must provide the following advice to candidates concerning pre-course preparation:*
- 4.2 Candidates are expected to have prepared for the course by reading the manual.
- 4.3 Candidates have a professional responsibility to act with probity. For example, where candidates are given study leave to attend an ARNI course and/or have their costs paid by their employer or educational provider, employers and educational providers have a reasonable expectation that those candidates will prepare adequately for attendance at the face-to-face element of the course by reading the manual.
- 4.4 Candidates must be present throughout the face-to-face element of the course in order to complete it successfully.
- 4.5 Evaluation forms must be issued to candidates at the start of the course and be collected at the end. The originals are to be forwarded to the Resuscitation Council (UK) with the Course Director's report.

5 Faculty

5.1 *Medical/Course Director requirements*

- 5.1.1 Each course must be led by a Course Director and must have a Medical Director (who may also act as the Course Director). If the Course Director is medically qualified and fulfilling both roles, it is useful to have a nominated Co-Director, to assist the Director. The Director/s are responsible for ensuring the smooth running of the course.
- 5.1.2 The Course Director must ensure that records are kept during the course and is responsible for providing the Course Director's report at the end of the course. The Course Director is

responsible for ensuring that the course fully complies with the **ARNI** course regulations. Where the regulations are not met, the Resuscitation Council (UK) may retrospectively withdraw course approval.

- 5.1.3 The Course Director must ensure that the faculty are familiar with the current course regulations and course materials which will be available on the LMS.
- 5.1.4 The Course Director/Medical Director, who must have been approved by the RC (UK) to direct **ARNI** courses, must be present throughout the course. At least one other medical Instructor must also be present throughout the course.
- 5.1.5 Any incident or concerns should be initially dealt with locally and must be documented fully in the Course Director's report. Further guidance and support is available from the RC (UK).
- 5.1.6 The Medical Director must be medically qualified and credible to fulfil the position of medical lead on an ARNI course. Doctors must be five years post-qualification to be eligible for the role of Medical Director.
- 5.1.7 The Medical Director (if he/she is not also the Course Director) should work alongside the Course Director to ensure that the course is run in accordance with the regulations. The Medical Director has certain additional responsibilities as outlined in 'Guidance for managing a candidate whose performance raises serious concerns for patient safety' during RC (UK) courses.
- 5.1.8 Applications to become an approved Course Director or Medical Director should be made on the 'ARNI Provider Course Director's application form'.
- 5.1.9 If a Course Director has not directed a course for two years, their status as a Course/Medical Director expires. Should they wish to direct a course, they must resubmit a Course Director application process.
- 5.1.10 The Course Director should be supernumerary. The Course Co-Director would usually be counted in the instructor numbers.

5.2 *Faculty*

- 5.2.1 Each course should have a multidisciplinary faculty. The faculty will comprise at least eight instructors in addition to the Course Director (i.e. nine people). In normal circumstances the Course Director is supernumerary. The Resuscitation Council (UK) should be notified of any exceptions and this should be recorded in the Course Director's Report. Co-Directors are not usually supernumerary.
- 5.2.2 The faculty will comprise members of ARNI Instructors and ARNI Instructor Candidates.
- 5.2.3 There is a minimum requirement of two Instructors for every four candidates and one Instructor for every eight must be medically qualified. Every teaching station must have a minimum of two ARNI Instructors; in exceptional circumstances stations may have one full

instructor and a clinically experienced Instructor Candidate. The number of Instructor Candidates (IC) on the faculty should not exceed 1/3 of the total faculty up to a maximum of 4 ICs. Each Instructor Candidate and Recertifying Instructor must have a full non-recertifying Instructor as a mentor. Thus, the total number of Instructor Candidates and Recertifying Instructors must be matched by an equal number of full non-recertifying Instructors.

- 5.2.4 Instructors should aim to teach on at least one ARNI provider course each year in order to maintain Instructor status. It is recommended that instructors teach outside their home centre from time-to-time. Instructing on an ARNI course will count towards the NLS recertification instructor requirements.
- 5.2.5 Combined ARNI and NLS Instructors must teach on six days over two years. This must include one ARNI and one NLS course over this period. The remaining three days may be a combination of NLS, ARNI and can include one GIC.
- 5.2.6 It is recommended that Instructors should attend at least one Instructor Day every four years.

5.3 *Instructor recertification*

- 5.3.1 Instructors must recertify every 4 years. Recertifying Instructors should make a prior arrangement to be recertified on a course. Recertification involves being assessed as an
- 5.3.2 Instructor Candidate during delivery of a skill station, the communication station and a simulation.
- 5.3.3 The assessor must complete the current appropriate assessment forms. If an Instructor fails recertification, it may be possible to undertake another course. In these circumstances, both the Resuscitation Council (UK) and the Course Centre must receive details of paperwork relating to the initial recertification prior to the second recertification attempt occurring.
- 5.3.4 Instructors who have not maintained their instructor status must complete a [Lapsed Instructor form](#) and submit it to the ARNI Co-ordinator at the RC (UK) ARNI@resus.org.uk
- 5.3.5 Once reviewed and agreed, the lapsed Instructor will revert to Instructor Candidate status.
- 5.3.6 It is rare for lapsed Instructors to be asked to attend a GIC course, however, in preparation for their teaching practices they may be given access to the online GIC modules. Full Instructor status will normally be achieved after the successful completion of two teaching practices. Once this has been achieved, their ARNI Instructor status will be re-instated and be valid for four years from the date of completion of their second assessment.
- 5.3.7 Instructors who have not recertified within one year of the expiry date of their Instructor certificate must complete the [Lapsed instructor form](#).

