

ARRENT ARAMEDICS ADVANCING PARAMEDICINE

# SUSTAINING A FIT-FOR-PURPOSE PARAMEDICINE WORKFORCE THROUGH PROFESSIONALIZATION

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- Introduction & Conflicts of Interest
- Paramedicine workforce crisis in U.S.
- Common responses
- Professionalization as a strategic response?
- Professionalization agenda
- Preparing the ground through research
- Questions and discussion



- Introduction & Conflicts of Interest
  - Both Peter and Nick are Board Members of the American Paramedic Association.
  - Peter is Professor of Paramedicine at Monash University, a Board Member of The Paramedic Network and a Director of the Global Paramedic Higher Education Council, as well as sitting on several advisory bodies internationally. He is a Registered Paramedic and a course assessor for the Paramedic Board of Australia.
  - Nick is a Board Member of The Paramedic Foundation, the Colorado Chapter of the National Association of EMS Physicians, the EMS Association of Colorado, and treasurer of the National EMS Management Association. He is the trauma research manager for UCHealth in Northern Colorado.



- Paramedicine workforce crisis in U.S.
  - Inability to consistently recruit and retain paramedics and emergency medical technicians in the U.S. is a threat to the existence of an effective emergency medical response
  - Attrition rates estimated to be between 20-30% (hard to compare internationally because of differences in sector structure)
  - High turnover constrains adoption of evolutionary paramedicine developments
- Possible reasons for the crisis
  - Low remuneration and occupational status
  - Lack of educational and career pathways
  - Fragmented emergency medical service system
  - Lack of professional agency



- Common Responses actual and suggested
  - Sign-on bonuses (increasingly more extreme)
  - Employer-provided housing
  - Lowering entry-to-practice standards
  - Overseas recruitment



- Professionalization as a strategic response?
  - Long-term and seemingly intractable workforce crisis in the U.S.
    paramedicine system
  - Little reference has been made to potential recruitment and retention strategies related to the professionalization of the workforce and service delivery systems
  - Internationally, this has proved relatively successful, despite similar growth in demand for services
  - Paramedic attrition rate in Australia is less than 3 percent
  - Paramedicine degree programs remain in high demand and have high entry standards



- Professionalization agenda
  - Internationally, paramedicine has demonstrated five interrelated professionalization strategies:
    - 1. Adopting higher education for entry to practice
    - 2. Implementing co-regulation alongside other health professionals (same standards, education and behavioural expectations as others)
    - 3. Creating a body of knowledge through paramedic-led research
    - 4. Establishing vibrant professional bodies (high levels of membership, with resources for advocacy and support services)
    - 5. Encouraging autonomy of practice (paramedics regulate their own practice, education and professional behaviours)



- Preparing the ground through research
  - Mixed methods study drawing on the functionalist approach described in the trait theory of professionalization
  - Recognition that the professionalization of paramedicine is an innovative, long-term process
  - Create a unifying narrative that will bring together stakeholders seeking to a sustainable paramedicine workforce

## Aims

- 1. Determine the influence of paramedic professionalization on the sustainability of paramedicine workforces; and
- 2. Harness professionalization to promote policies and practices that will enhance the recruitment and retention of paramedics and associated personnel.



- Questions and discussion points
  - Is this idea desirable and feasible?
  - Where would you start?
  - Where does support lie?
  - How can barriers be overcome?
  - How would professionalization influence paramedics' relationships with others? eg. doctors, nurses, fire fighters.
- Yes, we do need research funding.



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