



Paramedic Curriculum (6th Edition)

Implementation from April 2024

*Curriculum for all paramedic education
programmes leading to professional
registration.*



COLLEGE OF
paramedicsTM

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Acknowledgements

Without the time and energy of a core group of driven individuals this document would not have been possible, all of those brilliant people are named at the end of this publication and sincere thanks extends to each and every one of them, as well as their employers and colleagues that enabled the time for them to dedicate to the hours of collaboration that have underpinned this publication.

I would however like to take a moment to specifically recognise the contribution of Jim Petter FCPara, his patience and dedication deserves mention, Chris Moat MCPara, for never being afraid to step in and move us forward, Els Freshwater FCPara for her unwavering support and dedication to the cause, and Larry Baker (NHSE) for nagging just the right amount!

Finally, our out-going Trustee for Education, Dr Vince Clarke MCPara and my predecessor, Bob Fellows OBE FCPara. During his extended tenure Vince has been the perfect combination of ally and task master, not only in the compilation of this document but all of the underpinning and continued work of the Education Directorate here at the College of Paramedics. Bob, though now officially retired remains a trusted confidante and critical friend, his attention to detail and historical knowledge of our profession never ceases to amaze.

'Individually, we're one drop. Together, we're an ocean.' – Ryunosuke Satoro

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Foreword

Welcome to the sixth edition of the College of Paramedics' pre-registration *Paramedic Curriculum*. Since the publication of the first edition in 2006 (when the document was referred to as the Curriculum Guidance), this publication has been updated regularly to keep pace with the development of the profession and to reflect the breadth and depth of knowledge expected of the contemporary paramedic at the point of registration.

The journey to publication of this edition has been longer than usual as we set about ensuring that all stakeholders were engaged and enabled to contribute. This has been imperative as this publication is looking to address a series of growing challenges and potential risks that are arising due to variation in the knowledge, skills and capabilities of new paramedic registrants. Such variation has been identified following the facilitation of multiple focus groups across England where feedback was anonymously collected and collated by NHSE in a Thematic Report. Similar activity is planned for Scotland, Wales and Northern Ireland in 2024.

The recent publication of the [NHS Long Term Workforce plan \(NHS England 2023\)](#), sets out the need for continued growth in numbers of the paramedic workforce in order to enable the supply of paramedics to work in roles across the Health and Care economy. This workforce must have the right skills and competencies to meet the demands of contemporary healthcare settings and be prepared for future evolutions. It is essential that they exhibit the values and behaviours expected within such systems, and demonstrate the ability to assess, treat, manage, discharge and, where appropriate, refer service users requiring acute, chronic, and/or specialist services in primary, secondary and wider regional care.

Such growth in paramedic demand poses a challenge to the quality of educational experience of pre-registration learners as resources to facilitate these programmes are limited. The quality of education undertaken by learners is, without doubt a pivotal component in shaping their professional journey. It is imperative, therefore, that the College of Paramedics continues to produce a curriculum that not only meets, but exceeds the expectations of healthcare delivery in the 21st century.

Clinical decisions by paramedics are increasingly made against a background of complex and often conflicting values. The most obvious evidence of this is in the growing importance of ethical issues in healthcare. But there are many other increasingly “values complex” areas of paramedic practice, such as clinical governance, audit, quality assurance, concerns about cost-effectiveness, and the use of quality-of-life and other similar measures in preventive and public health medicine.

Just as we need a clear evidence-base, because of the increasing complexity of the evidence underpinning decision-making, so increasingly do we need values-based practice due to the

increasing complexity of the values underpinning challenging decision-making. The College of Paramedics thus continues to work on a values-toolkit, to augment the teaching of values-based practice in paramedic education as an adjunct to the current undergraduate curriculum.

The 5th Ed Curriculum Guidance (2019) was reduced in content by around 30% in response to stakeholder feedback and following the rise of the entry threshold to the HCPC register being set at BSc. At the time we believed that the next iteration of the curriculum would remain similarly light on detail, however, this was prior to the COVID- 19 pandemic that brought a variety of unique challenges; it was also before the introduction of the apprenticeship pathway for paramedics. The intention of this new curriculum is to ensure the detail included is sufficient to support education providers to deliver consistently high quality and appropriate programmes to create great paramedics ready to commence long and successful careers.

The College of Paramedics is committed to encouraging the quality development of paramedic education programmes and to supporting the delivery of innovative, engaging education that fosters lifelong learning and development of our future professional group. We look forward to engaging with more and more education providers as they seek our endorsement of their paramedic programmes for both pre and post registration courses and to work with us to produce a Paramedic Curriculum of which we can all be proud.

This *Paramedic Curriculum* has been developed through an effective collaboration that has involved education providers, practice-based education providers, paramedic learners, subject specialists, regional and national patient safety representatives, employer representatives and College of Paramedics members whose roles incorporate the clinical, educational, research and leadership pillars of the [Paramedic Career Framework](#) (College of Paramedics 2024).



A handwritten signature in black ink that reads 'K Lowery-Richardson'.

Kirsty Lowery-Richardson FCPara

Head of Education - College of Paramedics.

April 2024.

Introduction

This sixth edition of the Paramedic Curriculum will provide education providers and other stakeholders with a comprehensive resource to support the design and delivery of pre-registration education and training of paramedics throughout the UK. It is applicable to all routes of education including, but not limited to:

- BSc and BSc Honours
- MSc
- MSci

All of the above include traditional UCAS, employer supported and apprenticeship routes.

This curriculum represents an ongoing, important contribution by the professional body to the quality framework used to develop paramedics as they move through education, training and the early stages of professional practice.

The fourth edition of the College of Paramedics' Paramedic Curriculum Guidance included guidance on terminology from the Health and Care Professions Council. This terminology remains important enough for us to re-emphasise and maintain clarity in titles and positions as follows:

- Practice Educator (PEd) was previously known as Practice Placement Educator (PPEd)
- Practice-Based Education and Practice Based Learning were previously known as Practice Placement Education, and
- Learner was previously known as Student

[Paramedic Practice Based Learning – A Handbook for Practice Educators and Facilitators](#)

(Clarke 2020) is a supplementary resource that explains the importance of practice-based education, concerning the development of the 'Learner' in becoming a competent, capable registrant and member of the paramedic profession. The College of Paramedics is broadly supportive of the Newly Qualified Paramedic (NQP) preceptorship framework currently utilised by NHS ambulance services in England, Scotland and Wales; however, it also advocates that preceptorship should be available to ALL newly registered paramedics in order to support their transition into a fully autonomous role regardless of employer or practice area. The Paramedic Foundation Preceptorship programme, designed to work within the auspices of the current NQP framework, is in development by the College of Paramedics and should be implemented fully in 2025.

The Paramedic Curriculum 6th Edition has developed over the past 18 years to reflect the transition to higher education and continual development of the profession. This current edition brings many important changes. It acknowledges the recent update of the Standards of Proficiency for Paramedics by the regulatory body as well as the continual expansion in the

breadth of care delivered, with reference to; clinical decision-making, values-based practice, public health, mental health, learning disabilities, paediatrics, end of life care and research.

Education providers will recognise that the Paramedic Curriculum has been revised to reflect the expanding scope of practice for paramedics, specifically at the point of registration and during the period of support that is necessary for the development of effective registrants.

