

Community Paramedicine

Algoma DSAB Cochrane DSSAB Manitoulin-Sudbury DSB

A partnership in
Community Paramedicine



Coverage Area

- Algoma, Cochrane and Manitoulin-Sudbury Districts combined:
 - Total Population 123,000
 - Total Coverage of 234,000 square km

Approximately the same size of the UK (GB, Scotland and Northern Ireland) who BTW has a Population of 64 million!

- 25% of the total geographic area of the Province of Ontario but only 1% of the population



Issue

Factors affecting the ability of seniors to remain living in their homes

Our Demographics

- Northern rural
- Many small and isolated communities

Create Health Care Gaps

- Difficult to provide timely services
- Patients ultimately enter and stay longer in the healthcare facilities

Our Proposal

Community Paramedicine

To develop and evaluate an effective and valued Community Paramedicine Program which meets the unique needs of the population in rural Northern Ontario

Mitigating the Issue

Community Paramedicine

Mandate **BLSPCS**

"... conserve life, alleviate pain and suffering and **promote health**".

Guidance **ALSPCS**

"... provision of **timely and appropriate care to ill and injured patients in the prehospital setting**, in accordance with the paramedics' training and authorized skill set

Joint Initiatives

Community Referrals

- System wide

Wellness Clinics

- Wherever seniors gather

Paramedic Directed Ad Hoc Home Services (Located in pilot communities)

- Known community members with needs, or
- Those recently discharged from hospital

Circle of Care Partnerships (Located in pilot communities)

- Discharge Follow-up and Health Team/Agency referrals

*All initiatives are provided
by on-duty PCP crews*

Additional Initiatives

- Measures and Evaluation (by Dr. S. Ritchie, Laurentian University)
 - Comprehensive literature review
 - Collection, compilation, and analysis of the data necessary to fulfill the MoHLTC program evaluation and reporting requirements for the funding period.
 - Collaboratively develop the plan and tools necessary for ongoing formative evaluation beyond the funding period;
 - Disseminate research and evaluation at academic fora (i.e. at least one conference presentation and submitted academic paper)

Additional Initiatives

- Education
 - Northern College has been contracted to create 5 online modules
 - Foundational information for PCP's practicing Community Paramedicine
 - Once all modules are finalized, they will be made available to the whole Province (similar to the first provincially available module Community Referrals Toolkit)

Successes and Challenges

Community Referrals

➤ Successes

- Positive paramedic buy-in
- Patients in need are being referred

➤ Challenges

- CCAC's ability to provide service in remote northern communities
- First Nations have separately funded health services (not CCAC)

Successes and Challenges

Wellness Clinics

- Successes
 - Positive paramedic buy-in in some areas
 - Large community response
- Challenges
 - Paramedic motivation in some areas

Successes and Challenges

Ad Hoc / Circle of Care visits

➤ Successes

- Hospitals and Health Teams are engaged and making referrals
- Positive paramedic feedback (mostly)

➤ Challenges

- Currently high volume of Circle of Care referrals in some areas creating high demands on paramedic time
- Paramedics so far are hesitant in initiating Ad Hoc services
- Ability to document in a manner where data from three Paramedic Service providers can be analyzed together

General Issues and Lessons Learned

- Issues
 - Language Barriers
 - Patients in need do not have a telephone, a requirement of CCAC
 - Patients requiring more help than what CCAC provides
 - Training is difficult due to geography
 - Paramedic buy-in
 - Internal road blocks (Labour/Management – ensuring smooth integration)
- Lessons Learned
 - Change is a lengthy process - Community Paramedicine is an EMS culture change and will take time for paramedics to become more proactive rather than solely reactive.

Contacts

Algoma DSAB, Cochrane DSSAB, Manitoulin-Sudbury DSB Joint Community Paramedicine Initiative

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