

## What's New in Emergency Pre-hospital Care Research? Nottingham 27<sup>th</sup> November 2008

Workshop led by Suzanne Mason, Colin O'Keeffe and Pat Coleman

Workforce and organisational challenges of the emergency care practitioner (ECP) role –findings of the NEECAP Trial – A multi-site community intervention trial of ECP schemes in the emergency care system

### Introductions

Suzanne Mason welcomed more than 30 participants, including ECPs, other health care professionals, managers, researchers and representatives from the Department of Health. Colin O'Keeffe and Pat Coleman were helping with the workshop and several members of the NEECAP trial steering group were also present.

### What was the purpose of the workshop?

To disseminate some of the results of the trial, and to give participants the chance to place the findings in the context of their own experiences, perspectives and expertise of ECP working, and in so doing identify key principles to guide the development, integration and future direction of the ECP role.

### How would we achieve this?

After brief overviews of the findings in three topic areas 1) Professional development 2) Organisational support, and 3) Strategic direction, (below) the participants were asked to sort themselves into one of three 'break-out groups'. Each of the groups would focus on one topic. This was to enable participants to engage with the issues and each other in smaller groups. The 'break-out' groups were asked to talk initially in pairs and choose someone to summarise and report the main points. This exercise took about 20 minutes. The three groups then reassembled into the full group to receive the reports from each 'break-out' group and identify any common themes in further discussions.



ECP role opportunities for career development

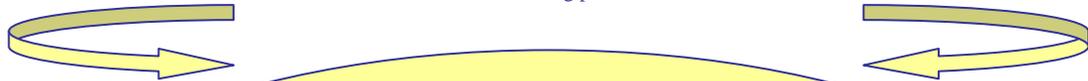
- Different clinical backgrounds provided opportunity for learning through peer mentoring but disparity between nursing/paramedic backgrounds in terms of professional development.
- Need for appropriate clinical supervision
- Variation in funding/resources for CPD/clinical supervision
- Rotation through fixed acute centres e.g. ED, 999 and MIU offers potential for maintaining skill-mix

Challenges and opportunities of ECP team-working evident in

- New group affiliations
  - New role affiliations
  - Conflict and co-operation
  - Acceptance and integration of ECPs into wider health care team
- Implications for organisational support
- Clear vision and leadership
  - Supportive management
  - Improved communication between all involved in delivering patient care

ECP brand –

- Registration/regulation to define ECP role distinct from other providers
- Targeting at patients for maximal impact
- Targeting at services where autonomy and a more comprehensive service is valuable
- Employing organisations gain benefit from ECPs working across boundaries
- Further research – cost effectiveness, in-depth study of services



Findings from the trial resonated with the workshop participants own experiences of ECP working and managing change in the NHS. The following issues were identified as priorities for effective working:

- need to define ECP role nationally through registration, regulation of entry, and agreed title
- clear vision and commitment for ECPs at senior management level
- effective systems of clinical supervision
- targeted training and equipped to attend to the patient groups they are expected to see. (May differ according to local setting - for example, adequate prescribing rights for primary care type presentations)
- training to be targeted according to previous skills, competences and case-mix
- teambuilding through education of all stakeholders and other health professionals,
- organisational strategies to overcome barriers to integrated care for example ECP in 999 ambulance comms to enable appropriate referrals to ECPs, publicity in local settings; improved communication