This Paramedic Curriculum does not stand alone in providing a curriculum framework for paramedics. Closely linked are other important documents that strongly influence the standards and quality of paramedic education:

- [HCPC Standards of Education and Training](#) (HCPC 2017)
- [HCPC Standards of Proficiency – Paramedics](#) (HCPC 2023)
- [HCPC Standards of Conduct, Performance and Ethics](#) (HCPC 2024)
- [QAA Subject Benchmark Statement – Paramedics](#) (QAA 2019)
- [The Frameworks for Higher Education Qualifications of UK Degree-Awarding Bodies](#) (QAA 2024)
- [The UK Quality Code for Higher Education](#) (QAA 2023)
- [Paramedic Practice Based Learning – A Handbook for Practice Educators and Facilitators](#) (Clarke 2020)

In creating this 6th Edition of the Curriculum, we have removed the section entitled Principles of Paramedic Programme Management (previously section B of the 5th Ed Curriculum Guidance), the content of which will now sit in a new supplementary document entitled *Programme Management Guidance* (CoP 2024).

An additional supplementary document to complement Section P1 (Practice-Based Education and Learning) is the *Principles of Practice Based Learning for Paramedics* (CoP 2024).

Purpose

The purpose of the paramedic curriculum is to produce contemporary paramedics at the point of registration enabled to enter clinical practice in a setting where they will encounter an unpredictable and undifferentiated case load. The new registrant will also be prepared for further development across all of the four domains of practice.

The College of Paramedics defines a paramedic at the point of registration as:

An independent, graduate-level, generalist clinician commencing a journey of lifelong learning. Approaching their patients holistically, they draw on a range of systems-based assessments, diagnostic tools, and interventional skills; and are able to manage an undifferentiated, diverse, and complex case-load of patients, including the critically ill and injured, doing so in environments over which they have limited control. They advocate for their patients, stratifying risk and navigating changeable health and care systems to implement appropriate person-centred management plans autonomously, and as part of a multidisciplinary team. They support and supervise colleagues, as well as seek advice and support when needed. They exhibit professional values, attributes, skills and knowledge across the four domains of practice that are underpinned by ethical reasoning, research and evidence.

The paramedic curriculum will enable a workforce that reflects the changing needs of patients encountered in emergency and urgent care settings. The modern paramedic will continue to be extremely well-prepared for work in evolving emergency ambulance roles; however, they will be capable of working in a variety of settings where unscheduled care is delivered and will continue to be a great asset across health and care systems.

Curriculum adherence and endorsement of programmes

The College of Paramedics is committed to enabling all education providers to engage with its Paramedic Curriculum (6th Ed). We are therefore designing an endorsement process that is accessible and inclusive with the aim of supporting all facilitators of paramedic education to demonstrate curriculum adherence to their partners, stakeholders and current and potential learners.

Further information on the endorsement process can be found in the *College of Paramedics Programme Endorsement Guidebook* (CoP 2024).



Curriculum Outcomes

This Paramedic Curriculum contains the intended learning outcomes necessary to be a safe and effective paramedic at the point of qualification. Each ILO has action verbs associated that align with academic levels four/SCQF 7 (certificate of higher education), five/SCQF 8 (foundation degree), and six/SCQF 9/10 (bachelor's degree). In higher education having learning outcomes mapped to these academic levels of learning is a requirement for university accreditation (Quality Assurance Agency, 2014) and subsequent HCPC approval (Health and Care Professions Council, 2017). As a graduate entry profession, all newly qualifying paramedics should be able to meet each of the ILOs in this curriculum in order to successfully complete a pre-registration programme of study.

The following intended learning outcomes (ILOs) have been developed to align to and support the [Health and Care Profession's Council Standards of Proficiency for Paramedics](#) (2023) and to ensure that paramedics complete education programmes suitably prepared and enabled for contemporary practice and career development in line with the College's Post registration [Career Framework](#) (College of Paramedics 2024).

Example of action verbs used in this curriculum:

Academic Level	Action verbs
4 / SCQF 7 Knowledge and comprehension	Discuss, explain, define, describe, recall, state.
5 / SCQF 8 Application and analysis	Analyse, differentiate, distinguish, apply, use, demonstrate.
6 / SCQF 9/10 Synthesis and evaluation	Evaluate, assess, judge, justify, create, plan, formulate.

Table derived from Newton et al., (2020).

N.B. Master's level programmes will have higher academic level ILOs than those in this document.

The intended learning outcomes in this curriculum combine the action verbs at each of the cognitive, affective, and psychomotor domains of competence deemed appropriate for the paramedic at the point of qualification after an extensive national consultation. As each ILO integrates action verbs at different academic levels, they lend themselves well to a spiral curriculum. Programmes may elect to use the outcomes in whole or part in their own curriculum by removing the action verbs that do not reflect the academic level of their learners at a given stage of their programme. Further information relating to how programmes can demonstrate how they meet these outcomes in full will be contained within the *College of Paramedics Programme Endorsement Guidebook (2024)*.



Pre-Registration Curriculum

The ILOs are presented in tabular form in the *College of Paramedics Programme Endorsement Guidebook (2024)* to facilitate identification and mapping for programme leads, they are also mapped to the *HCPC Standards of Proficiency for Paramedics* and *QAA Subject Benchmark Statement: Paramedics* in this document.

C1 Curriculum Content

This section describes key concepts and content underpinning the pre-registration curriculum domains required of a programme of study. During their studies, learners must explore each of the curriculum domains in order to facilitate successful application of their knowledge and understanding to their practice.

The curriculum is represented by component domains which are sub-divided into topics and areas of learning. Practice-based learning wraps around all of the domains as it is a key component of learning and development that encompasses all areas. Placing research and evidence-informed practice at the centre of the model reflects the College of Paramedics' view that this should underpin and reinforce each domain of the curriculum.

The College of Paramedics expects programmes to adopt a constructive alignment approach when developing their programme to ensure that learners actively engaged in meaningful learning experiences that facilitate the development and evaluation of desired knowledge, skills, and understanding.



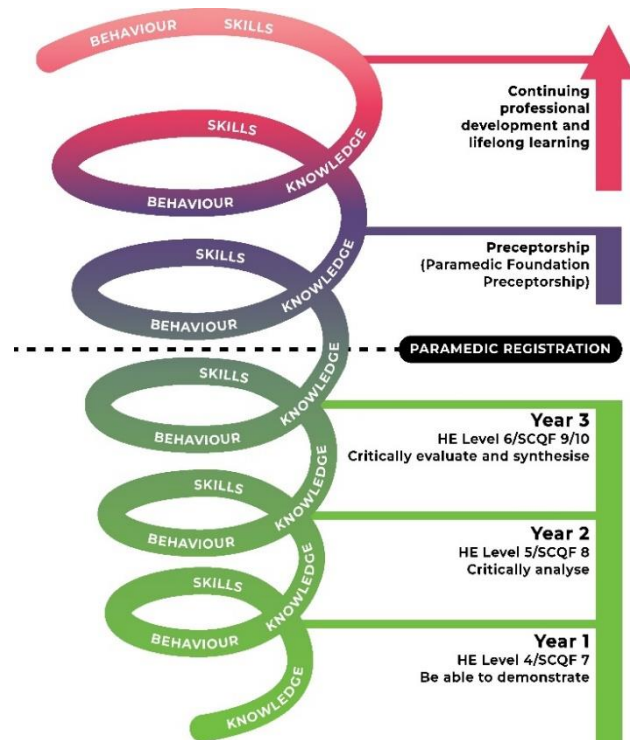
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Pre-Registration Curriculum

Spiral Curriculum

The College of Paramedics recommends that learners follow a spiral curriculum incorporating knowledge, skills and behaviours to enable them to effectively develop. This development should continue throughout the programme of pre-registration education, into the period of preceptorship and the individual's continued professional development and lifelong learning.



