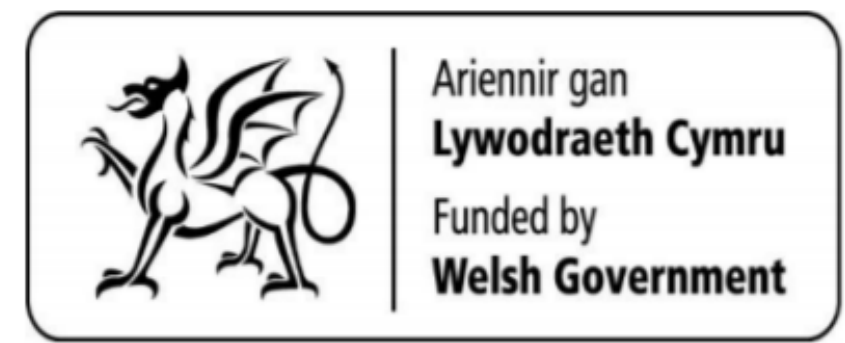




Ymddiriedolaeth GIG
Gwasanaethau Ambiwians Cymru
Welsh Ambulance Services
NHS Trust



Swansea University Medical School
Ysgol Feddygaeth Prifysgol Abertawe



Ambulance paramedics Responding to urgent patient Requests In general practice for home Visits - Evaluation development (ARRIVE) Protocol

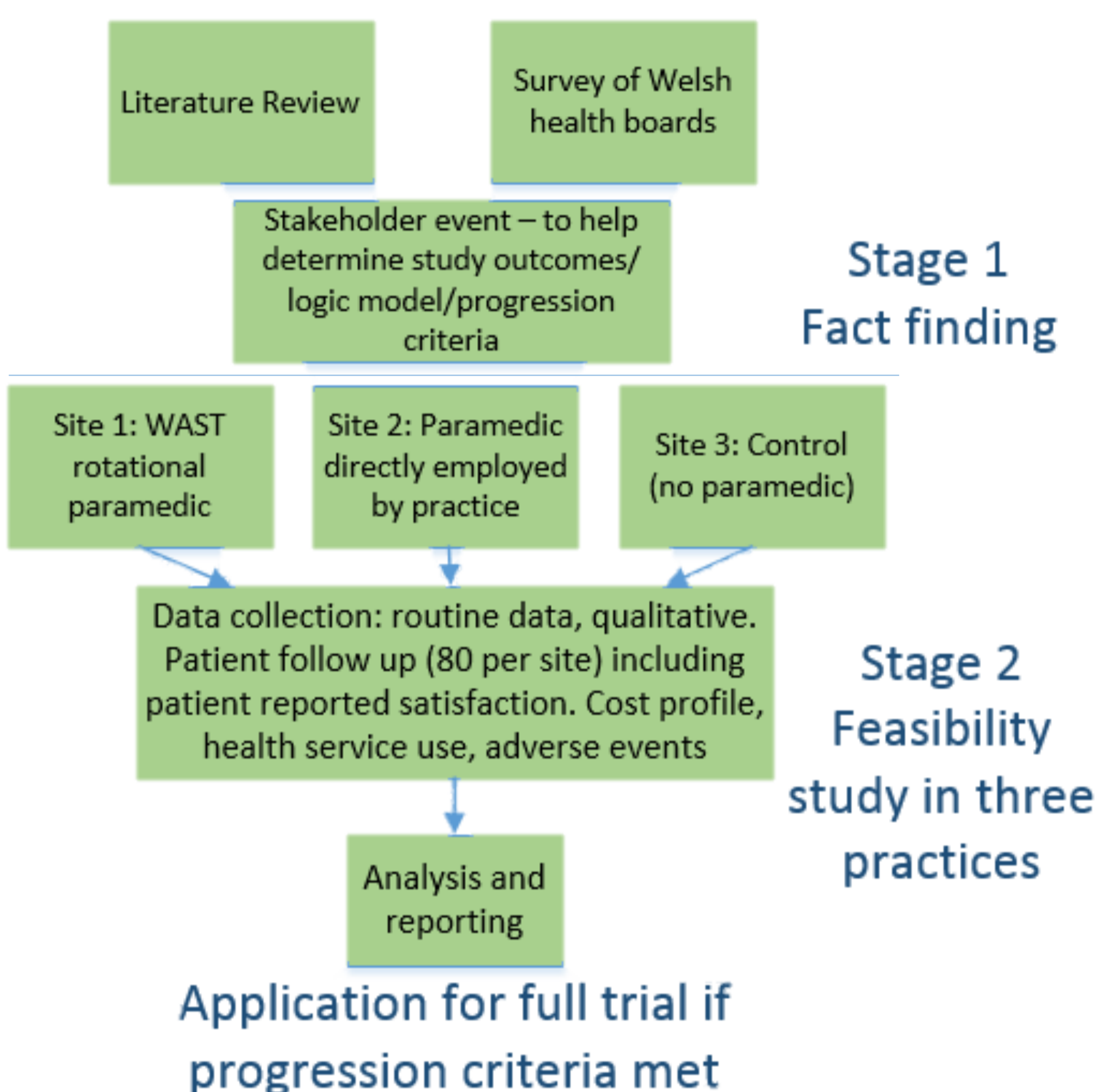
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Background: In response to rising demand for healthcare and limited availability of GPs, paramedics are increasingly working in general practices, most commonly to carry out home visits. UK policy supports this change, which involves role substitution across professional groups and sectors of care. Schemes have been introduced over recent years in Wales, with various configurations, employment, and governance arrangements. However, we do not know the risks and benefits of Paramedics working in Primary Care (PPC), or which model works best. As well as effects at individual patient level, potentially on outcomes such as safety, acceptability, efficiency, and costs, this interface-crossing innovation may have an impact on workforce issues including professional role development and 999 service availability. There is an urgent need to better understand the PPC innovation.

