

Paramedicine can  
take the stress off the  
shoulders of  
hospitals, physicians,  
even...

[Health & Medicine](#), [Healthcare](#)



## **Abstract**

This is a case analysis paper that supports a community paramedicine program. This paper analyzes the benefits and costs to the community, the nearby hospital, the physician in the neighboring town, and also addresses the views of the home health agency, advocating acceptance.

In this case analysis, an initiative has been introduced in my community to implement a community paramedicine program. This program would require an additional 160 hours of training for all of the paramedics that want to become community paramedics. In order for the program to be implemented, support must be obtained by the County Health Department, the local hospital, the community practitioners, (which includes a family practice physician located 15 miles away in a neighboring town), and the local home healthcare nursing agency, (which views this program as a possible threat to their business). This position paper will support and advocate a community paramedicine program. This paper will analyze the benefits and costs to the community, the nearby hospital, the physician in the neighboring town, and also addresses the views of the home health agency, advocating acceptance of the community paramedicine program. Before we go into that, what exactly is community paramedicine?

Basically, community paramedicine is a form of medical care used to reach out to patients at risk for using, (or that currently/frequently use), the emergency medical or in-patient, (hospital), healthcare systems for primary care services, and helping them find more appropriate resources for their

medical needs. There are many ways of providing these services. Here are some examples: In rural areas, community paramedicine may be used to expand the scope of services when primary care resources may be hours away. In urban areas, community paramedicine could be helping frequent users of the emergency medical care system find primary care resources to meet their medical needs. In many other locales, community paramedicine may be used to help assist patients at risk for costly hospital readmissions and preventing them from needing to be readmitted. (Zavadsky, 2011). As you can see there are many practical, cost saving uses for community paramedicine, (and we will visit a few of them in this paper). First, we will take a little more of an in-depth look at community paramedicine as well as the benefits and costs associated with community paramedicine in the local populous/community.

There are many benefits and costs associated with adapting/converting to a community paramedicine system. Community paramedicine's reach has been growing and snowballing, mainly due to the Healthcare Reform Act. Many Emergency Medical Service (EMS) agencies are moving away from the "emergency" paradigm and towards a more generalized medical service that takes more of the community's everyday medical needs into consideration. Community paramedicine is basically used as a supplement to the traditional EMS agency's role. Community paramedicine is used to bridge the gap between emergency and regular medical care, (or I should say medical care that is more within the norm). There are a plethora of EMS organizations and agencies that are currently working on developing a plan

to implement community paramedicine. Let's now look at some of the cost benefits of community paramedicine.

We all know that once a call goes out to the local EMS agency, that agency is going to charge the individual, (and the individual's insurance company), an exorbitant amount of money for the services that are about to be provided. An ambulance ride to the local hospital and the medical care of an emergency department are extremely expensive and sometimes not required. Not every call that paramedics respond to actually needs emergency medical care. Now imagine if you will, the EMS agency/paramedic themselves could decide whether or not an emergency transport to a hospital is required? What if that same paramedic could treat and release the patient there at the scene? Just these two instances could save an EMS agency/department, hospital, the individual with the medical issue, (their insurance company), and the community as a whole, quite a large sum of money.

Paramedic's/Emergency Medical Technician's (EMTs) roles change a bit when practicing community paramedicine. Instead of having to respond to a multitude of numerous 9-1-1 calls and costly emergencies, community paramedics would be striving to prevent emergency calls. Rather than having to transport a patient to the Emergency Room, (ER) at the local hospital for care, paramedics would be able to treat patients in their own home. These community paramedics would be, (and are), trained above and beyond traditional paramedics and have the capabilities to do patient assessments, conduct wound care, blood draws, administer medication and

immunizations, as well as act as a conduit of information between the patient and their primary care physician. (Delucia, 2013). Also, instead of waiting for that 9-1-1 call to come in, community paramedics are proactive and go to a patient's home before they have to make that dreaded call. All of the above are examples of benefits to the community, (and all of these benefits provide a large cost savings to the community, individual, and taxpayers). Now, let's look at how community paramedicine can benefit/help the local hospital and doctor's office.

