

# Interdisciplinary Collaboration

Community Paramedicine Improves Access to Supportive Clinical Medicine for Oncology Patients

#### **Presentation Objectives**

- Provide Brief Program Overview
- Partnership Opportunity
- Development of an Interdisciplinary Healthcare Team
- Theory to Practice
- Outcomes to Date





### Calgary Zone Community Paramedic Program

- Operating Since Dec 2012
- 7 Days a Week, 06:00-20:00
- 22 Community Paramedics
- 6 Response Units
- 1 Patient Coordinator
- 5239 Patient Events in 2015







COMMUNITY PARAMED

Mobile clinical care team providing immediate and scheduled medical supervision and treatment currently unavailable in the community setting



#### **Requests for Community Paramedic Services**

#### 2 Methods Depending on Referral Source

#### 70 Partnered Continuing Care Sites





20 Specialty Clinics and Primary Care Networks

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### Tom Baker Cancer Centre (TBCC) Overview

- Southern Alberta's tertiary cancer centre
- 14,000+ patients receive treatment annually
- They see an increase of 4.4% of patients per year





## Indirect Referrals For Oncology Patients

Cancer Patients being referred to our program to support signs and symptoms

"Nausea"

"Pain"

2014

pril

"Dehydration"



## Opportunity

- Partnership and integration of services with the Tom Baker Cancer Centre (TBCC)
- 1. Efficacy improved patient outcomes
- 2. Efficiency improve system capacity

