

# Civil Defence College



## Extenuating Circumstances & Appeals

**Policy No. 17**

# Extenuating Circumstances and Appeals.

## Contact Details

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## **1. Background**

The Pre Hospital Emergency Care Council (PHECC) is the regulator for emergency medical services in Ireland and their role is to protect the public. PHECC require Civil Defence to establish an Extenuating Circumstances Policy in relation to the process of recertification at responder level.

## **2. Purpose**

PHECC Education and Training Standards outline certification periods and minimum course duration, the recertification course is generally shorter than the full course. The recertification course and assessment must be completed before the expiry date of the existing certificate. Otherwise, the Volunteer is required to complete the full course. The exception to this is where there are extenuating circumstances.

## **3. Scope**

In order to simplify the process, the Civil Defence College will accept applications for responder recertification courses 6-months in advance of the expiry date of certification. This will allow a Volunteer complete the shorter recertification course during this 6-month period. If a Volunteer does not complete the shorter recertification course and assessment before this end date, they must complete the full certification course.

The Civil Defence College will ensure that dates for Instructor recertification courses are published in a timely manner that will allow for instructor recertification before certification expires.

In the event where a Volunteer is due for recertification, has been invited on or is undertaking a recertification course, but due to unforeseen circumstances, find themselves unable to complete the course and assessment before the end date of their existing certification, extenuating circumstances could be initiated. PHECC Education and Training Standards allow for a maximum of 30-days, beginning immediately after the end date of their existing certification, during which the Volunteer must complete the shorter recertification course.

This 30-day period is only applicable to those Volunteers who have applied for Extenuating Circumstances before the end date of their existing certification, and whose Extenuating Circumstances Application has been approved by the relevant official.

#### 4. Decisions

- Responder/Local Training – the process is held within the Local Authority
- Instructor/Central Training – the process is held within the Civil Defence College

There are four steps in the process

1. The Application for Extenuating Circumstances to be granted
2. The Decision of the relevant person
3. An Appeal Application - *if relevant*
4. An Appeal Decision - *if relevant*

#### 5. Aim

The aim of this Extenuating Circumstances Policy is to outline the required criteria and the steps that must be taken, in order for a Volunteer to avail of the 30-day period in which to complete the shorter recertification course.

The following is a list of circumstances under which a Volunteer may apply for extenuating circumstances:

- A physical injury or emotional trauma during a period four to six weeks previously
- A physical disability of chronic or disabling condition such as epilepsy, glandular fever, or other illness
- Recent bereavement of a close family member or friend
- Severe accident/physical injury
- Domestic crisis/serious illness of a close family member
- Other (details should be described in your Extenuating Circumstances Application)

#### 6. Examples of Scenarios and Outcomes of decisions

Two distinct scenarios under which extenuating circumstances may be applied for are outlined below:

##### Scenario 1: Volunteer Responder

In the case where a Volunteer Responder is due for recertification, has been invited on or is undertaking a recertification course and due to extenuating circumstances cannot complete the course and assessment, their application for Extenuating Circumstances must be sent to their Course Instructor during the 6-month recertification period.

##### Outcomes:

Approved: This decision will **require** the Volunteer Responder to complete the recertification course/assessment in the 30-day period that immediately follows the end date of their existing certification. Once availing of the 30-day period, the Volunteer Responder is **not** permitted to practice or respond on medical duties/courses until they have completed the

recertification course.

Not Approved: there is an Appeals Process, which a Volunteer Responder can engage with in order to have the decision re-examined by their Civil Defence Officer. Due to time constraints, the Appeal Application should be lodged as soon as possible after your Extenuating Circumstances Application has not been approved.

*See Appendix 1.*

### Scenario 2: Volunteer Instructor

In the case where a Volunteer Instructor is due for recertification, has been invited on or is undertaking a recertification course and due to extenuating circumstances cannot complete the course and assessment, their application for Extenuating Circumstances must be sent through their Civil Defence Officer to the Civil Defence College Instructor in charge of that discipline

#### Outcomes:

Approved: This decision will **require** the Volunteer Instructor to complete the recertification course in the 30-day period that immediately follows the end date of their existing certification. Once availing of the 30-day period, the Volunteer Instructor is **not** permitted to instruct or respond, at the level of the Instructor certificate, on medical duties/courses until they have completed the recertification course.

