

# Paramedics

# Career

# Framework

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# Introduction



# Foreword

As one of the key providers of healthcare in urgent and emergency care, paramedics have a unique role that intersects healthcare, public health, social care and public safety. The role of the paramedic has developed considerably in recent decades and today, they are responsible for providing many patients and service users with the most appropriate treatment at their first point of contact with a health professional.

As health care shifts towards being delivered more in the community and in the context of the challenges set by the Urgent and Emergency Care Review, the workforce must have the right skills and competencies to meet the demands of the contemporary healthcare setting and the changes it is likely to go through. It will also need to have the values and behaviours expected within the NHS, able to be flexible and above all, provide excellent and safe patient care.

Looking to the future, we know that education and training will be central to delivering and developing these skills. It must, therefore, be of an excellent standard, meet the requirements of the contemporary regulatory and strategic framework and encourage widening participation. The College of Paramedics has already undertaken work to address this issue and develop the clinical, educational, managerial, and research abilities for post registered paramedics. This has included developing current and potential career opportunities, some of which include development into the wider healthcare of the community.

This framework seeks to further aid this, acting as a guide to the most appropriate education, knowledge, and expertise available to paramedics as they develop their skills along their career framework pathway. Initially published in 2015, it has now been updated to reflect this work and includes a number of case studies to help illustrate these pathways. It is a key milestone in leading the development of the paramedic profession, a commitment of Health Education England and the College of Paramedics. We believe it provides the best advice for paramedics seeking to develop their skills, and we would like to thank all those involved for their hard work, time and contributions in getting us to this point.

Paramedics are now delivering care and treatments that would have only been undertaken by doctors ten years ago, and we hope that this work will support this development. Looking forward we anticipate paramedics becoming an integral part of the multi-professional workforce delivering urgent and emergency patient centred care in the future.

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**Patrick Mitchell**

Director of National Programmes  
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Chief Executive  
College of Paramedics

Further resources are available at:

[The College of Paramedics](#)

[Health Education England](#)

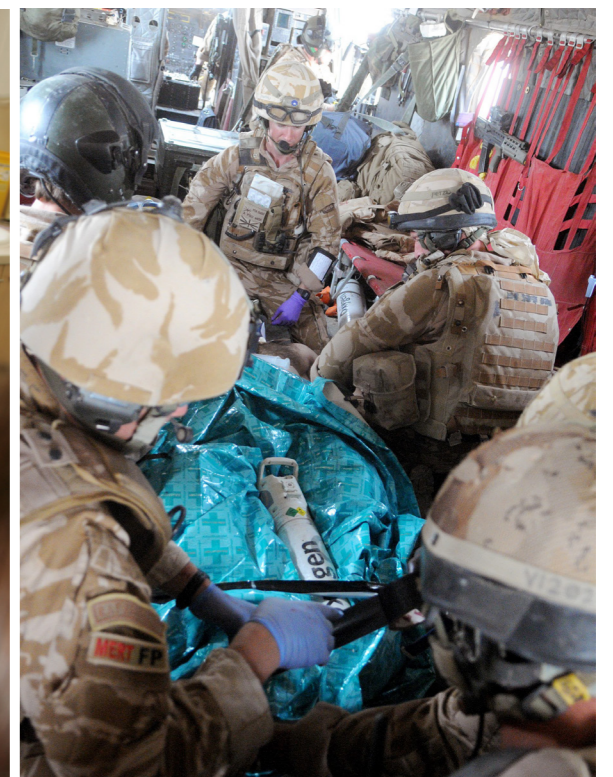
[The Health and Care Professions Council](#)

[The Quality Assurance Agency for Higher Education](#)

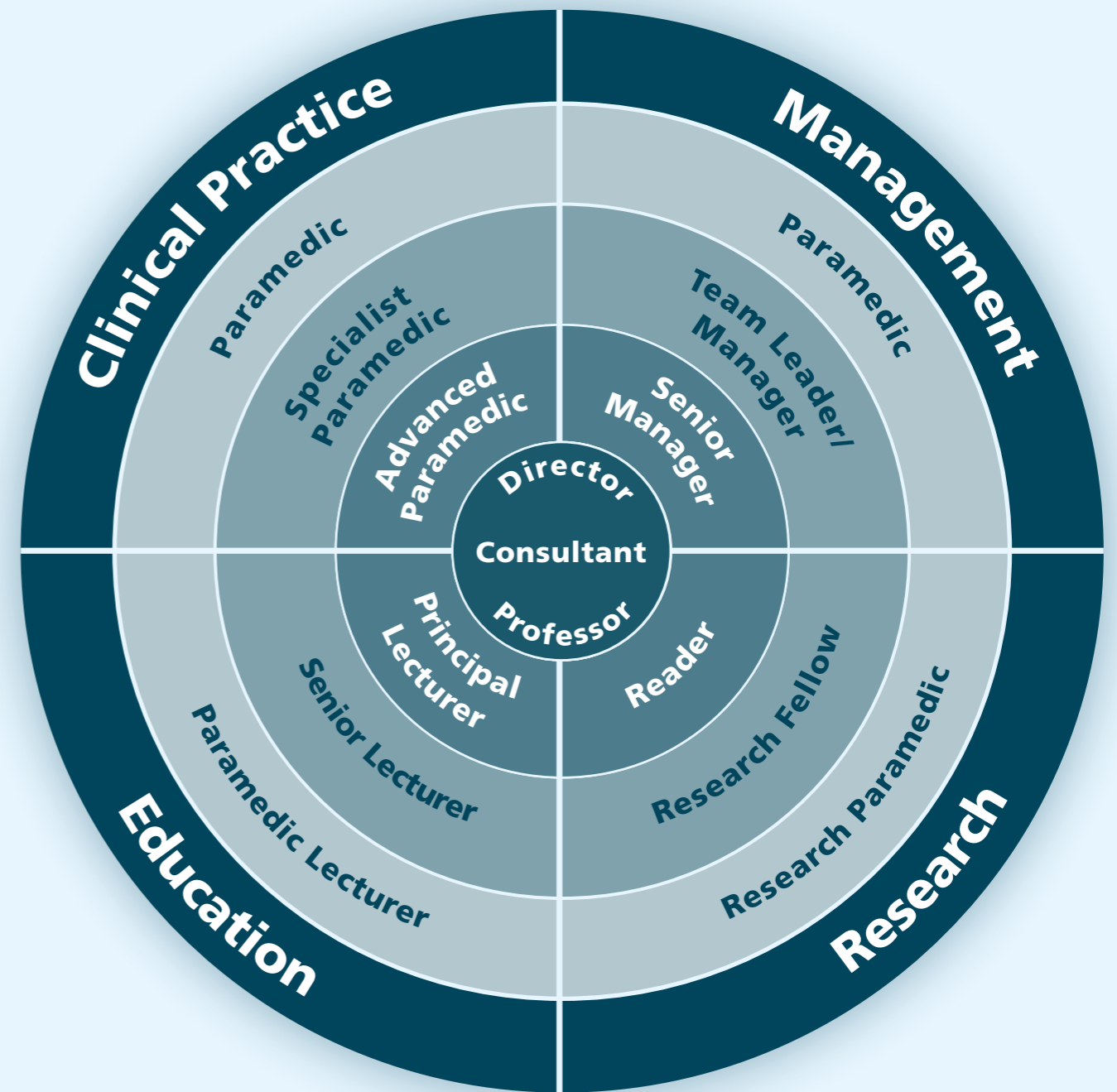
# Where paramedics work

Primary care, acute care, urgent care, emergency care, emergency department, urgent & emergency care centre's, minor injury units, walk-in centres, GP out-of-hours services, 111 systems.