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Curriculum Domains

This section outlines each domain of the curriculum and the topics within. A numbered set of ILOs for curriculum mapping can be found in the College of Paramedics Programme Endorsement Guidebook (2024).

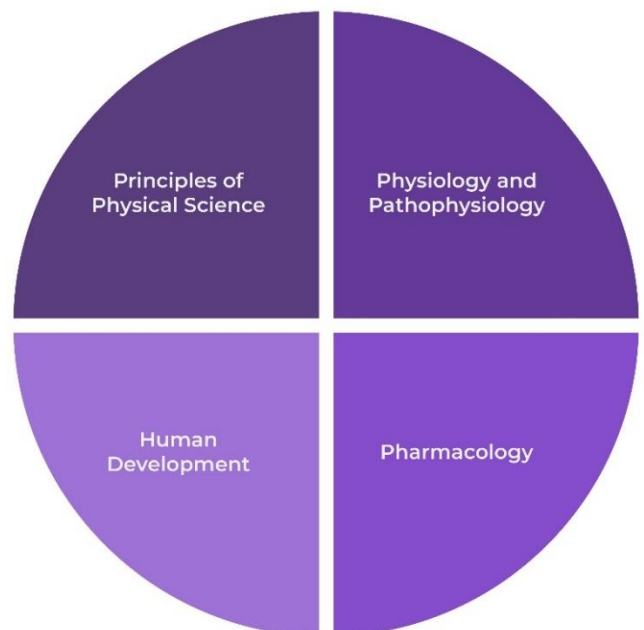
C1.1 Physical, Life and Clinical Sciences



Physical, Life and Clinical Sciences

This domain includes the topics:

Principles of Physical Science,
Physiology and Pathophysiology,
Human Development and
Pharmacology.





Pre-Registration Curriculum

C1.1 Physical, Life and Clinical Sciences

Principles of Physical Science	<p>Recall and apply fundamental principles of physics, chemistry, and biology; electrophysiology; and biomechanics and ergonomics; and evaluate how they relate to the process of formulating diagnoses in paramedic practice.</p> <p>Define, apply, and select the scientific units of measurement used in clinical and healthcare practice.</p> <p>Describe, apply, and evaluate the principles of physiological homeodynamics and how biological systems respond to acute and chronic stressors.</p> <p>Recall and use relevant anatomical, medical, and physiological terminology.</p>
Physiology and Pathophysiology	<p>Explain and apply the principles of human anatomy and physiology and analyse and evaluate human growth and development across the lifespan.</p> <p>Describe, analyse, and evaluate the aetiology of acute and chronic medical presentations across the lifespan.</p> <p>Describe, analyse, and evaluate the aetiology of traumatic presentations across the lifespan.</p> <p>Identify physiological observations in patients and evaluate their significance in relation to physiological and pathophysiological conditions.</p> <p>Describe, analyse, and interpret the relationship between cardiac anatomy and physiology and the components of an electrocardiogram (ECG).</p>
Human Development	<p>Describe, contrast, and evaluate the sequential stages of physiological and pathological human growth and development, including physical, cognitive, emotional, and social measures of maturation across the lifespan.</p> <p>Describe, analyse, and evaluate the impact of factors on individual vulnerability to injury or illness and treatment responses, including genetics, physical ability, cognition, health status, and social inequalities.</p> <p>Describe, analyse, and evaluate the biological and environmental determinants of health for individuals.</p>
Pharmacology	<p>Define and apply the principles of pharmacodynamics and pharmacokinetics.</p> <p>Describe and analyse the pharmacodynamics and pharmacokinetics of the medications administered by paramedics to treat service users under the Joint Royal Colleges Ambulance Liaison Committee Guidelines.</p> <p>Recall and contrast the legal mechanisms in UK law under which paramedics may administer medications to service users including exemptions to the relevant legislation, patient groups directions, prescribing, and local policy; and how these mechanisms contribute to safe medicines management.</p> <p>Describe the pharmacological action of drugs commonly encountered by paramedics that affect the following body systems: cardiovascular, digestive, endocrine, haematopoietic, immune, musculoskeletal, nervous, reproductive, respiratory, and urinary.</p> <p>Explain, demonstrate, and justify the safe administration of medications, and anticipate resulting physiological changes.</p> <p>Define, analyse, and evaluate pharmacological interactions of medications.</p> <p>Define adverse drug reactions and create management strategies for these reactions, including for anaphylaxis.</p> <p>Define, analyse, and interpret the presentation of toxidromes.</p>



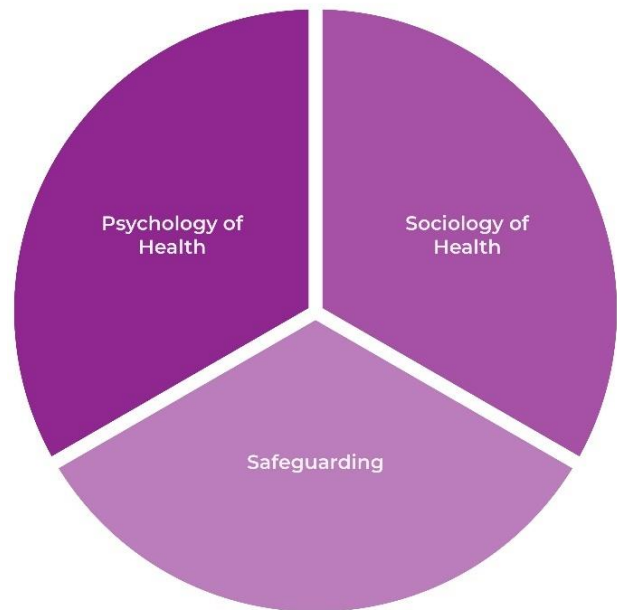
C1.2 Psychology, Sociology and Safeguarding

This domain includes the topics:

Psychology of Health,
Sociology of Health and
Safeguarding.



Psychology, Sociology, and Safeguarding





Pre-Registration Curriculum

C1.2 Psychology, Sociology and Safeguarding

Psychology of Health	<p>Discuss, analyse, and evaluate the psychological and behavioural determinants of health for individuals.</p> <p>Discuss, analyse, and appraise the psychological health needs of individuals.</p> <p>Describe, apply, and critique the key models of behavioural change.</p> <p>Discuss the principles of cognitive behavioural therapy.</p> <p>Describe and appraise the principles of motivational interviewing.</p>
Sociology of Health	<p>Describe, apply, and critique the fundamental principles of sociology in the context of the paramedic role.</p> <p>Define, analyse, and evaluate the concept of health inequalities using UK and global examples.</p> <p>Discuss, analyse, and evaluate the sociological determinants of health for individuals.</p> <p>Define 'cultural diversity' and apply this definition with respect to clinical practice.</p> <p>Discuss, analyse, and appraise the health needs of different social groups.</p> <p>Describe, analyse, and evaluate the impact of culture on health and illness.</p> <p>Describe and evaluate how health policy, health care systems, and the wider context of society impacts on health inequalities.</p> <p>Describe and analyse the major problems of health and health care delivery for marginalised patient groups in the UK (e.g., homeless persons, asylum seekers) and evaluate the role of paramedics in addressing these problems.</p> <p>Describe, analyse, and evaluate institutional prejudices and how these relate to your own perspectives.</p> <p>Discuss, analyse, and appraise how awareness, action, and advocacy are necessary to address healthcare inequalities.</p> <p>Describe and demonstrate an approach to patients from diverse backgrounds and evaluate when some patients require more input and advocacy than others.</p>
Safeguarding	<p>Describe, analyse, and appraise safeguarding legislation and local/national policy relating to safeguarding.</p> <p>Describe, demonstrate, and justify the safeguarding of children and adults according to legislation and local/national policy.</p> <p>Identify and analyse signs of abuse and neglect in individuals and groups and formulate appropriate care plans to safeguard them.</p>

