COMMUNITY HEALTH AND EMS PROFESSIONALS

COMMUNITY PARAMEDICINE

Ada County Community Paramedics
370 North Benjamin Lane, Boise, ID 83704
208-287-2993
The Concept of Community Paramedicine:

- Meeting Healthcare Needs With Untapped Resources/Infrastructure/Providers
- Leveraging Resources/Partnerships
- Closing Gaps/Expanding Coverage By Expanding The Role Of EMS Professionals
- Comes With Additional Education And Medical Oversight
- Designing The Program To Meet The Specific Needs And Resources Of Each Community
- National Concept – Locally Tailored
EMS Agencies & Professionals

- Communications Infrastructure
- Reporting Requirements
- Electronic Patient Care Records
- Medical Interventions
- Medications
- Assessments
- Transfer of Patient Care
- Perception vs. Reality
Perception Vs Reality

Ada County Paramedics
FY2013 – 23,354 Total Calls
- 14,541 No Lights or Sirens, 62%
- 1,129 Lights and Sirens, 5%

Perception – Car Accidents And Heart Attacks
Reality – Mix of Emergent And Non-Emergent Patients
- Social Determinants of Health
- Mental Health
- Primary Care
Why EMS Professionals – Benefits

- EMS Professionals are one of the only healthcare providers who have to communicate with every other individual involved in health care.

- EMS Professionals perform many aspects of healthcare and care coordination which normally require multiple healthcare providers to complete.

- EMS Professionals see how a clinical plan fits into a person’s actual life, barriers, and what happens when it fails.

- EMS Professionals work independently in nonclinical settings, and are comfortable with non-transport and assessment skills. Medics need to be able to find answers in this type of setting.

- EMS Professionals know local needs, populations and resources.

- EMS Professionals can extend the reach of providers into the home environment. “Eyes & Ears Of Providers”

- EMS is the link into the healthcare system.
Brief History of CPs at ACP

- Began December 2011
- 2 FTEs. 4 Half Time Paramedics
- 1-3 Year Plan
- Additional Education – Colorado Mountain College
  * Multiple Clinical Sites
  * Continuing Education
- Community/Partner Stakeholder Engagement
- Program Focus/Pilot Development
  * Transitions Care with Hospital
  * Agency/County Health/Wellness Programs
  * System Focus
Established Programs/Pilots:

- At Risk Field Referrals
- Transitions Program with Hospitals
- County Wide Flu Vaccine Program/Wellness
- Mental Hold Emergency Department Diversion Pilot
- Formation of Liaison and Advisory Council
- D.O.T Program/Direct Observation Therapy - TB Medication
EMS Systems Partners
Field Referral Program:

- ACP Personnel/Dispatch/ Law Enforcement/Fire Units

- Online Referral

- Patient Contact

- Over the Phone/In-Home

- 2013 – 94 Total Referrals

- 2014 – 48 Total Referrals

- Redesigned Online Referral Form
EMS Systems Partners
Field Referral Program

On-Line Form

Community Paramedic Referral Form for EMS, Police and Fire

If you’re an EMS system partner interested in referring a patient to the Ada County Community Paramedic Program, please fill out the form below and click “Submit.” If you have any questions, please don’t hesitate to contact the Ada County Community Paramedics at 208.287.2998 or 208.287.2993.

Today’s Date
8/12/2014

Your Name

Your Email

Client Information (Police and Fire departments only)

Client Last Name

First Name

MI

DOB

Age

Gender

Home Phone

Street

City

State

Zip Code

Encounter Information

Community Paramedic Concept

For Patients

For Healthcare Providers

For EMS and System Partners
- Ada County CP - Transitions Program -
  St Luke's Hospital System

- 30-Day Transitions Program
- Reduce Readmissions
- Empower Patients
- Patient Types:
  CHF
  COPD
  AMI
- 2013 – 19 Total Patients
- 2014 – 24 Referrals – 12 Accepted
Community Paramedic Program
Patient Satisfaction Evaluation

Community Paramedic Line (208)287-2998

YOUR VISIT WITH THE COMMUNITY PARAMEDIC:

<table>
<thead>
<tr>
<th></th>
<th>EXCELLENT</th>
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<tbody>
<tr>
<td>1. Willingness to listen carefully to you</td>
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<tr>
<td>2. Taking time to answer your questions</td>
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<tr>
<td>4. Explaining things in a way you could understand</td>
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<tr>
<td>5. Instructions regarding medication/follow-up care</td>
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<tr>
<td>6. Resource referral was appropriate and helpful</td>
<td>5</td>
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<td>7. The thoroughness of the examination</td>
<td>5</td>
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<td>8. Assistance in communicating with my providers</td>
<td>5</td>
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WOULD YOU RECOMMEND THE SERVICE TO OTHERS?  Yes  No

IF NO, PLEASE TELL US WHY:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

ANY ADDITIONAL COMMENTS ABOUT THE COMMUNITY PARAMEDIC VISIT OR PROGRAM:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
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THANK YOU FOR YOUR COMMENTS!
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WOUlD YOU RECOMMEND THE SERVICE TO OTHERS? **Yes**  No
“Very supportive! Educational and provides resources for the heart failure patient to live by!”