NHS ambulance trusts, telephone triage systems, mental health, community settings, higher education, military, private and independent sector, research, management, offshore & remote, helicopter emergency medical services, hazardous area response teams, special operations response teams, and internationally.



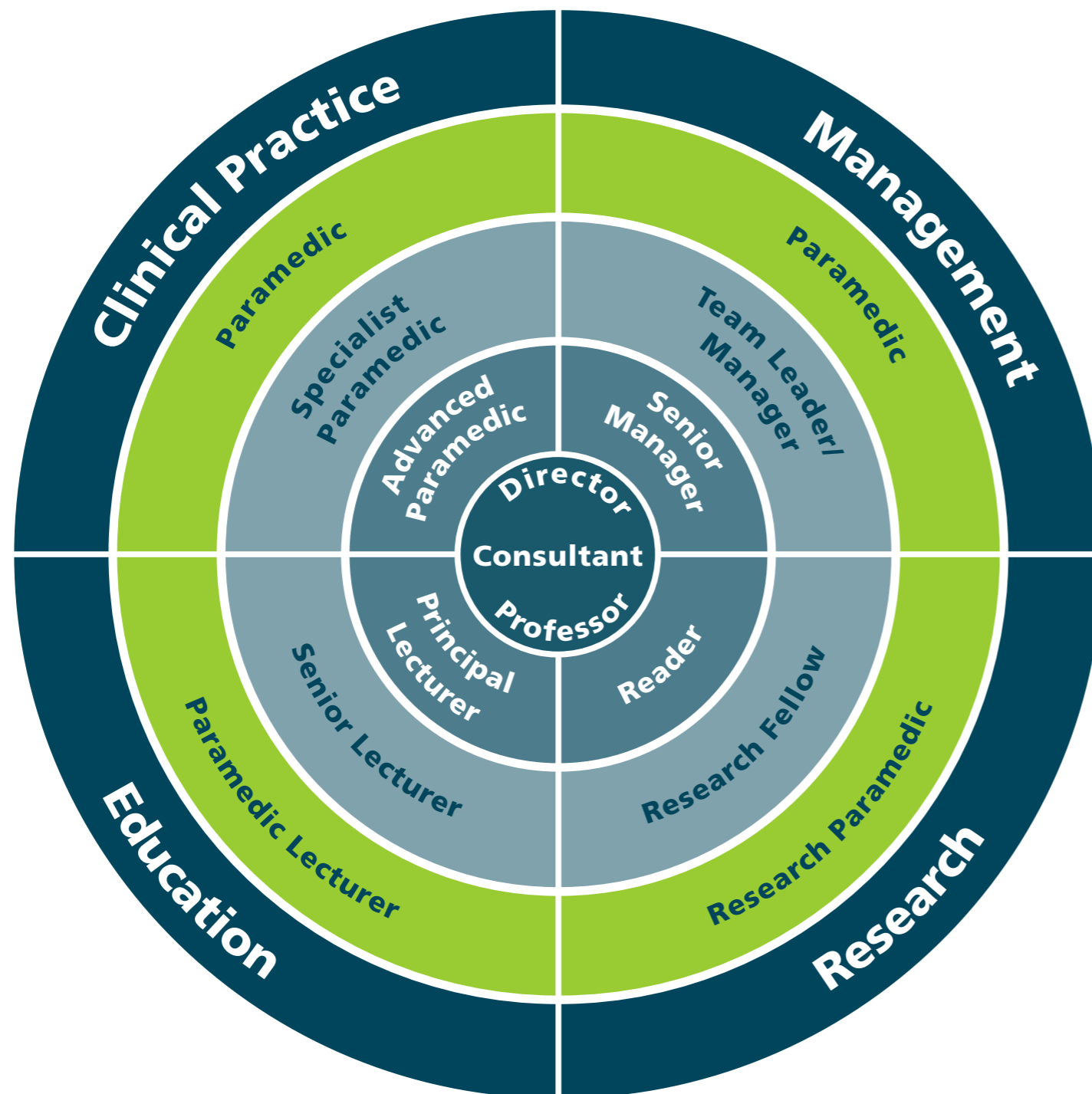
# The Career Framework



# Role definitions



# Role definitions



## Paramedic

A paramedic is an autonomous practitioner who has the knowledge, skills and clinical expertise to assess, treat, diagnose, supply and administer medicines, manage, discharge and refer patients in a range of urgent, emergency, critical or out of hospital settings. Newly registered paramedics are expected to provide care across all practice areas. The under-graduate curriculum is designed accordingly to ensure that paramedics have effective core skills in their generalist role.

# Role definitions



## Specialist Paramedic

A specialist paramedic is a paramedic who has undertaken, or is working towards a post-graduate diploma (PGDip) in a subject relevant to their practice. They will have acquired and continue to demonstrate an enhanced knowledge base, complex decision making skills, competence and judgement in their area of specialist practice.

# Role definitions



## Advanced Paramedic

An advanced paramedic is an experienced paramedic who has undertaken, or is working towards a master's degree in a subject relevant to their practice. They will have acquired and continue to demonstrate an expert knowledge base, complex decision making skills, competence and judgement in their area of advanced practice.

# Role definitions



## Consultant Paramedic

A consultant paramedic is a paramedic who is working towards or has completed a PhD clinical/professional doctorate and applies a highly developed theoretical and practical knowledge over a wide range of clinical, scientific, technical and/or management functions, which include; clinical/professional leadership; expert practice; policy and service development, research and evaluation; and education and professional development.

# Education requirements

The College of Paramedics makes known that the educational levels described below relate only to the clinical career pathway.

| Paramedic title             | Academic level  | Assessment standard   | Period of study to achieve competency | Experience/competency required to be eligible to apply for the next level   |
|-----------------------------|---|---|---------------------------------------|---|
| <b>Paramedic</b>            | <ul style="list-style-type: none"> <li>BSc (Hons)</li> <li>HE – level 6</li> <li>SCQF – 10</li> </ul>                                     | <ul style="list-style-type: none"> <li>HCPC standards of education and training</li> <li>HCPC standards of proficiency</li> <li>QAA subject benchmark statement – paramedics</li> <li>College of Paramedics paramedic curriculum guidance.</li> </ul> | 3 Years                               | Post registration/ graduation paramedics should obtain sufficient evidence to demonstrate a portfolio of post registration expertise and competence.              |
| <b>Specialist Paramedic</b> | <ul style="list-style-type: none"> <li>HE – PGCert</li> <li>HE – PGDip</li> <li>SCQF – 11</li> </ul>                                      | <ul style="list-style-type: none"> <li>CPD portfolio of evidence.</li> <li>College of Paramedics paramedic post-registration career framework</li> </ul>  | 1 Year – PGCert<br>2 Years – PGDip    | Specialist paramedics should obtain sufficient evidence through education and expertise to demonstrate a portfolio of post registration expertise and competence. |
| <b>Advanced Paramedic</b>   | <ul style="list-style-type: none"> <li>MSc</li> <li>HE – level 7</li> <li>SCQF – 11</li> </ul>  | <ul style="list-style-type: none"> <li>Advanced practice</li> <li>Examinations/OSCE</li> <li>CPD portfolio of evidence</li> <li>College of Paramedics paramedic post-registration career framework</li> </ul>   | 3 to 5 Years                          | Advanced paramedics should obtain sufficient evidence through education and expertise to demonstrate a portfolio of post registration expertise and competence.   |
| <b>Consultant Paramedic</b> | <ul style="list-style-type: none"> <li>PhD</li> <li>Clinical/professional – doctorate</li> <li>HE – level 8</li> <li>SCQF – 12</li> </ul> | <ul style="list-style-type: none"> <li>College of Paramedics paramedic post-registration career framework</li> <li>Department of Health</li> </ul>  | 6 Years                               |   |

# Clinical Practice



Further resources are available at: [The College of Paramedics](#) [Health Education England](#) [The Health and Care Professions Council](#) [The Quality Assurance Agency for Higher Education](#)

# Paramedic

Paramedics are experienced autonomous allied health professionals. They are patient-focused and are responsible and capable of delivering safe, effective and appropriate treatment to patients with urgent, emergency, and unscheduled healthcare requirements. This includes, management at the scene, or in-hospital of critically ill and injured patients. Their focus includes the care of acutely ill and/or injured patients at initial presentation, and those who present with an acute exacerbation of a chronic illness or disease.



