

**GUEST EDITORIAL**

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**“An exploration of expanded paramedic healthcare roles for Queensland.”**

*- A Canadian Perspective*

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**Introduction**

An excellent overview of international approaches to expanded paramedic roles has been presented in the report “An exploration of expanded paramedic healthcare roles for Queensland”.<sup>1</sup>

In Canada, as in Australia, maintaining health care has been exacerbated by several factors including: rising cost of health care, increase in chronic diseases requiring greater health resources, a shortage of doctors and other healthcare workers in addition to the problems of recruiting and retaining staff in rural and remote communities.

Canada is divided into provinces with the responsibility to deliver the health care given to the provinces with the exception of First Nations health which is partnered with Health Canada, a federal government department. Over time, individual provinces have developed systems that meet the needs of the local communities. Nonetheless, availability of health care resources and finances has had an impact on the development of such systems. In Canada, like Australia, paramedics have been engaged in unofficial expanded practice opportunities for some time and interest lies in expanding roles and developing broader and more general knowledge beyond the highly specialized knowledge that is presently experienced by paramedics.

The major causes identified in the Queensland report as contributing to the relative under representation of the health workforce in rural and remote areas is equally shared in Canada with the shortages of health professionals continuing to worsen.

Outlined in the exploration of expanded paramedic healthcare roles for Queensland report, are recommendations that encompass strategic direction for sustainable health care solutions.

*“The role of expanded practice programs for ambulance paramedics should be considered as a means of expanding their contribution to providing healthcare in the community, especially in rural and remote locations.”*

In many rural and remote communities in Canada there is limited access to advanced life support. With expanded scope of practice, the opportunity to increase the community’s level of care through alternate delivery models may enhance health care access and patient

outcome. The use of advanced life support capable practitioners appears to provide the greatest advantage in many rural and remote communities where none exists.

*“The development of paramedic expanded practice roles should be guided by the needs of the local community. Therefore, a needs assessment study and comprehensive review of current expanded practices should be carried out.”*

In Canada 31% of Aboriginal people live on Indian reserves and settlements typically located in rural and remote locations. Aboriginal Canadians have been identified as having a disproportionate rate of severe trauma than the non-Aboriginal population.<sup>2</sup> The use of expanded role paramedics to assist in causation and harm reduction strategies would lend a significant contribution to the communities overall health. It is also important to ensure the communities have a voice in identifying expanded roles and level of cares that would be supported.

*“The ambulance service should immediately begin to explore options for training paramedics in expanded practice roles and work in close association with universities to develop appropriate training curriculum according to the findings from the needs assessment study.”*

Many provinces in Canada have introduced legislation to widen the scope of practice of health care professionals and allied health workers. In addition for the expanded scope to be successful, transferable knowledge and credentials are imperative to allow the needs of communities to receive the best evidence care now and into the future through highly educated practitioners.

The Queensland report identifies that a significant change to how paramedics are educated and trained is necessary. A need for greater emphasis placed on chronic illness requires a different set of competencies than those required for acute conditions. In essence a paradigm shift for paramedics who have been trained to deal mainly with acute medical and trauma conditions will be required to achieve important chronic disease management skills.

*“The involvement and support of the medical profession and allied health workers needs to be encouraged to facilitate the development of the new roles and to forge essential working relationships with them.”*

## **Summary**

The Queensland report provides an excellent consensus on international models allowing it to be a valuable contribution to expanded scope of practice and an essential contribution to other countries in the world considering expanded scope models. The recommendations outlined in the report provide a sound and reasonable direction to ensuring a program that is sustainable for the future.

[Download Report](#) (1.4MB .pdf)

## **References**

1. Raven S, Tippett V, Ferguson J-G, Smith, S. Australian Centre for Prehospital Research. The University of Queensland. An exploration of expanded paramedic healthcare roles for Queensland. The State of Queensland (Department of Emergency Services); 2006.
2. Karmali H, Laupland K, Harrop AR, Findlay C, Kirkpatrick AW, Winston B, et al. Epidemiology of severe trauma among status Aboriginal Canadians: a population-based study. *Canadian Medical Association Journal*. 2005;172:1007-1011.