

## Paramedics

Paramedics have been an integral part of the primary care multi-professional team within general practice for many years, and their numbers have increased since 2021 with the introduction of funding via the Network Contract Directed Enhanced Service (DES). Paramedics have diverse skills that enable them to undertake various roles within general practice, which may include running clinics, triaging and managing minor illnesses, and conducting urgent home visits. Paramedics can provide continuity of care for patients with complex health needs, especially those with long-term conditions, by making regular visits to homebound patients.

Research highlights a number of potential benefits paramedics working in primary care offer. These include improved workforce capacities, enhanced patient care, and reduced GP workload. However, challenges exist, such as the need for more research to evaluate their effectiveness and issues related to education, training, and deployment. Addressing these challenges will be crucial in optimising the role of paramedics in primary care and maximising their contributions to patient care and the healthcare workforce.

### Training pathway

There are different routes to studying and qualifying as a paramedic:

- Complete a full-time approved qualification in paramedic science (e.g. at a university) and then apply to an ambulance service for a job as a qualified paramedic
- apply for a role as a student paramedic with an ambulance service and study while working
- apply for a degree standard apprenticeship in paramedic science with an ambulance service

Becoming a paramedic takes between two and four years. The course includes a mixture of theory and practical work including placements with ambulance services and other healthcare settings.

Published by Health Education England (2021), [First Contact Practitioners and Advanced Practitioners in Primary Care: \(Paramedic\). A Roadmap to Practice](#) is the Paramedic version of the educational pathway to FCP and AP in Primary Care. The document provides a roadmap of education for practice when moving into First Contact Practitioner (FCP) roles, and onward to Advanced Practice (AP) roles in Primary Care.

### Benefits

1. **Increased Capacity and Access:** Paramedics in primary care can help increase workforce capacity, allowing for improved access to healthcare services for patients, especially for patients with long-term conditions, acute exacerbations, illnesses, and injuries<sup>1, 2, 3, 4, 5</sup>.
2. **Reduction in GP Workload:** The introduction of paramedics into primary care teams has been positively received by General Practitioners given the associated reduction in the workload of GPs, freeing up their time for more complex cases and additional education<sup>1, 2, 6</sup>.

- <sup>7</sup>. Other reported benefits include increased resilience, and improved work-life balance <sup>1, 2, 6, 7</sup>.
3. Positive Impact on Patient Satisfaction: The presence of paramedics in primary care settings has led to improved patient satisfaction, possibly due to reduced waiting times and greater access to home visits <sup>1, 7, 8</sup>.
  4. Avoidance of Unnecessary A&E Attendance: Paramedics in primary care can provide appropriate care in the community, thereby reducing unnecessary attendances at A&E departments and Urgent Care Centres <sup>1, 5, 9</sup>.
  5. Contributing to Population Health Management: Paramedics can support population health management by providing on-the-day demand and access through hear and treat telephone triage, treatment of minor ailments and injuries, and medicines supply via patient group directions (PGDs) <sup>9</sup>.
  6. Cost-Effectiveness (potential): While there is a need for further research, the potential cost-effectiveness of paramedics in primary care settings has been suggested, considering their ability to manage a diverse range of clinical cases and conditions <sup>6</sup>.

## Challenges

1. Evidence Gaps: There are gaps in the evidence base regarding the effectiveness of introducing paramedics into primary care, including the clinical effectiveness, and cost-effectiveness of these roles. More empirical research is needed to fully understand the impact and outcomes of paramedics in primary care settings, particularly in quantitatively assessing their impact on patient health outcomes <sup>6, 7, 8, 10</sup>.
2. Consistency: There is significant variation in how paramedics are deployed in general practice, particularly concerning the patients seen and conditions treated. The variety of job titles used for the paramedic working in primary care was reported to be confusing for patients and other clinicians within primary care <sup>6, 7, 11</sup>.
3. Education and Training Needs: The variation in job titles, education, and clinical supervision of paramedics in primary care highlights the need for better access to education, clinical supervision, and further training to support their clinical development and ensure they can work to their full professional capability <sup>7, 11</sup>.
4. Time Demands for GPs: The deployment of paramedics in general practice may require additional training and supervision from GPs, which can impose time demands on GPs <sup>6</sup>.

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<sup>1</sup> Arden & Gem (2023)

<sup>2</sup> Muldoon, D. & Seenan, C. (2021)

<sup>3</sup> NHS Confederation (2021)

<sup>4</sup> Health Education England & College of Paramedics (2018)

<sup>5</sup> Mahtani K. R. et al. (2018)

<sup>6</sup> Schofield, B. et al. (2020)

<sup>7</sup> Eaton, G. et al. (2020)

<sup>8</sup> Xi, D. et al. (2021)

<sup>9</sup> NHS Confederation (2021)

<sup>10</sup> Eaton, G. et al. (2021)

<sup>11</sup> Eaton G. et al. (2022)

## References and further reading

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