



# COMMUNITY PARAMEDICINE: FILLING THE GAPS TOGETHER



# OBJECTIVES

- WHAT IS COMMUNITY PARAMEDICINE?
- WHY COMMUNITY PARAMEDICINE?
- HOW COMMUNITY PARAMEDICINE CAN ASSIST SENIORS IN COMMUNITY
- THE FUTURE

# WHAT IS COMMUNITY PARAMEDICINE?





**EMS...**

**Doing the same thing as the ER with  
1/8 the room ,less people  
and at 70 MPH**

**...Still called "Ambulance  
Drivers" ....**

**(so how was your "bad day"?)**





# COMMUNITY PARAMEDICINE IS:

- PARAMEDIC SKILLS
- PARAMEDIC TIME
- UNIQUE OPPORTUNITIES

UTILIZED IN A DIFFERENT WAY

# WHY COMMUNITY PARAMEDICINE?





# WHY COMMUNITY PARAMEDICINE

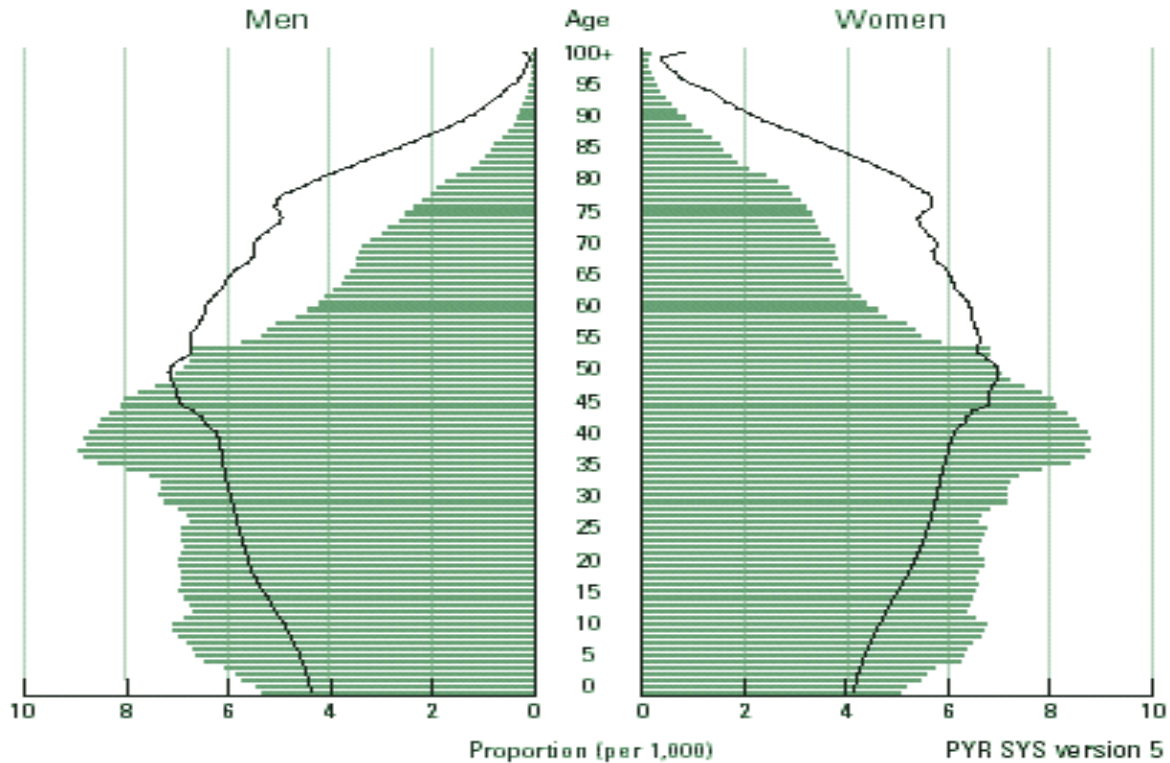
- ADDRESS GAPS IDENTIFIED IN THE COMMUNITY
- DECREASE 911 CALLS
- DECREASE HEALTHCARE COSTS
- ASSIST SENIORS TO AGE AT HOME

