

# **Health Education England**

# **South West Paramedics in Primary Care Survey Report**



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# **The Survey**

With the advent of the degree level threshold for registration for paramedics, the profession is now more equipped to work across the healthcare system and more paramedics than ever before are choosing Primary and Urgent Care (P&UC) as a career progression option. Although this poses challenges for ambulance services, the benefits of having a multi-professional workforce who are traditionally generalists and experienced in rapid clinical diagnostic and decision-making skills, has resulted in paramedics being welcomed across previously unreachable systems.

In the South West of England, paramedics are employed in P&UC from the northern borders of Gloucestershire to the most southern area in the Isles of Scilly and everywhere in between. However, because of the various ways in which they are employed across the systems, it is challenging to locate them all.

Health Education England have, in the last five years been working towards standardising the educational pathway for paramedics and other allied health professions via the First Contact Practitioner (FCP) and Advanced Practice (AP) routes (HEE 2021), however, without an understanding of the workforces' educational attainment levels and learning needs, this is difficult. Therefore, a survey was developed and distributed across the South West via primary care networks. Multiple attempts were made to initiate contact with paramedics, including via Regional Faculty Leads, primary care networks, individual connections and training hubs, with those in Cornwall the most challenging to find. Despite the challenges this activity has brought its own benefits by way of building new relationships and establishing on-going communication and engagement with these paramedics.

It is widely accepted that there may be as many as 200+ paramedics working in P&UC in this region, and we were able to secure 162 completed surveys which was considered a successful outcome.

# **Survey questions**

The survey contained ten questions and took an average of 5.03 minutes to complete. The survey questions would enable us to ascertain the following information:

- Location: where paramedics are located and to be able to maintain contact with the respondents to keep them updated and to offer support.
- Interest in establishing communication/engagement links: As well asking for contact details, we used the survey to ask for consent to contact them again in the future.
- Funding: How their roles are funded. In particular, whether they are employed under the Additional Role Reimbursement Scheme (ARRS) (NHS E&I 2019). The aim of the ARRS is to support new roles in primary care where there is a workforce shortage and in particular; clinical pharmacists, social prescribing link workers, physician associates, physiotherapists and paramedics.

- Current educational attainment level: In July 2021 Health Education England (HEE) undertook to ensure that there was a standardised level of knowledge and skills among paramedics working in P&UC. The First Contact Practitioners and Advanced Practitioners in Primary Care: Roadmaps to Practice, are supportive documents that provide a clear educational pathway from undergraduate to advanced practice for clinicians wishing to pursue a career in primary care. It also "assures governance and ultimately patient safety, ensuring capability to see and manage undifferentiated and undiagnosed presentations within an agreed scope of practice". By including a branch question regarding non-medical prescribing (NMP) attainment, we are able to build a picture regarding whether this is seen as a priority qualification for those working in P&UC and what the likely funding needs will be in the next few years. This data may also be used to influence pre-registration curriculum development which is currently in progress.
- Role Descriptors and Job titles: Paramedics can take on a range of personas working in P&UC. We were interested in finding out what the Primary Care Networks (PCNs) were using as role descriptors as reflected in job titles for these new and emerging roles and whether this aligned to the PCN data collection capture tool descriptor of 'community paramedic'.
- Area of practice for development: Participants were asked to disclose which areas of their practice they would like included in future educational events.

Key findings are highlighted throughout in **bold type**.

# **Survey findings**

#### Location

Fig 1. The table below illustrates the numbers of paramedics working across the range of locations within the seven identified regional areas.

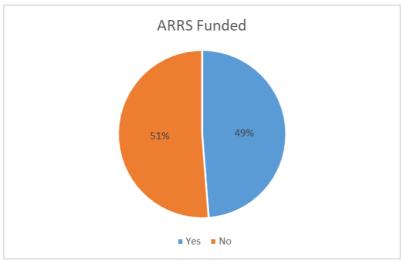


## **On-going Communication and Engagement**

Of the 162 respondents only 4 declined to give consent for future contact.

## **Funding**

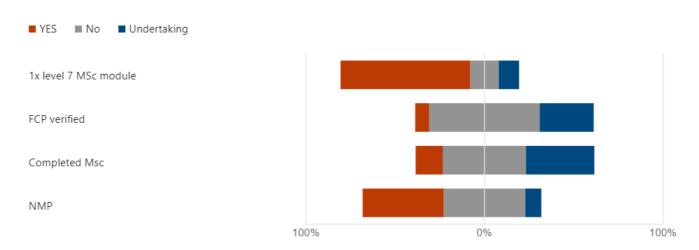
Figure 2. below which illustrates the split of those paramedics who are currently funded by ARRS



The significance of this data is that we do not know whether 51% of paramedics are receiving supervision support within their roles as in theory, they are not accessing the funding available to enable this.

