

Community Paramedicine in a Rural FHT West Carleton Family Health Team (WCFHT)

AFHTO Conference
2015

Beverley Atkinson
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Presenter Disclosure

- **Presenters:** **Beverley Atkinson/Steve Pancino**
- **Relationships with commercial interests:**
 - **Grants/Research Support: None**
 - **Speakers Bureau/Honoraria: None**
 - **Consulting Fees: None**
 - **Other: None**
- **Disclosure of Commercial Support**
 - **None**

Community Paramedicine (CP) Program

- In 2014 the Ministry of Health and Long Term Care (MOHLTC) distributed \$6 million dollars to initiate or expand paramedic programs in Ontario
- Thirty projects/programs were chosen
- WCFHT was chosen to integrate a Community Paramedic into the FHT to provide patients, services in their own home.
- The program started in October 2014 and is funded until October 2015 with potential for extension.

Program Purpose



Reduce
Stress on
Limited
Health
Services

Improve
Quality of
Life
Patients

Patient Population

Chronic Diseases
Co-morbidities
Palliative
At risk
Mental Health
Hospitalized

Patient Population

- Up until September 30/2015 - 118 patients enrolled in the program.
- The average number of medications per patient 11.69
- Emergency department visits
 - 30% Falls
 - 36% Palliative
 - 22% Emergencies
 - 11% Preventable

INTERVENTIONS

Identification of patients with high glucose levels
Identification of a patient with Lithium Toxicity
28 Non-Prescriptions Discrepancies
23 Prescription Discrepancies
18 Drug Related Concerns

Harold

Medically complex and non-compliant. He lives alone, is socially isolated, has transportation and home safety issues.

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Harold now receives community services such as Primary Care Outreach, CCAC for wound care, Fire Department (smoke detectors)