# THE AGING TSUNAMI

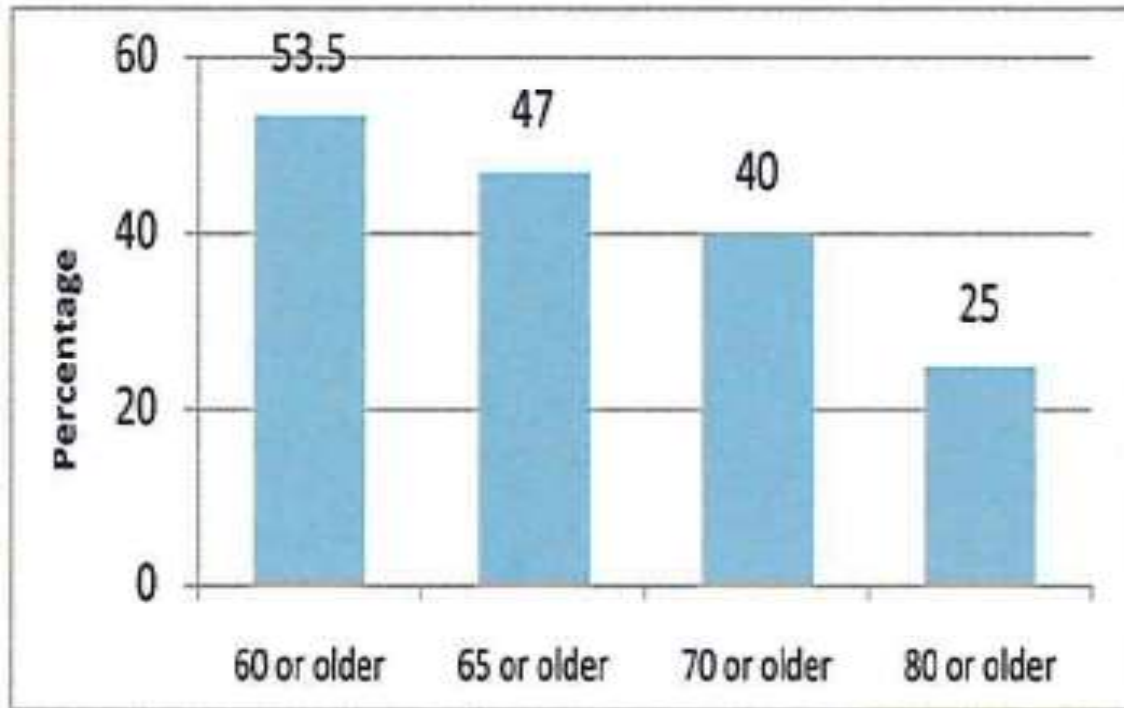
**Chart 2**