Aim: To understand and describe the underpinning research evidence; service design, purpose and potential impacts of paramedics working in and alongside primary care; and to determine the feasibility of undertaking a fully-powered evaluation of PPC.

Methods



Stage 1 Results:

Literature Review: There is a paucity of literature in this area, with very few articles being directly relevant to PPC. Of particular importance is an evaluation of early stage development of rotating paramedic model pilot sites commissioned by Health Education England, which found that paramedics managed a high proportion of calls in the community (70-93%); and there were early indications that hospital conveyance could be reduced within local populations where rotational paramedics operate (Turner and Williams 2018).

Survey of Welsh Health Boards: 25 sites (practices or clusters) are using or have previously used paramedics (as of 01/01/19). Six of seven health boards had at least one site utilising PPC, although two thirds of sites were within the two south west health boards. A summary of four sites (each in a different health board) is shown below, illustrating some of the differences in service configurations found so far. None of the paramedics were prescribing. Training, largely informal, ranged from 1 to 16 hours and generally focussed on the use of the practice's IT system, (except the site which did not allow the paramedic access to the care record).

Table 1: Summary of PPC models in four sites in Wales

	Site A	Site B	Site C	Site D
Stated main aim	To undertake home visits (short staffed)	To undertake home visits (short staffed)	To reduce GP calls to 999; reduce unnecessary admissions	To showcase that non GPs can provide appropriate care, and address staff recruitment
Employer	WAST, funded by Health Board	Practice	WAST, funded by WAST	Practice
Type of site	Single practice	Single practice	Cluster	Single practice
Duration of employment	Commenced June 2018, planned for 2 years	Commenced July 2017, planned to continue	Feb 17 – May 18, 16 months	Jan 15 – March 18, 38 months
Number of PPC	5 on rotation	1	2 on rotation	1
Type of paramedic	Advanced paramedic	Advanced paramedic	Paramedic	Advanced paramedic
Hours worked	08:30 – 17:30, 5 days	09:00 – 18:00, 4 days	10:00 – 18:00, 5 days	08:30 – 17:00, 5 days
Uniform	Nil	Nil	WAST uniform	Nil
Vehicle	Health Board vehicle	Own vehicle	WAST vehicle (could be diverted to Category 1 999 call)	Own vehicle
Rotational	Between practice, call centre and Rapid Response Vehicle	None	Between practice and Rapid Response Vehicle	None
Patients excluded	Young children	Nil	Based on triage by GP e.g. complex patients	Children under 2
Patients per day	10 home visits, 3 in practice	7 home visits, 3 in practice	5 home visits, 1 in practice	18 in practice, 0-1 home visits
Access to patient care record	Yes and can edit, not remotely	Yes and can edit, including remotely	No	Yes and can edit, not remotely

Discussion: The survey is providing a rich nationwide picture of paramedics roles in primary care, allowing us to compare and contrast service models, funding and governance. A stakeholder event (April 2019) will further ensure our understanding of the logic and rationale behind such work and support the design of our Stage 2 feasibility study in three practices.