



Extended Research Article

Clinical and cost-effectiveness of paramedics working in general practice: a mixed-methods realist evaluation

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Disclaimer: This report contains transcripts of interviews conducted in the course of the research, or similar, and contains language which may offend some readers.

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Plain language summary

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Plain language summary

There is a shortage of doctors to meet demand in general practice. Other healthcare professionals, including paramedics, are being employed. Little is known about how best to utilise paramedic skills in this setting. We wanted to understand whether and how paramedics meet the needs of patients, practices and the wider National Health Service, as the general practice surgery is different to the emergency ambulance service role. We used 'realist evaluation' methods to look at different models of paramedics in general practice (we call this 'paramedic working in general practice'). Realist evaluation asks what works, for who, and in what circumstances. This approach is well suited to the different ways paramedic working in general practice operates across the country. We reviewed relevant existing documents, research and reports, and spoke to leaders and experts about paramedic working in general practice. We then recruited 34 'case study' GP practices in England, both with paramedics and without. We collected 2 questionnaires, 30 days apart, from 489 patients who had seen a paramedic or a general practice. These questionnaires helped us compare people's health outcomes, safety concerns, and what services or resources they used (such as hospital appointments and medicines). We interviewed 69 people, including patients, general practitioners, paramedics and other practice staff. We also analysed consultation records from over 22,000 appointments. We combined (integrated) all of these results together to develop and test our theories about paramedic working in general practice. We concluded that paramedic care could help improve access to general practice services without substantial costs or savings for the National Health Service, and we found no important differences in outcomes for patients. However, it is important that patients are supported to understand the paramedic working in general practice role. We found that appropriate initial training and ongoing supervision are important for paramedic working in general practice to be safe and effective. Additional research, using different study designs, is important to better understand the impact of paramedic care on National Health Service costs and patient outcomes.

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