



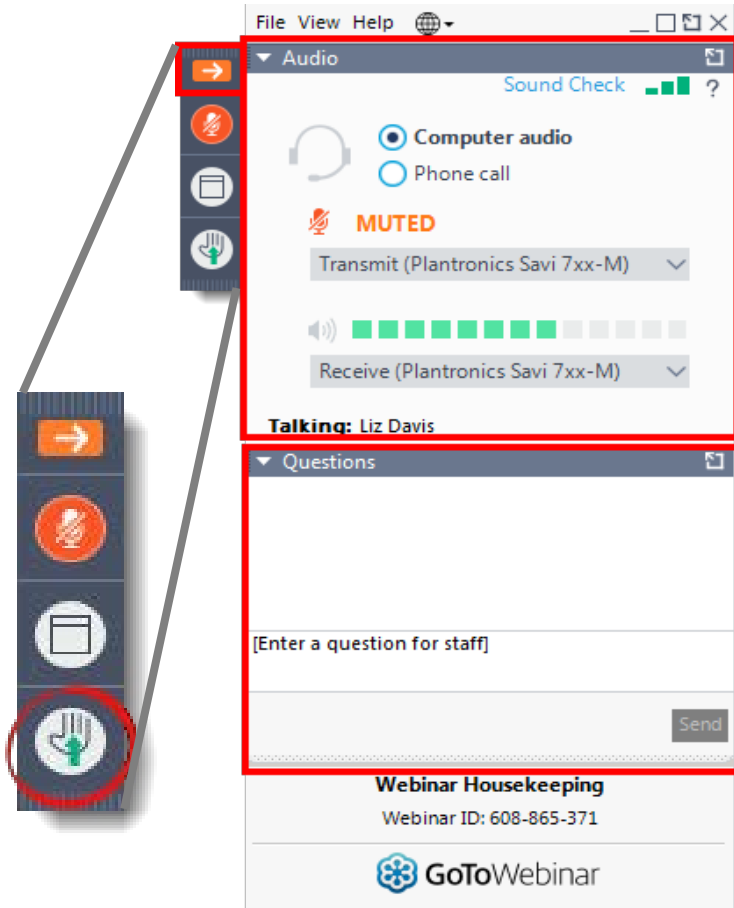
SIM PCMH Initiative

COMMUNITY INTEGRATED PARAMEDICINE

SEPTEMBER 6 , 2018

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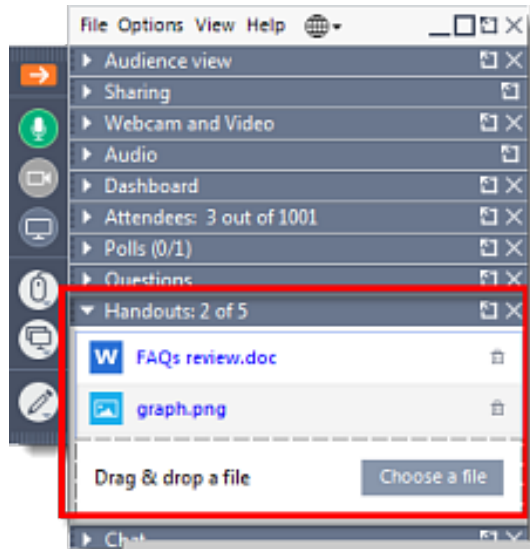
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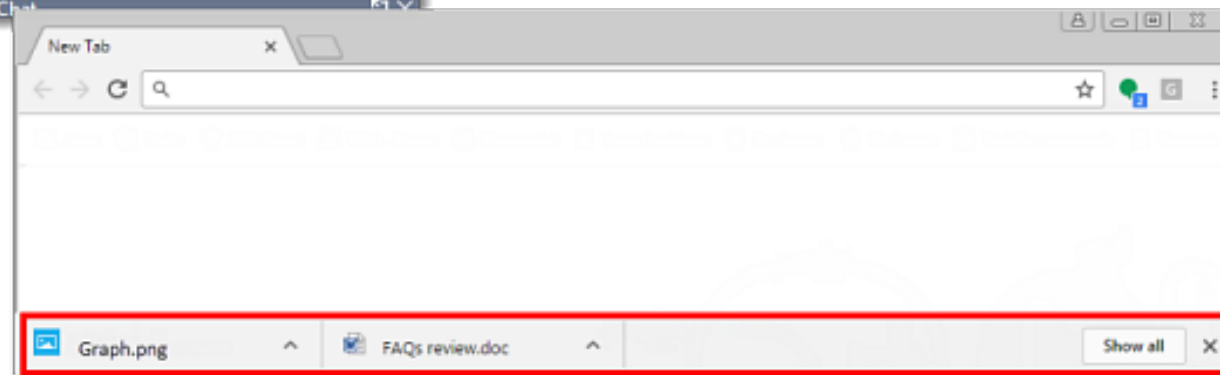
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Community Integrated Paramedicine

Community Integrated Paramedicine: What can we do for you?