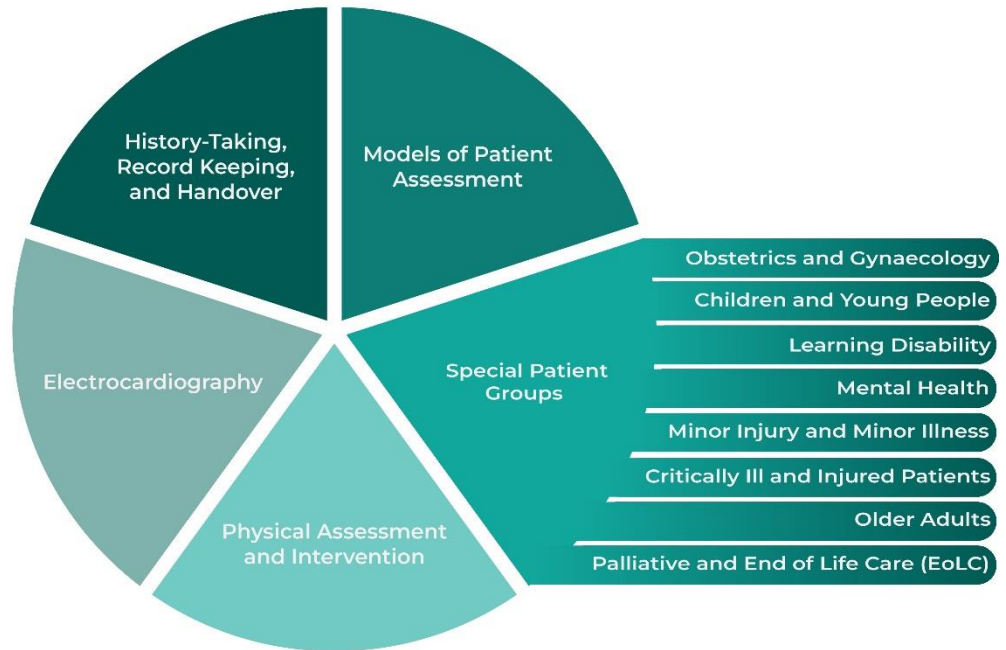


Pre-Registration Curriculum

C1.3 Clinical Assessment and Management



Clinical Assessment & Management



This domain includes the topics:

History Taking, Record Keeping and Handover,
Models of Patient Assessment,

Special Patient Groups:

- Obstetrics and Gynaecology
- Children and Young People
- Learning Disability
- Mental Health
- Minor Injury and Minor Illness
- Critically Ill and Injured Patients
- Older adults
- Palliative and End of Life Care (EoLC)

Physical Assessment and Intervention, and
Electrocardiography.



Pre-Registration Curriculum

C1.3 Clinical Assessment and Management

<p>History-Taking, Record Keeping, and Handover</p>	<p>Describe, analyse, and evaluate a structured and comprehensive health history.</p> <p>Explain, demonstrate, and develop accurate and comprehensive digital record keeping of service user health histories.</p> <p>Describe, demonstrate, and evaluate the importance of confidentiality, data protection and information governance in record keeping.</p> <p>Recognise, analyse, and appraise the varying needs of individuals, groups and/or carers, and modify communication accordingly when taking a history.</p> <p>Describe, demonstrate, and modify communication approaches to be culturally competent by asking about patients' viewpoints, culture, beliefs, and by showing humility.</p> <p>Describe and distinguish how a patient's genotypic sex, phenotypic sex, and gender identity may be divergent from their registered sex at birth and modify communication, assessment, management, and risk stratification strategies accordingly.</p> <p>Describe, demonstrate, and evaluate the accurate hand over of relevant information to other healthcare professionals.</p>
<p>Models of Patient Assessment</p>	<p>Describe and demonstrate the exploration of a patient's mental capacity and consent to assessment and treatment across the lifespan.</p> <p>Describe, demonstrate, and appraise models of patient assessment in practice.</p> <p>Describe, demonstrate, and appraise models of scene assessment and management in practice.</p> <p>Identify, demonstrate, and justify clinical and communication skills across the lifespan and in a range of different environments.</p> <p>Describe, demonstrate, and evaluate how models of patient assessment and management may require modification in austere environments, undifferentiated patients, emergency situations, and across the lifespan.</p>
<p>Special Patient Groups: <i>Obstetrics and Gynaecology</i></p>	<p>Describe and analyse the physiological process and stages of pregnancy and birth and evaluate their progress in practice.</p> <p>Describe and demonstrate facilitation of normal birth in the out of hospital environment, supporting choice, and addressing the psychosocial needs of the birthing parent and family.</p> <p>Describe and demonstrate management of the 3rd stage of labour, overseeing the safety of the birthing parent and the transition to extrauterine life for the neonate, including optimal cord clamping and thermoregulation.</p> <p>Recognise, distinguish, and formulate management plans for maternal conditions presenting in pregnancy and the year after birth, including sepsis, thromboembolism, maternal mental health, and cardiac arrest.</p> <p>Recognise, distinguish, and formulate management plans for conditions presenting in early pregnancy including miscarriage, ectopic pregnancy, and pre-eclampsia.</p> <p>Identify, assess, and formulate management plans for obstetric complications during pregnancy including eclampsia and ante-partum haemorrhage.</p>



Pre-Registration Curriculum

C1.3 Clinical Assessment and Management

	<p>Identify, distinguish, and formulate management plans for obstetric emergencies during labour including cord prolapse, upright vaginal breech birth, shoulder dystocia, and post-partum haemorrhage.</p> <p>Describe and demonstrate Newborn Life Support (NLS) including pre-term and full-term babies.</p>
<i>Children and Young People</i>	<p>Identify, interpret, and evaluate signs and symptoms including physiological observations associated with illness or injury in children and young people.</p> <p>Select, apply, and appraise developmentally appropriate language to build therapeutic relationships and alleviate anxiety in children and young people.</p>
<i>Learning Disability</i>	<p>Identify, interpret, and evaluate signs and symptoms including physiological observations associated with illness or injury in people with a learning disability.</p> <p>Select, apply, and appraise developmentally appropriate language to build therapeutic relationships and alleviate anxiety in people with a learning disability.</p>
<i>Mental Health</i>	<p>Define and analyse mental health and wellbeing and evaluate the role of paramedics in mental health promotion.</p> <p>Discuss, analyse, and critique the stigma and discrimination associated with mental health presentations.</p> <p>Identify and assess the signs and symptoms of common mental health disorders across the lifespan (e.g., anxiety disorders, depression, and acute stress reactions) and justify the provision of timely and appropriate care and support.</p> <p>Describe, implement, and evaluate management plans for patients with a severe mental health disorder across the lifespan (e.g., suicidal ideation, psychosis, and delirium) including risk assessment and safety planning.</p> <p>Describe and differentiate dementia and delirium to develop appropriate management and/or referral plans.</p> <p>Discuss, apply, and appraise the impact of regulatory and statutory guidelines, legal frameworks, and other national legislation associated with mental health presentations.</p>
<i>Minor Injury and Minor Illness</i>	<p>Describe, analyse, and appraise minor illness pathophysiology including the identification of red flag symptoms and the use of diagnostic tools to inform safe management.</p> <p>Support the treatment of patients across the lifespan presenting with minor illnesses in appropriate non-emergency settings and using appropriate referral pathways.</p> <p>Discuss, analyse, and formulate plans for definitive management of minor injuries, including identification of red flag symptoms and use of appropriate referral pathways (e.g., GP surgeries, minor injury units, and other facilities).</p>
<i>Critically Ill and Injured Patients</i>	<p>Describe and analyse the presentation of critically ill and injured patients and formulate plans for their definitive management.</p> <p>Explain, apply, and evaluate the role of trauma triage tools, national guidelines, and local policies in the care of the critically injured patient.</p> <p>Discuss, apply, and evaluate the role of national early warning score tools in the care of the critically ill patient.</p>
<i>Older Adults</i>	<p>Describe, analyse, and evaluate the significance of traumatic injuries in older adults.</p>