#### **Educational attainment**

Figure 3. below Illustrates a summary overview of the current level of attainment of the respondents.



Highlights include the following:

- 72.7% (123/162) have at least one Level 7 related academic module.
- Whilst only 7% (11/162) have completed the FCP verification, another 31% (50/162) are currently undertaking this pathway.
- 53.4% (85/162) have either completed or are enrolled on a Masters programme.
- 54.6% (87/162) have completed or are enrolled on the non-medical prescribing programme.

Figure 4. illustrates the percentage of paramedics who are undertaking or have completed the FCP verification process.

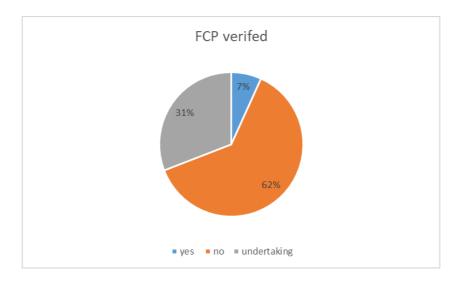
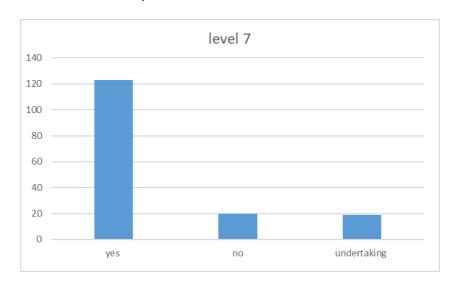


Figure 5. Illustrates the numbers of paramedics who have attained at least one Level 7 module.



When asked about their current level of education at Level 7 (Masters), important to note is that **20 paramedic respondents working in P&UC do not have any post-graduate qualifications**. This will need to be highlighted to Integrated Care Systems and Integrated Care Boards as an area of risk in relation to governance and regulation terms (NHS England 2022). Standardisation of attainment levels will reduce the risk to the public and support the development and growth of the profession.

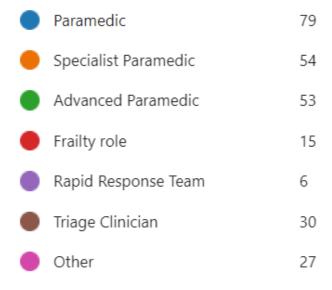
Education	yes	no	undertaking	total
Masters (MSc) programme	23	77	62	162

#### **Role Descriptors and Job Titles**

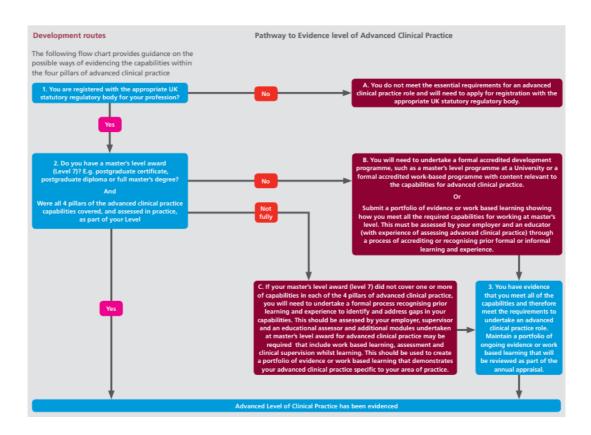
The majority of staff data capture input within PCN's uses the role descriptor 'Community Paramedic' and unless the system includes a deeper level of data capture that includes the registerable profession, this creates a challenge for those wishing to support paramedics who work outside of the traditional ambulance sector.

The survey found that of the 162 paramedics surveyed, there are zero with 'Community' as a descriptor in their job title. This clearly creates a challenge to identifying where paramedics are working. The most prevalent titles among those surveyed are 'Specialist' and 'Advanced Paramedic' and most would prefer 'paramedic practitioner' or 'urgent care practitioner'.

The illustration below clearly shows that there are currently a wide range of job titles across the South West.



The term 'advanced paramedic' is used by 51 (2 were duplicates) survey respondents however, the Multi-professional Framework for advanced clinical practice in England (NHS 2017) assert that this role descriptor should only be used by healthcare professionals working across the four pillars and who have evidence of formal accredited development at the required level (level 7 or equivalent). Please see the diagram below which demonstrates the pathway (NHS 2017).



The survey data shows that currently of the 51 who use this term only 24 (47%) have an MSc in Advanced Practice. The remaining 26 may have a portfolio of evidence to support their using the title and they may or may not have been formerly assessed via the nationally approved credentialling route.