Not Approved: There is an Appeals Process, which a Volunteer Instructor can engage with in order to have the decision re-examined. This will involve a more senior official in the Civil Defence College reviewing the application. Due to time constraints, the Appeal Application should be lodged as soon as possible after your Extenuating Circumstances Application has not been approved.

Applications, Decisions, Appeals and Final decisions should be made in a timely manner to allow, where successful, the course and assessment to be completed within the 30-day period that immediately follows the end date of their existing certification.

**Please note:** All information shared during the application/appeals process is viewed as strictly confidential. Only those involved in the application/appeals process will have access to this information.

All information will be stored with strict adherence to GDPR rules.

All applications, decisions and appeals are liable for an audit from PHECC and, as such, must be available for future reference.

*See Appendix 2.*

**Appendix 1. Volunteer Responder.**

<b>STEP 1. APPLICATION - Section A: (To be filled out by the <b>Volunteer Responder</b>)</b>			
Volunteer Details	Name:		Volunteer Number:
Volunteer Contact Details	Phone No:		Email:
Civil Defence Unit			
CDO		Instructor	
Course Details	Course Name:		Course Number: (if applicable)
End Date of Certification			
Details of Extenuating Circumstance	<p>Please tick the box that best describes your extenuating circumstance:</p> <ul style="list-style-type: none"> <li>• A physical injury or emotional trauma during a period four to six weeks previously <input type="checkbox"/></li> <hr/> <li>• A physical disability of chronic or disabling condition such as epilepsy, glandular fever, or other illness <input type="checkbox"/></li> <hr/> <li>• Recent bereavement of a close family member or friend <input type="checkbox"/></li> <hr/> <li>• Severe accident/physical injury <input type="checkbox"/></li> <hr/> <li>• Domestic crisis/serious illness of a close family member <input type="checkbox"/></li> <hr/> <li>• Other (please describe in the box below) <input type="checkbox"/></li> </ul> <div style="border: 1px solid black; height: 60px; width: 100%; margin-top: 10px;"></div>		
<p>Please tick the box to acknowledge that you have read and understood the statement below:</p> <ul style="list-style-type: none"> <li>• I acknowledge the fact that should my Extenuating Circumstances Application be approved, until such a time that I regain certification, I am <b>NOT</b> permitted to practice or respond on medical duties/courses. <input type="checkbox"/></li> </ul>			
Volunteer Signature	Name (Print)	Name (Signed)	Date

**STEP 2. DECISION - Section B: (To be filled out by the Volunteer Course Instructor)**

Instructor Name			
Course Start date (if applicable)			
Volunteer Attendance/ Participation in Course (if applicable)			
Details of Extenuating Circumstances			
Severity of circumstances			
Application Decision	Approved <input type="checkbox"/>	Not Approved <input type="checkbox"/>	
Reasoning for Decision			
Instructor Declaration	<p>I can confirm that:</p> <ul style="list-style-type: none"><li>• A discussion with the Volunteer Responder regarding the Extenuating Circumstances Application has taken place.</li><li>• There is sound reason to approve or not approve the Extenuating Circumstances Application based on the criteria above.</li><li>• Approving the Extenuating Circumstances Application will not give the Volunteer Responder in question an unfair advantage over other Volunteers participating in the recertification process.</li><li>• I will inform the Volunteer Responder in writing of my decision regarding their Extenuating Circumstances Application.</li><li>• If the Extenuating Circumstances Application is not approved, I will inform the Volunteer Responder of their right to appeal my decision to their Civil Defence Officer.</li></ul>		
Instructor Signature	Name (Print)	Name (Signed)	Date



<b>STEP 3. APPEAL - Section A: (To be filled out by the <b>Volunteer Responder</b>)</b>			
Volunteer Details	Name:	Volunteer Number:	
Volunteer Contact Details	Phone No:	Email:	
Civil Defence Unit			
CDO			
Details of Course	Course Name:	Course Number: (if applicable)	Instructor:
Reason why Application was declined			
Additional Information to support Appeal			
Volunteer Signature	Name (Printed)	Name (Signed)	Date



