

Connecting before crisis

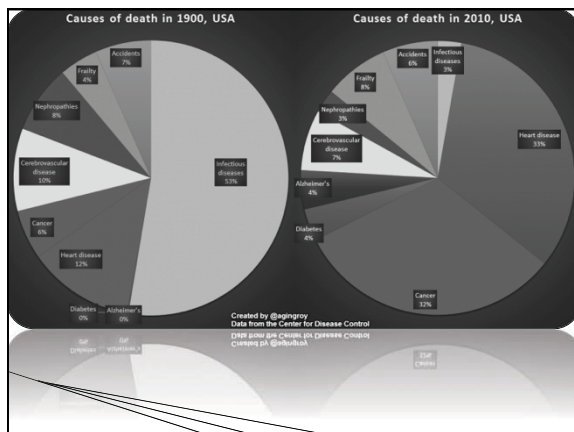


Chief Michael Nolan
County of Renfrew Paramedic Service
Director of Emergency Services

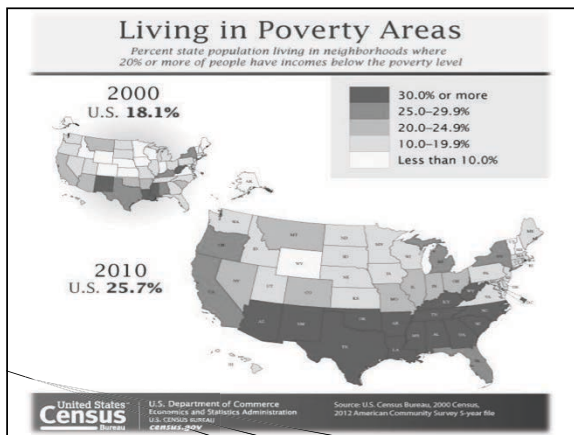
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Acknowledgements

- Canadian Institute of Health Research
- Dr. Jacques Lee, Sunnybrook
- Chief Pierre Poirier
- Government of Canada
- Government of Ontario
- Ontario Association of Paramedic Chiefs
- County of Renfrew
- Ontario Provincial Police
- Canadian Paramedicine Magazine

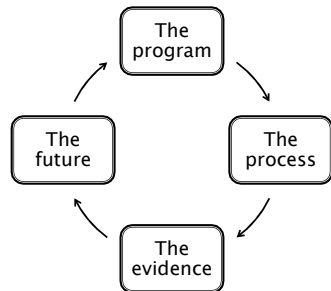




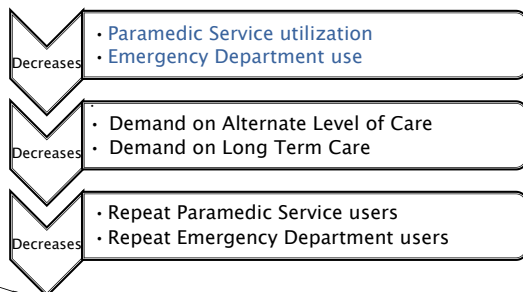




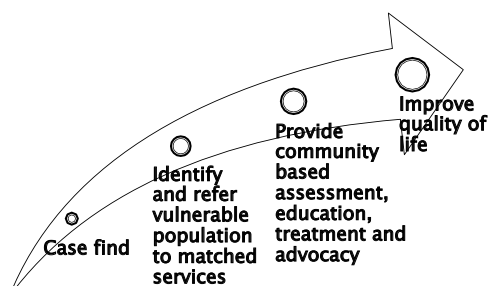
We will discuss;

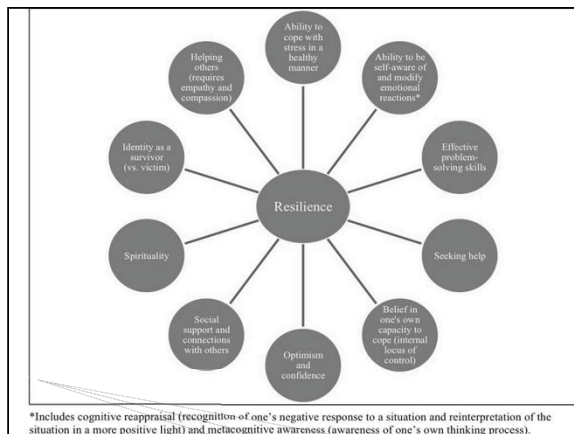


Community Paramedicine:



Community Paramedicine will:





Methods: Design

- Paramedics Evaluating the Risk of Independence Loss
 - 42 predictive variables chosen
 - Includes items modified from Identifying Seniors at Risk (ISAR) and Triage Risk Stratification Tool (TRST) and Gerson prediction rules
 - Extensive testing of forms in focus groups
 - > 2000 patients enrolled and followed

PERIL Clinical Prediction Rule

1. Any problems in the home preventing safe discharge?
2. Are the patients medications disorganized or is there evidence of clutter syndrome?
3. Have there been any 911 calls in the last 30 days?