# Case study

**Name**

Simon Dady

**Job title**

Paramedic, Motorcycle Response Unit,  
London Ambulance Service NHS Trust.  
Senior Lecturer in Paramedic Science,  
Anglia Ruskin University.

**Entry route**

Ambulance service training vocational route to registration then post graduate higher education continuing professional development

**How I got the role**

I joined the ambulance service before higher education direct entry routes existed, having always wanted to give 'being a paramedic' a go. My dad had been a paramedic and I recall wondering what the sense of satisfaction would be from doing a job which both changed and challenged me every day. I remember looking at the introduction of university paramedic degrees and decided to complete the BSc (Hons) degree so that I would not be 'left behind'.

20 years later, I have supplemented my involvement with clinical audit and research by completing a master's degree in clinical research, in addition to a BSc degree equivalent award in leadership and management. I am now employed at a university, imparting some of what I have learned and, I hope, some of the passion that I still have doing the role as a paramedic as well.

Having undertaken the training and a secondment to the London Helicopter Emergency Medical Service; and been employed in both a clinical team leader and paramedic clinical tutor role, I remain current clinically on a part-time basis from a MRU perspective in central London as an experienced specialist (senior) paramedic.

**What I do**

My typical day is dichotomous – a teaching day can involve anything from lecturing 150+ students at a time to tutor groups of a few, covering subjects as diverse as anatomy and physiology through to the finer nuances of care involving capacity, and end of life circumstances.

My clinical day is as varied as any other paramedic, though seen from two wheels. Cardiac arrests, heart attacks and stroke are not untypical, but then neither are the calls at the other end of the spectrum that can prove just as challenging for a whole range of other clinical and social care reasons.

**The best bits**

The variety in my work load keeps me thinking, challenged, enthused and focused – there is always something to learn!

# Specialist Paramedic

Specialist paramedics (urgent & emergency care) and (critical care) provide care at the point of contact, whether this focuses on the care of the acutely ill, or critically injured patient. They initiate and implement in collaboration with the patient, service user, or carer, a care and/or action plan that meets their requirements, assessing, diagnosing and administering drugs as appropriate, including those from the patient group directions (PGDs) and would have undertaken a programme of post-graduate education which has further developed their knowledge, ability and clinical expertise to an enhanced level of practice through the following:

- assessment, diagnosis referral, and discharge
- assessing and managing risk
- critical thinking and analytical skills incorporating critical reflection
- decision making/clinical judgement and problem solving
- developing higher levels of autonomy
- developing confidence
- developing therapeutic interventions to improve service user outcomes
- development of advanced psychomotor skills
- higher level communication skills
- managing complexity
- non-medical prescribing in line with legislation
- promoting and influencing others to incorporate values based care into practice.



# Case study

**Name**

Richard Taffler

**Job title**

Specialist Paramedic in Urgent and Emergency Care, South Western Ambulance Service NHS Foundation Trust

**Entry route**

Vocational Emergency Medical Technician, IHCD Paramedic.  
Post Graduate development. MSc in Advanced Healthcare Practice

**How I got the role**

While working as a lorry driver, my partner suggested that I turn my weekend interest in health care with St John Ambulance into a career and twenty years later I'm still here! I started as a direct entry technician in 1996, qualifying as a paramedic in 1999. By 2005 I was half way through my MSc in Advanced Healthcare Practice with the Peninsula Medical School and I started to work at our HQ as Clinical Effectiveness Officer, then Clinical Development Manager. In 2008 I greatly enjoyed attending the personal impact and integrity course run by the King's Fund, for developing NHS managers.

I now work as a specialist paramedic in urgent and emergency care. This involves the full work of an operational paramedic, along with extended assessment skills, wound care and medicines supply (such as antibiotics and analgesia) to support the appropriate treatment and care of patients in their homes and avoid unnecessary hospital admissions. I'm the local lead for the management of frequent callers to 999, a paramedic student mentor. I work part time in control, in a team helping to clinically manage our less serious calls and ensuring that requests from health care professionals are clinically balanced against our resource demands.

Outside of my 'day' job, I'm part of the College of Paramedic's Post Graduate Curriculum Guidance Group and occasionally review information for the National Institute for Health and Care Excellence (NICE) as an external advisor.

**What I do**

A typical day involves working on an ambulance car, seeing patients either as a result of a 999 call, or referral from an ambulance crew or other health care professional. I see a wide variety of patients from those in cardiac arrest to those requiring treatment for minor injuries. Health promotion is an important part of the role, helping patients, their relatives, friends and carers to self-care or, if things deteriorate, giving them the knowledge of what to do and who to contact and when.

**The best bits**

I get real enjoyment from the autonomy and responsibility of my role, trying to provide the most appropriate care for our patients. Working with such a great team across the whole organisation makes this achievable and I still look forward to going to work every day.

# Case study

## Name

Michael Bradfield

## Job title

Critical Care Paramedic (CCP), South East Coast Ambulance Service NHS Foundation Trust (SECAmb)

## Entry route

Vocational Emergency Medical Technician - experiential (5 years post paramedic registration), Post Graduate Certificate + 300 hours clinical placement in emergency department, intensive treatment unit and theatres.

## How I got the role

I joined Oxfordshire Ambulance Service, now part of South Central Ambulance Service NHS Trust, as a trainee ambulance technician in 2005. I went on to complete the Institute of Health Care Development paramedic course and transferred to London Ambulance Service NHS Trust in 2008. I was fortunate to undertake secondments in the emergency operations centre and London Helicopter Emergency Medical Services before joining SECAmb Critical Care Paramedic (CCP) programme in 2011. I qualified as a critical care paramedic after a programme of academic study at the University of Hertfordshire (PGCert) and supervised clinical placement. I have since completed a MSc degree in Advanced Paramedic Practice and diploma in Immediate Medical Care (Royal College of Surgeons, Edinburgh).

## What I do

As a critical care specialist paramedic I am responsible for providing clinical leadership at life-threatening medical and trauma cases, including the use of additional clinical interventions and care pathways. The SECAmb CCP course places emphasis on critical thinking and clinical decision-making rather than simply having access to additional skills or drugs. Tasking specialist paramedics to critically ill and injured patients means that clinical staff who may have

less exposure to this very small group of patients can be supported by paramedics with focused experience in this area. I am currently seconded to the Kent, Surrey and Sussex Air Ambulance, working as part of a multi-disciplinary team delivering advanced level care. Working in a variety of frontline and clinical support roles has helped me to develop as a clinician but also enabled me to undertake educational and mentoring roles in a variety of settings, including working as a part-time senior lecturer in pre-hospital care at Kingston St. George's, University of London.