Kristine Kuhl –Community Integrated Paramedicine Coordinator

Emily Bergquist – Medical Control Authority Coordinator

MDHHS

Bureau of EMS, Trauma and Preparedness



Community Integrated Paramedicine (CIP)

1. CIP in Michigan

What is this?

2. Partnerships to fill the gaps in care.

3. Does CIP make sense for any of your patients?

The Evolution of Emergency Medical Services (EMS)

1966 white paper titled “Accidental Death and Disability: The Neglected Disease of Modern Society.”

From Emergency to Critical Care
(Inter-facility)

1990’s point of care testing and
telemedicine – game changer

Utilization in episodic, non-acute, out
of hospital care

2001 – Community Paramedicine -
Improving Rural Healthcare



What CIP IS

- Healthcare Delivery Model
- Addresses gaps/provides safety net in a community
- Specially trained EMS providers with an expanded role (not scope)
- Partnerships and integration of care
- Triple Aim
- Adaptive

Working Definition of CIP

- The intention of Community Integrated Paramedicine (CIP) is to bridge the gaps within the local healthcare system and serve the underserved. CIP is the safety net for the safety net. By evaluating a patient in their true setting, identify the social determinants that may not be revealed outside of the home, and relaying that information and assisting in correcting these barriers to care; they are able help provide the right care, at the right time, in the right setting while decreasing health care costs



What CIP is NOT

- Replacement of services
- Duplication of Services
- Competition

Recipe for a Community Paramedic (CP)

- Take a Paramedic
 - Add experience
 - Send them to more training
 - Give them different clinical experiences
 - Bring out the empathy
 - Capitalize on their problem solving skills
 - Give them some tools

International and National Scene

England, Australia, Canada, Scotland,
United States

International Roundtable on Community Paramedicine

- 2005 - 50 delegates – Australia, Canada, Scotland and United States
- Rural focus

Community Paramedicine Insights Forum (CPIF)

- National Association of State EMS Officials
- National Organization of State Offices of Rural Health
- Center for Leadership, Innovation and Research in EMS

Currently 36 states in 'some form'

- Some have sought legislation first
- Some have allowed pilot studies first (Michigan)
- Others have assembled committees to have a concrete strategic plan and many are still in that phase

Colorado

Western Eagle
County Health
Services District
(WECAD)

Rural resort
community –
54,000

2 hours west of
Denver – extreme
weather

30% residents
uninsured

54% ambulance
patients uninsured

Goal – Proactive to
prevent
ambulance
transport

Colorado Services Offered

Hospital discharge
follow-up

Medication
reconciliation

Blood draws

Home safety
checks

Social assessment

Nutritional
assessment

Well baby/child
checks

Blood pressure
and oxygen
saturation

Post-injury/illness
follow-up

Illness/medication
education and
compliance

Colorado Results

- Patient profiling was done based on Eagle County Community Paramedic visits from January 2015 to December 2015. Results showed:
 - 52 patients were served
 - 146 visits were provided
 - Patients were seen 1-5 times
- Higher Level of Service Utilization Prevented:
 - 142 doctor visits
 - 26 emergency room visits
- Initial Cost Savings:
 - \$1,969 average savings per visit
 - \$280,000 total healthcare costs saved in 12 months
- <https://www.ruralhealthinfo.org/project-examples/786>

California – 7 concepts

Post-Discharge, Short-term Follow-Up:

Frequent EMS Users

Directly Observed Therapy for Tuberculosis

Hospice

Alternate Destination – Mental Health

Alternate Destination – Urgent Care

Alternate Destination – Sobering Center

What is Michigan doing?