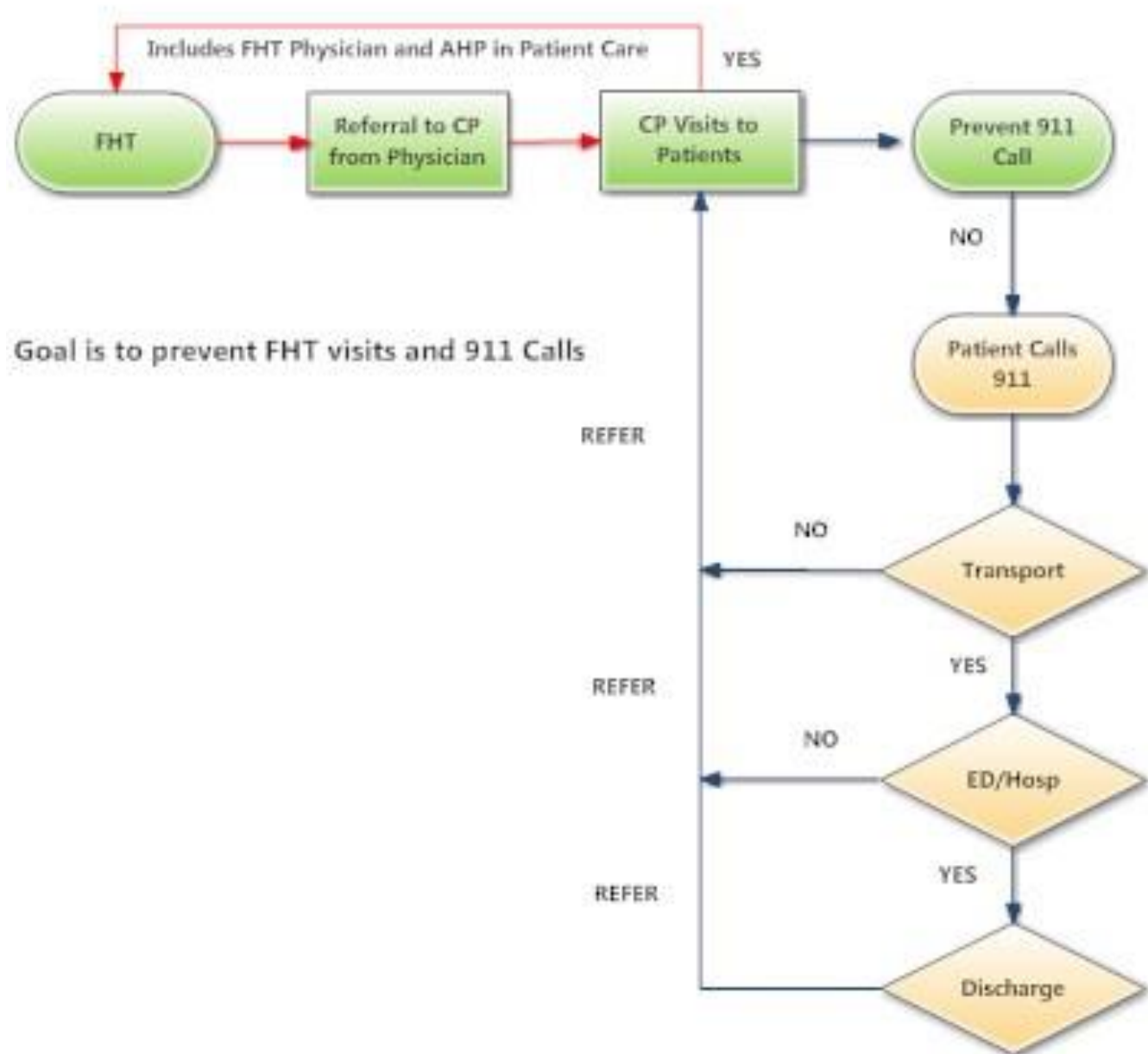
Harold and Tracey

Patient Entry into CP Program



Tracey and Janine

FHT Care to Prevent 911 Call



Why a Community Paramedic

Training

- Medical, Health and Safety, Environmental Assessments, Defuse Conflict and Addictions

Infrastructure/Logistical Support

- Car, drugs and medical supplies/equipment, back-fill , relationship with police and community supports GPS dispatch for personnel safety

Scope of Practice

- Paramedics instill trust; point of care testing, immunizations, keen assessment skills and a thorough identification of medications

Patient Benefits



Paramedic Service Benefits

- Enhanced opportunities for Paramedic Service personnel skills ,development and maintenance.
- Increase in Scope of Practice
- Prevention of repeat 911 calls that use up limited resources

