This is a peer-reviewed, post-print (final draft post-refereeing) version of the following published document, This document is the Accepted Manuscript version of a Published Work that appeared in final form in Journal of Paramedic Practice, copyright © MA Healthcare, after peer review and technical editing by the publisher. To access the final edited and published work see https://www-magonlinelibrary-com.glos.idm.oclc.org/doi/full/10.12968/jpar.2016.8.2.66. and is licensed under All Rights Reserved license:


DOI: 10.12968/jpar.2016.8.2.66
EPrint URI: http://eprints.glos.ac.uk/id/eprint/6233

Disclaimer

The University of Gloucestershire has obtained warranties from all depositors as to their title in the material deposited and as to their right to deposit such material.

The University of Gloucestershire makes no representation or warranties of commercial utility, title, or fitness for a particular purpose or any other warranty, express or implied in respect of any material deposited.

The University of Gloucestershire makes no representation that the use of the materials will not infringe any patent, copyright, trademark or other property or proprietary rights.

The University of Gloucestershire accepts no liability for any infringement of intellectual property rights in any material deposited but will remove such material from public view pending investigation in the event of an allegation of any such infringement.

PLEASE SCROLL DOWN FOR TEXT.
A call for research into the link between professional practice and education

Matt Perry, lecturer, Oxford Brooks University; Keith Bromwich, lecturer, Oxford Brookes University; Matt Catterall, principal lecturer and programme lead, Oxford Brookes University.
Email for correspondence: mattperry@brookes.ac.uk

There is no universally accepted definition of the criteria that makes a profession, nor what factors contribute to professionalisation of a specific industry. Definitions by Greenwood (1984), van Mook et al (2009) and Mahony (2003) provide a brief comparison of the attributes of a profession and being professional. Greenwood (1984) offers a succinct definition of a profession, identifying they possess a systematic body of theory and community authority, while van Mook et al (2009) suggest it is expertise in a particular domain that contributes most to professionalism. Additionally, Mahony (2003) argues that the controlling of education is key to being a profession and being professional. Mahony (2003) further suggests having specialist knowledge with autonomy and specific professional ethics are essential elements in developing professionalism. The concept of professionalism is therefore interwoven with education.

While university programmes educate paramedics, there has been little research conducted on how paramedic-specific education may alter the development of an out-of-hospital care profession. Some evidence from developed ambulance services indicates education improves patient care (Spaite et al, 2000; Giddens et al, 2012), and currently this is postulated as a major driver for UK paramedics to undertake higher level academic programmes of study.

Globally this perspective is not universally accepted as necessary for paramedics. Advocates for the use of medically-controlled treatment protocols, rather than enhanced workforce education and professionalisation, remain (Halter et al, 2011). Despite research around this increasingly divergent debate within the profession, it remains unclear from the literature if any one model of service provision has particular advantages for developing an ambulance service. Furthermore, few studies have considered the impact of non-tertiary training courses in terms of professional development.

Many countries, such as Germany and the US, largely remain convinced that paramedic practice should stay under physician leadership (Roudsari et al, 2007). In these settings, existence of a body of knowledge, without acceptance by associated professions, is unlikely to provoke the same innovations seen in mature professional and independent paramedic practice witnessed in the UK, Australia and New Zealand. We propose that within these settings it is critical other aspects of professionalism, such as community recognition and authority from medical and paramedical colleagues, are essential features to achieve and maintain professional status.

We suggest research should be undertaken to discover the extent of education in the out-of-hospital
health workforce. For example, a population survey of paramedics in the UK would identify levels of education, training and career planning. Together with supporting research into the experiences of paramedics and examination of paramedic practice, this would contribute to identification of specific professional features within this cohort. In this way the policies, planning and delivery of paramedic-specific tertiary education programmes can be grounded in evidence, thus enhancing the care such practitioners provide.

References