**Appendix 2: Volunteer Instructor.**

<b>STEP 1. APPLICATION Section A: (To be filled out by the <b>Volunteer Instructor</b>)</b>			
Volunteer Details	Name:	Volunteer Number:	
Volunteer Contact Details	Phone No:	Email:	
Civil Defence Unit			
Civil Defence Officer			
College Instructor			
Course Details	Course Name:	Course (if applicable)	Number:
End Date of Certification			
Details of Extenuating Circumstances	<p>Please tick the box that best describes your extenuating circumstance:</p> <ul style="list-style-type: none"> <li>• A physical injury or emotional trauma during a period four to six weeks previously <span style="float: right;"><input type="checkbox"/></span></li> <hr style="width: 80%; margin-left: 0;"/> <li>• A physical disability of chronic or disabling condition such as epilepsy, glandular fever, or other illness <span style="float: right;"><input type="checkbox"/></span></li> <hr style="width: 80%; margin-left: 0;"/> <li>• Recent bereavement of a close family member or friend <span style="float: right;"><input type="checkbox"/></span></li> <hr style="width: 80%; margin-left: 0;"/> <li>• Severe accident/physical injury <span style="float: right;"><input type="checkbox"/></span></li> <hr style="width: 80%; margin-left: 0;"/> <li>• Domestic crisis/serious illness of a close family member <span style="float: right;"><input type="checkbox"/></span></li> <hr style="width: 80%; margin-left: 0;"/> <li>• Other (please describe in the box below) <span style="float: right;"><input type="checkbox"/></span></li> </ul> <div style="border: 1px solid black; height: 30px; width: 100%; margin-top: 5px;"></div>		
<p>Please tick the box to acknowledge that you have read and understood the statement below:</p> <ul style="list-style-type: none"> <li>• I acknowledge the fact that should my Extenuating Circumstances Application be approved, until such a time that I regain certification, I am <b>NOT</b> permitted to instruct or respond, at the level of the Instructor certificate, on medical duties/courses. <span style="float: right;"><input type="checkbox"/></span></li> </ul>			
Volunteer Signature	Name (Print)	Name (Signed)	Date

**STEP 2. DECISION** Section B: (To be filled out by the **Civil Defence College Instructor**)

College Instructor Name			
Course Start date (if applicable)			
Courses delivered by Volunteer Instructor since last Certified			
Details of Extenuating Circumstances			
Severity of Circumstances			
Application Decision	Approved <input type="checkbox"/>	Not Approved	<input type="checkbox"/>
Reasoning for Decision			
College Instructor Declaration	<p>I can confirm that:</p> <ul style="list-style-type: none"><li>• A discussion with the volunteer and their Civil Defence Officer regarding the Extenuating Circumstances Application has taken place</li><li>• There is sound reason to approve or not approve the Extenuating Circumstances Application based on the criteria above</li><li>• Approving the Extenuating Circumstances Application will not give the Volunteer Instructor in question an unfair advantage over other Volunteers participating in the recertification process.</li><li>• I will inform the Volunteer Instructor in writing of my decision regarding their Extenuating Circumstances Application</li><li>• If the Extenuating Circumstances Application is declined, I will inform the Volunteer Instructor of their right to appeal my decision, which will involve a more senior official in the Civil Defence College reviewing the application.</li></ul>		
Instructor Signature	Name (Print)	Name (Signed)	Date

**STEP 3. APPEAL Section A: (To be filled out by the **Volunteer Instructor**)**

Volunteer Details	Name:	Volunteer Number:		
Volunteer Contact Details	Phone No:	Email:		
Civil Defence Unit				
Civil Defence Officer				
Details of Extenuating Circumstances Application	Course Name:	Course Number: (if applicable)	College Instructor:	
Reason why Application was declined				
Additional Information to support Appeal				
Volunteer Signature	Name (Printed)	Name (Signed)	Date	

<b>STEP 4. APPEAL DECISION</b> Section B: (To be filled out by the <b>Senior College Official</b> )			
Senior College Official Name			
Receipt Date of Appeal Application			
Appeal Application Decision	<p>I can confirm that a review of the Application has been completed and that the Appeal is:</p> <p>Approved <input type="checkbox"/> Not Approved <input type="checkbox"/></p>		
Reasoning for Decision			
Senior College Official Declaration	<p>I can confirm that:</p> <ul style="list-style-type: none"> <li>• A discussion with the Volunteer Instructor regarding their Appeal Application has taken place</li> <li>• There is sound reason to approve or not approve the Appeals Application based on the criteria above</li> <li>• Approving the Extenuating Circumstances Application will not give the Volunteer Instructor in question an unfair advantage over other Volunteers participating in the course.</li> <li>• I will inform the Volunteer Instructor in writing of my decision regarding their Appeal for Extenuating Circumstances</li> </ul>		
Senior College Official Signature	Name (Print)	Name (Signed)	Date



**Civil Defence College**

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