



Community Paramedicine

Doug Socha

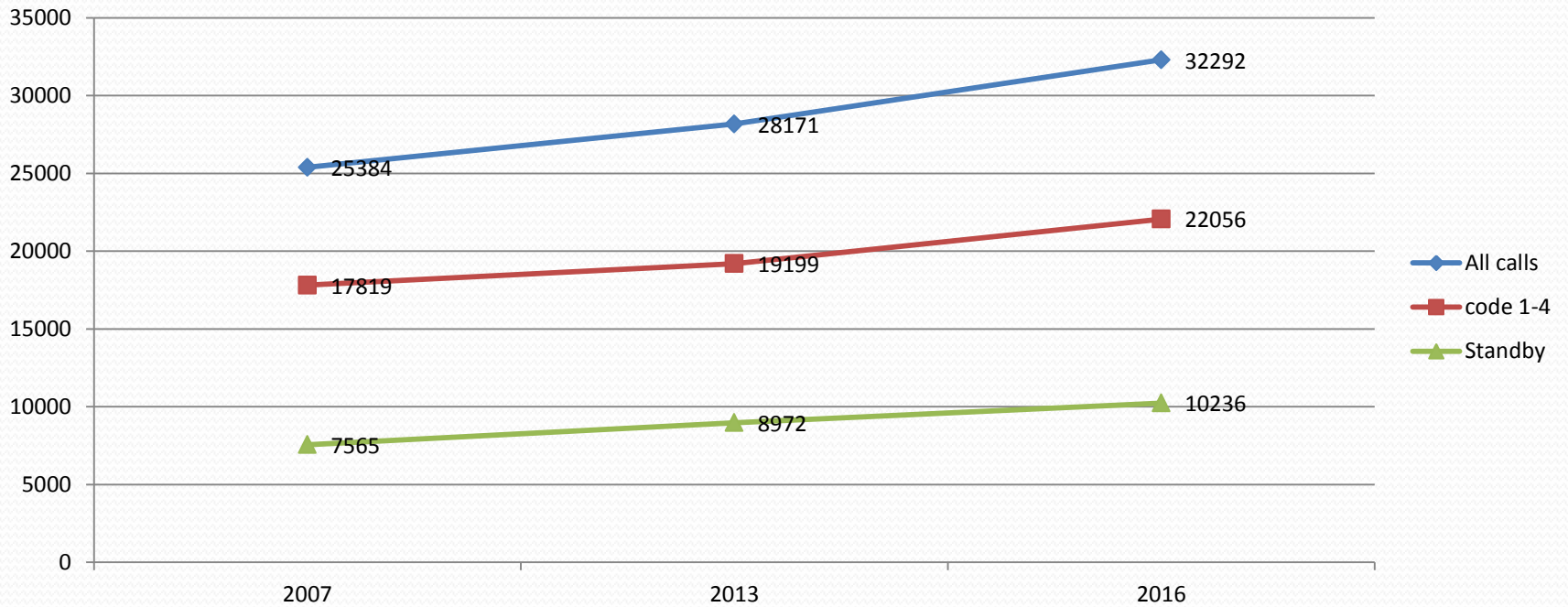
Chief Hastings-Quinte Paramedic
Services

*Primary Care Hypertension/Smoking Update Brag and Steal
Opportunities to Improve your Practice*

