

National Consensus Conference on Community Paramedicine [U.S.]

International Roundtable on Community Paramedicine, 2013
Kenilworth, Warwickshire, United Kingdom

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Acknowledgment

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U.S. Department of Health and Human Services

Overview

- Describe NCCCP products:
 - Conference summary
 - Research agenda
- Discussion:
 - How can we encourage more research?
 - To what extent do themes resonate cross-nationally?
 - What roles can **IRCP** play to support and advance the priorities and opportunities identified?
 - What could the next steps be?

Panelists – Group 1

- Education & Expanded Practice
 - National Highway Traffic Safety Administration
 - Professor EMS Education, Creighton University
 - Community Paramedic
 - Medical Director
 - Community Paramedic Instructor & Curriculum Developer



Panelists – Group 2

- Integration with other Medical Professions
 - American Nurses Association
 - Emergency Nurses Association
 - Hospital Administrator
 - Medical Director
 - Public Health Nurse Consultant
 - National Association of State EMS Officials



Panelists – Group 3

- Medical Direction / Regulation
 - Local Program Directors
 - State Program Directors
 - Medical Directors



Panelists – Group 4

- Funding / Reimbursement
 - Local Agency Chiefs
 - Local Program Directors
 - Health Economists
 - National EMS Regulators



Panelists – Group 5

- Data, Performance Improvement, & Outcome Evaluation
 - Local Agency Chiefs
 - Local Program Directors
 - Health Economists
 - National EMS Regulators
 - National Association of State EMS Officials



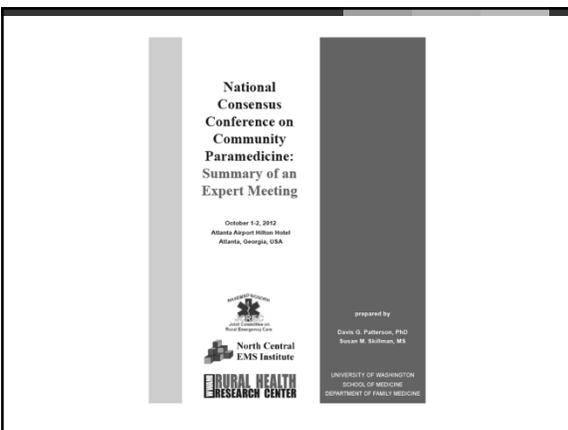
Participants

- Community Paramedics
- Local Agency Chiefs
- Local Program Directors
- Local Medical Directors
- State Offices of Rural Health
- State EMS Regulators
- State Program Directors
- State Departments of Health
- National EMS Regulators
- National Highway Traffic Safety Administration
- National Association of State EMS Officials
- National Nurses Associations
- Health Economists
- University Professors and Educators
- Curriculum Developer
- Public Health Nurse Consultants
- Hospital Administrators



Structure of meeting and summary

- Expert panel and discussion on 5 topic areas
- Summary:
 - CURRENT PRACTICES AND RESOURCES
 - While not yet widely implemented, the concept of CP has a long history, with some notable early examples, such as the Red River, New Mexico, program in the early 1990s. A number of CP models
 - GAPS TO ADDRESS
 - Other health providers often do not fully understand the skills and expertise of EMS personnel, a barrier that must be overcome before introducing the concept of CP.
 - OPPORTUNITIES
 - If CP providers can operate under their current EMS scopes of practice, it may be possible in some places to implement this model without additional approval from state EMS offices or physician
- Includes “Global Themes” section
- “Consensus”: many areas of general agreement—including agreement that an issue is important and in need of further exploration



National Consensus Conference on Community Paramedicine: Summary of an Expert Meeting

October 1-2, 2012
Atlanta Marriott Marlow Hotel
Atlanta, Georgia, USA

prepared by
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North Central EMS Institute

RURAL HEALTH RESEARCH CENTER

UNIVERSITY OF WASHINGTON
SCHOOL OF MEDICINE
DEPARTMENT OF FAMILY MEDICINE

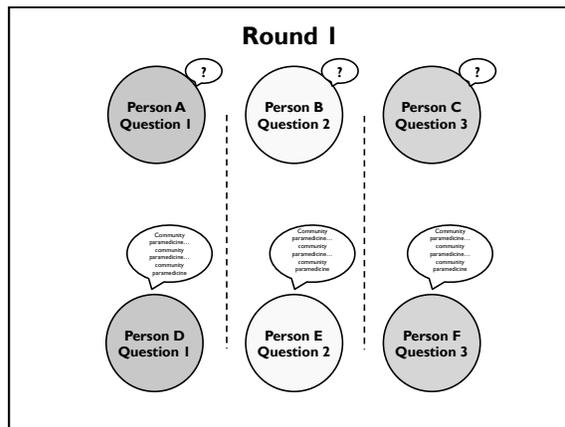
Education and Expanded Practice Roles Opportunities



