

# PARAMEDICS IN PRIMARY CARE: A REGIONAL ROTATIONAL SCHEME WITH EMBEDDED PRECEPTORSHIP



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On behalf of the Yorkshire & Humber Primary Care Workforce & Training Hubs

## Introduction

This project focused on developing and testing a model where paramedics are delivering care in GP Practices in Yorkshire & the Humber. Supported with a training and skills development programme including preceptorship, resulting in an increased availability of GP appointments and reduced emergency department (ED) admissions.

Developed in April 2021 this innovative scheme of collaborative working with Yorkshire Ambulance Service (YAS) and Workforce Training Hubs across the region was developed to provide paramedics with the skills needed to support Primary Care capacity and provide a fulfilling work mix for paramedics that did not destabilise YAS and the capacity to deliver emergency services.

## Background

Experience with a previous primary care pilot tested in West Yorkshire showed that, while paramedics enjoy the role in primary care and opportunity to apply their skills in different ways, there was limited interest in permanent Primary Care roles. Many preferred a rotational model which enabled them to maintain different skills, an extensive paramedic professional network and flexible working patterns. This way of working helps improve understanding between primary care and this element of urgent care and gives the opportunity to share learning across care environments.

The rotational model was then developed across Yorkshire and the Humber which enabled the Training Hubs to share resource of educators for teaching and feedback sessions and allowed for greater peer support for the specialist paramedics.

## Delivery & Results

### Delivery Model

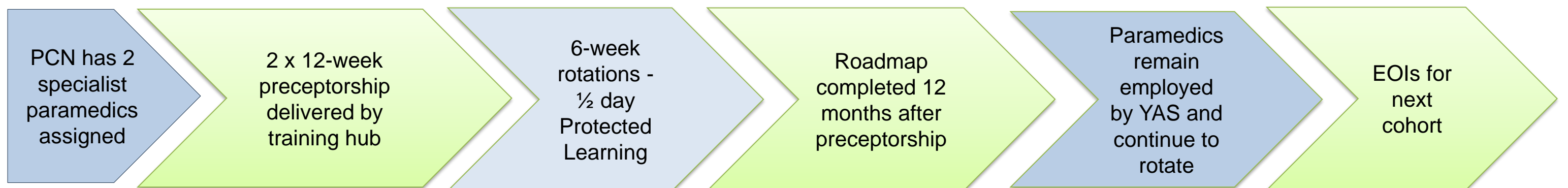
- 12-week intensive training programme with teaching sessions 1 day each week
- Followed by an ongoing 6-week rotational working pattern between primary care and YAS
- Supervision is provided by a GP, and this continues alongside completion of the HEE FCP Roadmap stage 2 after the preceptorship period
- Paramedics remain employed by YAS

### Results

- Increased GP time available for complex patients
- A training approach reducing GP supervision time
- Fewer patients admitted to ED
- Fewer ambulance journeys improve availability of paramedics /ambulances
- Access to specialist mentored development

### Outcomes

- **An effective training and development model has been established**
- **A growing number of paramedics are embedded in Primary Care**
- **Primary Care capacity has increased using the skills of Paramedics**



## Aims

- Deliver 12-week Primary Care Paramedic Preceptorship scheme
- Provide timely access to GP appointments
- Help ensure patients avoid any unnecessary visits to emergency department
- Give Paramedics skills to manage acute care, an introduction to aspects of long-term condition management and other skills for Primary Care
- Meet conditions of the road map
- Support PCNs to embed a paramedic role
- Ensure supervision needs are understood and enacted
- Improve financial efficiency within the system
- Develop the specialist paramedic ambulance service workforce leading to better retention and job satisfaction

The charts demonstrate the non-conveyancing rates to ED for individual specialist paramedics pre and post rotation. The most impact is seen on the non-conveyancing rate of Category 3 Urgent Calls. Non-conveyancing rates have increased for every specialist paramedic who has been part of the rotational model.

Table 1. YAS Non-Conveyance Rate All Categories.

