FIRE-BASED COMMUNITY HEALTHCARE PROVIDER PROGRAMS

November 4, 2015
PRESENTATION OUTLINE

- Background
- Urban Fire Forum
- Fire-Based EMS Opportunity
- Challenges
- Fire-Based Programs
- Questions
Orange County Fire Rescue

- 41 Stations
- 111,346 call for service in FY15
- 59,638 EMS Transports
- 1189 Employees
- $156 Million Budget
### Scope of Services

<table>
<thead>
<tr>
<th>Fire Suppression</th>
<th>Emergency Medical</th>
<th>Technical Rescue</th>
<th>Hazardous Materials</th>
<th>911 Communications</th>
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<th>Community Outreach</th>
<th>Training</th>
<th>Safety &amp; Wellness</th>
<th>Infrastructure Support</th>
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AFFORDABLE CARE ACT

- Signed into Law March 23, 2010
URBAN FIRE FORUM

- September 8, 2014
- Advocates for Fire-Based EMS in MIH
- Defines a Community Paramedic
- Outlines Scope of Services
- Highlights Opportunity
- Potential Community Impacts
Why Fire-Based Community Healthcare?

- Fire Service Organizations are established providers of Medical Services
- Well Trained Workforce
- Facilities Geographically deployed throughout Communities
- Fire Service provides 97 percent of EMS in 200 of the most populated communities
- Branding
COMMUNITY PARAMEDIC DEFINED

- Licensed/ Certified Paramedic with Additional Training
  - Physiology, disease processes, injury and illness prevention, and medical system navigation
- Population
  - Public health services to elderly, underserved, and chronic condition- primary care and social services
- Health Care
  - health assessment, chronic disease monitoring, education, medical care and prescription regime compliance, immunizations and vaccinations, laboratory specimen collection, hospital discharge follow-up care, and minor medical procedures
COMMUNITY PARAMEDIC DEFINED

- Program can provide means to free emergency response units when no actual emergency exist... but still meet needs of patient
  - walk-in clinics, mental health triage, social detox facilities, shelters and homeless services, and in-home assistance
- Schedule in-home evaluation of high-risk patients following hospital discharge
  - EKG, blood glucose, pulse oximetry, venous lactate, end-tidal carbon dioxide, along with the standard vital signs, and optional blood draws
Fire-Based EMS Opportunities

- Treat & Release
- Community Paramedics
- Fire Department Clinics
- Behavioral-Health responses
- Targeted Prevention Strategies
- Non-Emergent EMS
- Coordinated Healthcare
CHALLENGES

- Political/Legal
- Hospital Approach
- Competition
- Financial
- Apathy
MINNESOTA

- First state to implement a CHP/MIH
- Minnesota Statutes 2010, Chapter 12 S.F. No. 119
- Signed by Governor: April 6, 2011
- Established:
  - Definition of Community Paramedic
  - Minimum Service Requirements for Certification
  - Initial Education
  - Continuing Education Hours
  - Payment for Service
  - Service Evaluation
MISSOURI

- Missouri Revised Statutes,
- Chapter 190 Emergency Services §190.098.1
- Must be a Paramedic and have completed a CP Certification
- Shall provide services of a healthcare plan that:
  - Was developed by a physician
  - Was developed by an advanced registered nurse collaboratively with a physician
  - Was developed by a physician assistant collaboratively with a physician
  - Does not duplicate services to the patient by another provider
Public Law, Chapter 562, LD 1837
Signed: 2012
An Act to Authorize the Establishment of Pilot Projects for Community Paramedicine
- Using the same process established by the board in rule for using pilot projects to evaluate the workability and appropriateness…
- The board may establish up to 12 pilot projects for the purpose of developing and evaluating a community paramedicine program.
- May not exceed 3 years in duration.
WASHINGTON

- Bill passed on Friday April 10, 2015

- Allows EMS personnel operate in non-emergency situations.
Virginia

- No Community Paramedic Law or Pending Bills
- Said that EMS is for emergency
- Interested agencies to become home care organizations
FLORIDA

- Existing law that allows for an agency to provide community health care

- Title XXIX Public Health, Chapter 401, section 401.272

- Perform and provide care that prevents illness and injury
FIRE BASED PROGRAMS
Kent Fire, Washington

- Started as a 9-1-1 prevention program, but now morphing into preventative health care
- Deployed in cars
- Use Nurses, Paramedics, EMTs
- Navigation to the right setting
- Research first-then charge
McKinney, Texas

- Pilot started June 2013
- Deployed in pick-up trucks
- Chief says: “This is just a natural evolution of EMS...It is something we should have been doing for years.”
- Two steps
- Estimate saving 1 hour a day of using emergency equipment, thus saving tax dollars
Light response for low acuity patients
Have 40 hour employees meeting with frequent callers who have been referred by front-line providers
Constant state of influx
Made difficult due to high homeless population with no physical address
RN triage paid for by hospital
Partnered with another fire district to serve ~22,000 residents
2 years planning and live recently
Increase primary care to rural portions of district
Partnered with health centers that identify patients, especially chronic conditions
Deployed in vehicles with 1 medic and 1 EMT
Research first-money later
MESA, AZ

- Pilot was in 2006
- Ambulance vehicle-1 nurse practitioner and 1 Paramedic
- Nurse practitioner can prescribe meds, suture, etc.
- “lower-level” 911 calls
Orange County, FL

Business Case

- Fire Rescue personnel have direct access to citizens in need
- Repeat callers may need assistance beyond Fire Rescue services
- Fire Rescue can direct these citizens to Orange County services as needed
- Services include financial assistance, elderly care, mental health, children services, and other social support
Orange County, FL

Project Branding

“OC 4 Me”

- Service Categories
  - Children and Families
  - Financial and Job Assistance
  - Community and Safety
  - Health and Wellness