

Chapter 1

What is a Practice Educator?



Learning objectives

1. Rationale for the role of PEd
2. Scope of the PEd role
3. Formal versus informal support
4. Teaching in practice

This chapter will outline the rationale and evolution of the PEd as well as showing the suggested boundaries of PEd practice. Teaching theory will be briefly discussed to assist the PEd in their role.

Paramedic education has moved almost exclusively from traditional 'in-house' education to higher education. Since this move, there are greater demands being placed on practice educators, mentors, paramedics and indeed anyone who supports paramedic learners whilst in education and practice. The College of Paramedics (2015) states:

[Placements] must be undertaken with appropriately trained and registered paramedic educators (PEds) so that every patient encounter becomes an opportunity for learning to prepare the contemporary learner paramedic for ongoing development within evidence-based autonomous practice.

The Health and Care Professions Council (2017) states in SET 5.5:

We also expect you [the education provider] to make sure that the qualifications and experience of staff are appropriate to the specific aspects of practice-based learning they are involved in, and that they are able to effectively support learning and assessment.

Thus, it is vital for PEds to have sufficient education and indeed resources to support their role.

The College of Paramedics (2015) requires that the PEd:

[E]nsures that they also help to educate and guide learners through their practice placement experiences.

The College of Paramedics (2015) further states:

The role of the paramedic educator is extremely important and comes with significant responsibility. The actions and examples set by the paramedic educator during clinical placements have lasting consequences, which include positive and negative influences.

Learners identified a number of key areas that they expected from a PEd: communication, support, organisation and qualities such as appropriate use of humour and being accepted by their PEd (Lane, 2014).

Clearly, the PEd role is a very significant one and, whilst it provides support to learners, is one that also requires support from others to ensure its effectiveness.



Reflection

What does support of learners *actually* mean? Explain in your own words.

There a number of words associated with support:

- Provision
- Backing
- Facilitation
- Establishment

How do these words relate to the role of the practice educator?

Formal versus Informal Support

As previously stated, the Health and Care Professions Council (2017) and the College of Paramedics (2015 and 2017a) have guidelines as to who should be a PEd, and provide formal support in the practice environment. However, it is argued that there is a valuable place for informal guidance,

mentorship and practice-based education. Mohtady et al. (2016) argue that informal and formal support are complementary and equally important within healthcare.

Informal support can theoretically be provided by any individual in contact with the learner. For example, in the practice environment, ambulance technicians and emergency care assistants (ECAs) can be a valuable source of learning. It is important to remember that the learning opportunities provided in an informal manner should be provided by the most appropriate people in the same way that formal support is provided. For example, it may be unreasonable to expect an ECA to provide support for a learner in an advanced assessment technique. However, they are likely to be very adept in supporting the learner in communication skills or basic airway manoeuvres.

How Experienced Should a PEd Be as a Clinician?

There has been anecdotal discussion about how much experience a clinician should have prior to becoming a PEd, but there is no definitive answer to this debate. The College of Paramedics (2017b) suggests that PEds will usually be paramedics selected from the Health and Care Professions Council register, who are at least 12 months post-qualification. However, this is not a requirement and may not always be put into practice. Lane (2014) states that learners:

... seemed to be looking for experienced PEds who were knowledgeable about their Higher Education (HE) programmes and had a genuine desire to mentor them.

Yet, this statement still does not address the amount of time that should elapse between qualification and PEd status. Likewise, Health Education England (undated) states that the:

Provider must ensure that learners have an appropriate level of supervision at all times by an experienced and competent educator, who can advise or attend as needed.

In the absence of a well thought-out and researched timeframe, it could be argued that there should not be a set amount of time post-registration as individuals develop and gain experience at different rates. In addition, background, previous employment roles and other personal experiences may well play a large part in a person's ability to be an effective PEd. It is therefore suggested that rather than a set amount of time, a robust selection process may be more effective in assessing suitability for the role of PEd. The details of the selection process would be best determined nationally

and therefore this is outside the scope of this text, although certain areas are recommended by Nasser-Abu Alhija and Fresko (2014) (see Figure 1.1).



Figure 1.1 Examples of personal qualities of a PEd
(adapted from Nasser-Abu Alhija and Fresko (2014))

How Many PEds are Too Many?

Again, this is an ongoing and controversial issue with no real resolution. Some learners express the desire for one PEd only, whereas other learners prefer multiple PEds (Lane, 2014). Certainly, having one PEd should provide consistency for the learner, which could be disrupted by multiple PEds. Conversely, multiple PEds are likely to give a more diverse experience and knowledge base for the learner to further their development. In other words, the learner can select the most appropriate part of each PEd's practice and integrate this into their own practice. This point is argued by Kostrubiak et al. (2017), who state that learners benefit from multiple mentors, as each will have different abilities and strengths, all of which may not be present in a single person. However, it is also recognised that too many PEds could be unhelpful for the learner, as they may feel like they are starting afresh every time they attend a placement (Lane, 2014). It is recommended that a balance is sought between too many and too few PEds. It is likely this will be an individual requirement for each learner. Thus, discussions should be had with the learner to ensure they are receiving the most appropriate range of PEds for their needs.

Is a PEd a Teacher?

It could be argued that education and teaching are the same concept; however, the definitions demonstrate a subtle difference, in that education is the *facilitation of learning*, whereas teaching is the *imparting of knowledge*. Teaching thus suggests a directive approach that is potentially in opposition to education, which supports a person to learn. The imparting of knowledge is within a PEd's role; however, this should take place in an environment