

The Community Paramedicine at Clinic (CP@clinic) Program

Developed, researched, and implemented by the McMaster Community Paramedicine (MCP) Research Team. Director: Dr. Gina Agarwal, Professor

The CP@clinic Program is an innovative and evidence-based program to address the high 911 call rate and high needs of the vulnerable population of older adults living in social housing.

PARTICIPANT BENEFITS



40.5% of participants who had high blood pressure had normal blood pressure after attending CP@clinic¹



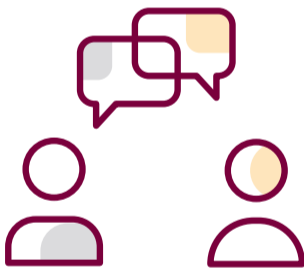
79% of participants were at a high risk for diabetes¹⁻³
15% of them dropped in risk category in 6 to 12 months¹⁻³



Participants who attended CP@clinic had significant increases in Quality-Adjusted Life Years (QALYs) with gains between **0.05-0.15**^{1,2}



The quality of life of participants who attended CP@clinic significantly improved in self-care, ability to engage in usual activities, and pain and discomfort.^{1,2}



CP@clinic participants reported that they felt more socially connected to the other residents.⁴



CP@clinic participants are actively engaged in goal setting enabling them to take charge of their health and empowering them.⁵

HEALTHCARE BENEFITS



For every **\$1** spent on the CP@clinic Program, the Emergency Care System sees **\$2** in benefits.⁶
Net savings per social housing resident:⁶

\$88



CP@clinic Program has been shown to significantly reduce 911 EMS calls by approximately:^{1,2}

20%

5. Agarwal, G. and Brydges, M., 2018. Effects of a community health promotion program on social factors in a vulnerable older adult population residing in social housing. BMC Geriatrics 2016; 18(1).

1. Agarwal G, Angeles R, Pirrie M, McLeod B, Marzaneck F, Parascandalo J, Thabane L. (2019). Reducing 9-1-1 emergency medical service calls by implementing a community paramedicine program for vulnerable older adults in public housing in Canada: A multi-site cluster randomized controlled trial. Prehospital Emergency Care. 23(5):718-729.

2. Agarwal G, Angeles R, Pirrie M, McLeod B, Marzaneck F, Parascandalo J. (2018). Evaluation of a Community Paramedicine Health Promotion and Lifestyle Risk Assessment Program in Seniors Living in Social Housing Buildings: A Cluster Randomized Trial. CMAJ. 190(21): E638-E647

3. Brydges, M., M. Denton, and G. Agarwal, The CHAP-EMS health promotion program: a qualitative study on participants' views of the role of paramedics. BMC Health Services Research, 2016. 16(1): p. 435.

4. Agarwal, G. and Brydges, M., 2018. Effects of a community health promotion program on social factors in a vulnerable older adult population residing in social housing. BMC Geriatrics. 2016; 18(1).

5. Brydges M, Agarwal G, Denton M. The CHAP-EMS health promotion program: a qualitative study on participants' views of the role of paramedics. BMC Health Service Research. 16(435): n/a.

6. Agarwal G, Pirrie M, Angeles R, et al. Cost-effectiveness analysis of a community paramedicine programme for low-income seniors living in subsidised housing: the community paramedicine at clinic programme (CP@clinic)BMJ Open 2020;10:e037386.