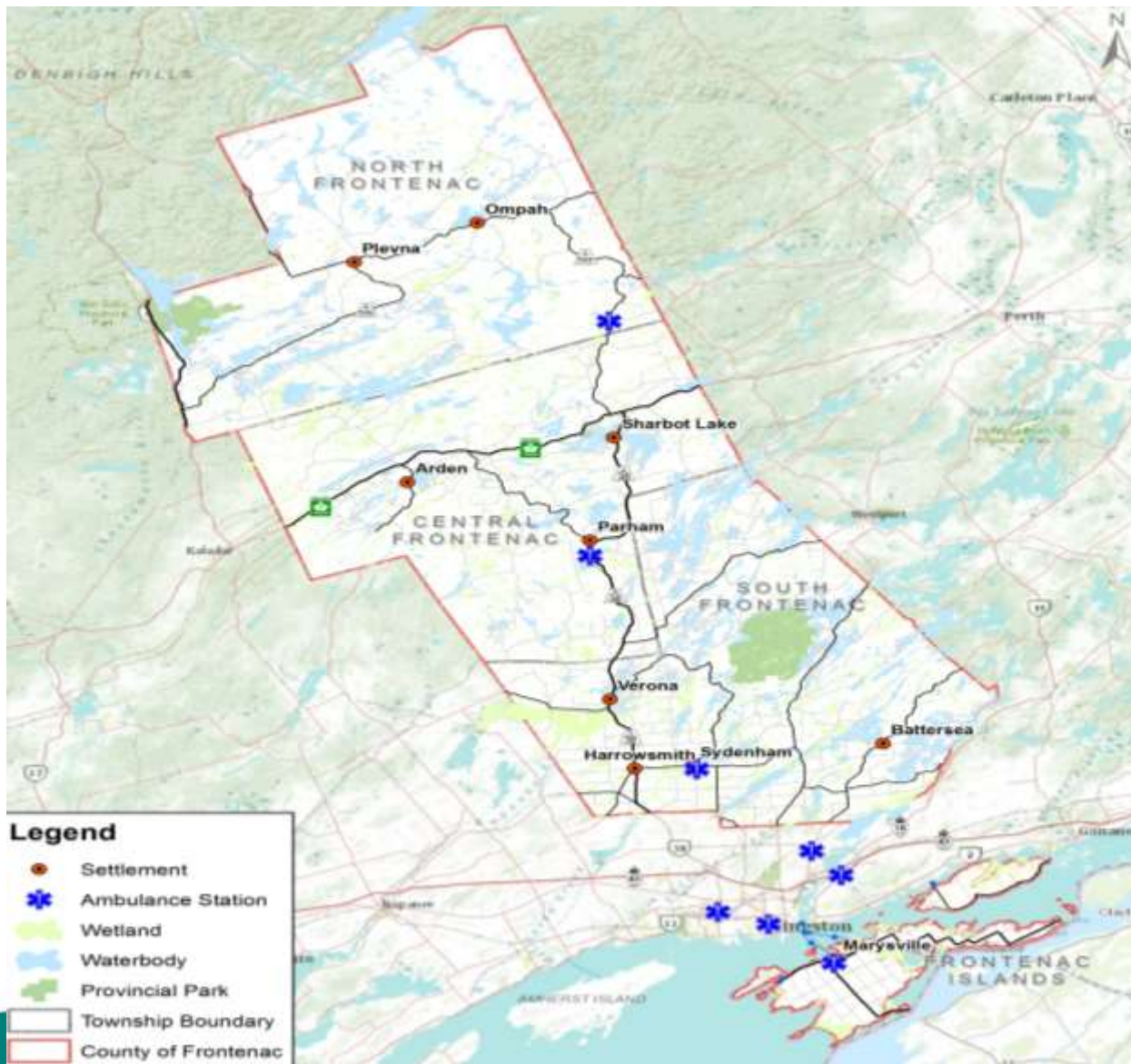
Population by age and sex, Canada, 2001 and 2041

