Specialist Paramedic integration with Primary Care

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Aims

Primary Care faces a staffing crisis as a result of large numbers of GPs retiring over the near future, fewer GPs in training and an absence of Advanced Nurse Practitioners and other Allied Health Professionals to provide cover.

Specialist Paramedics are trained to fully assess, treat safely and appropriately discharge or refer patients with acute minor illness or injury. Currently, the Service cannot exclusively target Specialist Paramedics towards the patient cohort for whom they have been trained. This project ensures relevant patients will be seen in their own domestic setting and meets the 2020 Vision’s strategic objectives.

The proposed model, whereby each Specialist Paramedic is available to a cluster of medical practices, ensures that patients receive access to a health care professional, alleviates GP workload and limits the risk of individual Specialist Paramedics being approached by any single practice to work exclusively for them.

Our aim is to:

• Improve patient care in the community by aligning the right clinician to the right patient
• Allow GPs time to focus more on complex medical patients
• Enable Service clinicians to integrate into wider multidisciplinary teams
• Have 100% of patients seen and treated/discharged/referred safely and appropriately by Specialist Paramedics between December 2017 and April 2018
• Less than 5% adverse events involving Specialist Paramedic care between December 2017 and April 2018
• GP time (at 30 minutes per visit) saved, measurable as percentage of visits completed by Specialist Paramedics each day – potentially 27.5 hours weekly with a target of 95% by February 2018

Methodology

The Model for Improvement provided a systematic framework for this work, ensuring that actions taken were highly connected to achieving measurable improvements. Four sequential testing ramps were undertaken:

• Home visits
• Rota for practices
• Generic email
• IT compatibility

Outcome/Results