- 9 plus programs already exist as “special studies”
- Strategic Plan – 2 years (2018/2019)
- Regulatory Process
 - Define Scope and Role
 - Minimum Standard Curriculum
 - Endorsement (personnel and agency)
 - Sustainability
 - Data

MICHIGAN HEALTH
ENDOWMENT FUND

CIP Programs in Michigan

Bottom Up Programs (Agency Driven)

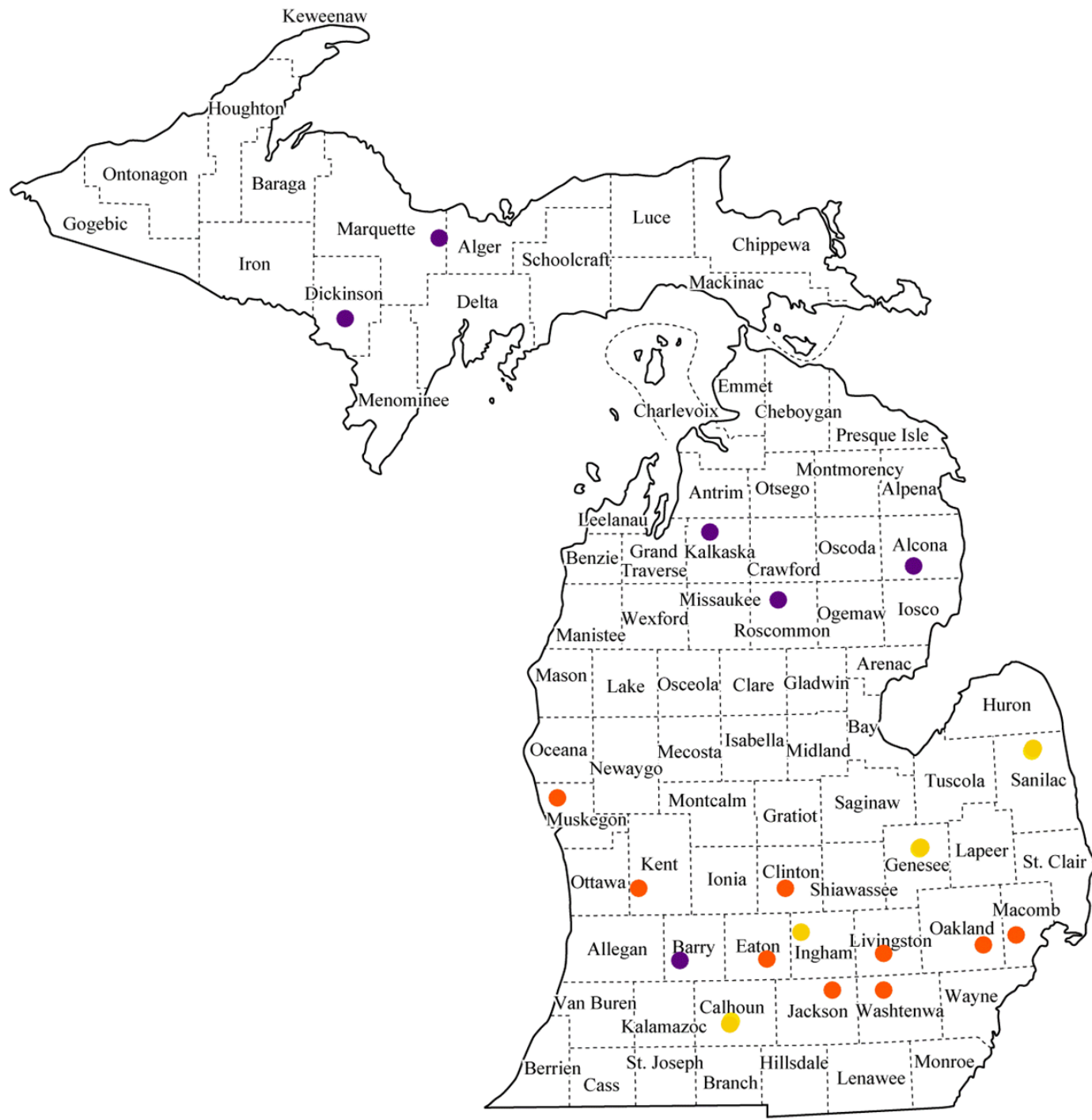
- Muskegon
- Clinton Area Ambulance Service Authority (CAASA)
- Hayes Green Beach
- Huron Valley Ambulance
- Jackson Community Ambulance
- Livingston County EMS

Top Down Programs (Hospital/Health Plan Driven)

- St. Joseph Mercy Oakland. Remote Specialist Visiting Physicians (RSVP) – Star EMS and Bloomfield Township Fire Department
- Tandem 365 – Life EMS
- Henry Ford Health System-Superior EMS & Medstar

Program Map Legend

- Existing programs are in the southern half of the lower peninsula – general locations indicated by **orange dots**
- Six entities have begun the process of creating new CIP programs and the majority will be up and running within the next 9-18 months – general locations indicated by the **purple dots**
- Steadily increasing requests to meet with areas interested in learning more about Community Integrated Paramedicine - locations indicated by **yellow dots**



