

# Experiences and Perspectives of Paramedic Medication Prescribing: A Qualitative Reflexive Thematic Analysis

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## INTRODUCTION

In some areas, such as the UK, paramedics can work as independent non-medical prescribers (NMP).<sup>1</sup> This allows appropriately qualified paramedics to independently prescribe, or deprescribe, medications within their capabilities.<sup>2,3</sup>

Some see NMP as a way to improve access to healthcare and relieve system pressures.<sup>4-7</sup> However relatively little is known about the experiences of paramedics working in this role, especially when compared to other NMPs, such as nurses and pharmacists.<sup>8</sup>

This study investigated the experiences of paramedics engaged in medication prescribing. It was hoped better understanding challenges and facilitators to practice may **i)** inform priorities for future practice and **ii)** offer insights for other health systems considering similar models of care.

## METHODS

Participants were recruited via local networks. This included paramedics working as NMPs, or those involved in its policies, who shared their experiences in semi-structured interviews. These were recorded and analysed using Braun and Clarke's framework, with inductive coding completed at the semantic level.<sup>10,11</sup> Ethics approval and consent were obtained.<sup>12</sup>

Reflexive thematic analysis complemented by critical realism and complexity theory was used.<sup>13,14</sup> This helped the research team consider how paramedic NMP fits in a system, rather than existing as a skill in isolation.

## KEY LEARNINGS

- **Supportive systems are essential:** strong training and clear frameworks build confidence, ensure safe practice, and strengthen professional identity.
- **Education and governance are key:** strong training and a standardised governance structure can build confidence, ensure safe practice, and strengthen professional identity.
- **Prescriber voices must guide reform:** their experiences highlight priorities and should inform future policy and models of care.

## RESULTS

Six interviews were conducted, with a mean duration of 52 minutes. The four themes produced are shown below.

### An Evolving Identity

*"The paramedic drives the ambulance"... it's often challenged by the medical profession.'*

The identity of the paramedic prescriber was seen as evolving, with ongoing efforts to establish recognition among professionals and the community.

### Developing Prescribers

*'I've kind of gradually [developed] through reflection, through peer support, through discussion.'*

Participants highlighted the importance of both structured and informal supports, including ongoing training, mentoring, and interprofessional collaboration.

### Regulation and Policy

*'You could go your entire career and never be audited...'*

Improved regulatory and policy frameworks were viewed as key, with concerns over current systems and calls for future-focused policies and advocacy.

### Foundations for Future Success

*'There's a big disparity...pharmacists and nurses prescribe anything and everything.'*

Long-term success hinged on professional parity, with disparities noted in education, opportunities, and prescribing rights compared to other professions.

## CONCLUSION

Independent prescribing for paramedics has had a significant impact on both the primary care landscape and paramedic professional identity.

Prescriber experiences provide essential evidence for guiding reform. Their insights underscore the need for robust education, governance, and regulatory frameworks that promote safe prescribing, enhance portability, and strengthen confidence..

## REFERENCES

Please scan the following QR code for an online reference list.