PERIL Prediction Rule

Performance

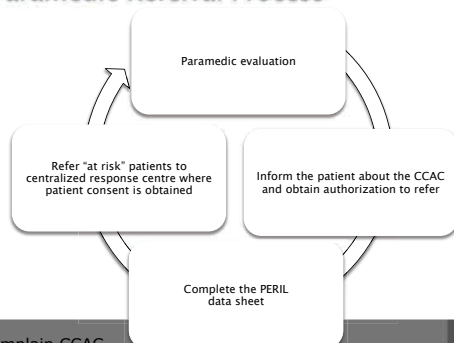
- 1/3
 - **27%** of patients – adverse outcome in 30 days
- 2/3
 - **54%** of patients – adverse outcome in 30 days
- 3/3
 - **93%** of patients – adverse outcome in 30 days

PERIL Prediction Rule

Pathway

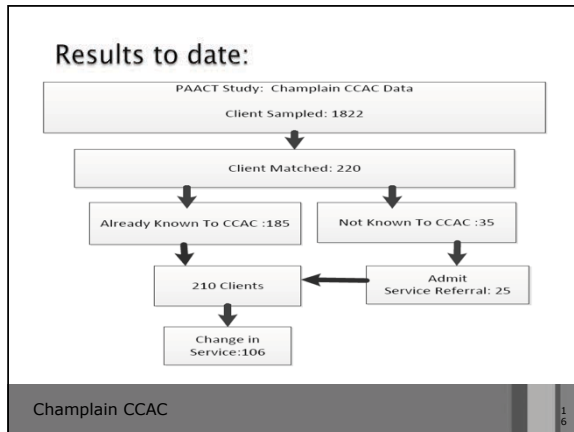
- Refer all patients with PERIL score 2/3
- Prioritize patients with PERIL score 3/3

Paramedic Referral Process



Champlain CCAC

10-1



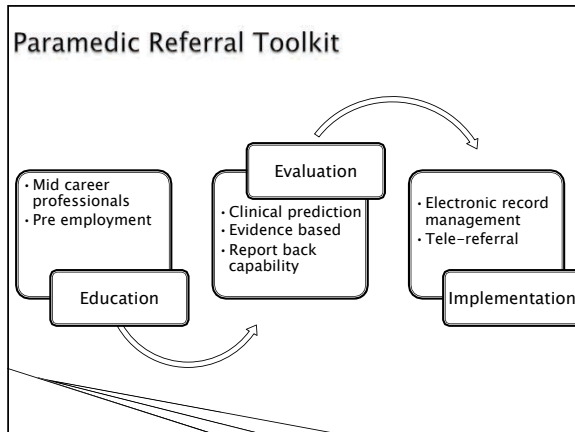
Change in Services

| Client Number | Diagnosis | Reason for Call to Emergency Services | Outcome with CCAC |
|---------------|--|---|---|
| 634- -- 8 | CVA x 2 Hypertension Wallenberg's Syndrome | Allergic reaction, 84 year old spouse needing more help | Care Plan review: OT Referral for equipment needs. Linked with Pain & Symptom Management Team |
| 302- -- 1 | Dementia, Osteoarthritis | Declining mobility, multiple falls. Two EMS calls in 2 days | Readmitted to CCAC for assessment, OT referral, 2 WW and RTS, connected to CSS |
| 641- -- 0 | Osteoporosis, MS, Dementia | Chest pain and headache: postural hypotension and UTI | Reassessed: referral for PT, Admitted to H2H (enhanced care) |
| 631- -- 6 | COPD, Pneumonia | Respiratory Distress Depression, Failure to Cope | Enhanced services, link to community supports (MOW), LTC counselling |

Champlain CCAC

Paramedic and Community Care Team

| |
|--|
| Repeat 911 / Paramedic use by patients 1, 3, 6 and 12 months |
| Hospital admission rates 1, 3, 6 and 12 months |
| Use of community services within 1 and 3 month |
| Mortality within 1, 3, 6 and 12 months |
| Functional decline within 1 and 3 months |



Learning Objectives

1. To provide Paramedics and Police with the knowledge to assess patients for a Community Referral.

This program will enable the learner to:

- Describe the consequences of healthy aging versus disease.
- Compare the older adult with the chronically ill.
- Recognize social problems and functions including the activities of daily living for older adults.
- Recognize that the chronically ill may have similar needs to the older adult.

PREMERGENCY

Paramedic Training Angles, anytime

Community Paramedic Tool-Kit Training Program V3

Resources

Menu Glossary

- 1. Community Paramedic Tool-Kit...
- 1.1. Welcome
- 1.2. Program Goal
- 1.3. 1. Learning Objectives
- 1.4. Pre and Post Training Eval...
- 1.5. Pre-Quiz
- 1.6. Aging Video
- 1.7. Activities of Daily Living
- 1.8. Prediction, Consent & Adv...
- 1.9. The 3 D's
- 1.10. Case Study Scenario Video's
- 1.11. Post Evaluation
- 1.12. Post-Quiz
- 1.13. Certification

Aging Video

To Pause - Click the video. You cannot rewind until you finish viewing the video.