When it comes to community paramedicine and the relationship with the local hospital, there are a few areas where the hospital definitely benefits. When it comes to the community paramedic program, (in relation to hospitals), it takes emergency trained paramedics and puts them into a different role, a slower paced role if you will. In their new positions as community paramedics, instead of racing to the scene of accidents or emergencies, these individuals now make scheduled home visits to home-bound and elderly patients, and also those that are chronically ill. These visits are coordinated through doctor offices, clinics, and by emergency systems medical directors, as a way to prevent expensive emergency department treatments at the local hospital.

It is no surprise that healthcare costs keep on rising. Hospital care is at an all-time high, and with the introduction of the Healthcare Reform Act, insurance rates are going through the roof, (personal opinion, but still supported by fact). When we take a close look at the increase in healthcare costs, we as healthcare professionals know that the emergency department is a huge

culprit when it comes to overspending. There are some many patients that end up going to the ER for care due to things like mixing up their medications, or like in the case of my children's Grandfather, not getting a wound on his foot taken care of before it got extremely infected, (he is a type II diabetic and ended up losing his foot). Many of these patients that make mistakes like these are not home-bound, so they don't necessarily qualify for home healthcare benefits. However, these patients may still need some minor medical care in their homes from time to time.

The typical type of patient that a community paramedic would treat, would be someone who frequently makes trips to be seen in the ER, but may not have a way to receive follow-up care from a primary care physician, (or any healthcare professional), once they get back home. These individuals may not have anyone at home what so ever that could assist in their care until they get well enough to manage themselves. The great thing about community paramedicine, (and the paramedics that work within this realm), is that with just a phone call from a primary care physician or with a referral from the local hospital emergency department, a community paramedic administer general medical care after the patient has been discharged from the hospital. I believe that a good, experienced paramedic would be an asset to any hospital or doctor's office/clinic that was participating in a community paramedicine program. Why, you ask? The answer is quite simple.

Paramedics, (at least the ones that I know), are highly skilled in medicine and have received fairly in-depth medical training, most have years of experience under their belt, and they are used to dealing with the public on

a regular basis. I have never met a paramedic that wasn't respectful and didn't show some level of compassion towards their patients. I'd like to now visit a few examples of when community paramedicine would be beneficial to hospitals/doctor's offices and also have an impact on the patients that are being treated.

Here is a scenario for you: An elderly woman has type II diabetes and forgets to take her medication from time to time. When this happens, she ends up calling 9-1-1 and is transported to the local hospital by ambulance. Upon arrival, she is assessed by the ER doctor on duty, and is then given some glucose and monitored for approximately an hour. By going this route, the woman cost the EMS service approximately \$500, the hospital another \$1000 and her insurance company settled the bill at let's say \$950 total, (after she paid a \$100 deductible. Realize that these are just hypothetical examples, but what I have witnessed, close to real life). She could have saved quite a bit of money if there were a community paramedicine program in place instead. Community paramedics are experienced at doing in-home assessments. They learned this skill initially when they were performing their duties as EMTs. With the training and education requirements that are in place to become certified as a community paramedic, these paramedics will be that much more skilled and will have increased their knowledge base in areas such as chronic disease management, medication compliance, and home safety, (such as fall risks and dizziness balance assessments). These professionals are also required to be trained on how to implement the instructions from the primary care provider.

I'm sure, (but not positive), that a part of the 160 hours of community paramedicine training curriculum, (as stressed in this scenario), most likely would include making decisions on how to determine in what areas of the EMS agency's response area, are there people in need of community paramedicine, (mainly rural, underserved areas). Since doctors and hospitals/clinics are not in abundance, rural populations are especially in need for access to any healthcare system, (to include community paramedicine). A patient in a rural area might be able to take care of his or her daily medical needs, but getting a ride to a doctor, hospital, or clinic can be difficult. This type of situation shows that there is a definite gap in care that community paramedicine can fill. Now that we have looked at how community paramedicine can benefit the population of a certain locale, as well as the local hospital and doctor's office, let us now look at how community paramedicine could affect the local home health agency.