## The best bits

The role is varied and the dispatch profile different to conventional emergency call tasking. We attend fewer patients per shift but over larger geographical areas, so tend to arrive later into a scene with resources already in attendance and often convey to specialist hospitals with longer transfer times. I enjoy working with my colleagues to support them in providing care in cases which can be complex and time-critical. Specialist practice is not about turning up and taking over, but in providing appropriate support in decision-making, triage and clinical interventions as part of a team-based approach that is needed in managing critical care patients.

# Advanced Paramedic

Advanced paramedics are experienced autonomous paramedics who have undertaken further study and skill acquisition to enable them to be able to deliver a more appropriate level of assessment and indeed care to patients in the community and access many more referral pathways. Advanced paramedics provide a level of leadership and management and are responsible for mentoring as a clinical supervisor developing specialist and advanced paramedics. They have a critical awareness of knowledge issues in the field and the interface between different fields. They are innovative, and have responsibility for developing and changing practice and/or services in a complex and unpredictable environment which is achieved through appropriate periods of expertise, portfolio's of evidence, and the acquisition of a masters degree.



# Case study

**Name**

Mark Che Bruce

**Job title**

Advanced Paramedic – Advanced Clinical Practitioner

**Entry route**

Vocational route IHCD Emergency Medical Technician, IHCD Paramedic.

Post registration: Postgraduate Certificate in Emergency Medical Care, pre hospital trauma life support, advanced life support, Certificate in Education, Post Graduate Certificate in Pre-Hospital Critical Care, Post Graduate Certificate in Advanced Practice, MSc degree Advanced Practice.

**How I got the role**

Having initially joined the ambulance service in 1987 as an ambulance cadet, I spent several years working on a busy urban accident and emergency rota before pursuing other career aspirations.

I found my passion lay in the development of advanced practice with the emphasis on enhanced clinical decision making and a holistic approach to patient / service user assessment and treatment and alternative pathway utilisation.

With this in mind I applied to undertake a three year development programme as a paramedic - advanced clinical practitioner working alongside a multi-disciplinary team and mentored by consultants in emergency medicine. The role focuses on the development of a non-medical practitioner that is able to assess, manage and treat the whole range of patients, either self-presenting or brought to the emergency department by ambulance. It is envisaged that after a three year period the MSc educated practitioner is able to work autonomously at registrar level.

Outside my 'day job' I'm part of the College of Paramedics Post Graduate Curriculum Guidance Group and am either studying or spending time with my long suffering family and fiancé.

**What I do**

My day to day role involves the initial assessment, immediate life-saving interventions and ongoing treatment planning and specialist referral of a wide variety of patients designated either majors or resuscitation patients, which requires me to implement and request diagnostic requests, and interpretation, treatment planning, specialist referral and discharge along with comprehensive medical clerking are undertaken on each patient that is seen.

**The best bits**

The role in itself poses many challenges for a paramedic in that your knowledge is continually probed, your clinical decisions are questioned and you are continually learning new skills and developing an in-depth knowledge of the continuum of care from arrival and admission to safe discharge. This is the best part of the job, although daunting, frustrating and emotionally draining, it improves my clinical decision making and understanding of the care needed for patients which I see when I work, not only as an operational paramedic, but also as an advanced paramedic practitioner in the emergency department.

# Case study

**Name**

Dan Cody

**Job title**

Advanced Paramedic: Critical Care

**Entry route**

Vocational – Patient Transport Service, Emergency Medical Technician, Paramedic, Critical Care Paramedic. Post registration development.

**How I got the role**

Starting my career in the London Ambulance Service and then moving to the East of England (formerly the East Anglian) Ambulance Service in 2005, I was on the first CCP cohort within the service in 2007. This was initially a developmental role predominately working with the Magpas emergency medical team in a doctor and paramedic team receiving training and gaining supervised exposure, whilst developing a solo CCP RRV. As the role evolved autonomous practice developed to include surgical skills, procedural sedation as well as early implementation of skills that are now commonly used across all ambulance practice. During this development phase I undertook an MSc in Critical Care and the diploma in Immediate Medical Care, for which I am now an examiner. I remained in the specialist paramedic role full time for 4 years before undertaking a project management secondment with the trauma network before returning full time for a further year. During this time I was appointed as the Associate Clinical Director at Magpas and professional lead for the paramedic team.

Spanning this period I was involved in the training and education of new doctors and CCP's and also undertook a full time educator post teaching pre-registration paramedic courses. To round off my experience I undertook an

operational management role, responding as an autonomous CCP and incident commander. Along side my NHS and charity roles my experience was supported by 10 years in the army reserve including two operational tours in Iraq and Afghanistan.

**What I do**

In 2015 I moved full time to Magpas as the Associate Clinical Director. My current role involves a mixture of activity, the majority in clinical practice as part of a doctor/paramedic team practicing at an advanced level but also some non-clinical time supporting clinical leadership, service development and training. In clinical practice I may act as the lead clinician across the full range of pre-hospital emergency medicine (PHEM) activity or be in a supervisory role for both doctors and paramedics. I am the training course lead responsible for the design and delivery of training for the medical team and am the national lead for the development of a specialist training programme in PHEM for paramedics. This has now developed into a consultant level role and I will be moving into the next stage of my career.

# Case study

**Name**

Dan Cody

**Job title**

Advanced Paramedic: Critical Care

**Entry route**

Vocational – Patient Transport Service, Emergency Medical Technician, Paramedic, Critical Care Paramedic. Post registration development.

**The best bits**

Bringing an advanced level of care and experience to an incident and supporting colleagues in the provision of patient care and influencing positive outcomes.  
Having an involvement in service and practice development and driving forward changes to patient care and the paramedic profession.

# Consultant Paramedic

A consultant paramedic will hold or be working towards a doctorate award and will practice within the Department of Health guidance for allied health professional consultant appointments. Core responsibilities include an organisational development role in areas of new and innovative clinical practice for paramedics delivering patient care. Working at strategic – executive level they will be developing new care pathways, whilst liaising with central health policy makers. Connected to the trusts medical directorate and research and audit teams (through primary research) they will be instigating and reviewing care pathways.



# Case study

**Name**

Tim Edwards

**Job title**

Consultant Paramedic

**Entry route**

Vocational IHCD technician and paramedic route.

**How I got the role**

I initially trained as an ambulance technician with the London Ambulance Service in 1997 via the traditional IHCD technical vocational route, and subsequently qualified via the same pathway as a paramedic in 2000. After this I studied part time to achieve a diploma of higher education in Paramedic Science, post graduate certificate in Education, BSc (Hons) degree in Emergency Care Practice, post graduate certificate in Primary Care and MSc degree in Cardiology. During this time, I worked as a paramedic on rapid response cars and ambulances and was seconded to a hospital urgent care practitioner scheme and the London Air Ambulance.

As my career progressed I worked as an emergency care practitioner (specialist paramedic) and clinical team leader, and obtained a fractional appointment as a senior lecturer at the University of Hertfordshire. Immediately prior to my appointment as a consultant paramedic I worked as an advanced paramedic practitioner.

**What I do**

All allied health professions consultants have four key areas of responsibility – clinical practice, teaching and education, service development and research. I remain clinically active and undertake at least one clinical operational shift each week. This ranges from shifts on ambulances and response cars to providing cover at events and working on the

advanced paramedic practitioner car or with London's Air Ambulance. I provide clinical leadership and guidance, supported by an expanded scope of practice that enables me to manage a broad mix of patients, which may range from acute behavioural disturbance to end of life care. I also participate in the clinical on-call rota providing remote advice to ambulance clinicians. I maintain a visiting lecturer contract with the University of Hertfordshire and also deliver teaching internally in support of our education department. I am involved in a number of service development initiatives, including developing advanced practice and co-designing new roles such as the senior paramedic post. I am currently in the final year of a PhD investigating the influence of airway management strategies on outcomes in patients who are resuscitated and undergo transfer to specialist heart attack centres. I also work with our clinical audit and research unit, assisting with audits and producing other research outputs.