With Professional Bodies and Royal Colleges having a shared commitment to "developing this critical workforce role in a consistent way to ensure safety, quality, and effectiveness "employers must consider how their paramedic role descriptors align with the framework.

Respondents were asked to add additional data if they answered 'other' to the role descriptor question. The 30 who completed this section gave the answers in the image below:

9 respondents (30%) answered Urgent Care for this question.

**Contract Practitioner** 

**Lead and Partner Prescribing Team** 

Paramedic Practitioner Trainee ACP

**Home visiting** 

care homes

**Acute Care** 

**Urgent Care** 

**Care Team** 

**Palliative Care** 

**Advanced** 

Team Lead

primary care

Team/Home Clinical Practitioner

urgent requests Emergency Care

**Care Practitioner** 

linical Lead

Some new emerging roles such as 'Frailty Lead' roles are more prevalent than expected and demonstrate how paramedics are now reaching out across the healthcare system and being used in agnostic multi-professional roles.

There are a number of paramedics working in leadership roles. One paramedic respondent is working as a Practice Partner in the South West region and other lead roles within the PCN's are more prevalent than ever before.

#### Areas of practice for development

The answers were submitted into a free text box and a total of 108 responses were noted. These were then allocated into themes which resulted in 17 areas of practice being identified. This included:

Dermatology	Headaches
Long term health conditions (asthma/COPD/diabetes/heart failure)	End of Life (EOL) /Recommended Summary Plan for Emergency Care and Treatment (RESPECT) Treatment Escalation Planning (TEP)
Blood interpretation	Paediatrics - unexplained fever , managing risk
Frailty	Male genital examinations
Gynaecology/women's health/breast examination	FCP-ACP route and portfolio
Minor illness	Urology
Eye presentations/ Ophthalmology	Dementia
Maintaining safe practice/risk management	Advanced communication skills training
ENT	

# Summary of key findings

- As 51% of paramedics are not ARRS funded, this raises questions as the whether they are receiving adequate supervision support.
- 20 paramedic respondents working in P&UC do not have any post-graduate qualifications. This could be putting patients at risk.
- A move to a standardised role descriptor which could then be updated on all data input systems making paramedics easier to locate across the South West, is recommended.
- The role descriptor 'advanced paramedic' should be protected and used only when there is evidence of completion of an accredited level 7 programme and when the position entails working across the four pillars (clinical, research, education, leadership).

# **Outcomes**

As a result of the new knowledge and intelliegence gleaned from this survey five direct actions have been initiated:

- Targeted educational seminars have been organised to cover some of the requested areas of practice and to support the completion of either the FCP or AP developmental routes.
- Equipment, such as intimate examination models, have been purchased to enable the practical skills to be taught in a safe and informative way.
- An inaugural South West Paramedics in Primary Care conference has been organised and will be held on the 25<sup>th</sup> March 2023. The conference will offer a range of educational sessions targeting the educational needs identified in the survey. It will also offer paramedics the opportunity to attend workshops which will aid their understanding of how to achieve FCP or ACP verification, if they have not already done so.
- HEE now hold a database of 158 paramedics (who gave consent to be contacted)
  although this will require maintenance as paramedics move around roles. This will be
  used to ensure they are given regular updates of events, seminars and supportive
  networking opportunities.
- We will share this report with Integrated Care Systems, Integrated Care Boards and direct employers. They can use the data collected to ensure paramedics within their workforce, are practicing in a safe and effective way and offer additional support and supervision to those who need it, to reduce the risk to patients.

#### **Additional Benefits**

- We now have evidence that paramedics are working at all levels, including the most senior positions, across the healthcare system. This knowledge adds to a growing bank of evidence in the form of research, education, management and practice that is a tangible development for the paramedic profession. This may in future strengthen the calls for paramedics to be offered medical directorates and other influential roles, and ultimately be the owners of their own profession, which has historically been led by our colleagues in medicine and nursing.
- Employers can consider how their paramedic role descriptors align with the framework and alter role descriptors to improve future data collection and inform strategy.
- This data highlights the need for further investigation regarding supervision of paramedics working in P&UC

#### **SW Paramedics in Primary Care Survey Report**

#### References

NHS England and NHS Improvement (2019) Network Contract Directed Enhanced Service: Additional Roles Reimbursement Scheme Guidance [online]. NHS England and NHS Improvement [Accessed 02/02/023]

NHS Health Education England (2021) First Contact Practitioners and Advanced Practitioners in Primary Care: (Paramedic) A Roadmap to Practice. [online] NHS England. [Accessed 02/02/23]

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NHS and Academy of Medical Royal Colleges (2017) Academy of Medical Royal Colleges & New Care Models Programme Workforce. Joint Statement. [online] NHS England [Accessed 02/02/23]