Pre-Registration Curriculum

C1.3 Clinical Assessment and Management

	<p>Discuss and assess the causes and consequences of falls and evaluate these causes and consequences for older adults.</p> <p>Discuss and analyse the five frailty syndromes (e.g., falls, immobility, delirium, incontinence, and side effects of medication) and evaluate their impact on older adults.</p> <p>Describe, analyse, and evaluate clinical frailty.</p>
<i>Palliative and End of Life Care (EoLC)</i>	<p>Recognise and analyse the signs of when somebody is imminently dying due to an irreversible process and support them to realise their preferences by formulating care plans that address the five priorities of care for the dying person.</p> <p>Recognise, demonstrate, and prioritise the initial assessment and management of symptoms causing distress in EoLC.</p> <p>Describe and apply the procedural, legal and ethical aspects of advanced care planning, palliative care, and EoLC and justify the use of anticipatory prescribing medications.</p> <p>Describe, demonstrate, and justify the procedural, legal and ethical aspects of implementing Recognition of Life Extinct/Pronouncement of Life Extinct (ROLE/PLE) procedures.</p> <p>Describe, demonstrate, and plan appropriate care after death for patients.</p> <p>Discuss the implications of culture, spirituality, and faith that relate to death and dying both for the patient, their loved ones, and the community.</p> <p>Identify, analyse, and select appropriate approaches to communicating with bereaved people.</p>
Physical Assessment and Intervention	<p>Describe, demonstrate, and interpret a comprehensive set of physiological observations appropriate to the patient's age and condition.</p> <p>Identify, differentiate, and evaluate the influence of wider health determinants on the assessment findings.</p> <p>Describe, demonstrate, and interpret systematic physical examinations of service users across the lifespan using a systems-based approach.</p> <p>Describe and apply the use of appropriate assessment tools across the lifespan and evaluate the need to implement appropriate immediate interventions where necessary.</p> <p>Describe, demonstrate, and evaluate the importance of a person-centred stepwise approach to pain management that uses pharmacological, non-pharmacological, and biopsychosocial strategies.</p> <p>Identify, differentiate, and evaluate time-critical presentations including exacerbations of existing conditions across the lifespan.</p> <p>Describe, demonstrate, and justify the safe, effective, and appropriate resuscitation of patients across the lifespan.</p>
Electrocardiography	<p>Describe and demonstrate a systematic and accurate approach to the interpretation and reporting of the 12-lead ECG</p> <p>Describe, analyse, and interpret the relationship between ECG lead placement (including altered lead placement for posterior and Right ventricular views) and the different regions of the heart shown on the 12 lead ECG.</p>



Pre-Registration Curriculum

C1.3 Clinical Assessment and Management

Recognise, analyse, and interpret ECG changes that are indicative of conditions of cardiac origin e.g., acute coronary syndrome, arrhythmia, conduction abnormalities, cardiomyopathies, and ion channelopathies.

Recognise, analyse, and interpret ECG changes associated with non-cardiac medical conditions.

Identify, analyse, and evaluate the significance of ECG findings (including occasions of limited change in the ECG) within the broader context of patient assessment and diagnostic reasoning.



Pre-Registration Curriculum

C1.4 Ethics and Law

This domain includes the topics:

Equality, Diversity and Inclusion,
Legal Systems and Healthcare Law,
Frameworks for Professional Practice,
Philosophy in Paramedic Practice, and
Healthcare Ethics.



Ethics & Law





Pre-Registration Curriculum

C1.4 Ethics and Law

Equality, Diversity, and Inclusion	<p>Describe, analyse, and evaluate the importance of cultural humility and self-awareness for promoting an inclusive and non-discriminatory approach to interactions with all people.</p> <p>Recall, apply, and appraise national legislation and policies relating to equality and diversity.</p> <p>Describe and analyse Equality and Human Rights legislation and evaluate how it overlaps with health inequalities.</p>
Legal Systems and Healthcare Law	<p>Describe, apply, and appraise the legislation, policies, and legal systems that inform practice.</p> <p>Describe, demonstrate, and justify working within the legal boundaries of the profession.</p>
Frameworks for Professional Practice	<p>Describe, analyse, and evaluate frameworks for professional paramedic practice and the role of professional, statutory, and regulatory bodies (PSRBs).</p> <p>Define, analyse, and appraise HCPC standards and guidance in relation to maintenance of one's professional practice and fitness to practise (e.g., conduct, character, knowledge, skills, and health).</p>
Philosophy in Paramedic Practice	<p>Describe, apply, and appraise the key concepts of philosophy in relation to healthcare practice.</p> <p>Describe, analyse, and interpret the relationship between philosophy, ethics, and law in paramedic practice.</p> <p>Define, analyse, and evaluate one's own philosophical perspective and the potential impact on practice.</p> <p>Recognise and analyse how other people's philosophical perspectives may differ from one's own and evaluate how this has the potential to impact on practice.</p>
Healthcare Ethics	<p>Describe, analyse, and appraise how ethical principles and ethical frameworks relate to paramedic practice.</p> <p>Discuss, analyse, and evaluate the ethical issues associated with paramedic practice.</p> <p>Describe, analyse, and evaluate the ethical issues associated with the allocation of health resources e.g., health economics, National Institute for Health and Care Excellence guidance.</p>



Pre-Registration Curriculum

C1.5 Public Health and Well-being

This domain includes the topics:

Infection Prevention and Control,
Population and Public Health,

Health Education and Promotion, and
Resilience and Disaster Preparedness.



Public Health & Well-being





Pre-Registration Curriculum

C1.5 Public Health and Well-being

<p>Population and Public Health</p>	<p>Describe, analyse, and interpret the principles of epidemiology.</p> <p>Describe, differentiate, and appraise public health and population health approaches.</p> <p>Describe and demonstrate the principles of inclusive health care and evaluate the needs of people in inclusion health groups.</p> <p>Discuss, appraise, and judge how paramedics should contribute to equitable healthcare access for all groups.</p> <p>Describe, analyse, and critique the role of paramedics in identifying and minimising the risks for developing health conditions.</p> <p>Describe, apply, and integrate core concepts of population and public health including health inequalities, indices of multiple deprivation, health protection, and epidemiology.</p> <p>Describe and analyse public health priorities nationally and evaluate these priorities in the context of local demographics.</p> <p>Demonstrate an awareness of environmental impacts on health.</p>
<p>Health Education and Promotion</p>	<p>Recognise, demonstrate, and evaluate the paramedic's role in influencing behaviours that influence health.</p> <p>Describe, demonstrate, and integrate the basic theories of health promotion and education.</p> <p>Discuss, analyse, and critique the role of paramedics in health education and health promotion within the context of an inter-professional approach.</p> <p>Identify, demonstrate, and integrate a range of health promotion and health education approaches e.g., very brief advice, brief intervention, and signposting to other services.</p> <p>Discuss, analyse, and evaluate the role of nutrition in promoting health and preventing illness across the lifespan.</p>
<p>Resilience & Disaster Preparedness</p>	<p>Explain and evaluate the roles and functions emergency personnel involved in a major incident.</p> <p>Understand, apply, and justify assessment decisions using a major incident triage tool.</p> <p>Describe, analyse, and evaluate the concept of interoperability and related models and principles for major incidents.</p>
<p>Infection Prevention & Control</p>	<p>Describe, demonstrate, and appraise how infection prevention and control measures mitigate the spread of communicable diseases.</p> <p>Describe, analyse, and plan the necessary actions relating to the detection, control, and reporting of notifiable diseases.</p>



Pre-Registration Curriculum

C1.6 Personal and Professional Attributes and Development



Personal and Professional Attributes and Development

This domain includes the topics:

Communication Skills,
Personal and Professional behaviours, and
Personal Growth, Well-being, and
Resilience.





