

Briefing paper for employers employing paramedics within primary care

With the growth of Paramedics working within a Primary Care setting it is becoming increasingly apparent that there is a need to support Practices in their understanding of what the transferable skills are of the paramedic practitioner and what to consider when recruiting and developing Paramedics in a Primary Care Setting. This is important to ensure that the role of the potential role of the paramedic practitioner within primary care is fully understood. The word practitioner in the paramedic practitioner title is not to be confused with the use of the word in the Advanced Clinical Practitioner title. Unless a paramedic has achieved advanced status in line with the HEE Multi-professional framework for advanced clinical practice in England they are not able to work at this level. Paramedic practitioner is likely to be changed in the future to Specialist paramedic to highlight that they have a specialist ability in the emergency situation and able to signpost those with less acute situations rather than convey to hospital. This skill is not to be misinterpreted to be the ability to assess diagnose and manage and therefore is not advanced practice.

This brief summary therefore details the 3 levels of Paramedics that may work within Primary Care, (**N.B this is a** guide and not meant to be exhaustive)

Paramedic - this group of individuals have undergone a degree level programme in Paramedic science and will be registered (but not regulated) with the Health & Care Professionals Council. Based on the Agenda for change pay scale this role normally sits within band 5/6. Their remit within SECAmb is providing an emergency response to sustain life so have a good understanding of acute presentations. As a result within a Primary Care setting they can potentially provide the following:

- Minor injury assessments
- ECGs and interpretation of acute presentations
- Advanced Life support respond to medical emergencies
- Follow specified PGDs within scope of agreed practice
- Cannulate
- Basic understanding of care pathways
- Basic understanding of the multi-disciplinary team

N.B Paramedics can NOT carry out any intimate physical examinations (rectal or vaginal) but may carry out intimate procedures to sustain life such as administering rectal diazepam

Paramedic Practitioner - this group of individuals have undergone a further 18 months professional development to become a Paramedic Practitioner at degree level. There is no set national standard for a paramedic practitioner and it is the employers responsibility to check the skill set meets the service need, (and must have achieved competence in 15 OSCE assessments) and registered as above. Based on the Agenda for change pay scale this role when in the emergency setting normally sits within band 6/7. General Practice should map the skill set against the Competency Guidance for Clinical Roles within Primary Care across Kent and Medway Their remit within SECAmb is the same as that of a Paramedic but with additional development and understanding of minor illness/injury to support, treat and signpost/refer on patients with chronic conditions as well as risk stratification. The workload of

paramedics is predominantly emergency and urgent undifferentiated healthcare requests, ranging from life-threatening to a high proportion of non-life-threatening conditions

As a result, within a primary care setting they can potentially provide all of the above plus:

- Consultation and assessment skills
- Treatment, management and referral of patients with minor injury
- Support minor illness assessment under the supervision of a General Practitioner or Advanced Clinical Practitioner
- Home visits (ideally following triage) to assess patients and then discuss and agree management plans under supervision of the delegating GP or ACP
- · Phlebotomy with additional training
- Imms and Vaccs following additional training
- Basic Wound care following further development starting with training equivalent to that of a HCA and allowed to work up once they have further education
- Support development of pre reg paramedic students through mentorship (Must be live Paramedic mentor)

Advanced Paramedic Practitioner – this group of individuals MUST have undergone an accredited advanced clinical practice programme at Masters level in order to be awarded this title and work at this level. Based on Agenda for change pay scale this group normally sits within band 8. Their remit within SECAmb is as above plus A and E duties /OOH. An ACP is characterised by a high degree of autonomy and complex decision making encompassing the four pillars of clinical practice, leadership and management, education and research, with demonstration of core capabilities and area specific clinical competence. They are able to manage clinical care in partnership with individual's families and carers and act autonomously.

As a result in a Primary Care setting they can potentially provide all of the above plus

- Advanced consultation and clinical assessment skills (following meeting the competencies within the multi professional framework for advanced practice).
- Enhanced minor injury and minor illness assessment and management
- See patients within their own homes or presenting with undifferentiated undiagnosed conditions and assess manage diagnose and treat automatously
- Support and develop junior members of staff
- Focus on leadership, research, clinical practice and education
- Support wider primary care team by working within an integrated workforce
- Empower safe and effective practice
- Telephone Triage post recognised/approved telephone triage training