— 2041  
■ 2001



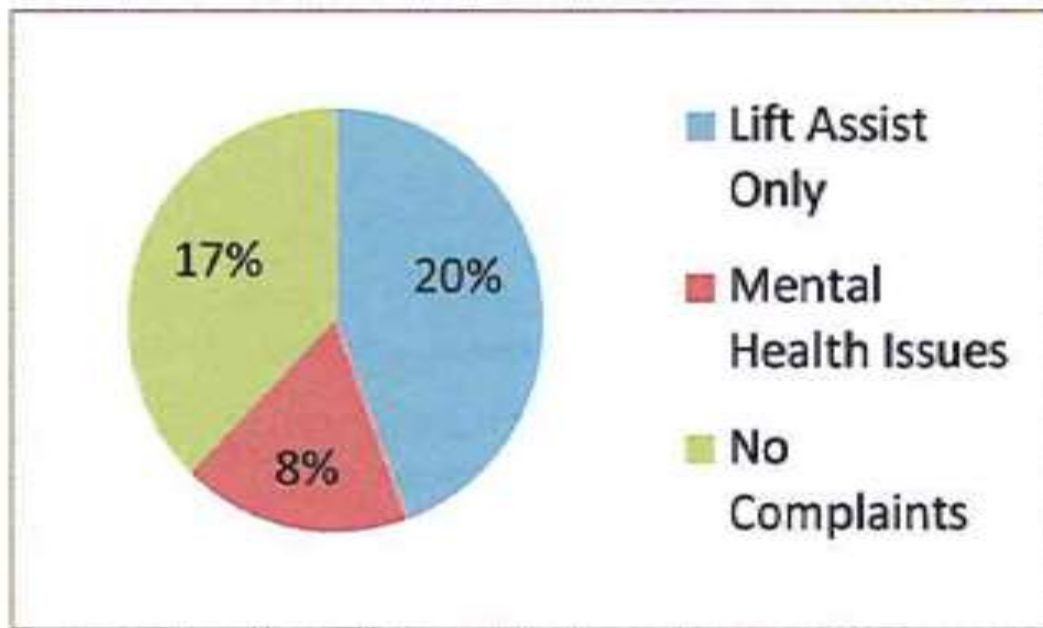
# PATIENT AGE





# GAPS IN THE COMMUNITY

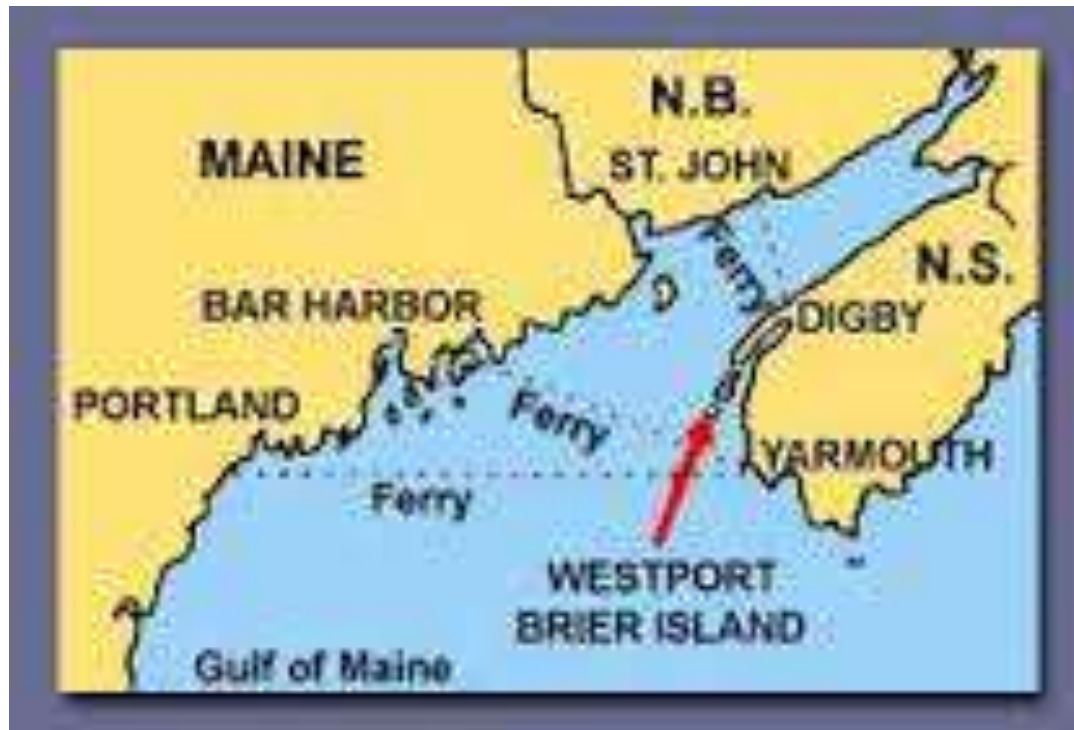
- NO PATIENT CARRIED



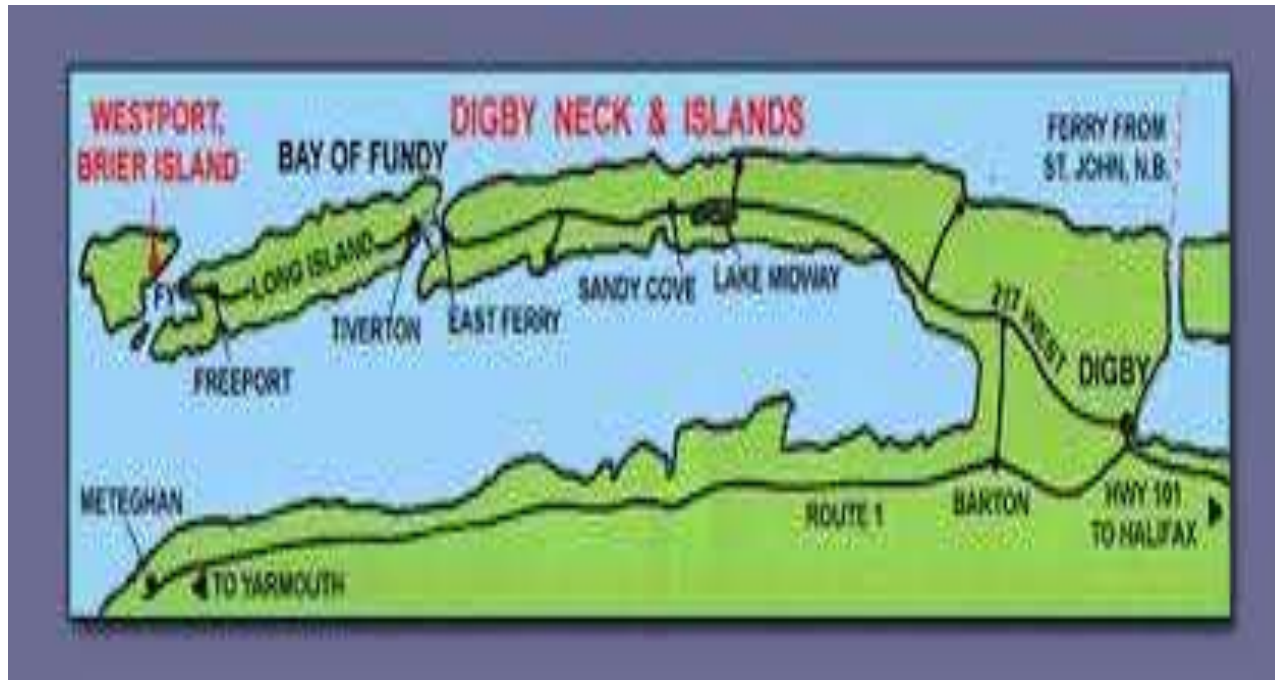
# HELPING SENIORS



# LONG AND BRIER ISLAND



# LONG AND BRIER ISLAND





# LONG AND BRIER ISLAND

- NEED IN COMMUNITY
- PARAMEDICS
- LOW CALL VOLUME (= TIME)
- AMBULANCE STATIONED AT CLINIC  
24/7

# LONG AND BRIER ISLAND

- Home visitation (**V.I.S.I.T.**)
  - *Vital signs*
  - *Interview*
  - ***Safety Inspection***
  - *Treatment*

# LONG AND BRIER ISLAND

- Well Woman Clinics
- Well Baby Clinics
- Healthy Islander Clinics
- Smoking Cessation
- Exercise Classes
- Venipuncture Labs
- Flu Clinics