Pre-Registration Curriculum

C1.6 Personal and Professional Attributes and Development

<p>Communication Skills</p>	<p>Describe, apply, and appraise the theories of communication that inform effective interaction with service users, carers, peers, and other health care professionals.</p> <p>Define, demonstrate, and critique how verbal, non-verbal, and digital communication skills are necessary to facilitate the execution of professional responsibilities and to promote a culture of inclusivity and belonging.</p> <p>Describe, analyse, and select communication techniques that demonstrate professionalism, empathy, inclusivity, and compassion to create therapeutic relationships and collegiality.</p> <p>Identify and analyse the communication needs of service users and carers, and formulate plans to meet those needs.</p> <p>Identify, differentiate, and modify barriers to effective communication.</p> <p>Describe, demonstrate, and develop the communication and coaching skills needed for leading, influencing, motivating, and inspiring others.</p> <p>Describe, apply, and modify conflict resolution and de-escalation principles to defuse potential conflict situations.</p>
<p>Personal and Professional behaviours</p>	<p>Describe and demonstrate a professional approach, attitude, and behaviours and evaluate one's own practice in the context of the relevant standards and guidance.</p> <p>Describe, analyse and develop an understanding of one's own values and how they affect practice and relationships with colleagues and service users (e.g., situations of personal incompatibility)</p> <p>Describe and demonstrate values-based practice as a partner to evidence-based practice and evaluate its role in shared decision-making.</p> <p>Describe and apply the theories of emotional intelligence and evaluate personal self-awareness, self-management, social awareness, and management of personal and professional relationships.</p> <p>Describe and demonstrate the ability to critically reflect on the impact of one's attitudes and behaviours on professional practice.</p> <p>Describe the importance of mental health and wellbeing in the context of professional registration.</p>
<p>Personal Growth, wellbeing, and Resilience</p>	<p>Describe, analyse, and evaluate the factors that impact on personal wellbeing and resilience.</p> <p>Recognise, analyse, and evaluate when wellbeing is negatively affected in one's self and others.</p> <p>Describe and analyse the importance of support networks and evaluate the impact of discussing issues that affect personal wellbeing with others.</p> <p>Identify, analyse, and evaluate how fatigue, stress, emotional labour, moral injury, and post-traumatic stress disorder can affect one's physiology and psychological wellbeing.</p> <p>Describe, deploy, and appraise adaptive coping strategies to promote resilience through physical and psychological self-care.</p>



C1.7 Leadership and Non-Technical Skills

This domain includes the topics:

Situational Awareness,
Clinical Reasoning and Decision-Making,
Leadership and Teamworking, and
Human Factors.



Leadership and Non-Technical Skills





Pre-Registration Curriculum

C1.7 Leadership and Non-Technical Skills

Situational Awareness	<p>Describe, analyse, and evaluate the dynamic factors that contribute to individual and team situational awareness.</p> <p>Describe, manage, and evaluate risk and uncertainty by conducting ongoing dynamic risk assessments.</p> <p>Describe, demonstrate, and evaluate how to establish and maintain a safe practice environment for all.</p> <p>Describe, apply, and implement health and safety regulations (e.g., appropriate use of universal precautions, infection prevention and control, personal protective equipment, and vehicle safety devices).</p> <p>Recognise, demonstrate, and justify when to modify and adapt approaches with respect to the environment and situations encountered.</p> <p>Recognise, analyse, and appraise the interaction between situational awareness and clinical decision making.</p>
Clinical reasoning and Decision-Making	<p>Define, apply, and appraise clinical reasoning theories, demonstrating the capacity to identify how clinical reasoning ability develops and its role in providing safe and effective patient care.</p> <p>Identify, analyse, and evaluate the clinical decision-making process through application of effective history taking, physical examination, and hypothesis-driven inquiry from all available sources, underpinned by an understanding of epidemiology and likelihood ratios.</p> <p>Identify and interpret diagnostic tests, integrating pre-test probabilities and test sensitivity, and specificity, to inform clinical decisions.</p> <p>Identify, analyse, and construct accurate problem lists, utilise semantic qualifiers, and prioritise differential diagnoses, ensuring the formulation of safe, prioritised, and efficient management plans that consider patient preferences, co-morbidities, and available resources and pathways.</p> <p>Describe and demonstrate shared decision-making, through collaboration with patients, carers, and clinical teams, utilising guidelines, decision aids, specialist advice, and evidence-based practice, while upholding professional values and behaviours in the decision-making processes.</p> <p>Identify, analyse, and evaluate the needs of service users being discharged and recommend appropriate signposting, safety netting, referral, and/or re-contact options.</p> <p>Describe, analyse, and evaluate how cognitive biases may influence clinical reasoning and decision making</p>
Leadership and Teamworking	<p>Describe, analyse, and evaluate why leadership is essential across all four of the pillars of practice (clinical practice, strategic leadership and operational management, education, and research).</p> <p>Describe and demonstrate that leadership is a characteristic rather than a professional role or title.</p> <p>Describe and demonstrate inter-professional/multi-disciplinary working and evaluate one's ability to practice effectively as part of a multi-disciplinary team.</p> <p>Describe, demonstrate, and evaluate a range of leadership and management styles and theories.</p> <p>Describe, demonstrate, and evaluate a range of leadership and followership skills and behaviours.</p>



Pre-Registration Curriculum

C1.7 Leadership and Non-Technical Skills

	<p>Describe, demonstrate, and appraise the theories and techniques of effective team development and team working.</p> <p>Describe, analyse, and evaluate the concept of task-management in the context of leadership and team working.</p> <p>Recognise and analyse the importance of challenging stigma and prejudice through effective leadership and evaluate how this may help foster a positive culture regarding workforce mental health and wellbeing.</p> <p>Recognise, analyse, and evaluate the importance of mental health and wellbeing with regards to effective team leadership</p>
Human Factors	<p>Describe, apply, and integrate the principles of human factors/ergonomics as a discipline (e.g., an approach that seeks to improve system performance and optimise wellbeing of workers by promoting humanistic systems).</p> <p>Describe and analyse health and social care services as complex socio-technical systems and evaluate how policy, strategy, quality improvement and clinical governance processes influence the system.</p> <p>Describe, analyse, and appraise how humans interact with a complex socio-technical system (e.g., their surroundings, information/procedures, other team members, and equipment).</p>



Pre-Registration Curriculum

C1.8 Research and Evidence-Informed Practice

This domain includes the topics:

Accessing Evidence,
Understanding Evidence,
Evaluating Evidence, and
Evidence-Informed Practice.



