

BUILDING COMMUNITIES OF PRACTICE TO SUPPORT COMMUNITY PARAMEDICINE



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INTRODUCTION

Community paramedicine¹ (CP) is an emerging model of care improving access to primary care, particularly in rural areas.

Communities of Practice² (CoP) are collaborative forums where members share insights and support implementation efforts.

CP@clinic delivers free drop-in clinics led by paramedics. Services include chronic disease screening, referrals, health education, and care navigation. This program is currently being delivered in rural and regional Victoria through community health services. The focus of this study is to explore the utility of a CoP to support program implementers and CPs in the delivery and sustainability of the CP@clinic model.

RESEARCH QUESTIONS

Question 1: What are the barriers and challenges to CP@clinic program implementation?

Question 2: How can a CoP assist CP@clinic implementers and community paramedics with program delivery

METHODOLOGY

This ethics approved study used a hermeneutic approach to thematic analysis³ of 13 de-identified meeting minutes. Participants included:

- 13 community paramedics
- 12 researchers
- 10 administrative staff

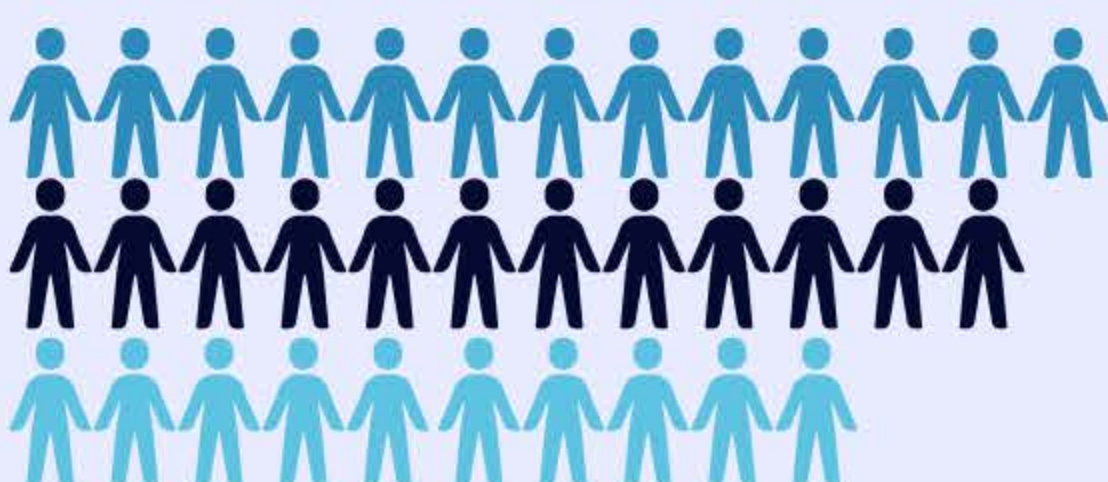


Figure 1. Community of Practice Participant Profile

RESULTS

Four themes identified evolving practices, identified barriers, tested solutions, and developed strategies for sustaining CP@clinic.

Table 1. Summary of emergent themes

Theme	Example
Workforce Development	Uncertainty around role scope; CoP enabled peer learning and role identity Participant 23 shared their experience of building rapport with clients, a departure from the emergency sector where relationships with clients are minimal
Community Engagement	Need to build trust and adapt to local needs; time-intensive but critical Participants shared early wins, including improved access to healthcare, successful patient referrals, and increased community trust.
Data Collection	Administrative burden; digital infrastructure challenges; CoP enabled sharing of workarounds. Participant 16 noted that each person might have a slightly different approach to the assessments, but with experience, the process becomes quicker and more efficient.
Sustaining Implementation	Concerns about funding, turnover and ownership; CoP stabilised continuity Participant 2 emphasised the need for funding certainty and longer-term assurance to continue building the program's momentum.

CONCLUSION

Communities of Practice provide essential support for implementing innovative paramedicine models such as CP@clinic. They strengthen collaboration between paramedics, researchers, and health services, and enhance long-term program sustainability in rural settings.

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