- 5.3.8 Instructors must be aware that their provider status is only valid as long as their Instructor certificate is in date. Once the Instructor certificate is out of date their provider status is no longer valid.
- 5.3.9 Instructors who are either medical or non-medical Course Directors may not recertify whilst acting in this capacity, unless assessed by a course assessor.
- 5.3.10 Instructors who are either medical or non-medical Course Directors may not recertify whilst acting in this capacity, unless assessed by a course assessor.

6 Programme

- 6.1 The standard programme is based on 16 candidates split into 4 groups of 4. Candidates should be allocated to make the groups as multidisciplinary as possible.
- 6.2 The programme running order must be adhered to.
- 6.3 It is the responsibility of the Course Director to ensure suitable allocation of the lectures taking into account credibility, knowledge base and Instructor requirements
- 6.4 Skill stations must be led by a full ARNI Instructor or Recertifying Instructor with appropriate experience or an IC under close supervision by a full ARNI instructor
- 6.5 Lectures should be delivered by an Instructor or an Instructor Candidate with current, direct and practical experience of the lecture material.
- 6.6 The Course Centre must supply as a minimum, the equipment detailed in the equipment list.
- 6.7 The course materials are provided by the Resuscitation Council (UK). Course Centres should produce the materials in whichever format is most appropriate for their equipment. Limited additional teaching material may be provided by Course Centres on the understanding that it is appropriate and clinically relevant.
- 6.8 Any deviation from the standard programme must be discussed with the Resuscitation Council (UK).
- 6.9 The Course Centre must supply as a minimum, the equipment detailed in the equipment list.

7 Assessment

- 7.1 Candidates will be assessed on each simulation:
- Communication with parents Skill Station - use the communication assessment form.
 - Face mask ventilation (FMV) Skill Station - use the FMV continuous assessment form.
 - Advanced Airway Skill Station - use the advanced airway continuous assessment form.
 - Structured Simulation Stations - use the continuous assessment form which also captures communication skills demonstrated in these simulations.

All candidate scores must be entered on the 'Candidate Continuous Assessment Progress sheet'. This includes all simulations and workshops.

7.2 *Airway assessment:*

- 7.2.1 Candidates must pass both airway skill station assessments. They will be informed of the assessment criteria prior to the stations.
- 7.2.2 At least one ARNI Instructor and one other member of faculty who is either a full Instructor or an Instructor Candidate must supervise the airway test.
- 7.2.3 Instructor Candidates can only lead an assessment under the supervision of a full Instructor.
- 7.2.4 Candidates who fail to achieve satisfactory scores must have them explained in the comments section of the assessment form in order to ensure early feedback and support for remedial action.

7.3 *Retest*

- 7.3.1 Candidates who fail the airway assessment should be re-assessed before the end of the first day using the same pass/fail criteria.
- 7.3.2 At least one different Instructor should assess this retest.
- 7.3.3 If the candidate fails the re-test, they may attend the remainder of the course in which case they will receive a certificate of attendance from the Course Centre. They will not receive a Resuscitation Council (UK) ARNI provider certificate.
- 7.3.4 Course Directors must ensure written feedback is given to unsuccessful candidates.
- 7.3.5 There is no multiple choice question paper.

7.4 *Recertification as an ARNI provider*

- 7.4.1 The ARNI provider certificate is valid for 4 years.
- 7.4.2 ARNI providers can only recertify by attending a full ARNI provider course.
- 7.4.3 In order to be considered for Instructor Potential on recertification the candidate must attend a full ARNI provider course but cannot do so until at least **one** year has elapsed after their initial certification.

8 **Instructor Potential (IP) regulations**

Credibility and nomination process

- 8.1 Candidates who show exceptional ability, aptitude and credibility may be considered for ARNI Instructor training ('IP appraisal form').
- 8.2 **Only current NLS Instructors will be considered for instructor status.**

- 8.3 Only registered professionals with regular exposure to and sufficient professional experience of resuscitation at birth or in a neonatal intensive care setting may be considered for ARNI IP status in order to establish credibility. (see Appendix 1)
- 8.4 Medically qualified instructors will normally be expected to have two years' experience providing second tier cover for the labour ward or NICU. NMC registered health professionals will have a neonatal specialist qualification. (see Appendix 1)
- 8.5 Any ARNI candidates are only eligible for consideration for instructor status after being nominated and seconded by instructors at the final faculty meeting. The whole faculty should then discuss each nominated candidate's performance using the ARNI Instructor Potential appraisal form and guidance.
- 8.6 Recommendations for ARNI Instructor Potential should ideally be unanimous, but if one faculty member is opposed, the Course Director may make the final decision.
- 8.7 Those recommended for Instructor Potential should be informed as soon as possible after the course.
- 8.8 All recommendations must be marked clearly on the result sheet and individually named in the Course Director report.
- 8.9 As all nominations for Instructor Potential will be recognised instructors, those nominated as Instructor potential will move directly to Instructor Candidates.