Faculty/Presenter Disclosure

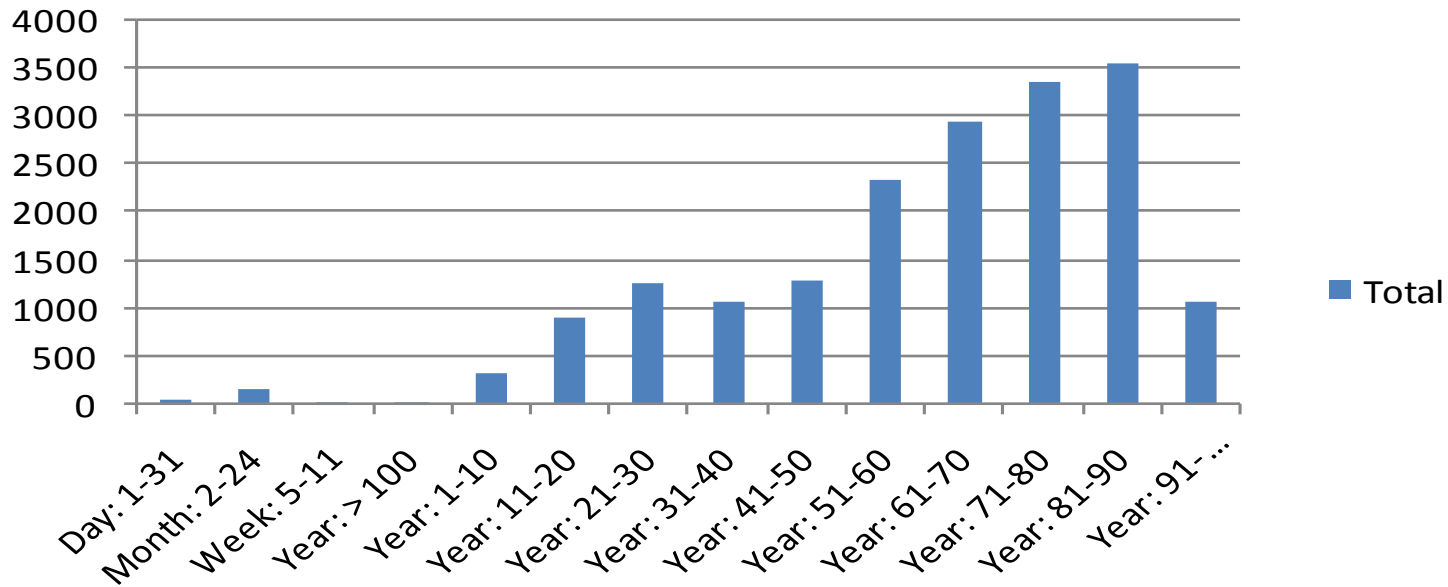
- **Faculty:** Doug Socha
- **Relationships with commercial interests:**
 - **Grants/Research Support:** N/A
 - **Speakers Bureau/Honoraria:** N/A
 - **Consulting Fees:** N/A
 - **Other:** N/A

Historical Call Volume



Patient Demographics

2016 Demographics by Age



Hastings County Health Unit Data

	HPE Health Unit	Canada
	Total	Total
Health Conditions		
Overweight or obese (%) Health data: Footnote 6	59.4	52.3
Overweight (%) Health data: Footnote 7	36	34
Obese (%) Health data: Footnote 8	23.4	18.3
Diabetes (%) Health data: Footnote 11	7.1	6.3
Asthma (%) Health data: Footnote 12	9.6	8.3
High blood pressure (%) Health data: Footnote 13	22.5	17.5
Chronic obstructive pulmonary disease (COPD) (%)	7.9	4.1
Hospitalized acute myocardial infarction event rate (per 100,000 population)	238	205
Health Behaviours		
Current smoker, daily or occasional (%) Health data: Footnote 29	28.4	20.1
Current smoker, daily (%) Health data: Footnote 30	24.4	15.3
Environmental Factors		
Second-hand smoke, exposure at home (%) Health data: Footnote 58	8.1	5.1
Second-hand smoke, exposure in vehicles and/or public places (%) Health data: Footnote 59	16.1	16.7
Youth, under 20 years, as a proportion of total population (%)	22.5	23.5
Seniors, 65 years and over, as a proportion of total population (%)	16.9	12.9

