Impact of EMS direct referral to community care on services received

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Introduction

• The Community Referral by Emergency Medical Services (CREMS) program was implemented in January 2015 in Southwestern Ontario
• Program allows Paramedics to directly refer patients in need of home care support to their local Community Care Access Centre (CCAC) for needs assessment
• Referral to community service connects each patient with appropriate, timely care, supporting their individual needs

Objectives

To evaluate the success of the CREMS program by determining:
• The number of referrals made by EMS in London-Middlesex to CCAC since implementation
• The proportion of referred patients receiving a new or increase in service due to EMS referral

Methods

• Data for all CCAC referrals from London-Middlesex EMS were collected for a thirteen month period (February 2015-February 2016)
• Data were evaluated for quantity of referrals and proportion that led to a patient receiving new or increased home care service

Results

Number of referred patients

- 391

New Clients

- 162 (41.4%)

Existing Clients

- 229 (58.6%)

Not Admitted to CCAC

- 43/162 (26.5%)

Admitted to CCAC

- 119/162 (73.5%)

Patients with Change to Existing Service

- 101/229 (44.1%)

Patients with No Change to Existing Service

- 128/229 (55.9%)

• 436 referrals made in the study period which represented 391 individuals
• No patients refused a new or increase in service

Conclusions

• The CREMS program benefited a substantial number of patients, with 56% of the total number referred receiving a new service or a change in existing services
• The positive impact on patient care observed in this project supports a continuation and expansion of the CREMS program
• Future studies will determine if the program reduces patient reliance on 911 requests for paramedic care and Emergency Department transports