Paramedic Alternate Care Referrals
CCAPI – Central Coast Alternate Pathway Initiative

Author: Andrew Craig  Position: ICP/ECP  Email: andrew.craig@health.nsw.gov.au  ECLP Cohort 16

Aim Within 7 months Improved Paramedic Performance around patient non transports on the Central Coast

Background to problem worth solving
Increased benefits of patients having health care options. Increased benefits of having a framework for safer decision making around non transports. Decreased presentations of non acute patients in ED

The Problem:
Low usage of Alternate Care Pathways resulting in a high number of non – acute patients arriving in ED by ambulance

Team members
• Sponsor/ (Guidance Team) Mr Alan Loudfoot Director Clinical Services
  Mr Graeme Malone Corporate Services Manager
  Mrs Michelle Shiel/ Director Clinical Innovation
• Project Team
  • Team Leader – Andrew Craig ICP / ECP
  • Consumer – Hunter New England PHN

Results
Outcome measures - Baseline

Paramedic Feedback
The Hunter New England PHN conducted a survey in 2016 of the 102 CCAPI Paramedic Participants

I have developed a better knowledge of referral option for patients as a result of the CCAPI Course?

Options
Easy
High
Low
Impact
Implementation

Cost Savings
During the CCAPI project period a percentage decrease in alternate pathway numbers was demonstrated for the Central Coast.

Overall Outcome of Project:
During the CCAPI project period a percentage decrease in alternate pathway numbers was demonstrated for the Central Coast.

Cost Savings
Average ED cost for patients arriving at ED by NSWA
Triage Code
3 $1057.40
4 $772.67
5 $519.59

Plans to sustain change
CCAPI concluded March 2016. Ongoing monitoring of non transport statistics is now being handled by the Health Resource Manager with regular reporting with the PHN.

Paramedic Comments
I think it is a good course and initiative

Most GPs are very receptive to this program. Well done NSWAG on a huge step forward

Management support is needed for this program to work

Many. Particularly low acuity and relatively simple jobs. Patients overwhelmingly surprised what we can do, the associated documentation and all round feel more included in their care over and above a transport only option.

I see a great level of information in many PHCR's and a better understanding of potential patient outcomes because of the course and do and have highly recommended it to my staff. I am also aware of many non transports as a result.