Ottawa
Paramedic
Services



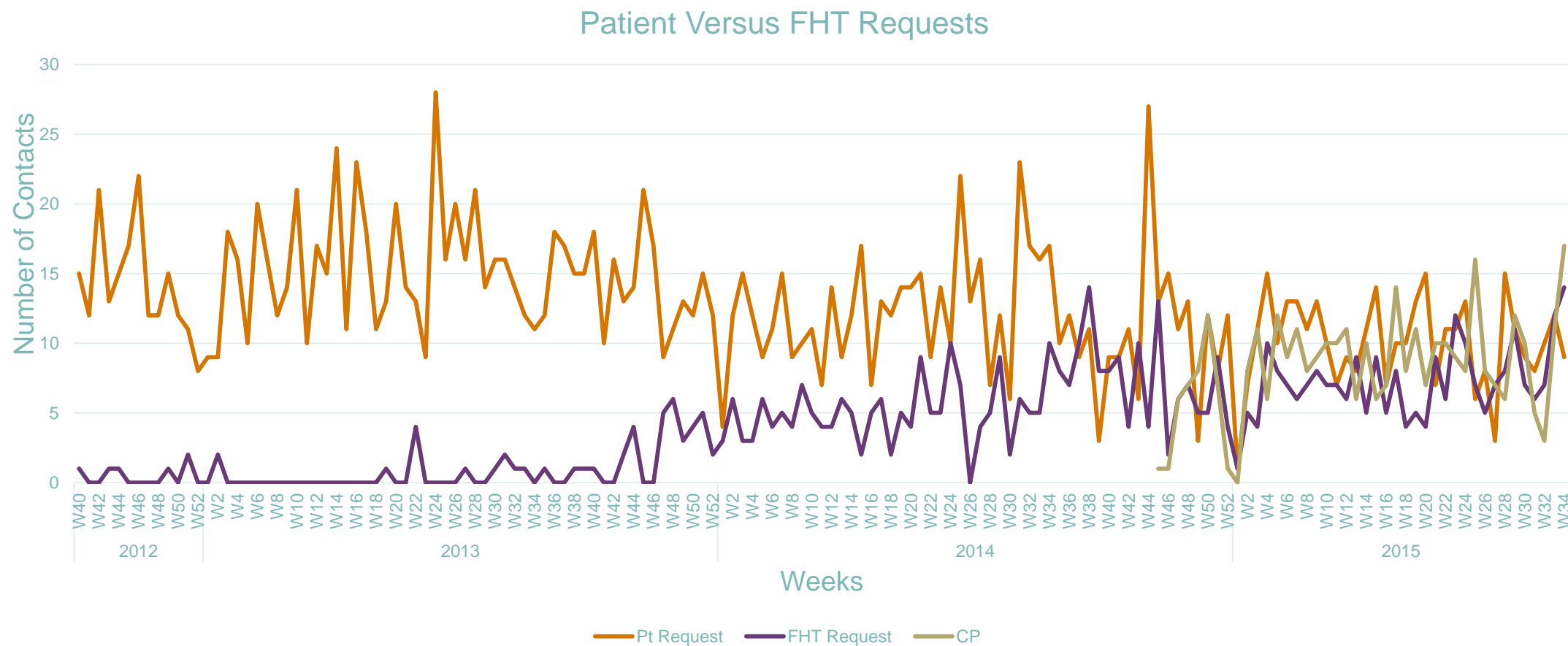
Renfrew County
Paramedic
Services

WCFHT Benefits

- Supports patient outreach
 - Eyes and ears for polypharmacy for patients
 - Identifies continuous improvement opportunities
 - Stronger partnerships with hospitals, CCAC and other community partners
-
- ***“Right Care, Right Time, Right Patient”***



Patient Request versus FHT Request



Benefits of the Health System

- Bridging acute and primary care
- Potential savings in reducing or alleviating ER loads, and decreasing the length of stay in hospitals
- Improve the coordination and continuity of care.
- Increased access to primary care for medically underserved populations

“My role as a paramedic isn’t always to save a life... sometimes it is to simply make their transition comfortable” ... Australian Paramedic



*We cannot solve our problems with
the same thinking we used when we
created them."*

Albert Einstein



Community Paramedics Improving Patient Outcomes

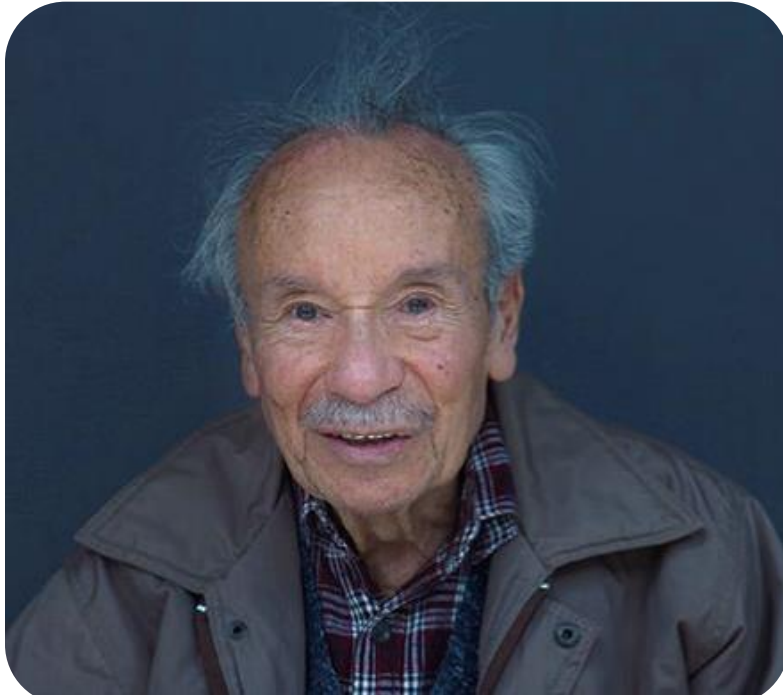
- MOH one time funding
- March 2nd program began
- Currently 70 active rostered patients (top 1% of health system users)
- Funding through to October 31st
- 13 community stakeholders



