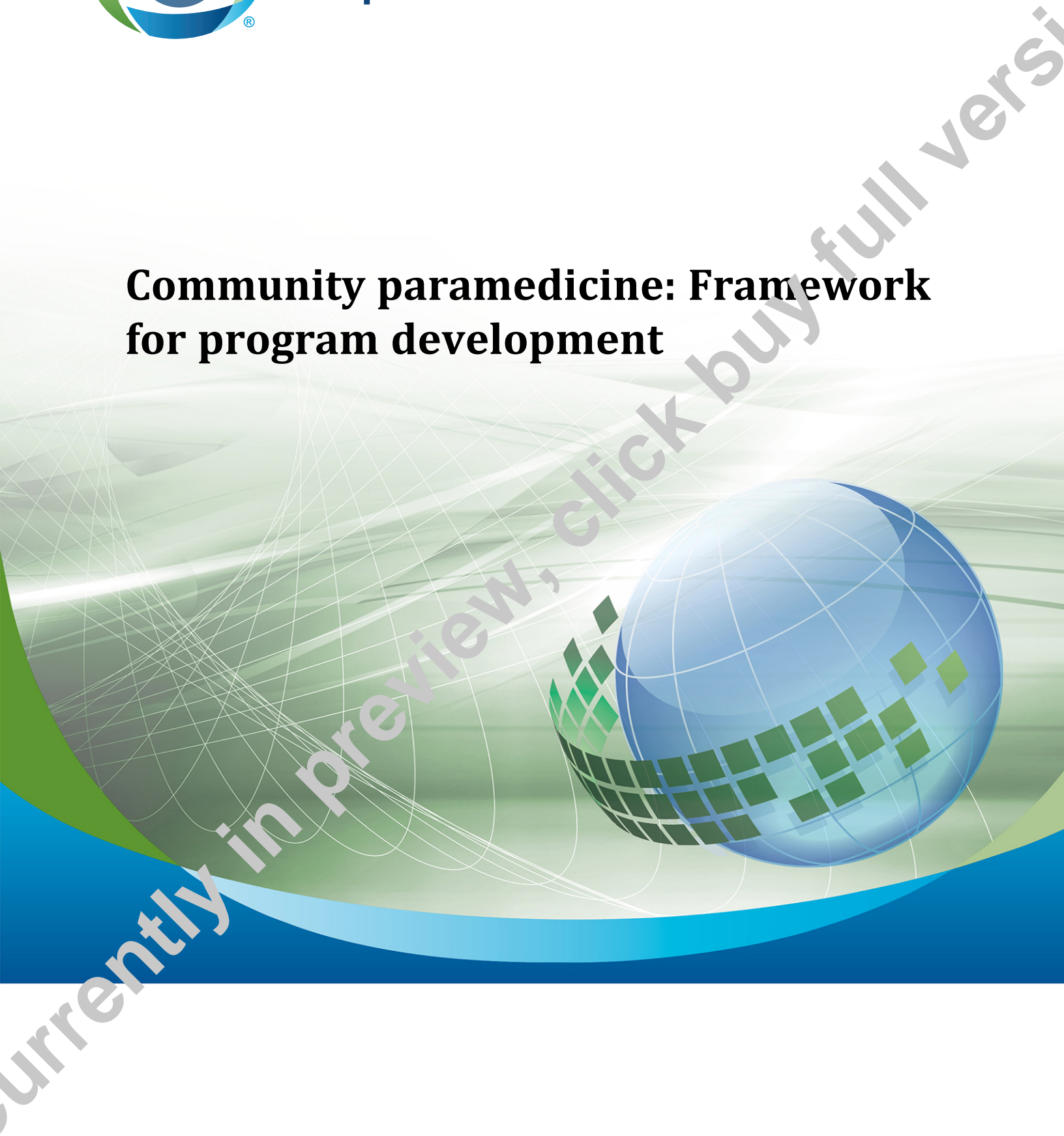




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Z1630-17

Community paramedicine: Framework for program development



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Preface

This is the first edition of the CSA Z1630, *Community Paramedicine: Framework for Program Development*. This Standard provides a framework for the planning, implementation and evaluation of a community paramedicine program. The purpose of this Standard is to provide guidance to fully understand the context, key considerations, and essential elements for community paramedicine program development. The Standard provides a framework and a systematic approach for paramedic services and their partners wishing to establish these programs.

