

SA Ambulance Service fact sheet

Extended care paramedics (ECPs)

The Extended Care Paramedic Program is a joint initiative of SA Health and SA Ambulance Service (SAAS) that commenced in December 2008.

ECPs are highly skilled clinicians who work collaboratively with other health care professionals to manage and treat people in their usual residence. SAAS operates the ECP program for all members of the community. It is proving to be particularly beneficial to both those living independently and also those in residential aged care facilities.

Who are ECPs?

Intensive care paramedics (ICPs) who have completed further specialised intensive training, skills enhancement and placements.

How do patients benefit from the ECPs' services?

ECPs only attend patients who have made a call to 000. ECPs in the SA Ambulance Service Emergency Operations Centre assesses the patients' requirements through phone consultation or emergency crew referral and can dispatch an ECP, which is a single responder in an ambulance response vehicle, as opposed to a traditional stretcher carrying ambulance.

ECPs provide alternate care pathways for patients and assist in reducing unnecessary transport to hospital. Attendance by an ECP reduces the disruption to patients and their carers, associated with a trip to hospital. If after assessment, the patient still needs to go to hospital, the ECP will arrange this.

Patients receive more tailored care and if needed, will be managed in collaboration with other health professionals that are appropriate to their needs.

When do they work?

- > On road 24 hours a day seven days a week.
- > There is always a 24 hour ECP presence in our Emergency Operations Centre available.

What geographical areas do they cover?

- > Adelaide metropolitan and fringe areas as operationally required

What equipment do they have?

- > normal ambulance kits, 12 lead ECG
- > procedures/equipment:
 - point of care testing using i-STAT machine
 - electrolytes
 - troponin I, INR
 - blood and other specimen collection
 - these are taken to IMVS for processing with a copy of the results sent to the patient's GP/Specialist
 - suturing equipment, wound glue and extensive range of wound dressings
 - ENT assessment - otoscope
 - ring cutters for ring removal.
 - urinary catheters and PEG's

What extra medications do they have?

- > antibiotics – oral, IV
- > bronchodilator puffers, spacers and peak flow meters

For more information

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- > analgesics – oral, IV, IN
 - endone, panadeine forte, panadeine, paracetamol
- > NSAID – oral and suppository
- > steroids – oral, IV
- > antiemetic – oral, IV
- > antispasmodic – oral, IV
- > antidiarrhoea
- > antihistamine - oral
- > ADT (tetanus vaccine)
- > others : Miconazole, Emla, Omeprazole, Ural, Gastrolyte.

What type of cases do ECPs attend?

- > wound care including suturing and skin tears
- > pain management, chronic pain (musculoskeletal) and palliative care patients with break through pain
- > gastroenteritis – diarrhoea and vomiting
- > catheter/urinary tract infection/urinary retention
 - replacement of urinary catheters – female, male and supra pubic with acute problems (not routine replacements)
- > rehydration/heat/dehydration
- > cellulitis
- > chest infections
- > PEG replacements (acute problems not routine replacements)
- > confusion/dizziness/lethargy
- > confirmed migraine
- > epistaxis
- > palliative care issues.

What other health care professionals do ECPs liaise with?

- > general and other medical practitioners
- > RDNS and Focus Health
- > Metropolitan Referral Unit
- > palliative care services
- > Carers Respite Centre
- > Adelaide Plastic Surgery
- > Sportsmed SA
- > physiotherapists.

How to access an ECP?

The introduction of ECPs is an enhancement of SA Ambulance Service existing service. The way to access an ECP is by calling triple-zero (000).

The pilot

(reporting period 1 December 2008 – 30 June 2009)

- > 1123 cases with ECP intervention
- > 49.4% of ED presentations prevented
- > 5.3% of hospital admissions avoided
- > no adverse outcomes.

