

**ECP, Practice Paramedic, Visiting Paramedic Network Session
Trinity Park
Thursday 08 Feb 2019**

The 'good bits'

- No night shift
- Good work / life balance
- Lots of challenges
- Constantly learning things
- No uniform
- Good GP support
- SystemOne
- Good support and collaborative
- Variability
- Every day is a school day
- Structured learning
- Treated like a grown up
- Lunch breaks
- Feeling useful

- Continuity
- Multi-disciplinary working

'Less good bits'...

- Patients expect a GP
- Scrips – especially in surgery
- Time management
- Less leave
- Pressure on turnover
- Referring to SAU
- Early presentation – fear of missing something
- Terms and conditions poorer
- Time constraints
- Feeling out of depth
- Wasted home wish
- Inconsistent GP approaches to same condition
- Visit requests rising
- Managing expectations of what a paramedic can do
- Shopping

Challenges doing the role

Expectations...

- Public awareness of our role is low – one idea is for reception/doctors to tell patients who will visit i.e. paramedic
- Time management e.g. examining patients in 15 minutes
- Not just seeing acute patients – they often have co-morbidities

Wasted visits – quality of triage depends on GP

Referrals - easier to admit to if you say you are calling on behalf of XXX'

Prescribing - E-prescribing is the most efficient. DP to investigate PGD

Time Management

- Not all GP's have mobiles so contacting them can be tricky!
- Laptops

Early presentation

- Safety netting
- Understanding blood results

Training

- Most attendees get about an hour per month training

Actions – Fed to organise future training sessions on:

- Consultation skills – **I have booked a full day session on Wed 25 April (it's the same day as the East shutdown afternoon)**
- Coding and recording in the patient record
- What is Qof?
- Understanding blood results
- Safety netting