When it comes to community paramedicine and the local home health agency I believe the outlook is good when it comes to possible integration. There is significant evidence that shows the need to better service/support patients once they have been released from the local hospital and sent home. The local home healthcare agency is an extremely viable resource when it comes to treating certain types of patients, but they are mainly there to provide skilled care to home-bound patients. There is an overwhelmingly high readmission rate in hospitals throughout the country, and many home health agencies have missed large sects of patients whom may need skilled



after hospital care, but may not be home-bound. This scenario is a perfect example of where community paramedicine fits into the equation.

In my local community, (as well as most of the country), EMS providers are considered to be trusted, competent, community oriented healthcare workers. As of 2012, more than 240, 000 paid EMTs and paramedics, (not including volunteer departments), were certified throughout the entire country. (Bureau of Labor and Statistics, 2014). These EMTs and paramedics provide a large and substantial workforce, that when appropriately trained, could help reach out to vulnerable patients throughout the local community. Those patients that require after hospital treatment but don't necessarily qualify as home-bound and cannot receive treatment from the local home health agency would benefit greatly from community paramedicine.

Every community has very unique healthcare needs and therefore requires its own solutions to meet those needs. The local healthcare system recognizes the growing need and use of EMS providers to fill gaps in communities. I believe that the local community needs to conduct a current assessment of the capabilities of home healthcare agencies within the region. To integrate the local EMS agency/department into the local healthcare system as a community paramedicine provider, the EMS agency needs to work with the local health system that is in place, and ensure that the local health system management is kept abreast and fully informed of the EMS agency's intentions and capabilities. As additional healthcare needs continue to grow within the local community, community paramedicine definitely has quite strong potential to work effectively with the local home

health agency and healthcare system as a whole, to solve community and individual healthcare needs.

Even though community paramedicine has many benefits and advantages, with any program there are always some areas that raise concern. Some of the areas of concern for community paramedicine are: There could be excessive use by some of the patients within the system, (due to the lower cost and ease of access). Some patients that may use the program may not be integrated into a healthcare system, so tracking their medical history/healthcare usage may prove to be difficult. Each and every community across the country is unique and will have its own needs. What is meant by this is that each community will have to determine how they will implement community paramedicine and how it will work for them. Each community will have to perform a type of assessment of needs to identify where there are gaps in healthcare services, and the amount of resources available, (i. e. EMS agencies/departments, paramedics, EMTs, etc.). Each community will also have to take into account the specific health needs of their citizens, which could be anywhere from substance abuse and mental health issues, to diabetes and AIDS. It may be hard to garner the support needed to implement community paramedicine in some areas of the country. One statistic that I found interesting was that 80% of physicians don't know how to use community paramedics, so EMS leaders must engage in educating them about what we do and how to access us. (Heightman, 2014). Above all, we as healthcare professionals need to show the powers that be

that community paramedicine is a cost effective, time saving, viable option when it comes to healthcare.

This position paper supported and advocated for a community paramedicine program. This paper also analyzed the benefits and costs to the community, the nearby hospital, the physician in the neighboring town, and also addresses the views of the local home health agency, pushing for acceptance of the community paramedicine program. I, (like many others), believe that the overall concept of community paramedicine is excellent. Many locations throughout the country are currently implementing community paramedicine, (or working on an implementation plan), but eventually I believe more and more EMS agencies/departments will be involved in community paramedicine. Even though there are a few States that already employ community paramedicine within their healthcare system, once town/city officials and taxpayers throughout the country realize the true cost savings and overall benefit that community paramedicine brings to the table, the flood gates will open and I believe that community paramedicine will eventually become the norm. Stay tuned, because I believe that it will soon be heading to a town near you!