**The best bits**

Remaining clinically and operationally active whilst contributing to the development of the service and future clinical career pathways.

# Management



Further resources are available at: [The College of Paramedics](#) [Health Education England](#) [The Health and Care Professions Council](#) [The Quality Assurance Agency for Higher Education](#)

# Paramedic

Clinical leadership is a key component of paramedic practice and has practical relevance to all aspects of the paramedic's role as an allied health professional. The practical application and importance of leadership in managing adverse situations is part of the day-to-day clinical practice of the paramedic.



# Case study

## Name

James Taylor

## Job title

Paramedic, Yorkshire Ambulance Service NHS Trust, Programme & Project Manager, Cambridge University Hospitals NHS Foundation Trust

## Entry route

MSc Health Care Management  
IHCD Paramedic  
IHCD Ambulance Technician  
PG Diploma Health Care Management  
NHS General Management Training Scheme  
University Diploma in Reflective Management Practice  
NVQ Level 4 in Managing Health & Social Care  
BA (Hons) Management International

## How I got the role

When I was at secondary school I knew that I wanted to be a paramedic and that I wanted a career within the ambulance service. I studied A-Levels and wanted to go to university. At that time, there was only one university in the country that was offering a paramedic science degree. However, I also knew that I wanted to travel. I decided to go to university and study for a degree in management, which included spending a year abroad in the USA.

On graduating in 2001, I was successful in being offered a place on the NHS General Management Training Scheme. The scheme provided two years of practical training and experience in management, gained through undertaking a number of management roles in different NHS organisations (acute hospital, primary care and ambulance service). The scheme combined practical experience with post-graduate study in health care management. I also undertook an NVQ Level 4 in managing health and social care which enabled me to put together a portfolio of evidence to demonstrate competence in management skills and practice.

On completion of the scheme, I worked as an assistant general manager in an acute hospital for 18 months before deciding I wanted to gain first-hand experience of providing patient care and become a paramedic. I joined the ambulance service as a trainee ambulance technician and then

subsequently undertook paramedic training. While working clinically, I also completed my MSc degree in healthcare management. In 2011 I decided to gain experience of project management and managed the project to develop the major trauma centre at Cambridge University Hospitals NHS Foundation Trust.

## What I do

I now combine clinical practice as a paramedic with management practice by working part-time in both roles. This enables me to maintain and develop my knowledge, skills and experience in both fields.

## The best bits

Being able to make a difference to patients and their relatives through providing direct patient care, mentoring more junior clinicians, and using my formal management and leadership skills to improve what we do and how we do it; as clinicians, in organisations and as a profession.

# Team Leader/Manager

Paramedic team leaders are employed as first line managers who undertake a role in an operational management capacity. They are responsible for the welfare and operation effectiveness of a number of clinical staff. They support the safe delivery and management of an organisations contractual urgent & emergency care provision.



# Case study

**Name**

Nigel Ward

**Job title**

Clinical Team Leader

**Entry route**

Vocational - Emergency Medical Technician, Paramedic.

Post graduate diploma Paramedic Science, certificate in Practice Placement Education and working towards higher education qualifications.

**How I got the role**

I was recommended to apply by my then line manager in the early days of the clinical team leader role back in 2002. I was shortlisted from application and subsequently successful at assessment and interview stages. I then completed a two week residential course before posting back to the same station where I remained for 13 years. I have recently transferred nearer to home by choice and this has been a positive move for me.

**What I do**

As an integral part of the management team I provide clinical support, supervision and leadership to staff within a dedicated team across the full spectrum of their working environment. I lead a group of both registered and non-registered clinical staff who deliver frontline out-of-hospital care to patients across London. Through clinical audits, I ensure all staff within my team deliver high quality patient centred clinical services in line with the trust's values, policies, and procedures.

My role entails supporting the objectives of both the local management team and trust in respect of efficiency, quality, governance, performance and staff/stakeholder engagement. This includes ensuring compliance with health and safety and infection control policies, ensuring that key messages

are communicated to staff within my team and being a role model in line with the trust's purpose and values.

I contribute to the provision of a 24 hour, mobile clinical supervision and support resource, providing staff with face to face, on-scene clinical support and supervision.

**The best bits**

Having more autonomy and flexibility within my own role. Being the first line of contact for staff and, often, being able to assist them before problems escalate.

# Senior Manager

A Senior Manager within an organisation is responsible for the delivery of the contractual urgent & emergency care provision. Senior managers also are appointed in educational, operational and support role posts. Throughout their career they would have developed and cultivated the following management abilities and attributes:

- team development
- negotiating and influencing skills
- networking
- management and leadership
- developing case for change
- identifying the need for change, leading innovation and managing change, including service development.



# Case study

**Name**

Julian Rhodes

**Job title**

Head of Education & Training – West Midlands Ambulance Service NHS Foundation Trust

**Entry route**

Vocational / Experiential and Post Graduate Education

**How I got the role**

I was fortunate to hold education experience and relevant qualifications upon joining the ambulance service back in April 1996. I have worked in a variety of roles from patient care assistant in non-emergency patient transport, ambulance technician, paramedic, community paramedic, advanced paramedic and experience in the emergency operations centre. Initially I worked for Staffordshire Ambulance Service NHS Trust prior to the amalgamation, and currently for West Midlands Ambulance Service NHS Foundation Trust.

I was seconded to the education department due to my experience and joining qualifications, and progressed into the education management role of head of education and training and continued this position into the amalgamation of the West Midlands Ambulance Service it is today. More recently I studied at DeMontfort University, successfully gaining the post graduate level 7 diploma in Health & Social Care Management.

**What I do**

My role is very motivating, challenging and truly multi-faceted, branching across both regional and national responsibilities. My regional responsibilities is the effective and efficient strategic operations of the education and training

function, which carries with it a large portfolio for workforce development. I am proud to hold this position and the team I have and manage to achieve our strategic objectives. Taking up national responsibilities has been one of the most recent challenges, which I have thoroughly enjoyed. I am currently the Chair of the National Education Network for Ambulance Services, Driver Training Advisory Group (DTAG), and the Vice Chair of NHS Ambulance Services First Aid. I have been privileged to undertake a part time secondment to the Association of Ambulance Chief Executives (AACE).

My own learning will never stop, and although I am the Head of Education & Training, I will never stop being a learner myself.

**The best bits**

Honestly, every part of my journey since 1996 has been the best bits. If I had to narrow this down, I would have to say having the opportunity to head up the education function within the West Midlands Ambulance Service NHS Foundation Trust, and most recently the experience gained from the secondment to the AACE.

# Director

A director is primarily responsible for maintaining and improving the effectiveness and operational performance of the organisation, with reference to acceptable standards as determined by contractual performance, financial, quality standards and other related measures. It is expected that they would have undertaken an appropriate management qualification to underpin their knowledge in business administration and leadership.



# Case study

**Name**

Andy Swinburn

**Job title**

Associate Director of Paramedicine

**Entry route**

Vocational route Emergency Medical Technician,  
BA (Hons) Paramedic,  
Post Registration and MSc degree

**How I got the role**

Since commencing my role working within an ambulance service I have undertaken a variety of clinically focused roles. Initially I undertook an education and training role but then changed direction onto the clinical pathway by becoming an advanced paramedic. After a number of years working at this level, I successfully gained a position as a consultant paramedic with East Midlands Ambulance Service.