Muskegon Program



- June 21, 2016
- **ProMed**, White Lake Ambulance Authority, Oceana EMS
- Mercy Health/Mercy Health Hackley
- West Michigan Regional Medical Consortium (WMRMC)
- Reduce hospital re-admissions post discharge and help with transition of care from hospital to Primary Care Provider
- Strokes and Trauma
- Case Management, sub-acute rehab, nursing home/rehab

Muskegon Wins

- Matter of Balance Instructors
- CVA/TIA Diagnosis (June-June)
 - 2015/2016 Inpatient readmissions: 56%
 - (N-1378)
 - 2016/2017 Inpatient readmissions: 13%
 - (N-1847)

Clinton Area Ambulance Service Authority (CAASA)



- To provide quality and compassionate care in the home environment in partnership with the patient, caregivers, and their primary care provider to allow for the highest quality of health and life possible.
- Anyone identified as in need of services
- Local PCP's, Pathway (local health department), DHHS Adult Protective Services, local critical access hospital, EMS crews

CAASA Wins

- 1 Patient 2016: 48 ambulance transports and 65 Emergency Department visits
- Quarter 1 2017: 0 and 0

Henry Ford: Superior EMS & Medstar of Macomb



- January 01, 2016
- Post discharge support, readmission prevention, PCP engagement
- CHF, COPD
- In-patient case management

Medstar Macomb Wins

- QTR 1 2017:
 - Reduced readmissions of enrolled patients from $\geq 20\%$ to 3%

Tandem 365



- May 14, 2014
- Life EMS
- Kent, Ottawa, Allegan, Kalamazoo permission- 1 Tandem Medical Director
- “A community collaboration empowering others to achieve better health, reduce costs, and improve quality.”
- 55 and older (typically) who require assistance managing complex medical problems
- Insurance plans – Priority Health (recent additions)

Tandem 365

- *Integrated Care Paramedics (ICP's) – Will probably be renamed 'Technicians' by proposed state standards*
- *Document in an electronic medical records system*
- *Conversations are logged through a three way call with a voice logger to record the conversation*
- *Involved in daily interdisciplinary team (IDT) discussions*
- *Summary reports are provided to Medical Control Directors.*
- *No new skill set is implemented without medical director knowledge and approval.*

