



Indigenous Communities in North Western Australia (Kimberley Region)

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Due Date

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A recent visit to North Western Australia (Kimberley region) highlighted the plight of the indigenous communities in terms of healthcare access. The remote area is characterized by scarce healthcare facilities, leading to a significant reduction in the health quality of the population. The hospitals and healthcare centers in the region lack essential care items, which means that the medical personnel cannot address arising health issues properly. All these have led to an overreliance on paramedic services to transport patients to regions with quality medical facilities. However, this can be difficult as well as the area is mostly sloppy, leading to road blockage during heavy rains.

The St. John ambulance services have been in place over the past decades to help with transfer. However, a brief interview with the indigenous groups revealed the unavailability of fast ambulance services or delays during critical care needs. The rising population led to increased demand for the emergency care to cater for maternity, accidents, critical care patients, etc. The mortality rate among the indigenous groups has also been on rise due to the unavailability of quick emergency responses. Mothers and children lose their lives due to lack of prompt medical attention to salvage their situations. Critically ill patients fail to arrive at healthcare centers on time, which results in their death. In light of the above problem, this report proposes the establishment of a paramedic system

to mitigate the challenge of timely access to the healthcare setting.

The profession of a paramedic has been in existence over the past decades to address healthcare needs in multiple populations. Unlike the prior duties that involved transferring patients to the hospitals, now, paramedics have developed new skills, enabling them to diagnose patients, offer treatments, and make referrals or discharge depending on conditions (Batt & Buick, 2015). The gist of the proposed service is to ensure integration of the advanced care model into the modern paramedic practice. The inclusion of the advanced healthcare trends will result in quality healthcare and minimization of mortality rates among the indigenous population. In exhibiting the parameters of the proposed intervention, this report focuses on the principles of paramedic care, the leadership of the agency, quality assurance, and the role of medical personnel. The articulation of the above values will offer adequate justification for the implementation of the paramedic system.

Principles of Paramedic Care

The principles of paramedic care hinge on the need to integrate advanced care models into the medical practice to achieve quality outcomes. Paramedic services follow a unique structure in terms of the functions and operations. The emergency nature of the services results in a strong connection between the paramedic system and emergency response agencies, hospitals, healthcare centers, and other emergency units (Johnson, Boyd, Grantham, & Eastwood, 2014). The healthcare teams try to cooperate effectively to ensure that quality care is provided to the patients.

Certain principles dictate the implementation of paramedic services for public safety, i.e. effective communication and the management of particular medical conditions. The ability to communicate enables the caregivers to react to health complications quickly and make regarding suitable interventions. During the care process, patients face incapacitation or increased pain, leading to their inability to express themselves coherently. Implementation of proper communication approaches would enable the medical team to determine the patient challenges, prognosis, and the ideal intervention. Non-verbal communication is of equal significance during the care process. The caregivers need to understand the non-verbal cues to comprehend the underlying health problems. Notably, cultural factors influencing communications should be taken into consideration to increase the levels of cooperation with the patients. For instance, certain cues or body signals could imply different meanings in different cultures. Therefore, a paramedic must understand the contextual

meaning of each cue to enable improvement in care provision.

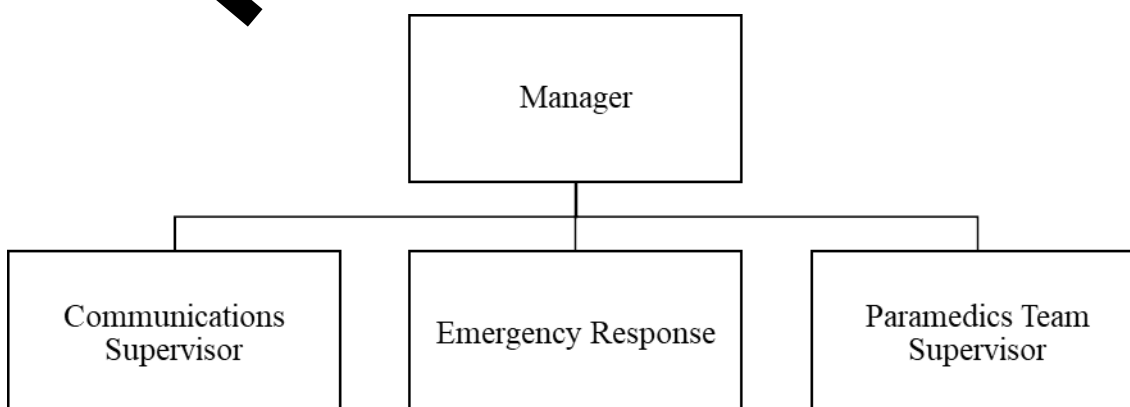
Management of health care conditions also constitutes a major principle in paramedic care.