This Standard includes the following elements of a program development framework:

- a) guiding principles;
- b) competency, education and training;
- c) models of care;
- d) planning, including
 - i) identifying partners;
 - ii) community and stakeholder engagement;
 - iii) community needs and service gap assessment; and
 - iv) communications;
- e) implementation; and
- f) evaluation and continuous improvement.

This Standard was prepared by the Technical Committee on Community Paramedicine, under the jurisdiction of the Strategic Steering Committee on Healthcare Technology, and has been formally approved by the Technical Committee.

Notes:

- 1) Use of the singular does not exclude the plural (and vice versa) when the sense allows.
- 2) Although the intended primary application of this Standard is stated in its Scope, it is important to note that it remains the responsibility of the users of the Standard to judge its suitability for their particular purpose.
- 3) This Standard was developed by consensus, which is defined by CSA Policy governing standardization — Code of good practice for standardization as “unanimous agreement. Consensus implies much more than a simple majority, but not necessarily unanimity”. It is consistent with this definition that a member may be included in the Technical Committee list and yet not be in full agreement with all clauses of this Standard.
- 4) To submit a request for interpretation of this Standard, please send the following information to inquiries@csagroup.org and include “Request for interpretation” in the subject line:
 - a) define the problem, and reference to the specific clause, and, where appropriate, include an illustrative sketch;
 - b) provide an explanation of circumstances surrounding the actual field condition; and
 - c) where possible, phrase the request in such a way that a specific “yes” or “no” answer will address the issue.

Committee interpretations are processed in accordance with the CSA Directives and guidelines governing standardization, and are available on the Current Standards Activities page at standardsactivities.csa.ca.
- 5) This Standard is subject to review within five years from the date of publication. Suggestions for its improvement will be referred to the appropriate committee. To submit a proposal for change, please send the following information to inquiries@csagroup.org and include “Proposal for change” in the subject line:
 - a) Standard designation (number);
 - b) relevant clause, table, and/or figure number;
 - c) wording of the proposed change; and
 - d) rationale for the change.

Z1630-17

Community paramedicine: Framework for program development

0 Introduction

0.1 Overview

The health care system is facing unprecedented challenges. There is increased financial pressure in the health care system, a shortage and misdistribution of health care professionals in some regions, and increased demand on paramedic services. At the same time, many jurisdictions are increasingly committed to transforming the health care system to be more patient and community-based.

Community paramedicine programs have emerged throughout Canada and internationally in an effort to maximize efficiencies in patient care and resources. These programs provide an innovative model of care that helps to improve access to additional support services for seniors and patients with chronic health and social issues. The development and expansion of these programs allows paramedics to apply their education and skills beyond the traditional role of emergency medical responders. These programs help to support high users of paramedic services to avoid emergency room visits and hospitalizations and can potentially delay entry to long-term care. The aim of these programs is to improve patient outcomes and decrease costs in a way that supplements, but does not replace, services delivered by other health care providers. These programs can help to provide a more sustainable, integrated, patient-centred system.

While many paramedic services and jurisdictions are developing and expanding these programs there are no nationally or internationally accepted guidelines for the development of community paramedicine programs. This Standard addresses the elements that experience has shown to be the most critical in developing an effective community paramedicine program.

0.2 Application

The extent of the application will depend on the circumstances particular to the paramedic service, the nature and location of its operations, the conditions in which it functions and the local gaps in healthcare. The intent of this Standard is not to promote uniformity in the structure of community paramedicine programs, but to encourage organizations to implement programs appropriate to community needs and available resources.

1 Scope

1.1

This Standard provides a framework for the planning, implementation and evaluation of a community paramedicine program, hereinafter referred to as “the program”. The purpose of this Standard is to provide guidance to fully understand the context, key considerations and essential elements for community paramedicine program development. The Standard provides a systematic approach for policy makers, paramedic services and their partners intending to establish a community paramedicine

program. The framework provides a practical guide and describes the participatory, evidenced-based, patient-centred process for establishing a practice role and new model of care.

1.2

This Standard includes the following elements of a program development framework See Figure 1:

- a) guiding principles;
- b) competency, education, and training;
- c) models of care;
- d) planning, including
 - i) identifying partners;
 - ii) community and stakeholder engagement;
 - iii) community needs and service gap assessment; and
 - iv) communications;
- e) implementation; and
- f) evaluation and continuous improvement.

Figure 1
Framework for community paramedicine program development
 (See Clause 1.2.)



1.3

This Standard is not intended to provide the full requirements of a management system standard. It may be used in conjunction with a management system, or on its own in the absence of a formal management system.