Research and Evidence-Informed Practice





Pre-Registration Curriculum

C1.8 Research and Evidence-Informed Practice

Accessing Evidence	<p>Describe, demonstrate, and develop a systematic approach to the retrieval of evidence for use in paramedic practice.</p>
Understanding Evidence	<p>Identify, differentiate, and appraise evidence that is not research (e.g., report literature, clinical practice guidelines, anecdotal evidence).</p> <p>Recognise, analyse, and appraise research of qualitative, quantitative, and mixed methods designs.</p> <p>Identify, analyse, and appraise emerging research methodologies and their relevance to paramedic practice.</p> <p>Describe, analyse, and evaluate the empirical research process including hypothesis/question formulation, ethical approval, sampling/recruitment, governance, publication, and dissemination processes.</p> <p>Identify, apply, and interpret the terminology used in research.</p> <p>Explain, analyse, and evaluate how the philosophical assumptions of a researcher (e.g., axiological, ontological, and epistemological assumptions) influence the approach taken when undertaking research.</p> <p>Describe, analyse, and appraise why different methodological approaches in research are necessary.</p> <p>Describe, analyse, and assess research ethics in paramedic practice.</p>
Evaluating Evidence	<p>Describe, apply, and evaluate the process of critical appraisal of research articles and other forms of evidence.</p> <p>Describe and apply hierarchies of evidence and evaluate their role in evidence-based practice.</p> <p>Describe, analyse, and evaluate the importance of patient and public involvement and engagement in research.</p>
Evidence-Informed Practice	<p>Identify, apply, and appraise appropriate evidence to justify practice.</p> <p>Explain, analyse, and evaluate why philosophical assumptions in research are relevant when translating research into practice.</p> <p>Describe, analyse, and appraise why different methodological approaches are important to consider when translating research into practice.</p> <p>Describe, apply, and evaluate the principles and tools of quality improvement.</p>



Pre-Registration Curriculum

Practice Based Education and Learning

P1 Practice Based Education and Learning

High quality practice learning opportunities are critical to the development of paramedics who are suitably equipped with the behaviours, knowledge, and skills to demonstrate competence across the domains of practice, it is essential in providing learners with the opportunities to continue and contextualise their learning.

P1.1 Practice Based Education

The College of Paramedics believes the provision of practice-based education within a pre-registration programme is no less important than high quality theoretical teaching and learning; it should enable learning in a variety of environments and settings, ensuring that the learner has extensive exposure to a wide range of service users (and clinical presentations), and environments, as well as robust learning opportunities supported by subject matter experts. As a key contributor to health and care delivery across systems, paramedics should recognise their diverse capabilities and understand the contribution they make to patient care as part of a patient journey.

There may be some re-visiting of practice-based learning settings during the programme – for example periods in an urgent and emergency care setting which would fit with the ethos of the spiral curriculum as the learner assesses service users at an increasing level of understanding and complexity as they progress through their programme.

Education providers should be able to provide a rationale for the number, length and duration of practice-based education and learning periods in their programmes, including the numbers of specific days or weeks of exposure to demonstrate competence. They must map to specific and appropriate areas to meet identified learning outcomes, stages of development and competence for learners.

When considering the acquisition of knowledge and attainment of competence for paramedic learners, the *Baxter Magolda theory of self-authorship* provides a pedagogical underpinning that aligns with the paradigm of learning in practice.

The theory follows learners through a 4-stage process of acquisition of knowledge, though this process is predominantly linear it can be cyclic as reflection and consolidation take place:

Absolute knowing – able to obtain knowledge, recite facts, certainty between right and wrong.

Transitional knowing – understand information, able to pose questions, minimal uncertainty and development of curiosity.

Independent knowing – able to assess information, explore and apply knowledge and information, evaluation of independent thinking.



Pre-Registration Curriculum

Practice Based Education and Learning

Contextual knowing – integration of knowledge, application of context to the development and creation of knowledge, applying both practice and theory together to create new knowledge. Absolute and Transitional knowing can successfully occur in classroom based and theory led sessions, however practice based learning is a key component of the latter two categories of independent and contextual knowing, hence our recommendation is that ***the time allocated to practice based learning is no less than 30 weeks (1125 hours) across a pre-registration programme.***

This recommendation is the result of significant consultation with education providers, employers and learners; with a current lack of robust evidence the figure has been derived to enable both education and placement providers to work towards consistency and fair distribution of practice learning capacity for paramedic learners nationally.

It would however be a poor pedagogical approach to assume that all learners would develop their knowledge and skills in the same timeframe, so the college would anticipate that the majority of learners would benefit from around 40 weeks (1500 hours) of Practice Based Education and Learning across the duration of their studies.

Individual learners will have different needs, the approach to practice based learning and education should be adaptive to enable additional time and support to enable attainment of competence and growth in confidence in preparation for registration.

Of the Practice Based Learning time, the College would recommend that no less than 20% (6 weeks/ 225 hours) is targeted at practice experience in areas that are not front-line traditional ambulance (double crewed vehicle). This is to ensure that learners are exposed to a breadth of experiences and are supported in their learning by subject matter experts across all of the curriculum and practice domains.

P1.2 General Principles

The College of Paramedics is one of ten Allied Health Professional Bodies that has collaborated on the development of the [AHP Principles of Practice Based Learning](#). We believe these seven principles are imperative to driving high quality practice-based learning experiences for all:

Principle 1: Practice based learning opportunities are co-produced.

The development of the future paramedic workforce can be represented as a three-legged stool – learner, education provider, practice setting. Each leg may be separate, but they are also all essential. If one of the legs is missing, the common goal simply cannot be achieved.



Pre-Registration Curriculum

Practice Based Education and Learning

Principle 2: Practice based learning takes place across all areas, pillars and levels of practice.

UK health care is changing; as a result, where paramedics work and how we practice is changing too. The UK has an aging and growing population with more complexities than ever before. Alongside this there is both policy drive and patient desire for person-centred care closer to home. Care that is underpinned by a robust evidence base, where equity is promoted and communities are empowered. Practice is responding to these changes, so too must education.

Paramedics work across different sectors of health and care including the independent sector, the NHS, and voluntary organisations. They work in different settings including the community, GP practices, acute hospitals, charities, care homes, and universities. Paramedics work in roles across all four domains of practice – clinical, education, leadership, and research. The College of Paramedics Career Framework (2024) demonstrates how these domains are embedded within paramedic practice. Practice-based learning should provide a range of diverse experiences that reflect this.

Principle 3: Practice based learning environments must be inclusive and welcoming to all.

Our learners should experience a welcoming and safe environment within all aspects of their studies. Practice, universities and learners all have responsibility and a role to play in achieving this. We should be actively anti-racist, anti-discriminatory and anti-oppressive in our practice. To do this we need to identify, challenge and remove any structural barriers to achieving equity of opportunities and experience for everyone. This will provide safe placements and work environments which are paramount to our health, wellbeing, safe learning and our feeling of belonging.

Principle 4: Practice based learning uses flexible, appropriate and supportive models of supervision and delivery.

The College of Paramedics promotes use of varied and appropriate learner supervision models to meet the needs of learners and educators experienced in each practice setting. It is encouraged as appropriate and necessary that typical practice education should include peer-assisted learning, learning amongst interprofessional teams, long-arm supervision and multiple learner-to-educator models within practice-based learning.

Principle 5: Practice based learning is designed with a whole team approach.

Whatever the composition of the team, this approach enables learners to gain experiential knowledge, skills, behaviours and attitudes by being immersed in a practice environment to prepare for practice. We need to support everyone in identifying and developing the skills they need to excel in their role, broadening the formal and informal training opportunities available.



Pre-Registration Curriculum

Practice Based Education and Learning

Principle 6: All those involved in practice education feel valued, respected and recognised within their roles.