As the organisation began the journey to embed the College of Paramedics career framework, I was successful in gaining my current role to lead this development in clinical practice.

**What I do**

As the Associate Director of Paramedicine, my role can be divided into two general themes. Firstly, I assist the organisation to develop and improve the clinical care it delivers to our patients. This is a strategic role across both acute and urgent care, with a focus on ensuring that the organisation can work with the wider healthcare community to change the way patients are cared for. This can include creating pathways, new models of care and ensuring their effectiveness is captured.

In addition, professional development forms an increasingly significant aspect of my position. This is focused on working across directorates and in collaboration with ambulance commissioners to invest in structures and role development.

**The best bits**

As a strong advocate of the College of Paramedics' work, being in a position to implement an aspirational career framework is an exciting and motivational aspect of my role. To ensure that paramedics can develop and flourish into a variety of exciting career opportunities is not only fundamental to improving care for patients but equally rewarding for my fellow colleagues.

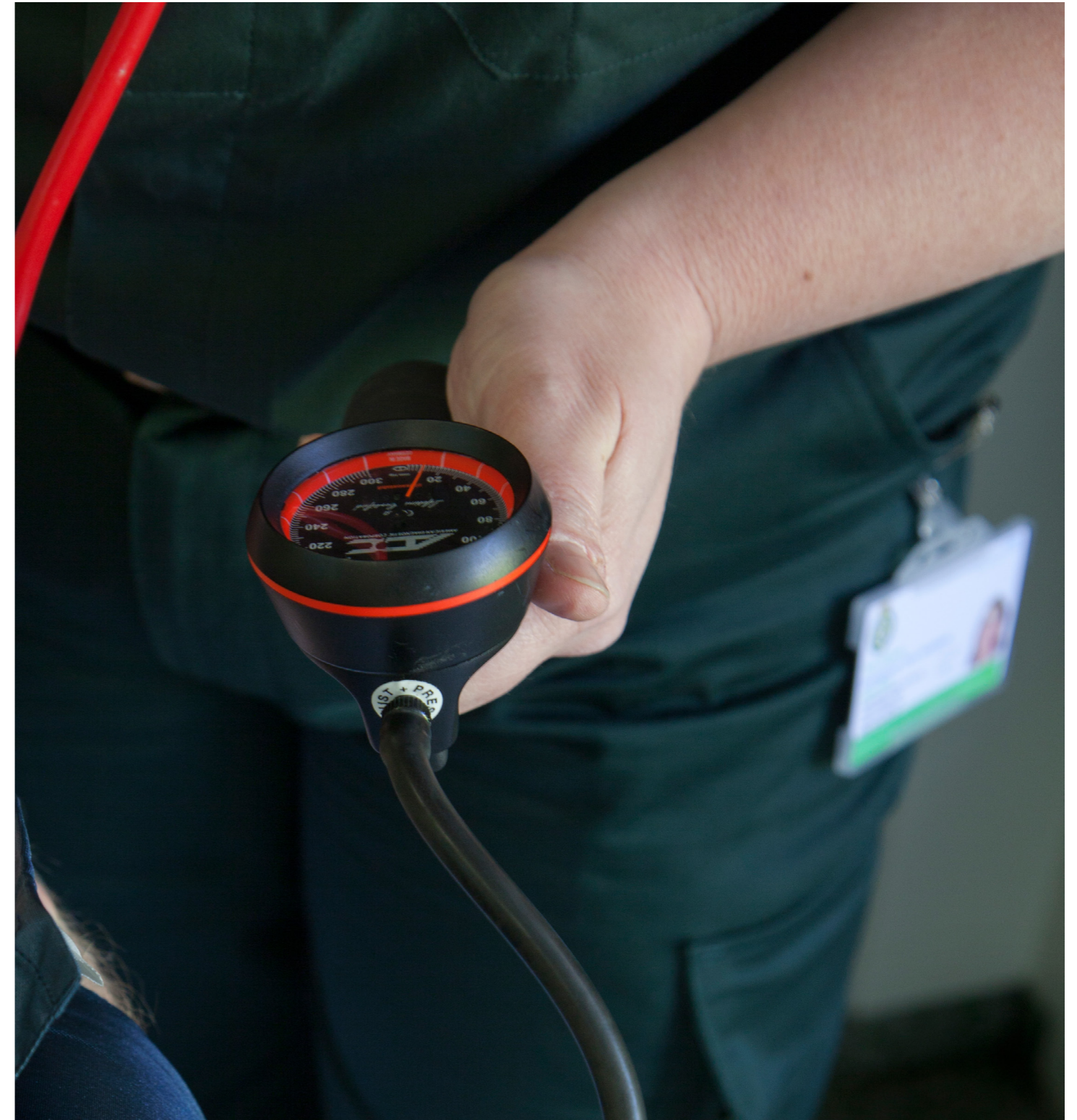
# Research



Further resources are available at: [The College of Paramedics](#) [Health Education England](#) [The Health and Care Professions Council](#) [The Quality Assurance Agency for Higher Education](#)

# Research Paramedic

A research paramedic is a paramedic who aspires to develop their career by combining clinical research and research leadership along with clinical practice and clinical development. They begin to develop the ability to critically appraise research using information systems and become involved in service audit with the aim to publish original research.



# Case study

**Name**

Graham McClelland

**Job title**

Research Paramedic, North East Ambulance Service NHS Foundation Trust

**Entry route**

Experiential & post-graduate study

**How I got the role**

I worked in a variety of roles within North East Ambulance Service; as a technician, paramedic and hazardous area response team paramedic, before applying for a 12 month secondment as the trial coordinator for the head injury transportation straight to neurosurgery trial. After being accepted for this role, which ended up lasting for nearer 24 months, I got increasingly involved in the rapidly developing field of pre-hospital research. Whilst occupying the trial coordinator role, I completed my BSc Practice Development degree and applied for a fellowship with the National Institute for Health Research to study for a masters degree in Clinical Research. Once my application to join was accepted I studied part time whilst continuing to work for North East Ambulance Service as a research paramedic working across a range of studies and projects.

**What I do**

My role involves participation in all aspects of research including developing ideas and grant applications, meeting with partner organisations, training staff, collecting data, writing reports and papers and presenting results. Within this role I try to support and help other paramedics who have an interest in research to develop the research capability within our profession.

In addition to the research aspect of my role, I also have to maintain my skills and knowledge as a paramedic so I still do operational shifts and try to keep on top of my continuing professional development requirements.

The final part of my role is developing as an academic which currently entails working on my PhD supported by a fellowship from the Stroke Association and attached to the stroke research group at Newcastle University.

**The best bits**

The variety in what I do, being part of driving pre-hospital care forward and the potential to beneficially affect practice on a large scale.

# Research Fellow

A paramedic research fellow is a paramedic who undertakes the leadership of original research projects that aims to contribute to the body of knowledge within the profession and evidence-based practice. They would hold or be working towards a Master's in Research (MRes).



# Case study

**Name**

John Talbot

**Job title**

Paramedic Research Fellow –  
University of Hertfordshire

**Entry route**

Experiential & post-graduate study

**How I got the role**

I worked for Two Shires and South Central Ambulance Service as a technician, paramedic, clinical supervisor, specialist paramedic and urgent and emergency care practitioner. Having completed a BSc Hons degree in Paramedic Science in 2010 at the University of Hertfordshire, I began lecturing on the programme in 2011; I had a particular interest in pharmacology and completed a postgraduate diploma in Therapeutics and an MSc in Medical Toxicology both at the University of Cardiff. Having always enjoyed research, I am fortunate to now be working as a research fellow in paramedics.