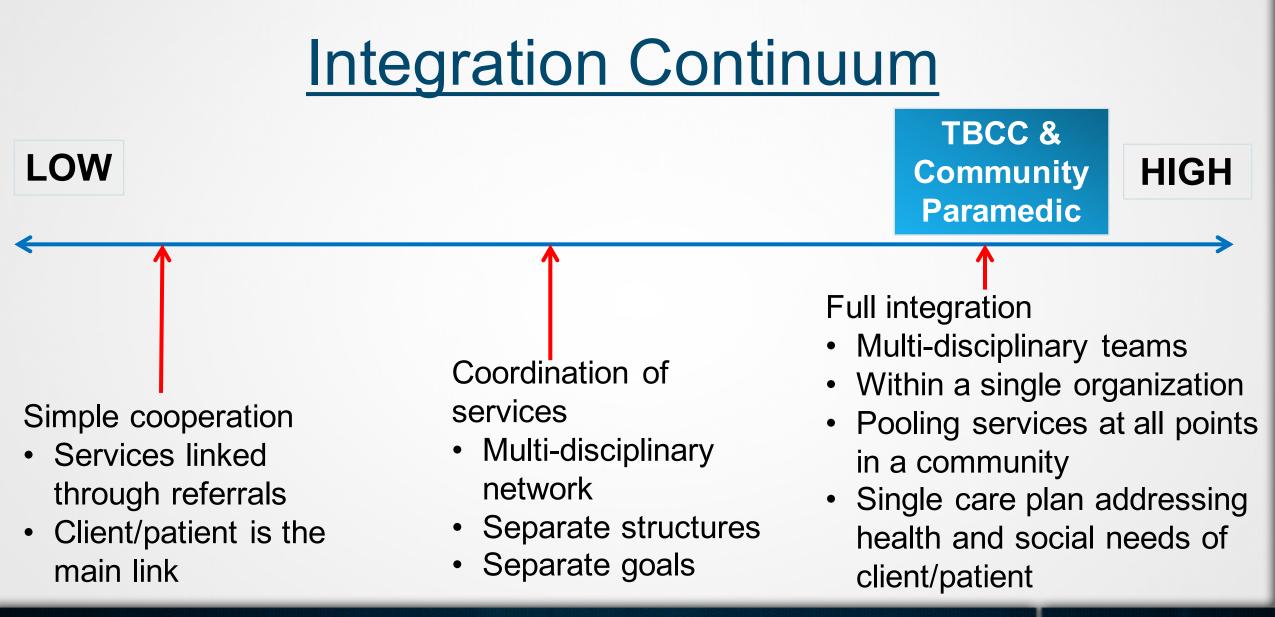




#### Partnership Question #1

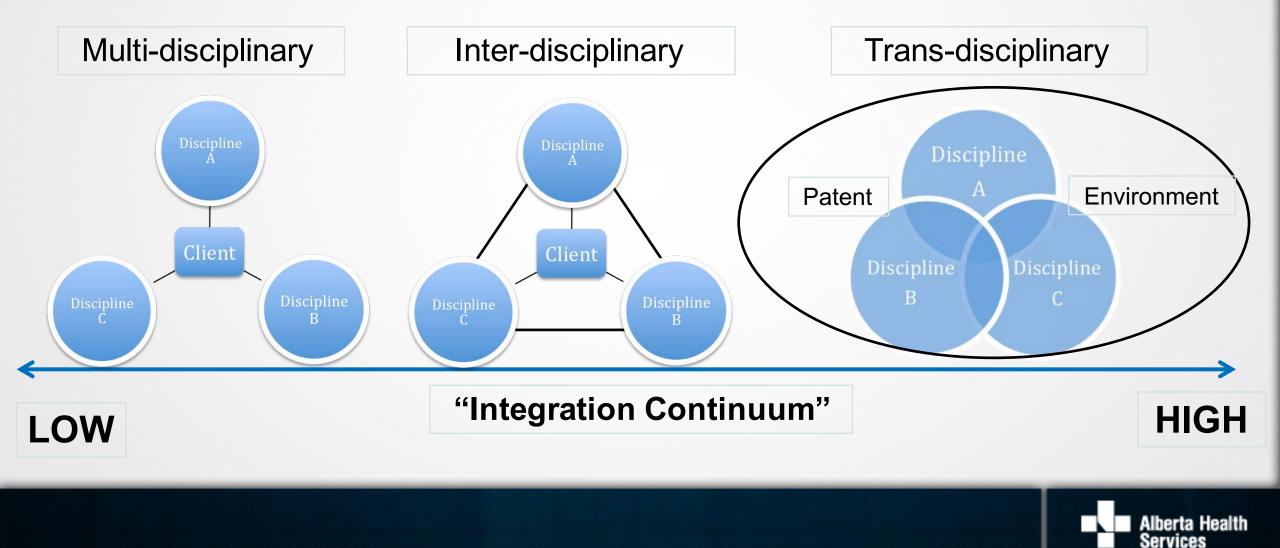
Which multi-professional model would support interdisciplinary collaboration between our programs?



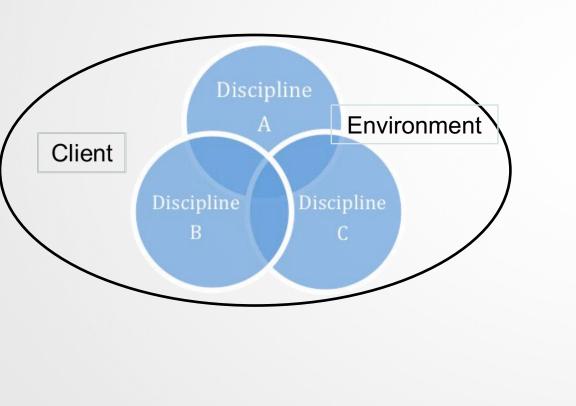




#### **Three Multi-Professional Models**



### **Trans-disciplinary Model**



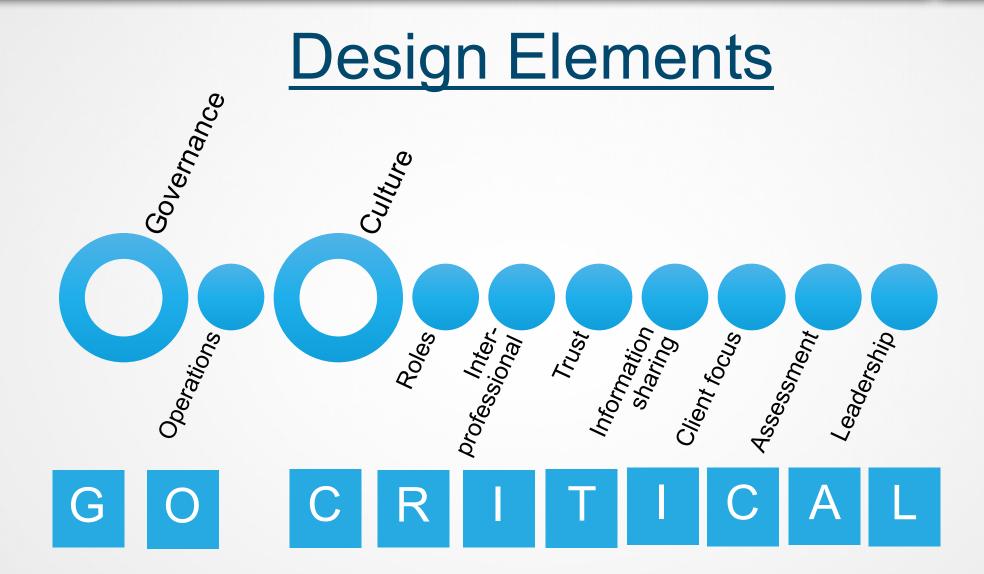
- Does not replace disciplines
- Identify with their team of professionals
- Patient as a member of the team
- Patient-focused approach **not** solution focused approach
- Role Release



#### Partnership Question #2

What design elements are foundational to the development and implementation of a trans-disciplinary model between our programs?