Key terms in the word cloud include: RURAL IMPROVING, PATIENTS, MODELS, ADVANCED, TELEMEDICINE, INTEGRATION, TRIPLE PRACTICE, EMPHASIS, REQUIREMENTS, EXPERIENCES, HEALTH, UNPRECEDENTED, NURSES, DECREASING, SUPERVISION, DEGREE, NEED, ACCESS, RELIABLE, ACHIEVABLE, POSSIBLE, ALTHOUGH, CONSULTATION, SERVE, COMMUNITARIAN, PAYOR, INTEGRATION, COMMUNITARIAN, HEALTH, LEADER, UNPRECEDENTED, NURSES, DECREASING, SUPERVISION, DEGREE, NEED, ACCESS, RELIABLE, ACHIEVABLE, POSSIBLE, ALTHOUGH, CONSULTATION, SERVE, COMMUNITARIAN, PAYOR, INTEGRATION, COMMUNITARIAN, HEALTH, LEADER.

Method

- **Task:** Develop a national CP research agenda (in 1.5 hours)
 - Get input from all 60 participants
 - Document research priorities, challenges, and opportunities
- **Solution:** Participants collect the data
 - Structured round robin pair interviews
 - All provide input on every question
 - All input documented



Research priorities

For Community Paramedic services to gain widespread acceptance and qualify for reimbursement, evidence of impact is needed.

What are the top priority research questions about Community Paramedicine that will demonstrate its impact on healthcare processes and outcomes in terms of...

- ...**effectiveness** (does it produce the desired effect)?
- ...**value** (does it reduce costs with comparable or better outcomes)?
- ...**safety** (does it reduce patients' risks)?
- ...**access** (does it connect patients to needed care?)

Research priorities

- Program development
- Technology
- Workforce:
 - Education and competencies
 - Supply (recruitment pipeline, retention, modeling)
 - Demand and utilization
- Medical oversight
- Team approaches and integration with other providers
- System impacts and value
- Patient access and satisfaction/safety and outcomes
- Data and methods for research and evaluation

Research challenges

Research requires funding sources, topics of interest to funders, research expertise, collaborators, study sites, data, and appropriate methods.

What are the top **barriers** to conducting research on Community Paramedicine? To enable research to happen, what specific resource needs must be addressed?

Research challenges

- Identifying research priorities
- Funding, infrastructure, and human resources
- Stakeholder support and involvement
- Data
- Methods
- Government and regulatory issues

Research resources and opportunities

What resources and opportunities are available now that could be used to advance community paramedicine research?

Where can we find funding sources, research expertise, collaborators, study sites, data (in addition to NEMSIS), methods, or other important **resources**?

Research resources and opportunities

- ▣ Academic resources
- ▣ Government institutions
- ▣ EMS organizations
- ▣ Other healthcare organizations
- ▣ Other interested organizations
- ▣ Data and methods resources
- ▣ Resources within community paramedicine

Research: next steps

- ▣ Prioritize our “priorities”!
- ▣ Document and describe program models in all their variety and complexity
- ▣ Survey the research and evaluation landscape-- pilot studies and evaluations **are** underway currently
- ▣ Disseminate what we’re learning
- ▣ What else...?

Contact

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Reports available: ircp.info/Downloads/ <http://depts.washington.edu/uwrhrc/>



Discussion

- ▣ To what extent do themes resonate cross-nationally?
- ▣ What roles can **IRCP** play to support and advance the priorities and opportunities identified?
- ▣ How can **IRCP** support and facilitate increased **quantity** and **quality** of community paramedicine **research**?
 - ▣ How can we move each one of us to the next level of involvement in EMS research?
- ▣ What could the next steps be?

Discussion (research)

- Poll: How many of you are...
 - ...EMS/CP researchers?
 - ...involved in EMS/CP research?
 - ...neither (no shame!)?