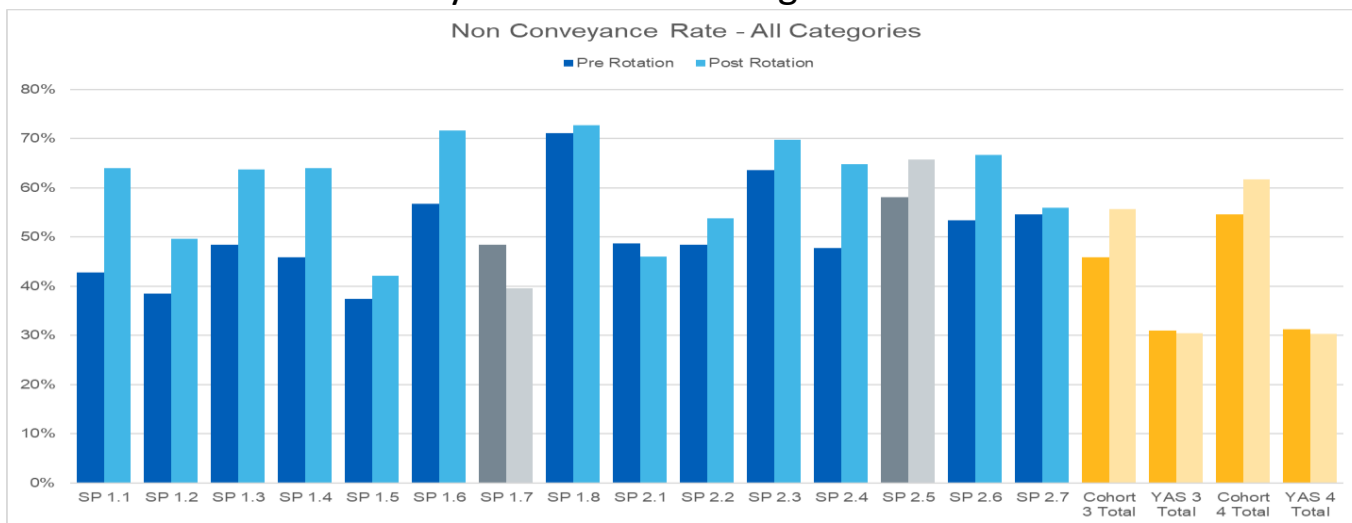
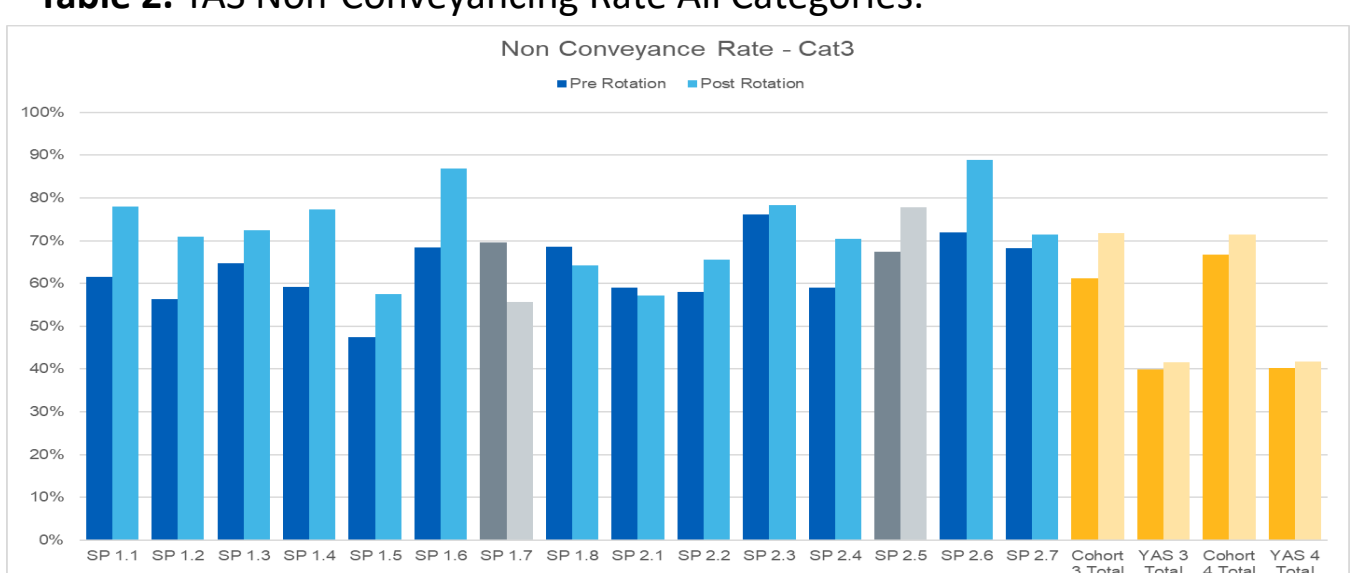


Table 2. YAS Non-Conveyancing Rate All Categories.



## Discussion

**GPs** Paramedics have been positively received in Primary Care and there is an increasing demand from PCNs for the rotational model. *'The paramedics have been a wonderful addition to our surgery and have helped improve our capacity to offer patients access for acute medical needs'*

*'The Paramedics have approached the rotational scheme with positivity and passion and working with them has been a positive development for both the Paramedics themselves as well as Primary Care'* GPs from Health Village & Dearne PCN

**Paramedics** The content and delivery of training and supervision are consistently reported as appropriate, timely and job relevant. Paramedics feel well supported and part of the team in General Practice. Stable numbers of paramedics have entered the scheme since 2020.

**Patients** 'Rotation into primary care is positive for our patients and for our clinicians. Patients get the right care in the right place and our clinicians gain valuable clinical experience, delivering high standards of care in different settings.' Consultant Paramedic for Urgent Care Andrew Hodge

## Conclusions

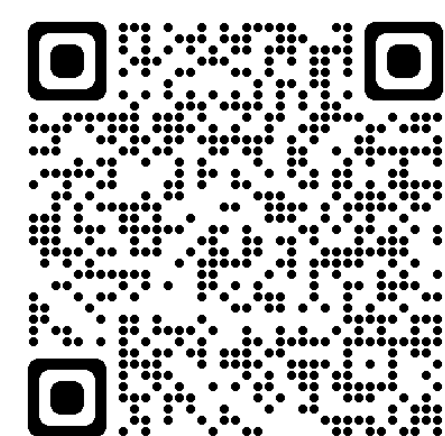
This staffing model is an effective use of the Additional Roles Reimbursement Scheme (ARRS) funding that enables staff in a variety of roles to become part of the Primary Care workforce using their specialist skills.

It is also a sustainable model of workforce supply and development delivering increased primary care capacity, benefits to patients, the health economy and a stable workforce.



## Acknowledgments:

Yorkshire Ambulance Service  
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