Paramedics need to understand diseases and injuries in terms of manifestations, symptoms, primary care, and medical interventions. The training equips them with the skills and knowledge necessary to diagnose medical conditions and initiate treatment approaches. The principle of care management dictates that the paramedics perform the role of primary caregivers to enable them to save people's lives.

The principles of managing multiple health conditions would apply in the proposed paramedic services. The healthcare providers will undergo training to increase their competencies in terms of verbal and non-verbal communication, emergency response, medical diagnosis, and treatment for patients (Wade & Macpherson, 2016). An oversight team will further be established to ensure the provision of quality care to the patients. The indigenous communities lack coherency in communication in the English language, so the development of non-verbal communication approaches will augment the team's ability to provide care adequately.

Leadership in the Organization

Leadership plays a vital role in the determination of outcomes in any organization. Also, the style of leadership tends to determine the quality of care attained over the short- and long-term period (O'Meara, Wingrove, & Nolan, 2017). Leadership philosophies define the overall directions pursued in the workplace paradigm. The proposed paramedic system will incorporate hierarchical organizational structure in leadership. In this context, different levels of authority are created to enable the flow of commands from leaders to employees (Ahmady, Mehrpour, & Nikooravesh, 2016). Managers at the top of the hierarchy with the duties of coordinating, controlling, planning, leading, and organizing. The people at the lower hierarchies report directly to the manager.



After the manager, there are the various team leaders comprising the head of communications, head of emergency response, and head of paramedic teams onboard. The communications supervisor plays the role of ensuring that information is quickly passed to the designated teams within the required time. In most cases, as exhibited in St. John Ambulance, communications breakdown resulted in delays in the arrival of the emergency teams, leading to adverse effects. So, communication supervisor plays an integral role in providing quality and timely healthcare. The emergency response supervisor will be in charge of ensuring that emergency cases are addressed within the required time. The emergency teams will be strategically located in specific places around the Kimberly region to ensure a speedy response to the arising cases.

Finally, the paramedic supervisor will lead the care provision team. He/she will be trained in critical care areas such as communications with patients, management of particular patient conditions, and understanding of perfusion, autonomic nervous system, and inflammation processes in the human body. In terms of communication, the paramedic will undergo rigorous training on effective communication even in cases of incapacitation. The contemporary paramedic practice requires emergency healthcare providers to be knowledgeable in various areas of care interventions. It is necessary to ensure basic training, such as disease diagnosis and drug administration. The manager and the supervisors will play critical roles in ensuring that the prescribed codes of practice are strictly adhered to.

In making the leadership effective, the transformational approach will be implemented.

Transformational leaders seek to work together with the team members to identify areas requiring change, create team vision, and employ team spirit in the execution of the change process. The selection of this approach dwells on the need for the cultivation of team spirit among the members of the organization. Notably, the bottom-up management approach will be incorporated in the leadership process. The team members will play the primary role in informing the goals, changes, and performances at different levels.

Quality Assurance

Quality assurance in any organizational setting bears the responsibility of ensuring that the set objectives are met in a timely and efficient manner. Performance indicators are often used as thresholds for determining the attained quality levels. In the context of paramedic services, quality assurance plays a significant role in determining the level of success achieved in rectifying the

shortcomings exhibited by the existing paramedic team. Some of the key performance indicators that would be used as quality thresholds include quality communications, timely response to emergencies, team coherency, and decreased ramping.