#### <u>Governance</u>

Consider what kind of governance model would best coordinate the patient care and partnership between our organizations

#### **Informal vs Formal**



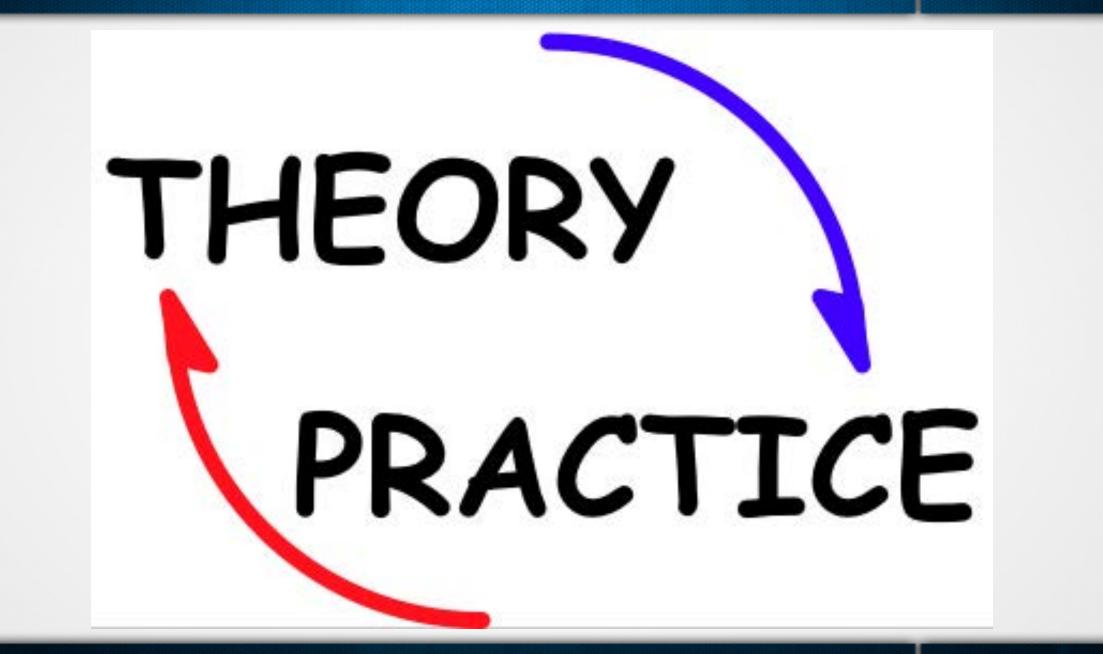


#### **Critical Elements for Operation**

- R → Role definition
- I → Inter-professional collaboration
- T → Trust building
- I → Information sharing
- C → Client focus
- A Assessment done jointly
- L → Leadership









#### **Governance Model**

Our leadership met and established an informal shared governance model based on a common vision and goals



Improving Patient Quality of life Improving Acute Care Patient Capacity

Reducing EMS and ED



#### **Roles and Inter-Professional** Collaboration Last Name

First Name

PHN

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**Community Paramedic Program Referral** 

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 Establish the Command Oncc supportive the comm
 100% of TBCC staff agree the partnership improves continuity of care and communication between Developing health care providers S Phone

"Do you trust the clinical judgement and treatment delivered by the community paramedics?"



**400% Strongly Castrant dig role 530% rag rate of** paramedic safely manage patients in the community

"The care delivered has been exceptional for our patient's that we requested community paramedic services" "They have proven to be very competent"



### **Information Sharing**

- 1. All Community Paramedic patient care records are sent to the referring oncology department or physician for continuity
- 2. Community Paramedics have access to pertinent patient care records
- 3. Real time physician consultation when needed





#### **Assessments and Treatment**

#### **Additional Education**

- Blood Transfusions
- Peripheral Inserted Central Catheters
- Additional medication
  administration

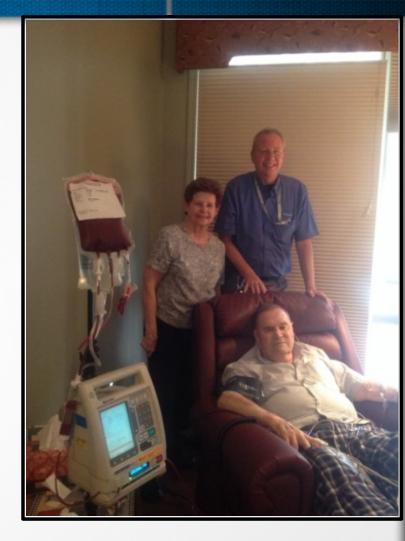




### June 2014, It Begins...

 363 patient events in the first 6 months

 Doubled to 726 patient events in the following 6 months





#### System Capacity Effectiveness

There were 1500 patient events in 2015, helping avoid unnecessary EMS usage, emergency departments visits, and increasing acute care beds









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	n ED and get admitted"			



#### **Cost Effectiveness**

#### Average Patient Cost for Comparable Treatment Tom Baker Cancer Centre - \$1300 EMS and Emergency Department Visit - \$1400 Community Paramedic Visit - \$316





### Quality of Life

100% of TBCC staff respondents agreed the Community Paramedic partnership improves patient's quality of life Our Community Paramedics are thanked on a daily basis

We've had multiple family donations

"God Bless you for being there and staying there to get things done"

"I feel lucky to be receiving care in my home"



#### **Challenges and Next Steps**

- <u>Demand</u> no longer have the program capacity to meet the demand for services
- <u>Evaluation</u> further quantitative and qualitative data analysis
- <u>Growth</u> increase Community
  Paramedic resources to meet demand







## **Thank You**