# RENFREW COUNTY

- AGING AT HOME STRATEGY

*“TO ALLOW SENIORS TO LIVE WITH DIGNITY AND INDEPENDENCE IN THEIR OWN HOMES”*

# RENFREW COUNTY

- AGING AT HOME PROGRAM
  - DEEP RIVER
    - TRANSPORT PATIENTS FOR APPOINTMENTS
    - WELLNESS CHECKS
    - IDENTIFYING HAZARDS

# RENFREW COUNTY

- WELLNESS CLINICS
- ADHOC HOME VISITS
- HEART WISE EXERCISE PROGRAM
- COMMUNITY PARAMEDIC REFERRIAL TO THE COMMUNITY CARE ACCESS CENTRE (CREMS)

# PERIL

- *PARAMEDICS EVALUATING RISK OF INDEPENDENCE LOSS*

# PERIL

- PATIENT CONSIDERED TO BE “AT RISK” IF ANSWER ‘YES’ TO TWO OF THREE QUESTIONS:



# PERIL

1. PROBLEMS EXIST THAT WOULD PREVENT THE PERSON FROM BEING SAFELY DISCHARGED HOME FROM THE EMERGENCY DEPARTMENT, OR CONTRIBUTE TO RECURRENT EMS/EMERGENCY USE?

# PERIL

2. REQUIRES HELP ON A REGULAR BASIS  
(BEFORE TODAY'S PROBLEM)?

# PERIL

3. HAS MADE ANY 911 CALLS IN THE PAST 30 DAYS?

# PREDICTION RULE

**1/3**

- 27% OF PATIENTS ADVERSE OUTCOME IN 30 DAYS

**2/3**

54% OF PATIENTS ADVERSE OUTCOME IN 30 DAYS

**3/3**

93% OF PATIENTS ADVERSE OUTCOME IN 30 DAYS

# THE FUTURE



# FUTURE

JANUARY 2014

- PROVINCE OF ONTARIO PLEDGED \$6 MILLION TO SUPPORT THE EXPANSION AND DEVELOPMENT OF COMMUNITY PARAMEDICINE INITIATIVES ACROSS THE PROVINCE

# FUTURE

OCTOBER 2014

- FRONTENAC PARAMEDIC SERVICES RECEIVES \$156,800 IN FUNDING



# FRONTENAC PARAMEDIC SERVICES PROPOSAL

TO ESTABLISH A SOLID FOUNDATION FOR FUTURE PROGRAMS THAT MEET THE OBJECTIVE OF *“IMPROVED DELIVERY AND COORDINATION OF SERVICES IN THE COMMUNITY FOR SENIORS AND OTHER PATIENTS WITH UNMET NEEDS”*.





# FOCUS ON COMMUNICATION

- RURAL KINGSTON HEALTH LINK
- KINGSTON HEALTH LINK
- SOUTH EAST LHIN
- NORTHERN FRONTENAC COMMUNITY SERVICES
- SOUTHERN FRONTENAC COMMUNITY SERVICES
- SOUTH EAST COMMUNITY CARE ACCESS CENTRE
- KINGSTON GENERAL HOSPITAL
- KFLA HEALTH UNIT

# PRIMARY COMPONENTS

1. PARAMEDIC REFERRALS
2. DEVELOPMENT OF COMMUNICATION LINKS
3. HOME VISITS
4. WELLNESS CLINICS
5. FLU SHOTS

# COMMUNITY PARAMEDICINE

## **FILLING THE GAPS TO ENSURE PATIENTS RECEIVE:**

- THE RIGHT CARE,
- IN THE RIGHT PLACE,
- AT THE RIGHT TIME,
- WITH NO DUPLICATION OF SERVICES

# QUESTIONS?

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**Deputy Chief of Performance Standards**  
**Frontenac Paramedic Services**  
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