



4 Develop the team

Paramedics

Practice based paramedics, S Kent Coast

GP practices in South Kent commissioned a 7-day acute home visiting service provided by paramedic practitioners who liaise with the patients own practice.

The idea

As part of the GP Access Fund, the Invicta federation in South Kent contracted the local ambulance trust to provide a paramedic practitioner visiting service to patients in their own home. The aim of the service is to minimise the disruption of home visits to GP surgery schedules and reduce the number of A&E attendances. The paramedic practitioner service provides a seven day per week visiting service in collaboration with local GP practices and the 8am-8pm hubs in Folkestone and Dover.

The paramedic practitioner is trained to independently provide care that does not require the intervention of a doctor. The paramedic has access to the full GP record. They report directly back to the GP with the outcome of the visit and any updates on any treatment and medication that was given. The paramedics also work at the hubs during the weekends, triaging and seeing patients who did not require a GP to attend.

Referrals to the service are via a GP or NHS 111. In the long term, Invicta Health is planning to work with SECamb to integrate paramedic practitioner visits into the overall ambulance service to increase sustainability, stability and primary care integration.

Impact

In the first 3 months of this service, 260 patients were seen. In 11% of cases, it was judged that this intervention at home prevented hospital admission. The service costs £3,000 per week to run. Aside from the benefits for all patients of receiving rapid help, the service pays for itself through reductions in hospital admissions.

Implementation tips

It is important to build a strong working relationship with the ambulance trust in advance, and collaborate on planning, evaluating and adjusting the service over time. Expect to need to make a number of adjustments, and to find more opportunities to incorporate the paramedic practitioners input than may originally have been obvious. This may include making follow-up home visits for patients treated out of hospital, for example, or being directly accessible to community nursing staff for assessments before liaison with the GP if necessary.

Not all paramedics are able to provide the care required for this service to deliver best value - it should be provided by a paramedic practitioner.

Avoid delaying implementation whilst trying to design the perfect system; as long as both partners are working safely, improvements can be made as the service develops.

Regular communication with everybody involved is vital. This includes communicating the success of the work to staff.

Staff are key to success; chose people who are flexible and can adapt to changing situations and circumstances.

Link(s)

www.england.nhs.uk/ourwork/futurehhs/pm-ext-access/resources/