**What I do**

Any and all things research; primarily I look for potential research opportunities in the paramedic field. Initially, I'll do background work such as literature searching and reviewing to establish the research question and how best to answer it. Finally I write the grant application in an attempt to win funding. I am also involved in systematic reviews, writing about research in the Journal of paramedic practice and lecturing in pharmacology.

**The best bits**

Raising the profile of paramedic research and getting students and paramedics to see the value of it. Research is empowering if you can understand it, you can influence so much more in the future.

# Reader

A paramedic reader who applies their knowledge and expertise in the creation and interpretation of new knowledge through original research and other advances scholarship. They would hold or be working towards an appropriate PhD such as a clinical doctorate research fellowship.



# Case study

**Name**

Michelle Esoum

**Job title**

Reader in Paramedic Science

**Entry route**

Experiential; post graduate education; research activities

**How I got the role**

I first came into the paramedic profession via a higher education route, gaining my BSc Hons degree in Paramedic Science. After that I worked as a paramedic in an NHS ambulance service where I took every opportunity to be involved in clinical research as this was an interest of mine throughout my pre-registration programme. After completing my first degree I got involved in some small in-service research projects where I was mentored by more experienced researchers and, after a few years of clinical practice and exposure to research activity, I felt ready to undertake my PhD. Evidence of doctoral level study is essential for consideration for a reader's post.

Throughout all of these processes, one thing I was advised to do was publish, publish, publish! I started this by writing reviews for peer reviewed journals and then moved on to working with other more established authors to write full papers. Although daunting in the beginning, I am so glad I took this advice as my publishing record and portfolio of conference outputs certainly helped me when applying for my readership post.

**What I do**

My role is varied as half of my work is research focused, and the other half involves teaching on both undergraduate and

post graduate paramedic programmes, as well as undertaking operational shifts to maintain and develop my skills and knowledge as a paramedic.

As a reader I am expected to develop my own programme of original research which involves not only submitting grant applications to gain funding to run the projects but also acting as the principal investigator on these projects. This involves implementing the research, monitoring governance of the research, collecting data, analysing data and publishing the findings, as well as managing the research teams affiliated to these projects. Supporting and developing colleagues and students into good research practices is an integral part of my role. Alongside this I enjoy facilitating other people to engage in research activities, helping them to address clinical research problems which ultimately may inform paramedic evidence-based practice.

**The best bits**

All of it! Working with peers and colleagues to promote the value of research for the paramedic profession and supporting them to shape their ideas into actual research projects is truly rewarding.

# Professor

A professor is an academic paramedic who has completed an appropriate PhD such as a senior clinical lectureship or clinical doctorate research fellowship. They would have and continue to make through research a significant and original contribution to a specialised field of inquiry, demonstrating a command of methodological issues and engaging in critical dialogue with peers and accepting full accountability for outcomes.



# Case study

**Name**

Julia Williams

**Job title**

Professor of Paramedic Science,

University of Hertfordshire

**Entry route**

Experiential; post graduate study; publishing activities; successful grant applications

**How I got the role**

The selection process was extremely challenging and it involved several stages, all of which required demonstration of successful previous research activity as well as highlighting future potential for research and innovation. In addition, I had to evidence an extensive contribution to teaching and supervision of both pre and post registration students at all levels from undergraduate through to doctoral level in a variety of roles, from lecturing through to programme development and validation.

I was able to draw from extensive experience in healthcare as well as being involved in paramedic education at both undergraduate and post graduate levels and research for over 20 years. I undertook my PhD at King's College, London researching into street homeless people's experiences of health and healthcare provision. This really fuelled my passion for research and I then took a post at the University of Hertfordshire where, alongside my lecturing activities, I became the research lead for paramedic science which enabled me to become actively involved in the vibrant and developing area of pre-hospital research.

Over the years I have developed a solid portfolio of publications and conference presentations reflecting my input to both clinical and educational research, and I have been

involved in numerous grant applications to fund research - some of these were successful and, equally, some were not; but they have all been good learning experiences which have helped improve my subsequent applications.

Initiating links with other higher education institutions and ambulance services both in the UK and overseas is key. This has facilitated collaborative working with other people in research and education which has, in turn, strengthened my research networks, the importance of which, in my opinion, should never be underestimated!

**What I do**

There are many facets to my roles but the activities fall broadly into three areas: research, education and clinical practice.

I have the perfect job! It gives me opportunities to work alongside students at all different levels from first year students on a pre-registration BSc Hons degree Paramedic Science programme through to supervising my PhD students who are undertaking essential research in out-of-hospital emergency urgent and unscheduled care.

For part of my time I am seconded to work as research lead for an ambulance trust which involves managing research projects, developing grant applications; undertaking

# Case study

**Name**

Julia Williams

**Job title**

Professor of Paramedic Science,  
University of Hertfordshire

**Entry route**

Experiential; post graduate study; publishing activities; successful grant applications

data collection; leading on the creation of research and innovations strategies; developing research knowledge and expertise amongst operational staff; organising professional development activities; and promoting and maintaining good research governance practices.

Additionally I am involved in presenting research findings at conferences; writing research papers; peer reviewing other staff's publications and facilitating their development in research; coordinating meetings with partner organisations and other research interested people to raise the profile of paramedic research and to capitalise on collaborative research opportunities.

I chair the College of Paramedics' Research and Development Advisory Committee and I am a member of several other organisations such as the 999 Research Forum, the National Ambulance Research Steering Group, and the Council for Allied Health Professions Research network – all of which afford further opportunities to champion the development of research aligned to the paramedic profession,

I also spend time working in clinical practice as this is where I believe the domains of education and research should merge seamlessly to underpin paramedic practice ultimately enhancing patients' experiences and improving clinical outcomes.

**The best bits**

I am passionate about integrating paramedic research, education and clinical practice. Every day is different and I feel really privileged to have the opportunity to contribute to these areas.

I love working with students helping to support and develop them into clinical research career pathways but, equally important to me is my clinical work which keeps me grounded especially as patients and colleagues have so many viable ideas for future clinical research studies. I feel I can make a difference by helping them to develop these ideas into actual research studies, the results and findings of which inform paramedic practice and education.

Enabling people to understand research and its impact on paramedic practice is a priority for me. Building research capacity and capability amongst paramedics will empower the profession to influence changes in service delivery, patient care and management, and patients' clinical outcomes in the years to come. I love my job and I am really excited about what paramedic-led research can do to shape the profession's future contribution to healthcare.

# Education



Further resources are available at: [The College of Paramedics](#) [Health Education England](#) [The Health and Care Professions Council](#) [The Quality Assurance Agency for Higher Education](#)

# Paramedic Lecturer

Student paramedics are mentored in clinical practice by practice educators, who are registered paramedics and have undertaken a programme of 'appropriate' practice education training, and are paramount to the educational and clinical development of pre-registered and post-graduate students. This role is typically the first educational characteristic that a paramedic aspires to and obtains a relevant qualification in. However, if they wish to develop along the education career pathway they should undertake and obtain a relevant teaching qualification such as a post-graduate certificate of education (PGCE) which will involve undertaking periods of delivering higher education as a lecture practitioner.



# Case study

**Name**

Rob Slee

**Job title**

Paramedic Lecturer. BSc (Hons) Paramedic Science, University of Greenwich

**Entry route**

Vocational / experiential and post-graduate education

**How I got the role**

I had been working clinically for 20 years in a variety of roles including as emergency medical technician, paramedic, clinical team leader, emergency care practitioner (specialist paramedic) and training officer for the clinical education and standards department, all whilst working for London Ambulance Service NHS Trust. Undertaking this last role grew my interest in higher education and having already completed my post graduate certificate in education I applied to the University of Greenwich on a part-time basis as a lecturer practitioner where with a colleague I was responsible for three of the paramedic courses organising and delivering a mixture of both theory and practical sessions, across all three years.