Community Paramedicine Defined

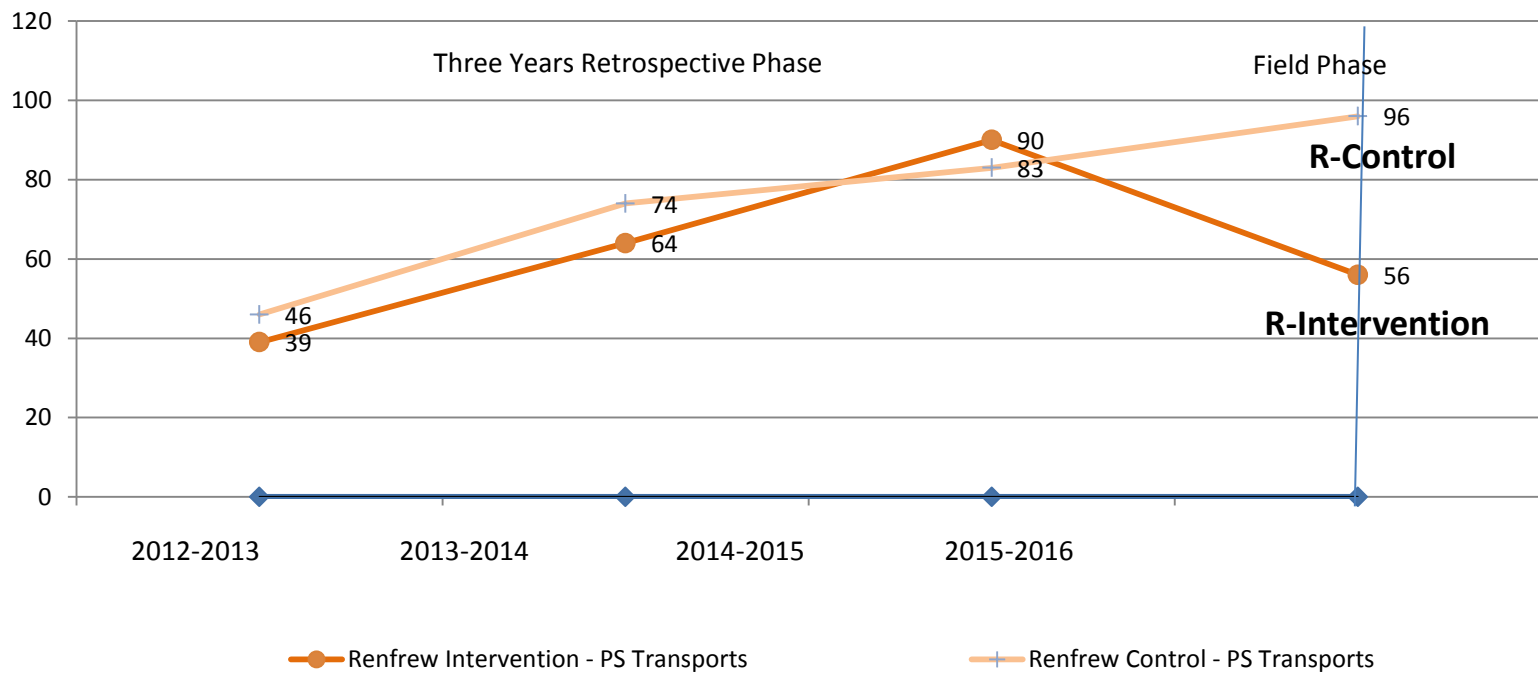
- The potential to involve paramedics in a non-traditional role of delivering care prior to the activation of the 9-1-1 system may in turn result in an increased capacity within the rest of the EMS system, while at the same time potentially increasing delivery of patient care within the community at large (International Round Table on Community Paramedicine (n.d))

Intervention/Change Made

- Hastings County in partnership with Renfrew County applied for funding to implement a community paramedicine program.
- Study looked at frequent users of the healthcare system and provided support in partnership with a number of community partners.

