

DEFINING & DESCRIBING PARAMEDIC PRACTICE IN CANADA

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BACKGROUND

Paramedicine is a rapidly evolving profession, with paramedics taking on new roles in a variety of non-traditional practice settings. As expectations have grown, so have paramedics' capabilities and education. Yet, there is surprisingly little aggregated and available data to inform paramedicine's growth. Health care in Canada is in the provincial jurisdiction, and there is considerable variation in scopes of practice, regulatory mechanisms, integration with other health and emergency services, and operational practices. Little infrastructure and few processes exist to gather and interpret data at the national level.

The CPIS Standards Research Project is a mixed methods study designed to identify core concepts, models, and taxonomies defining and describing paramedic practice in Canada with the intention of informing development of standards for a national Canadian Paramedic Information System.

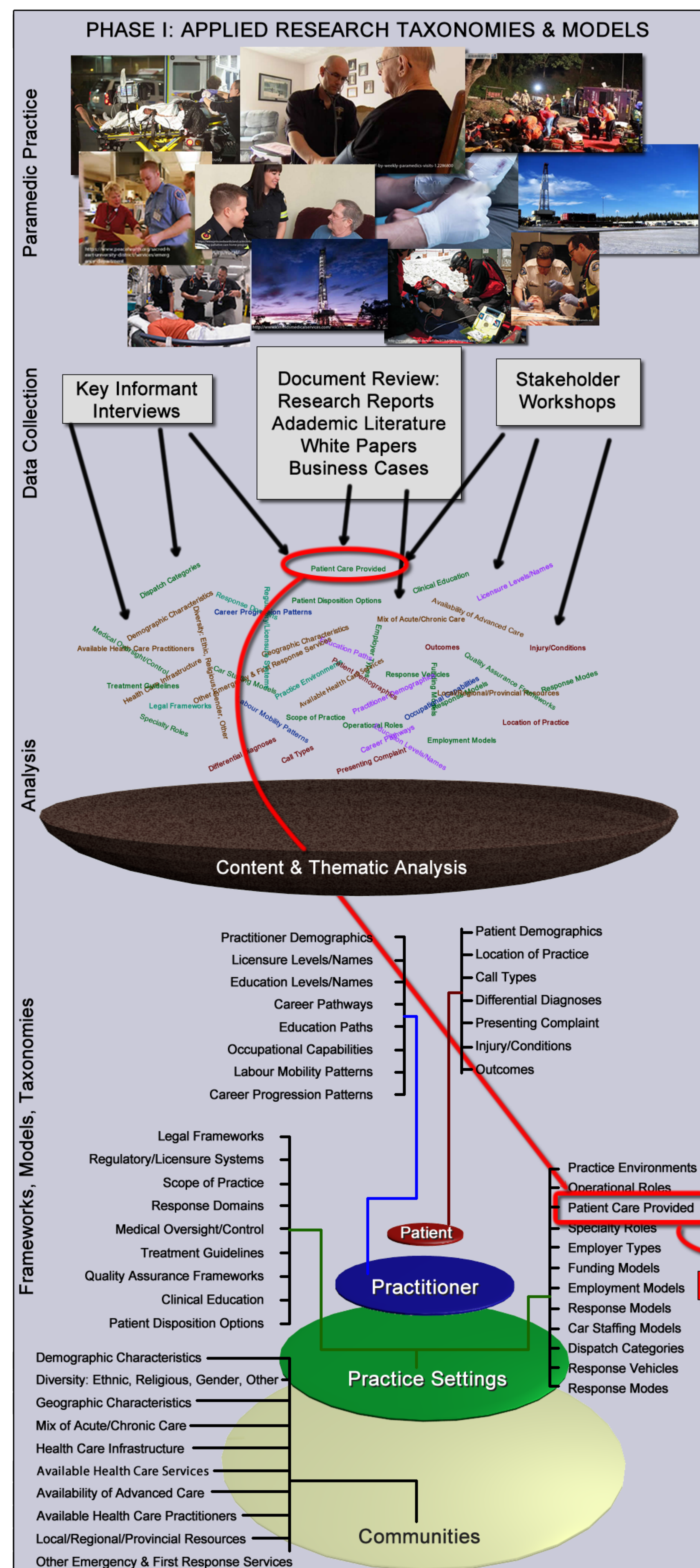
The project consists of two phases: an applied research phase, conducted through Justice Institute of British Columbia (JIBC) that includes review of academic and professional literature, along with workshops and interviews with key informants and stakeholders to develop a conceptual framework for describing Canadian paramedic practice; and a second phase, in which the research team will employ Canadian Standards Association (CSA) Group's accredited stakeholder consultation and consensus building process to develop a published set of national standards based on this conceptual framework.

METHODS

This mixed methods research project is descriptive and exploratory, with the intent of defining and describing key aspects of paramedic practice. The project rests on social constructivist foundations, seeing knowledge and understanding of the roles and practices of paramedicine as negotiated between various stakeholders, practitioners, and system users. The methodology calls upon traditional literature review methods, content and document analysis, narrative analysis (Reisman, 1993), and thematic analysis consistent with procedures used in grounded theory as described by Chamaz (2014) and Corbin & Strauss (2014).

Researchers will review paramedic-related literature to extract key terms, phrases, research questions, research variables, concepts and models, and descriptions of practice. In addition, researchers will conduct interviews, focus group sessions, and workshops with key individuals and stakeholder groups with the goal of identifying participants' information needs through examination of the "problems on their desks," the information they require to address these problems, and availability or lack of access to this information.

Researchers will create an evolving set of knowledge structures with key terms and definitions (e.g., "Patient Care Domains" consisting of: Acute Care, Urgent Care, Definitive Care, Primary Health Care, Preventative Care, etc., each with definitions and descriptions). The resulting frameworks and documents will be validated through formal consultation with stakeholders and further refined through CSA's accredited standards development process.



DISCUSSION

This project is in its start up phase, with data gathering commencing in April, 2019.

The outputs of this research will inform the growing body of research in paramedicine by providing a comprehensive review of key concepts, terms, and models describing the field; in effect, establishing foundational data terms and sets to guide research efforts. The resulting Standards will form the foundation for subsequent work to develop a national-level information system for the aggregation and access of data on Canadian Paramedic practice.

KEY REFERENCES

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Sample definitions derived from: World Health Organization. (n.d.) Primary Health Care. <https://www.who.int/news-room/fact-sheets/detail/primary-health-care> and WHO: About Us. <http://www.emro.who.int/about-who/public-health-functions/health-promotion-disease-prevention.html>

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