University
of Windsor



Meet John

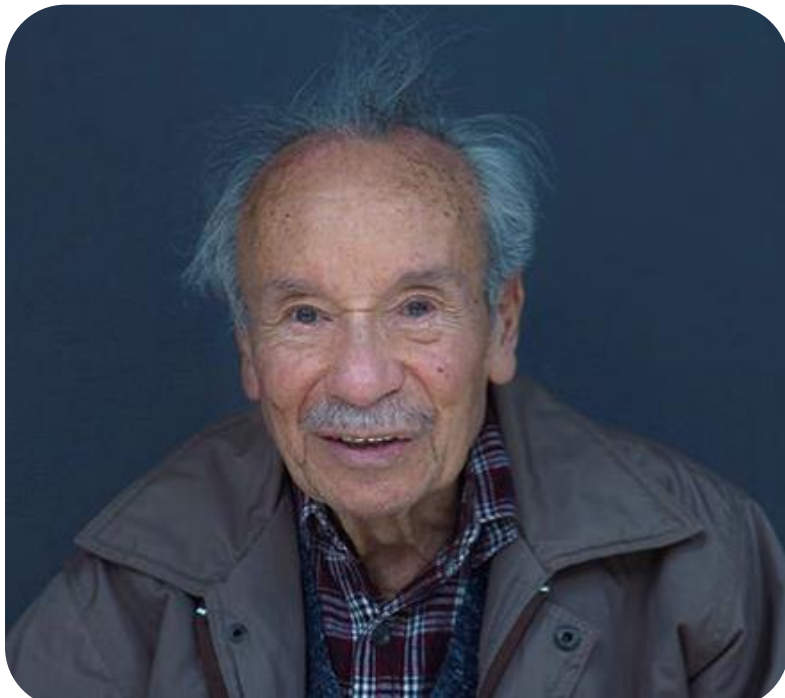


Synopsis

- 11 ED visits & 5 Admissions – 12 months (4 admissions/6 weeks)
- Orphaned client (no primary care provider)
- 8 Community services
(Rapid response nurse, Respiratory therapist, Social worker, Speech language therapist, Community nurse, Community nurse practitioner, Occupational therapist, Personal support worker, Age well nurse)



John today.....



Synopsis

- No ED Visits / Admissions in 18 weeks
- Primary care provider – Quarterback of care
- 2 Community services:
 - Community Paramedicine Program
 - Community Nursing
- Shopping at Walmart



Program Background



- Primary Care Paramedics
- 8 week custom program at Fanshawe College
- COPD, CHF, Diabetes, Advance Care Planning, NHS Wellness Index, Geriatrics
- Point of Care Testing
- Direct access to primary care
- Integrated into Chatham-Kent Health Link
- Non-response vehicle



Referral Pathways

- **Chatham-Kent Health Link**
 - top 5% of health users overseen by care coordinators
- **Cardiac Rehab from Community Health Centre**
 - Waitlisted patients for cardiac rehab program
- **CCAC Rapid Response RN program**
 - Post discharge COPD/CHF