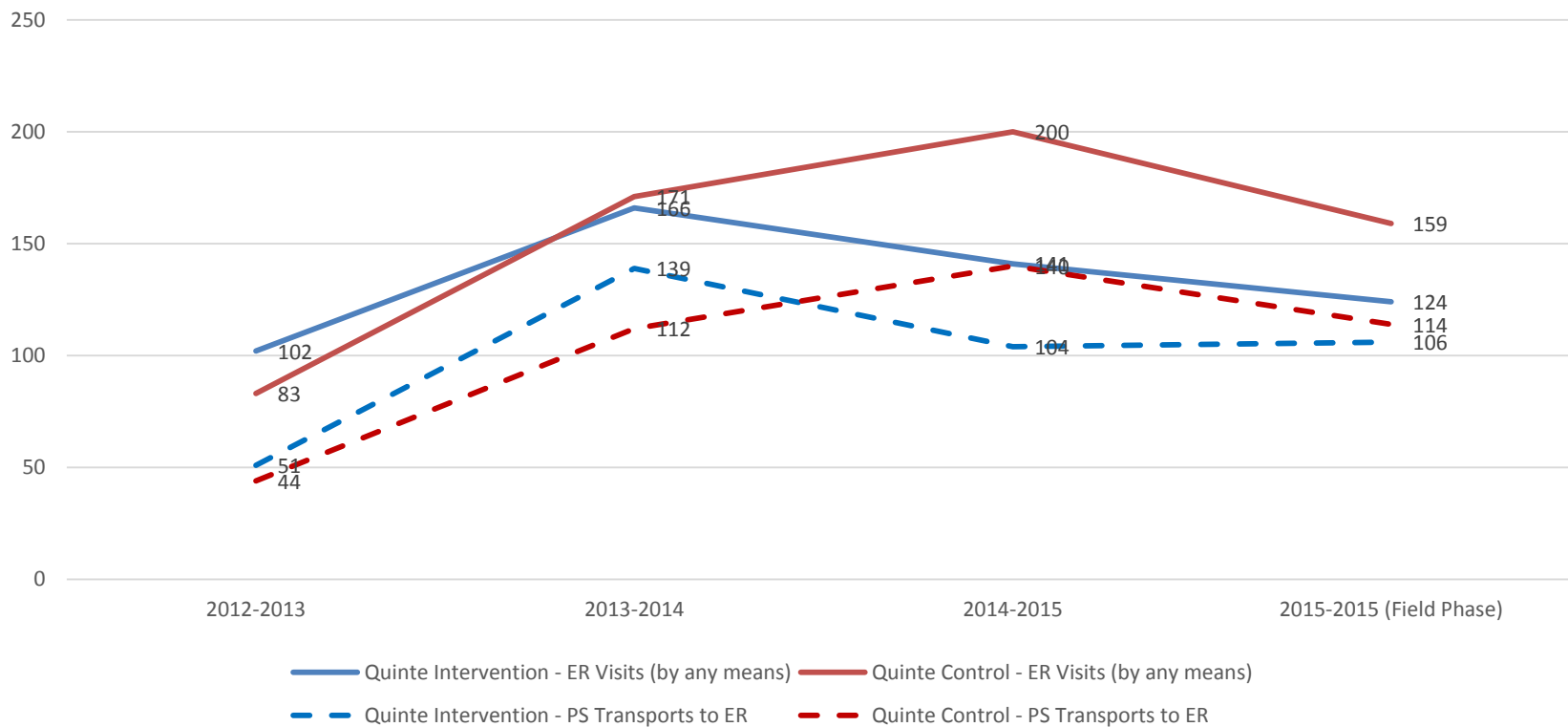
Rural Community Paramedicine Results

PS Transports over 2012-2013 to 2015-2016 Period
Renfrew (For each year: Feb. 1 to Jan. 31)



Urban Community Paramedicine Results

Hospital ER Visits (by any means) Compared to PS Transports over 2012-2013 to 2015-2015 Period
Hastings-Quinte



Quality of Life Results

Question Type – Posed to Intervention Group clients only	Renfrew (%) n=18	Hastings-Quinte (%) (n=45)
CP understood healthcare needs 'extremely well'	77.8	88.9
CP advice and information 'extremely' or 'very' useful useful in maintaining/improving health & well-being	72.2	80.0
CP services helped manage health & well-being 'a lot'	61.0	84.0
Indications that CP worked with other healthcare professionals to address your healthcare needs (Yes)	61.0	71.1
CPs helped manage a health issue at home (otherwise called 911) 'once or twice' or 'quite often'	5.6 11.0	24.4 26.7
Very Satisfied with ability to contact CP promptly	66.7	95.6
Very Satisfied not a burden on family, friends etc	38.5	78.5
Very Satisfied with services & care provided by CPs	77.8	95.6

EuroQol Results

- Quality Adjusted Life Years is a measure of disease burden, incorporating both the quality and quantity of the life lived. It is used to assess the value-for-money of a medical intervention.
- The calculations suggest that the Hastings-Quinte Intervention group achieved a 0.075 QALY result compared to the Control group. The County of Renfrew Intervention group achieved a 0.085 QALY result in the Field Phase compared to the Control group.
- This is the equivalent to 27-31 more days of higher quality life for the average Intervention Group participant compared to the Control Group.

Summary

- Patients enrolled in the study expressed a higher level of quality of life.
- Rural area saw a benefit compared to the control group.
- Urban area saw both intervention and control group decreasing ER visits. Suggesting easier access to the ER.
- Partnerships created will help move future initiatives forward.

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Full report DRDC-RDDC-2017-C086