Activities of Daily Living

B.A.D.I.'s

Dressing Eating Ambulating Toileting Hygiene



To Pause - Click the video. You cannot rewind until you finish viewing the video. < PREV NEXT >

Ontario

PREEMERGENCY Community Paramedic Tool-Kit Training Program V3

Paramedic Training Angeleno Anglene Resources

Menu Glossary

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The 3 D's



Dementia
Depression
Delirium

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Ontario

Fall

I Can't Get Up



Ontario

Correctly Fill in The Form



☒ YES ☐ NO
 Are there any problems observed in the home that would prevent this client from being safely discharge back home from the ED, or contribute to recurrent EMS / Emergency use?

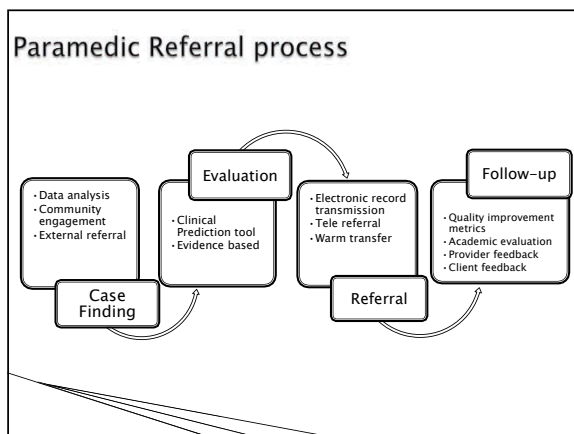
☒ YES ☐ NO
 Has the client used 911 in the last 30 days?

☒ YES ☐ NO
 Medications Disorganized (Meds not clearly labeled, Ad-lib containers, old meds mixed with current medications) ?

Score: 3

If #1 indicated or Score is either 2/3 or 3/3, then obtain verbal consent for referral.

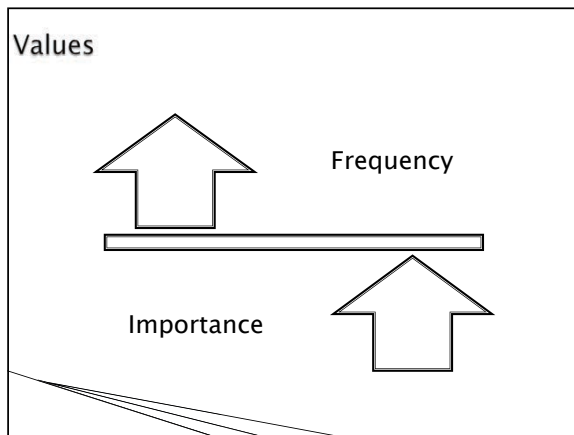



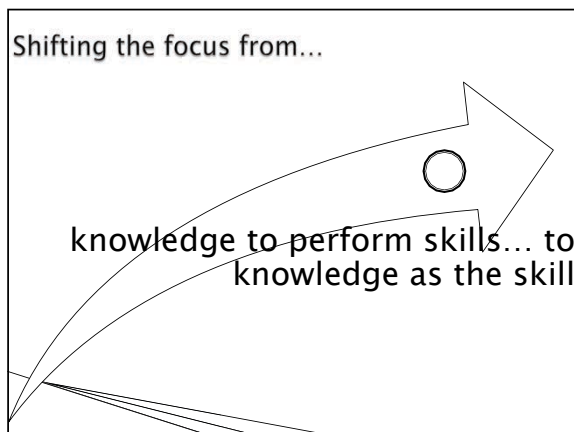


Models of care

| | |
|----------------------|--|
| Wellness clinics | <ul style="list-style-type: none"> • Voluntary case identification • Chronic disease self management • Risk screening • Health system navigation |
| Adhoc home visits | <ul style="list-style-type: none"> • Experiential case finding • Environmental assessment • Care giver support • Chronic disease self management |
| Aging at home | <ul style="list-style-type: none"> • Long term care avoidance • Allied professional extender • Routine evaluation • Customized care plans |
| Targeted Populations | <ul style="list-style-type: none"> • Expanding Paramedics In Community • Community Paramedic Response Units • House Calls • Health Links |

| Models of care | | |
|----------------|------------------------------------|---|
| | In hospital / clinic | <ul style="list-style-type: none"> • Triage • In department |
| | Extended Care Paramedics | <ul style="list-style-type: none"> • Long term care focused • Health system navigator |
| | Collaborative Emergency Centres | <ul style="list-style-type: none"> • Primary care extension • Interprofessional team |
| | Mobile Care Interprofessional team | |





Demo Paramedic Referral Training for IRCP attendees

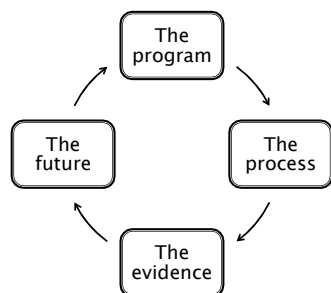
www.paramediccommunity.com

- › Login: ircp
- › Password: ircp

Dean Dimonte
Premergency
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We have discussed;



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