“____ was my paramedic and there is no way to say how wonderful he was! Great, great guy. He called every week and followed up and I truly miss talking to him. Wonderful Program”

“Extremely helpful – Dieticians helpful. Thanks for everything, making appointments for us.”
“Unequivocal Recommendation! “

“Program provides an invaluable service. _____ was a stellar representative for the program. He explained things in understandable terms. He helped us through the transition from confusion to acceptance and being able to deal with a completely different and new lifestyle. The program offers tools for living as normally as possible.”
Ada County CP - Transitions Pilot - Saint Alphonsus Hospital System

- 30-Day Transitions Program
- Reduce Readmissions
- Empower Patients
- Patient Types:
  CHF

*Contract Phase*
Clinical Expectations
Referral Guidelines
Personnel Responsibilities and Liabilities
Mobile Seasonal Flu Vaccination Clinics – Ada County Employees

- Two Main County Locations
- Additional County Sites
  - DMV
  - Weed and Pest
  - Waste Management
  - Recreation
  - 1600 Employees
  - Approximately 500 employees prior
  - 831 – 16% increase in two years
  - Over 50% of total employee population vaccinated
  - Included BP screenings, information campaign prior, prize drawing
  - New health screenings – Cardiac Risk Panel/A1C/BMI
Ada County CP Involuntary Mental Hold
Emergency Department Diversion Program

- Working with Local Law Enforcement
- Goal – Direct Admission Mental Health Facility
- Expedite Care
- Screening Exam
  - Oral Toxicology Swab
  - Alcohol Breath Test
  - Vitals/ECG
  - Bed Assignment

Phase I Results
No ED Diversions – 52 Patients
29 (54%) Met Criteria
14 Minute Screening Time
Savings of $70,035 in ED Charges
116 ED Bed Hours Saved (Almost 5 Days)
CP In-Home Medication Reconciliation Partnership

- February - completed our In-Home Medication Reconciliation Pilot Program
- Involved a partnership with Southwest Idaho Advanced Care Hospital
- Performed in-home medication reconciliations with 17 patients discharged home
- Goal – identify challenges or misunderstandings patients may have when they begin managing medications in the home
- Changed discharged protocols
Ada County Community Paramedic Liaison and Advisory Council

This group of healthcare experts are from all areas of the healthcare world with expertise ranging from community resources, government affairs and resource development to mental health and public health. The council consists of representatives from public health, state EMS, local hospital systems, nursing/home health and physicians.

- 15 Original Members
- Addition of a Council Member — Education
**Community Paramedic Liaison and Advisory Council Mission**
To bring together community leaders in healthcare who will advance the resources, reputation, and reach of our community paramedics to create an innovative and efficient healthcare delivery system.

**Council Vision**

**Mobile Integrated Health Care** – to provide leadership, resources, and modeling for the development of Community Paramedics into an active and collaborative part of the overall healthcare system.

**Patient Care** – to provide excellent patient-centered care, advocacy, and care coordination which will be driven by innovation, partnerships, patient activation, data collection and analysis, and continued education.

**Community Leadership** – to serve our community, patients and healthcare partners by leveraging established resources, innovation, data sharing, system coordination, education, and outreach.

**Education** – to be a leader in establishing national Community Paramedic educational standards which incorporate best-practices within healthcare.

**Positive Outcomes** – to ensure every program aspect will focus on meaningful patient outcomes and overall population health.
D.O.T Program – Direct Observation Therapy – TB Patients

- Contract with Central District Health Department
- Billed for one hour – then in 15 minute increments
- Observe medication self-administration
- Monitor for negative side effects
Community paramedics to take pressure off Winnipeg emergency rooms

Medicaid Savings

Wisconsin Pilot Program Uses Paramedics In-Home to Reduce ER Visits

Aim of the community paramedic program is to improve the health of the patient who comes home from the hospital.
Pilot program uses extended paramedic visits to assess and coach patients recently discharged from the hospital

In a Boise area pilot project, paramedics are taking on a new role to help patients avoid a return trip to the hospital. Within 48 hours of being discharged from a hospital, high-risk patients receive a two-hour home visit with a community paramedic, then weekly follow-up phone calls for a month. While the initiative is still in its early stages, results are promising—patient satisfaction scores are high and readmissions are being prevented.

Minnesota Community Paramedic Program Keeps Patients Out of Hospitals

State has become the epicenter of the community paramedic movement

Dallas Fire-Rescue: Paramedic ‘house calls’ pilot program showing early signs of success

New community paramedicine law signed in Maine

Maine Emergency Medical Services Board will be reviewing proposals for pilot sites and where they will be approved
Community Paramedics Expand Health-Care Access

Like many communities in the U.S., small town Eagle Valley, Colo., has a health-care crisis on its hands, but it's not waiting for Congress to legislate a solution. The Western Eagle County Ambulance District and Eagle County Public Health Department collaborated to create a community paramedic program that aims to improve access to health care in their rural area, where primary care physicians are scarce, 26% of people in the county are uninsured and 40% of the ambulance district's residents are uninsured.

Community paramedics expand health safety net

By Christopher Johnson
EDITORIAL ASSISTANT

Paramedics take on expanded health-care role in rural Minnesota

Ported at 2:49 PM on April 8, 2012 by Jennifer Vogel (4 Comments)
Filed under: Health care

Novel Community Paramedic Program Announced by Pitt’s Congress of Neighboring Communities (CONNECT)

03/18/2013

Leading Southwestern Pennsylvania health care organizations will collaborate to provide home care to residents suffering from chronic conditions
A New Delivery Model – the Community Paramedic?

The Affordable Care Act places increased emphasis on prevention.
Questions?