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The Need for a Professional Body for UK Paramedics

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Summary

The standards to which UK Paramedics and Emergency Medical Technicians work have historically been driven by the employer rather than a professional body. This in effect has meant that the National Health Service (NHS) Ambulance Services decided how educational programmes were structured and delivered. The private sector in the UK has also tended to look towards the NHS standards as the yardstick for their staff, although there has been significant difficulty in gaining the NHS award by the private sector. The advent of professional registration in 2000, and crucially the enactment of The Health Professions Order 2001 that resulted in the setting up of the Health Professions Council (HPC), prompted a real drive to develop a true professional body for UK ambulance staff. That professional body is the British Paramedic Association – College of Paramedics (BPA). The BPA has, since those early days, pursued true professional self-regulation of education and practice standards. The BPA acknowledges the immense task it has set itself, but believes that it can and must be achieved in order that education and practice standards continue to develop and deliver what is felt to be in the best interests of patients. By engaging with the HPC, the unions, employers and, very importantly, higher education institutions, the BPA will truly fulfill the requirements of a professional body for UK ambulance staff.

Discussion

Currently in the UK, to practice as, and use the title “Paramedic” one must be registered with the Health Professions Council (HPC). The Health Professions Order 2001 (the Order),¹ is the primary legislation that enables the Health Professions Council (HPC) to regulate paramedics and other professions. The Order imposes, among other things, a duty on the HPC to set standards of conduct, performance, ethics, education and training, and proficiency.

The BPA is the current recognised professional body for paramedics in the UK. The following is put forward by the authors as a brief definition of the term professional body: “A professional body exists to protect the interests of specific professionals and develop and further a particular profession.” However, many professional bodies also act to protect the public by maintaining and enforcing standards of training and ethics in their profession. In this capacity they act as ‘learned societies’ for the academic disciplines underlying their professions. It is contended that the British Paramedic Association – College of Paramedics

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(BPA) also performs these functions. In some countries and professions, membership of a professional body is required for an individual to legally practice, but as mentioned above this is not so in the UK. A word search of “the Order” in major search engines does not in fact reveal the mention of the words, or term “professional body”. However, the Order does demand that the HPC set, publish and, where required, revise the Standards of Education and Training (SET) in Article 14 of the Order, Standards of Proficiency (SOP) in Article 12 of the Order, and Standards of Conduct Performance and Ethics (SCPE) in Article 21 of the Order. If the SET,² SOP – Paramedics³ and SPCE⁴ are scrutinised, one will find numerous references to the HPC “needing to work with” relevant professional bodies in order for the various standards to be formulated, revised and workable. It is in these areas that the BPA works most closely with the HPC to ensure that both organisations fulfill their duties to the public, patients and paramedics. A very good illustration of this fact is that some BPA members are also Partners of the HPC and in this function assist the HPC in approving courses of education and training, acting as registrant assessors for those persons applying for registration with the HPC, and also sitting on the investigation and health panels of the HPC.

Taking the above into account it can be difficult to identify tangible benefits of belonging to a professional body. The BPA would say that the main areas of benefit to members lie in the philosophy that as a profession it must work towards undertaking responsibility for its own professional future. Historically in the UK, the standards paramedics (and Emergency Medical Technicians) have worked to, and the awards made following completion of training, have been driven largely by employers with significant input from doctors. This kind of approach is not followed by any other registered medical profession in the UK. The establishment of the BPA as a professional body run by paramedics, therefore provided the opportunity to change the way that education, training and associated awards are established. The prime responsibilities for the wider benefit of members are:⁵

- Self regulation of professional standards and education (BPA)
- Standards of education and training (HPC with BPA input)
- Standards of proficiency (HPC with BPA input)
- Benchmarking against other higher educational programmes (Quality Assurance Agency with BPA input)
- Curriculum guidance (BPA for the HPC)
- Continuous professional development (provision and support) (HPC and BPA)
- Responsibility for the review of professional awards (BPA)
- Reference point for health organizations (BPA)
- Professional support and advice (BPA)

Within all of the above work the main objectives of the BPA are:

- To strengthen and develop the profession and represent the interests of its practitioners.
- To raise the general awareness of the existing and potential contribution of the profession to patient care.
- To encourage and share good clinical practice and high standards of care.
- To develop and expand the potential of the profession for contributing to patient care in a modern health service.
- To represent the views of the profession to government, employers and other external bodies.
- To encourage higher standards of initial and continuing professional education and development.

- To commission, report and analyze research in out of hospital patient care.

Any profession that wishes to undertake full responsibility for its standards and future direction will need to pursue these objectives and establish the wider benefit of taking our profession into the future for itself and not be led by others from outside that profession.

Conclusion

The BPA, through determination and perseverance is, for the first time in the history of UK paramedic provision, achieving this benefit for its members as the group who can best deliver emergency out-of-hospital care (and increasingly, unscheduled non-emergency care) to the public and its patients. A good example of this is the production of the curriculum framework guidance for ambulance services and their partner higher education institutes.⁶ The document has been prepared completely by registered paramedics who are also BPA members, with advice being sought from universities and other specialists. Following an extensive consultation process this document now sets out a complete educational pathway and framework for the paramedic profession from entry right through to paramedic consultant. This is a milestone in the history of the UK ambulance services and one the BPA and its members, and hopefully many, many future members, can all be proud of.

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