

BRIEFING NOTES: PROVINCIAL ROUNDTABLE ON COMMUNITY PARAMEDICS

On March 8, 2013 York Region EMS hosted a roundtable discussion on behalf of the Ontario Association of Paramedic Chiefs (OAPC). The event was intended to bring together stakeholders as opportunity to share information and discuss opportunities and roadblocks to community paramedic (CP) initiatives.

Define Community Paramedic. In simplest terms, a community paramedic program is designed to promote access to health care through alternate means than emergency departments.

- It is **not** having a public access defibrillator program.
- It is **not** doing public relations events (parades, EMS week, school visits, etc.).
- It is **not** glorified PSW/homecare work.

That's not to say that these activities cannot be done by a paramedic working in a CP role. But, the goals of a community paramedic program are:

- Reduce repeated non-emergency use of paramedic services by individuals.
- Develop alternative pathways of care for individuals that have difficulty accessing primary health care services.
- Engage in a collaborative team-based care plan with other primary health care providers.

Opportunities.

- Over half of the paramedic services in the province either have CP programs running or are in the stages of launching.
- Community paramedicine has been identified in government reports as a priority for health care reforms (The Drummond Report, The Council of the Federation, Ontario's Strategy on Seniors, etc.).
- The OAPC has endorsed this model as part of their outlook on the future of EMS in Ontario.
- Centennial College has laid the foundation for a paramedic graduate certificate.
- Research is being conducted to provide evidence to support the concept (most notably, the randomized control trial EPIC (Expanding Paramedicine In the Community)).

Roadblocks.

- Paramedics are **not** health care providers. Therefore, we are enslaved by the Ambulance Act and it's limitations on what we can do.
- Emergency Health Services Branch. EHSB is stonewalling the OAPC, basically stating that services must abide by the Act.
- Potential partners don't know what we do (CCAC, Family MDs, etc).
- The Auditor General is reviewing EHSB spending. This may be a threat, but it may also end up being an opportunity.