Purpose: To provide guidelines for patient enrollment into Community Integrated Paramedicine Programs.

1. Enrollment to a CIP program will be necessary in the following situations:
	1. A physician’s referral
	2. Anticipation of more than 1 visit (includes but not limited to phone, telehealth/telemedicine, in person).
2. Enrollment will include:
	1. Physician’s referral (physician name should be documented in EPCR)
	2. Documented patient consent
	3. Documented intake assessment including but not limited to:
		1. Physical assessment with notation to overall physical and mental statuses and limitations both physical and cognitive
		2. Fall risk reduction assessment see Fall Risk Reduction Assessment protocol
		3. Social determinants of health assessment see SDOH Assessment protocol
		4. Medication audit see Medication Audit protocol (optional)
	4. Development of a service plan/care plan
3. Patient enrollment including the intake assessment must be documented within the EPCR or attached to the EPCR
4. Whenever possible CIP services should work in conjunction with already established services available within the community.