Communication as a quality assurance approach will be measured from two major perspectives, specifically between emergency teams and between patients and medical practitioners. As for emergency teams, the information relating to the need for help should be passed among them within the required timeframe. The quality assurance team should ensure that all communications are clear and easily to understand between the parties. The communications with patients, on the other hand, entails the accuracy with which the paramedic team collects useful information and uses it to manage the condition properly. At the end of every emergency incident, the quality assurance team must examine the quality of information passed in terms of speed, value, and ease in decoding.

The response to the emergency also constitutes a critical quality assurance threshold. The responsible teams should make sure that every incident is met with the quickest response to minimize any adverse outcomes. The critical approaches for determining the efficiency of the emergency team include preparedness, response, mitigation, and recovery. Firstly, the team must exhibit extreme levels of preparedness in responding to emergency cases. Secondly, the response should align with the needs of the affected parties. Finally, the mitigation measures should be lifesaving and aiming at lowering the adverse symptoms. The recovery period spans the time taken for the restoration of efforts used in managing the prevailing situation. Interventions such as stress reduction measures, replenishment of used resources, and execution of measures help to minimize vulnerability to future adverse outcomes.

Team coherence refers to the alignment of each member towards the accomplishment of common goals. This attribute is attained through the cultivation of trust between members. The five Cs for team coherence will be used as performance metrics, i.e. clarity, commitment, creativity, connection, and communications. In terms of clarity, the quality assurance team will determine whether the team members understand the work objective. Commitment will be measured in terms of team motivation towards goal attainment, the amount of inputs, and the levels of determination towards the set objectives. Creativity will be assessed through the levels of innovativeness among the team members. Their abilities to formulate unique solutions will be used to evaluate their

coherence. The penultimate aspect of coherence includes a connection that is determined by the ability of the members to form beneficial relationships and associations in the workplace. Finally, the team coherence will be assessed by the ability of the members to maintain smooth communication with one another.

Role of Medical Oversight Team

Medical oversight team plays a key role in determining the quality of care provided during the emergency scenarios. The oversight role is played by a team of physicians that regularly offer directions or monitor the nature of care provided. The oversight roles can be direct or indirect, depending on the organizational design. In direct oversight, the physicians issue orders to the caregivers on the scene, via radio or the phone. Indirect oversight entails the establishment of care protocols that would increase the level of safety among the patients. In the current context, the medical oversight team will comprise physicians specialized in distinct areas of care. The oversight team will include nurses, doctors, and pharmacists to provide direct care orders to the paramedics on the emergency scenario.

Recommendations

The proposed paramedic system aims to address the current issues faced by the indigenous groups living in North Western Australia (Kimberley region). The principles of paramedic care, such as communication and management of healthcare conditions, strongly applies to the population. The preliminary presentation revealed increased mortality rates among the population members due to the lack of proper ambulance services. The pertinent areas covered in the proposal, such as the leadership, quality assurance, and medical oversight, strongly dictate the quality of care to be provided by the emergency team. The leadership will ensure strong maintenance of the team spirit in the execution of tasks. Besides, the principles of paramedic practice will be enforced through the leadership abilities to align all members to work towards the attainment of common goals. A quick study and interaction with the community members revealed poor integration of healthcare amenities in the region. The majority of the population lacked access to proper care since most facilities are sparsely located.

A lot of factors within the social environment predispose the community to various risk factors that could adversely affect people's health. One of the risk factors comprises poor roads and infrastructure in the region, especially during the rainy seasons when the roads are blocked and

impassable. Access to quality care has become increasingly limited as the population grapple under the weight of poor social infrastructure. Based on the inherent population needs, I propose the implementation of a paramedic system in the region to aid in the management of emergencies. The report suggests the best practice elements that could assist in the implementation of quality paramedic services. The principles mentioned above would aid in the improvement of paramedic services in the Kimberley region. Some of the prescribed challenges would require the paramedics to develop a sound knowledge of medical procedures to enable them to administer effective interventions during the care process. Besides, they would gain insights on the best approaches to care provision, which would result in reduction in mortality rates during emergencies. The adherence to the principles would lead to a sound solution to the challenges.