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CONFERENCE REVIEW

Inaugural Extended Care Conference Thursday 11 November 2010

Michael Johnson

Final year student of Bachelor Clinical Practice (Paramedic) Charles Sturt University,
Bathurst, NSW, Australia

This one day conference was the Innaugural Extended Care Paramedic (ECP) conference, and was organised by ACAP NSW. Attendees comprised of currently serving paramedics, ECPs and candidate ECPs from Ambulance Service NSW (ASNSW), paramedic educators from within ambulance services and universities, students and other interested parties both locally and interstate. The conference was held at Ettalong on the NSW Central Coast.

Topic areas of presenters included; Patterns of adverse effects in EMS, Redesigning models of care across the patient journey, Meeting 21st century health care needs, New concepts in clinical education, Management of fractures, Radiology in the ECP program, Physician Assistants, Research project on anaesthesia, ECP experience in Adelaide, ECP role in elder care, and finally, ECPs and traditional boundaries. There were also trade and a research poster displays.

Interest in and a reassurance of Paramedic registration by 2014 was reiterated, along with the common theme amongst all presenters of accessing the appropriate treatment and linking patients to the services they need, by not just ECP's, but also paramedics in general to reduce workloads on Emergency Departments (ED).

As a final year student of Bachelor Clinical Practice (Paramedic) at Charles Sturt University, of particular interest were the Models of care, Meeting 21st century needs, and the Clinical education presentations. These presentations appeared to stimulate the most interest, judging by questions from the floor, regarding future developments in practice for ECPs. A common theme of the questions from the floor, throughout the presentations, was the interest in future research that ECP's would require to base sound evidence based practice upon. Something which my fellow students around the country will be heartened by, as one of the expectations of our degrees will be to participate, at some stage in our careers, in researching the types of questions posed from the floor.

An interesting perspective, for me, was presented by Clare Gardiner, in Redesigning models of care across the patient journey, and the increasing demand pressures on the ED. With a number of following presentations referring to the significant percentages of ECP attended patients, being kept out of the ED entirely. The role of the ECP in optimising the patient journey was emphasised. The daunting economic picture was painted that we would need to build a 300+ bed hospital a year just to keep up with population growth, and that health care professionals should consider the "transfer of care" and not discharge as the goal.

The potential role of ECPs in meeting health care needs into the future, presented by Siun Gallagher, outlined the future of ECP training, roles, and potential for significant reductions in hospital beds, and therefore providing health care cost savings. These savings, as mentioned in Gardiners' presentation, should be investigated thoroughly to secure future funding and legitimise the input ECP's can have in providing patient access to appropriate health care. Questions from the floor highlighted the need for ECP's to be able to independently initiate access to programs or facilities directly, and not feel the need go through the ED for the sake of access alone.

The presentation on Concepts in clinical education, by Bernard Champion, was particularly poignant for a soon-to-be-graduate, as it reflected on many aspects that we cover as part of our academic studies. Some of these academic requirements may be new to those currently serving as paramedics. Observations from the floor reflected on the difficulty of returning to "school", and, '...learning to learn', after so many years on-road. Drawing attention to, and reflection on, education versus experience. A challenge graduates and their experienced mentors will have to seriously grapple with into the future for a harmonious transition to graduate entry into ambulance services across Australia into the future.

The presentation on Physicians assistants, by Karen Mulitalo, posed a potential model for training ECPs as well as a potential pathway for ECP's to develop professionally and academically. The model of training of physicians assistants could easily be adapted to train ECPs

The SA ECP experience, presented by Kate Clarke, in the form of an outline of the ECP program in SA, and case studies, provided practical and tangible insight into the role that ECPs play in reducing demand on ED's in Adelaide. Even at this early stage, significant percentages of patients were diverted to more appropriate care, reducing demand on EDs.

The presentation by Irene Balderston, reflecting on care for the Aged, indicated the broad range of services that assist the aged. A prime example of how ECP's can divert patients away from ED's, and access services more appropriate for patient care. Access to services, and the need for a "one stop shop" for ECP referrals was highlighted, so that direct referrals from ECPs can be facilitated without need for the ED.

This conference, for me as a student, provided an affirmation of the role ECP's can play into the future. The key role of linking patients and providing access to the most appropriate and direct care was emphasised. The benefits of the roles of ECPs were reflected in the numbers presented in NSW and SA where significant reductions in admissions to EDs are already taking place. An Extended care Conference is planned for next year and details should be available via <http://www.paramedics.org.au>.