9 Instructor Candidate (IC) regulations

- 9.1 As the ARNI Instructor Potential is already a current NLS Instructor, he/she does not need to attend the Generic Instructor Course and will progress straight to IC status. IC's must complete the GIC online learning materials in order to update their debriefing skills prior to commencing their teaching practice.
- 9.2 ARNI ICs will be required to successfully teach and be assessed on a minimum of two ARNI provider courses before full Instructor status is granted and a certificate issued. In some cases, IC's may benefit from teaching on a third course prior to gaining full Instructor status. The Resuscitation Council (UK) must be notified of any candidates requiring a third IC by contacting the ARNI Co-ordinator ARNI@resus.org.uk
- 9.3 The IC will receive their allocations for the teaching programme within four weeks of the course. It is expected that ICs will familiarise themselves with the teaching materials for all stations allocated to them.
- 9.4 The Course Director will offer ICs the opportunity to be orientated to the centre and teaching resources (where possible) during the evening prior to the course. ICs are encouraged to attend this pre-course support.
- 9.5 ICs must attend the entire ARNI provider course.

- 9.6 Over their IC courses Instructor candidates must teach on an airway and communication skill station. To facilitate this, ICs are asked to submit a record of stations they have participated in on previous teaching practices to ensure they experience all elements of the course during the IC process.
- 9.7 They may also be required to give a lecture, teach simulation stations and be involved in the airway testing stations.
- 9.8 ICs must not lead any session without close full Instructor supervision.
- 9.9 All ARNI ICs should be assessed and receive feedback on each station. The relevant IC feedback forms in their instructor progress logs must be completed and discussed with the IC.
- 9.10 The IC should complete their teaching practices within 4 years of the date of the ARNI course on which they were IP'd.

10 Post course Organisation

- 10.1 The 'Final faculty' list must be completed on the LMS within **one week** of the course date.
- 10.2 The candidates' results must be uploaded to the LMS within **one week** of the course date. Delays in providing certificates to candidates should be minimised.
- 10.3 The Course Director must complete the Course Director's report on the LMS within **one week** of the course date.
- 10.4 After the course, the Course Director must send the following to the Resuscitation Council (UK) **one week** of the course date.
- Final Programme including faculty allocations
 - Instructor Candidate assessment forms (a copy should also be retained by the IC)
 - ARNI Instructor Potential appraisal forms
 - Candidate evaluation forms
- 10.5 After the course, candidates must complete their course evaluation form on the LMS. Their course certificate will be released once this has been completed. The Course Centre will be able to access and export anonymised analysis to keep for reference. If a candidate has not completed their evaluation after 120 days their course certificate will be automatically released.
- 10.6 If the final faculty, course requirements and administration do not comply with the criteria set down in these regulations and no reasonable explanation is given, future course registrations and Course Centre status will be reviewed.
- 10.7 The Course Centre should retain copies of all the paperwork. The duration of long term storage of course records is a local decision. As a guide the RC (UK) retains course paperwork for a period of five years.

- 10.8 The Course Centre should keep copies of written evaluations. This is in addition to the candidate evaluation on the LMS which should be completed prior to release of certificates
- 10.9 Instructors are strongly encouraged to download and review candidate feedback from the course as part of their PDR.

Appendix 1 – Appropriate ARNI Candidates

All candidates must be:

- registered professional healthcare provider
- current Resuscitation Council (UK) NLS Provider or equivalent (see section 8)

Doctors

- currently practising in a post or training programme that may require them to lead a neonatal resuscitation and stabilisation
- or manage a neonate requiring intensive care environment (including operating theatres and transport)
- recommended minimum two years' paediatric / neonatal / paediatric anaesthetic experience

Neonatal nurses

- currently practising
- qualified in speciality (neonatal) nursing
- regular exposure to the care of the newborn

Midwives

- currently practising
- two years midwifery clinical experience
- would be required to initiate resuscitation of term and preterm infants or babies born from complex pregnancies or deliveries

Paramedics

- regular exposure to neonatal transfer in a direct patient care capacity and regular, significant, timetabled experience in a Maternity Unit/NICU with direct experience of neonatal resuscitation and/or care of neonates receiving intensive care.
- recommended experience of neonatal transport for at least six months and teaches newborn resuscitation to paramedics for update

ANNPs

- currently practicing with on-going exposure to high risk delivery, neonatal resuscitation at birth, initial stabilisation or neonatal HDU / ITU
- may be required to lead resuscitation of newborn
- minimum two years' neonatal experience

Resuscitation Officers

- Would be a perinatal resuscitation officer in maternity hospital with Regular exposure to newborn resuscitation in an active role or regular, significant, timetabled experience in a maternity unit/NICU with direct experience of neonatal resuscitation and/or care of neonates receiving intensive care