The work of everyone involved in supporting quality practice-based learning experiences cannot be underestimated. Through the creation of positive learning experiences and cultures, they have the ability to support and shape a positive introduction to a learner's chosen profession. Furthermore, without a breadth of quality placement opportunities being offered, there will be no future workforce. As such, it is vital that all those involved feel valued. Valuing, recognising and respecting the importance of all those involved in practice education is a shared responsibility, essential to the preregistration curriculum, to support our current learners, future workforce and to serve our communities.

Principle 7: Practice based learning is evaluated; capturing data to drive improvement and demonstrate impact.

Data tells us what we need to know about the value and impact that placements have. It tells us what is working well and where there may be frustrations or areas to improve upon. It can enable different approaches to be tested out and help support a case for change.

P1.3 Practice Based Education Areas

We know that the modern paramedic needs to be confident in their capabilities to deal with a wide variety of patients of varying complexity and differing needs. Exposure to patient groups that present with differing pathophysiologies is essential, as is the opportunity to learn from subject matter experts in the practice environment (including medics and other health and social care professionals). Not all practice experience is required to have a clinical focus, as learning is required across all curriculum domains and the four domains of practice (clinical, education, leadership and research).

There are many approaches to Practice based learning, the table below explores and defines a variety:

Adopted Term	Other terms used in the literature	Description/Definition
Placement Type/Model		
Hub & Spoke Model	<ul style="list-style-type: none">Umbrella placement	Students are allocated to named location or person as the 'Hub' but will undertake learning experiences with other professionals, departments or associated organisations, these are the 'spokes'
International Placement	<ul style="list-style-type: none">Student Exchange	Placements are located in a country away from the nation they are studying/resident in. They may or may not have a clinical component depending on the arrangements made at a local level.



Pre-Registration Curriculum

Practice Based Education and Learning

Peer-Enhanced Electronic Placement (PEEP)	<ul style="list-style-type: none"> • Online Placement • Virtual Placement 	An alternative to face-to-face placements using an online learning environment and a mixture of group and individual work. Students take responsibility for a virtual caseload and conduct interviews with 'patients'. Students work through clinical processes using their professional reasoning and complete guided reflections. The PEEP model is supervised and assessed by practice educators and academics.
Project-Based Placement	<ul style="list-style-type: none"> • Hybrid Placement • Blended-Learning Placement • Research Placement 	<p>This type of placement is often blended with a virtual model or a traditional approach with a shorter face to face time. It is defined by the student being involved with development of a specific project with a measurable output for the provider and student.</p> <p>Placements which focus on student involvement in a research specific project also come under this definition</p>
Role-emerging Placement	<ul style="list-style-type: none"> • Non-traditional • Professionally distant context • Interprofessional placement 	This terminology typically describes when the student is placed within an organisation, or an area of service, where there is currently no paramedic employed. Different terminology for this is used across other professions to describe this type of placement model but the key defining feature is that professions are mixed with students and practice educators linked by common learning goals and not specific clinical competencies in their own field.
Simulated Placement	<ul style="list-style-type: none"> • Virtual placement 	<p>Simulated placements aim to replicate a physical clinical environment using technology such as mannequins and actors.</p> <p>This is distinct from the use of simulation within taught activities and/or associated with typical teaching experienced by learners.</p>
Student-Led Clinic	<ul style="list-style-type: none"> • Dedicated Education Unit • Clinical Education Wards • Student-Led group • Collaborative Learning Unit 	<p>Education institutions and/or a healthcare provider set up a clinic, ward or unit that is staffed by students from various stages of education who lead in the management of patients in this environment.</p> <p>It can use several different modes of supervision but generally adopts peer-assisted learning and long-arm supervision to facilitate student development and maintain patient safety</p>
Traditional Placement	<ul style="list-style-type: none"> • Traditional model • Traditional Fieldwork • Standard Placements 	A location accepted to be 'core' for the profession e.g., paramedic placements in emergency ambulance services
TECS (Technologically enhanced care services)		Those involving technologies such as telehealth, telecare, telemedicine, tele-coaching and self-care apps as models of service delivery.
Virtual Placement	<ul style="list-style-type: none"> • Simulated Placement • Technology Assisted Placement • Telehealth placement 	These are practice learning activities that take place exclusively online, without any physical presence in specified environment. An example of this is the distinct PEEP framework, this is presented separately as it has an established model whereas the term virtual placement can be used to define a range of online activities. Virtual placements can include shadowing online consultations, delivering clinical advice or rehabilitation/Health Promotion via online classes, online projects or student-led online clinics with a specific caseload.

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Owen Barr, Ulster University.	Ruth Fisher, Queen Margaret University	Sue Boardman, Sheffield Hallam University.
Patricia Gallagher, NHS Education Scotland.	Sakina Waller, University of Huddersfield.	Thomas McCallum, NHS Education Scotland.
Patrick Hunter, College of Paramedics.	Samantha Paterson, Glasgow Caledonian University.	Thomas Morrell, London Ambulance Service.
Paul Jones, University of Central Lancashire.	Sammer Tang, College of Paramedics.	Tim Butterill, University of Hull.
Paul Maze, Welsh Ambulance Service Trust.	Samuel Duncan, College of Paramedics.	Dr Tim Edwards, London Ambulance Service.
Paul Tolley, West Midlands Ambulance Service.	Samuel Fisher, Sheffield Hallam University.	Tim Hayes, Anglia Ruskin University.
Paul Watson, College of Paramedics.	Saoirse Allen, College of Paramedics.	Timothy Weeks, New Buckinghamshire University.
Paula Treadwell, University of Sunderland.	Sarah Smith, Queen Margaret University.	Tina Spittle, Staffordshire University.
Pauline Cranmer, London Ambulance Service.	Sarah Todd, College of Paramedics.	Tom Hewes, University of Swansea.
Pete Gregory, University of Wolverhampton.	Scott MacKenzie, University of West of Scotland.	Tony Jackson, University of Sunderland.
Peter Phillips, University of Bournemouth.	Shannon Gorman, Paramedic student.	Tony Spence, Yorkshire Ambulance Service.
Peter Turner-Wells, College of Paramedics.	Sharon Seddon, University of Cumbria.	Tracey Bickell, University of Portsmouth.
Phil Withers, University of Hertfordshire.	Sharyn Edwards, Sheffield Hallam University.	Tracey Samuel-Smith, Health and Care Professions Council.
Rachel Newall, South Central Ambulance Service.	Sian Cowell, College of Paramedics.	Tristan Henderson, University of Plymouth.
Rachel Pogson, Keele University.	Sian Lloyd, University of Wrexham.	Dr Ursula Rolfe, University of Bournemouth.
Rebecca Connolly, College of Paramedics.	Simon Butler, Peterborough GP Network/University of Cambridge.	Victoria Burnham, Scottish Ambulance service.
Richard Nicholson, Anglia Ruskin University.	Simon Robinson, College of Paramedics.	Victoria McGaughey, College of Paramedics.
Richard Webb, College of Paramedics.	Sona Mojizisova, Queen Margaret University.	Dr Vince Clarke, College of Paramedics.
Rob Cawston, University of Bedford.	Stephanie McIntyre, Paramedic student.	Vincent Romano, North West Ambulance Service.
Rob Isherwood, University of Portsmouth.	Steve Carter, University of Coventry.	Will Broughton, New Buckinghamshire University.
Rob Slee, University of Greenwich.	Steve Barren, East of England Ambulance Service.	Zlata Skavova, Queen Margaret University.
Rory McKelvin, University of Bolton.	Steven Christopher, Independent.	

