
CONFERENCE ABSTRACT

The role of paramedics in integrated models of care

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Introduction

For over two decades, grassroots initiatives have driven paramedicine to grow beyond its traditional role of emergency transport to include primary, palliative and preventative care. Paramedics are interacting with more organizations and providers than they did previously. This has contributed to tensions in role definitions, regulatory frameworks and funding models. Health system leaders need to address these tensions to effectively utilize paramedics in achieving the goals of integrated care, and to foster multi-professional collaboration between paramedics and other providers. As governments look to update frameworks for paramedic education and practice, their role within integrated care teams remains understudied.

Aims Objectives Theory or Methods

This scoping study establishes a foundation of knowledge on the role of paramedics in integrated care. Following Arksey and O'Malley's method for scoping reviews, a comprehensive search of the literature was conducted for programs and initiatives where paramedics worked with at least one other health or social care provider. Qualitative content analysis was done to identify the clinical, professional, organizational, system-level, functional and normative aspects of these programs, and the roles of paramedics within them. Findings were organized using Valentijn's Rainbow Model of Integrated Care taxonomy. Common features, challenges and areas of further study were documented.

Highlights or Results or Key Findings

The literature search yielded 10,435 unique citations; 137 documents with 108 unique programs were included in analysis and clustered into two models of care. "Care pathways" models target broad populations experiencing an event: e.g., heart attack, psychological crisis, fall, hypoglycemia. Paramedics' roles in these models involve informal collaboration with other providers, providing standardized assessment, treatment, and triage, and activating follow-up pathways. "Care team" models target populations with complex, ongoing needs. Paramedics' roles in these models involve formal collaboration with care teams, treating symptom exacerbations, implementing individualized care plans, and conducting scheduled home visits. Across both model types, paramedics play an unscheduled response, case-finding and care navigation role, and serve as additional health human resources for public health outreach initiatives. Programs face challenges with unclear role

boundaries, interprofessional education and understanding, legislation that mandates transport, medical oversight mechanisms, misaligned payment systems, inadequate data infrastructure and the culture of emergency medicine.

Conclusions

Paramedics can help achieve goals of integrated care by allowing systems to flexibly respond to client needs: providing unscheduled and scheduled services, activating appropriate emergent and preventative care pathways, and supporting public health. Further work is needed on interprofessional, organizational and system-level integration of paramedics to better enable these roles.

Implications for applicability/transferability sustainability and limitations

This study can help health system leaders consider how paramedics fit into the skill-mix of care teams. When updating frameworks for education, regulation and funding, the flexible, adaptive function of paramedics within local systems should be retained and enabled. This study was limited to comparable health systems in high-income countries.