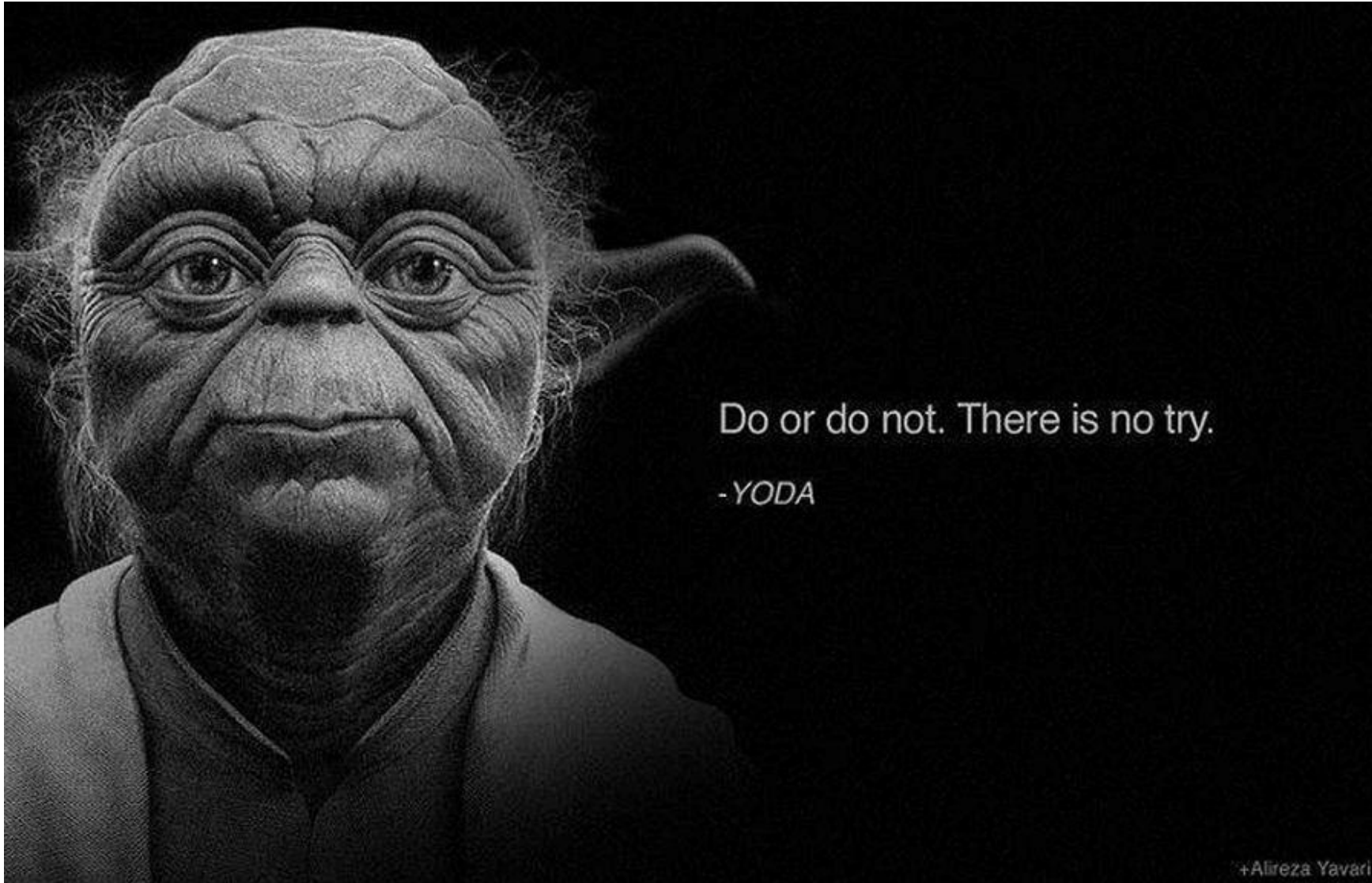
Preliminary Results – 6 months

- 92% reduction in 9-1-1 calls
- 85 fewer ED admissions
- XXXXX Reduced Hospital Admissions
- Improved Wellness Index by XXXXXX
- Improved Access to Primary Care



Next Steps

- Program evaluation by Odette School of Business
- Fine tuning of referral pathways
- Sustainability
 - Working with municipality and other stakeholders to change the way in which paramedic services are delivered in the community from a solely reactive system to a proactive system



Do or do not. There is no try.

-YODA