In 2014 I then had the opportunity to apply for a full-time post with the university, and continue to deliver across all three year groups as well as be the course leader for two of the courses. I am currently in my second year of an MSc degree in Advanced Practice.

**What I do**

My role is varied, in terms of teaching being a mixture of both theory and skills, across all three year groups primarily to my paramedic students (circa 100). I also have the opportunity to deliver a variety of sessions to under graduate nurses and

post graduate nurses and paramedics. One of the interesting elements to my role is that the paramedic course delivered involves two partner organisations and whilst the curriculum delivered is the same, the nuances that exist between the two partner organisations provides a wide and varied insight into how two different organisations (one urban and one rural) work and the requirement of the different skill sets.

Another element to my role is being the personal tutor for a number of students, mainly pastoral in nature, is seen as an important requirement in terms of monitoring the student's progress and supporting them with various resources and support, which is a key part to the student's university journey.

In order to maintain my own credibility I retain a bank contract. The students not only respect this more, but, they understand that not only have I had the experience of using the skills in practice, but I that I use those experiences to try and help them understand the context in which they are used.

**The best bits**

Seeing the students grow through their educational journey and have the ability to be able to help them with the theory practice gap, and seeing the students grow into the registered professionals of tomorrow.

# Senior Lecturer

A senior lecturer is an academic paramedic who has a relevant teaching qualification such as a post-graduate certificate of education (PGCE). They are responsible for the design and effective delivery of teaching materials which contribute to the development of programmes, which are flexible and responsive to the continually changing needs of the paramedic and multi-professional workforce. They set and assess work and provide feedback, and support students and mentors in practice based learning, fulfilling the role of link teacher and monitoring the quality of the learning environment.



# Case study

**Name**

Ken Street

**Job title**

Senior Lecturer/Course Leader FdSc/BSc (Hons)  
Paramedic Science, University of Portsmouth

**Entry route**

Vocational / experiential and post-graduate education

**How I got the role**

I have worked clinically for 12 years in a variety of roles including as a paramedic, specialist paramedic urgent & emergency care, emergency care practitioner and in clinical mentorship. Initially I worked for Hampshire Ambulance Service, prior to the amalgamation, and latterly for South Central Ambulance Service. My route into higher education began as a part-time hourly paid lecturer delivering lectures and facilitating assessments on an ad-hoc basis, before applying for a new full time position in 2012.

Initially I joined the university as a senior lecturer, primarily in a teaching role, when there was only one pathway to registration, one other paramedic on the team and a total of 50 undergraduate paramedic students on the programme. I took up my course leader role in 2014 and now work as part of a seven person paramedic team offering three pathways to registration to over 100 undergraduate students.

**What I do**

My role is truly multi-faceted, ranging from preparing and delivering lectures to all levels of student, including other programme areas like pharmacy, providing pastoral care to our students and writing, developing and steering new programmes through the approval process. As a course leader I also have an administrative role ensuring that quality is

maintained and that all programmes are delivered smoothly, effectively, and continue to meet professional, statutory and regulatory body standards. I also retain a bank contract with the ambulance service to maintain my own professional development and credibility.

My role has allowed me the opportunity to do things I would never have done as an operational paramedic including presenting at conferences, working more closely with the College of Paramedics and embarking on my first empirical research project with colleagues looking at paramedic education in higher education over the past decade. I am still a student myself and am working towards my MSc degree in Advanced Clinical Practice.

**The best bits**

Seeing competent, confident and enthusiastic paramedic students graduate and embark on their careers.

# Principal Lecturer

A principal lecturer is an academic paramedic who has undertaken a relevant masters level programme of education. They are responsible for the management of an academic team who deliver courses and programmes of pre-registration and post-graduate education applicable to the paramedic and multi-professional workforce.



# Case study

**Name**

John Donaghy

**Job title**

Principal Lecturer and Professional Lead –  
Paramedic Science University of Hertfordshire

**Entry route**

Vocational/experiential and post-graduate education

**How I got the role**

I have worked for the London Ambulance Service NHS Trust for over thirty years as a technician, paramedic, flight paramedic, duty officer and training officer. I was involved in working with the Department of Health in establishing the concept of the hazardous area response teams. I completed my post-registration studies in paramedic science at the University of Hertfordshire, graduating in 2001. Following a short time as a sector training officer, I moved into higher education at the University of Hertfordshire as a part-time senior lecturer. Following a period of around four years I became the professional lead for paramedic science and subsequently went full-time. In this time I have undertaken a number of roles, from undergraduate admissions tutor, programme lead, postgraduate MSc programme lead and professional lead.

**What I do**

My role as professional lead is to manage the team (line manage) which currently consists of twelve members of staff. I have overall responsibility for the paramedic department and oversee the paramedic budget. I report to both my line manager, the Head of Department of Allied Health and Midwifery, and the Dean of School. I report directly to the Dean on professional issues and advise on strategy. I contribute to the school's business plan. I liaise closely with

the College of Paramedics, the Health Care Professions Council and commissioning authorities. I sit on national and international working groups and formed partnerships working with Oslo, Norway and Seville, Spain.

**The best bits**

Working with partner organisations and our postgraduate paramedic students.

# Professor

A professor is an academic paramedic who is working towards or has completed an appropriate PhD clinical/professional doctorate. They have responsibility for the management of all programmes within their remit, and provide strategic direction and professional involvement and promotion of the paramedic role and its future path and educational process to achieve this.



# Case study

**Name**

Peter Woodford

**Job title**

Associate Professor – Kingston and St Georges University of London

**Entry route**

Vocational patient transport service, Emergency Medical Technician, paramedic post-graduate: master's degree with intention to gain a PhD.

**How I got the role**

I worked for an ambulance trust starting in patient transport service, then training as an ambulance emergency medical technician and then Institute for Health Care Development (IHCD) paramedic. This, after a period of time, led to becoming a mentor for paramedic students. I took on the role of clinical supervisor to develop my experience in junior management and staff leadership. This allowed me to ground my skills in appraisals, rostering, clinical leadership and managing staff issues. I then became a training officer primarily delivering IHCD technician and paramedic courses (pre – degree route).

During my role as a training officer I identified the move to higher education on the horizon so maneuvered myself into a position so as to take on the role of a university lead. This involved various secondments to universities as an honorary lecturer and then course director. I carried on in this role undertaking management, re-design and creation of programs etc. Finally I decided to progress full time in a university setting and undertook the role of associate professor full time, whilst maintaining a small part time bank role in the trust.

**What I do**

There are two elements to my role, one is programme management across the school. I am responsible for day to day implementation of all courses we undertake. All staff issues, leave, appraisal and management of the 19 staff in the team. The second role is national engagement, strategic direction and professional involvement and promotion of the paramedic role and its future path and educational process to achieve this. This involves sitting on various commissioning bodies across the South East and London, being a member of various groups looking at university higher education development and career progression and sitting on panels at the Health and Care Professions Council and College of Paramedics to help steer the direction of paramedic career development. I also undertake research and publish annually on paramedicine topics.

**The best bits**

Being involved with forging the paramedic of the future and steering educational approaches around simulation.

[Introduction](#)

[The Career Framework](#)

[Clinical Practice](#)

[Management](#)

[Research](#)

[Education](#)

Further resources are available at:

[The College of Paramedics](#)

[Health Education England](#)

[The Health and Care Professions Council](#)

[The Quality Assurance Agency for Higher Education](#)