Emergent Health Partners (EHP) Community Paramedic Programs

Huron Valley
Ambulance (HVA) –
August 2015

Jackson Community
Ambulance (JCA) -
March 2016

The program mission is
to focus on ER diversion
and readmission
prevention



EHP Discoveries and Wins

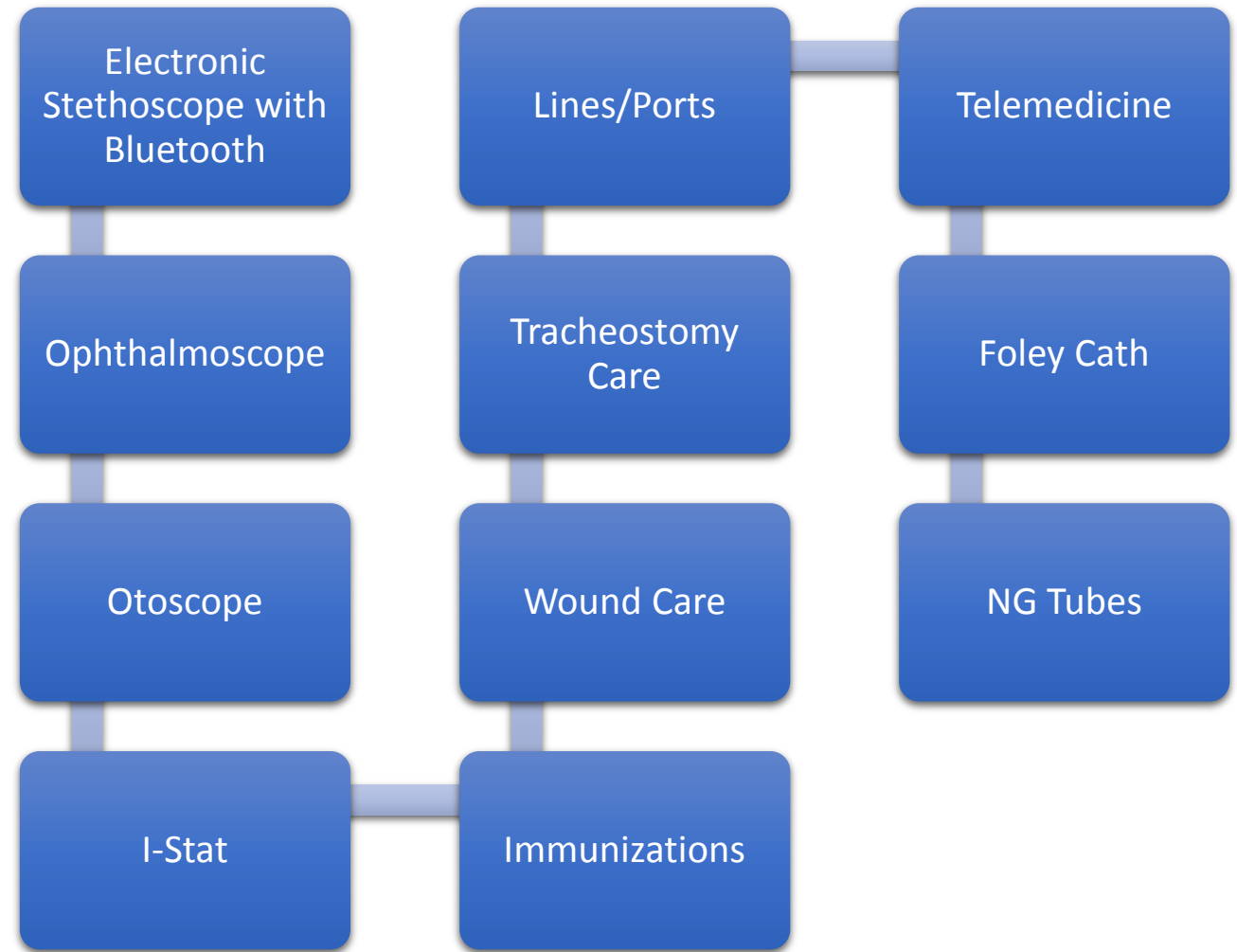


- Whatever it Takes
- Asthma Educators
- Nursing Homes
- Vascular Surgeon
- 911 Diversion
- Treat in place for high utilizers
- ACS
- First line antibiotics
- 850 patient contacts per quarter

What Does CIP Education Look Like?

- Social Determinants of Health
- Communication Strategies
- Pathophysiology
- Lab Values
- Chronic Disease
- Mental Health
- Nutrition
- Pharmacology
- Care Plans
- Resources
- Hospice and Palliative Care
- Substance Abuse
- Immunizations
- Clinicals...lots and lots of clinicals

Equipment & Skill Set Snapshot





Chronic Disease

- Episodic assistance
- Education
- Post-discharge monitoring

Post-Discharge/Care Transition/Safe Landing

understand discharge instructions

medication reconciliation/compliance

social evaluation

scheduled follow-ups/transportation

physical exam

home safety

care plan compliance/communication

point of care testing

symptom response plan

DME follow-up & appropriate use

| What can we
do for you?

Complicated patients

Non-compliant

Frequently use ED

Frequently admitted

Do Our Missions Intersect?

- From the 2018 PCMH Initiative Participation Guide (December 19, 2017)
 - “...focusing on the development and testing service delivery models in order to achieve better care coordination, lower costs, and improved health outcomes for Michiganders” (Introduction, p.5),
 - Community Linkage – a relationship between a Practice and a community-based organization which provide services and resources that address significant socioeconomic needs of the practice’s population (Models of Care Management and Coordination, p.10).
 - Appendix B: Social Determinants of Health Brief Screening Tool

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Imagine... what would our partnership look like?

- How much do your top 5 most complicated patient's cost?
- Can a CIP do some in-home investigation for you?
- They are still your patients
- Another set of eyes and a new perspective
- Experience
- Identify the underlying factors
- Fix, manage, expedite (sometimes sick is sick)



A Few Links for Additional Information

- National Association of State EMS Officials (NASEMSO)
 - NASEMSO just surveyed all of the states again – Michigan's updated information will be in the next edition. This document is a survey of Mobile Integrated Health-Community Paramedic (MIH-CP) programs across the nation.
 - https://www.nasemso.org/State-CP-Status-Board-and-Map/documents/CP_State_Status_Board_CURRENT.pdf
- Huron Valley Ambulance (HVA) Community Paramedic Protocols
 - Protocols for a program that serves a wide variety of populations and has several partners – one of the broadest programs we have in the state.
 - <https://www.washtenaw.org/DocumentCenter/Index/289>
- St. Joseph Mercy RSVP Program
 - Mobile Integrated Health/top-down/hospital driven type of program utilizing two different EMS agencies as 'vendors' to complete the work
 - <http://www.stjoeshealth.org/body.cfm?id=7598&action=detail&ref=5532>



Contact Information



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Additional Questions and Resources

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[SIM Care Delivery Webpage](#)



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Don't forget to complete the follow up survey!