



Homeless Shelter Embedded Community Paramedics: Reducing 911 utilization and Enhancing Access to Primary Care

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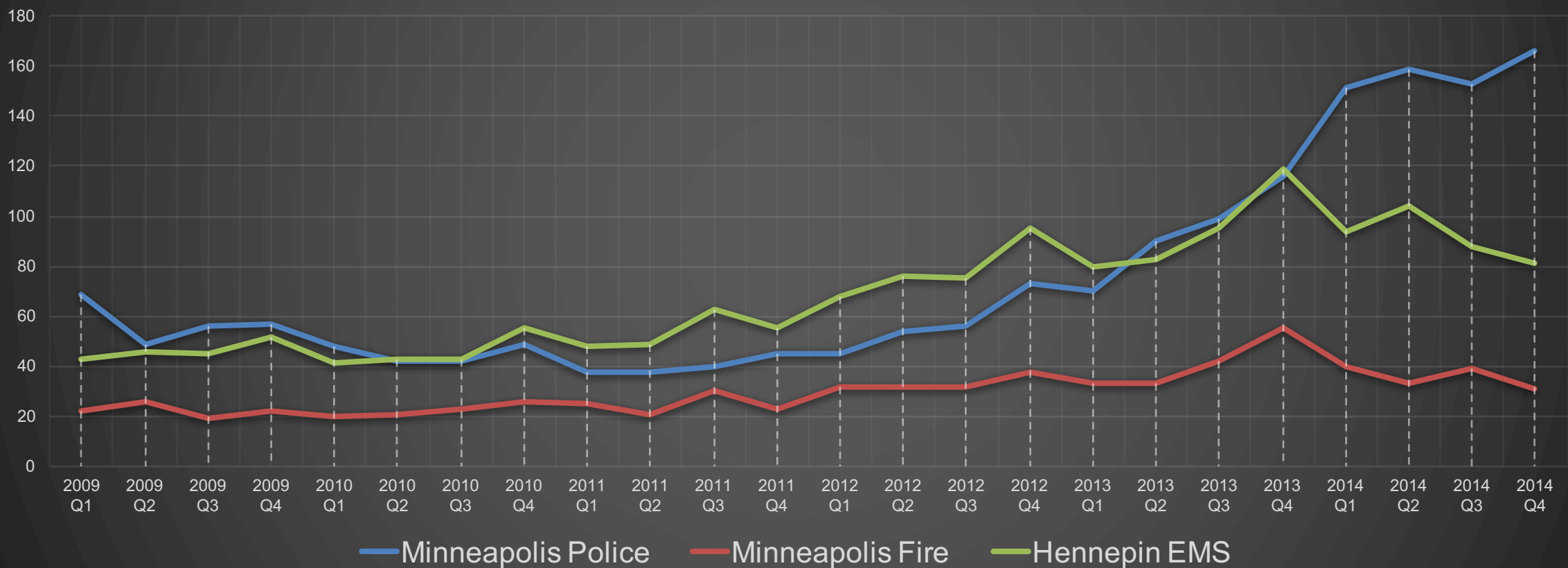
	The Harbor Light	Overall
CY 2009	522	55214
CY 2014	1205	70234





Steadily Increasing Volume

Requests for Public Safety Service Volume to Harbor Light Center
Monthly Average per Quarter,
TriTech InformCAD Data





Precedence

- Central Arizona Shelter System (Phoenix, Arizona, USA)
 - Primary Care Paramedics placed in large (~1000 resident facility) 24/7/365
 - 30% reductions of EMS utilization





- Accountable Care Organization
- Prepaid Medical Assistance Plan
- Reinvestment Initiative
 - Personnel Additions (Social Workers, Community Health Workers, Physicians, Nurse Care Coordinators, ChemDep Counselors)
 - Unique Programs (Housing Support, Clinic Remodels, etc.)



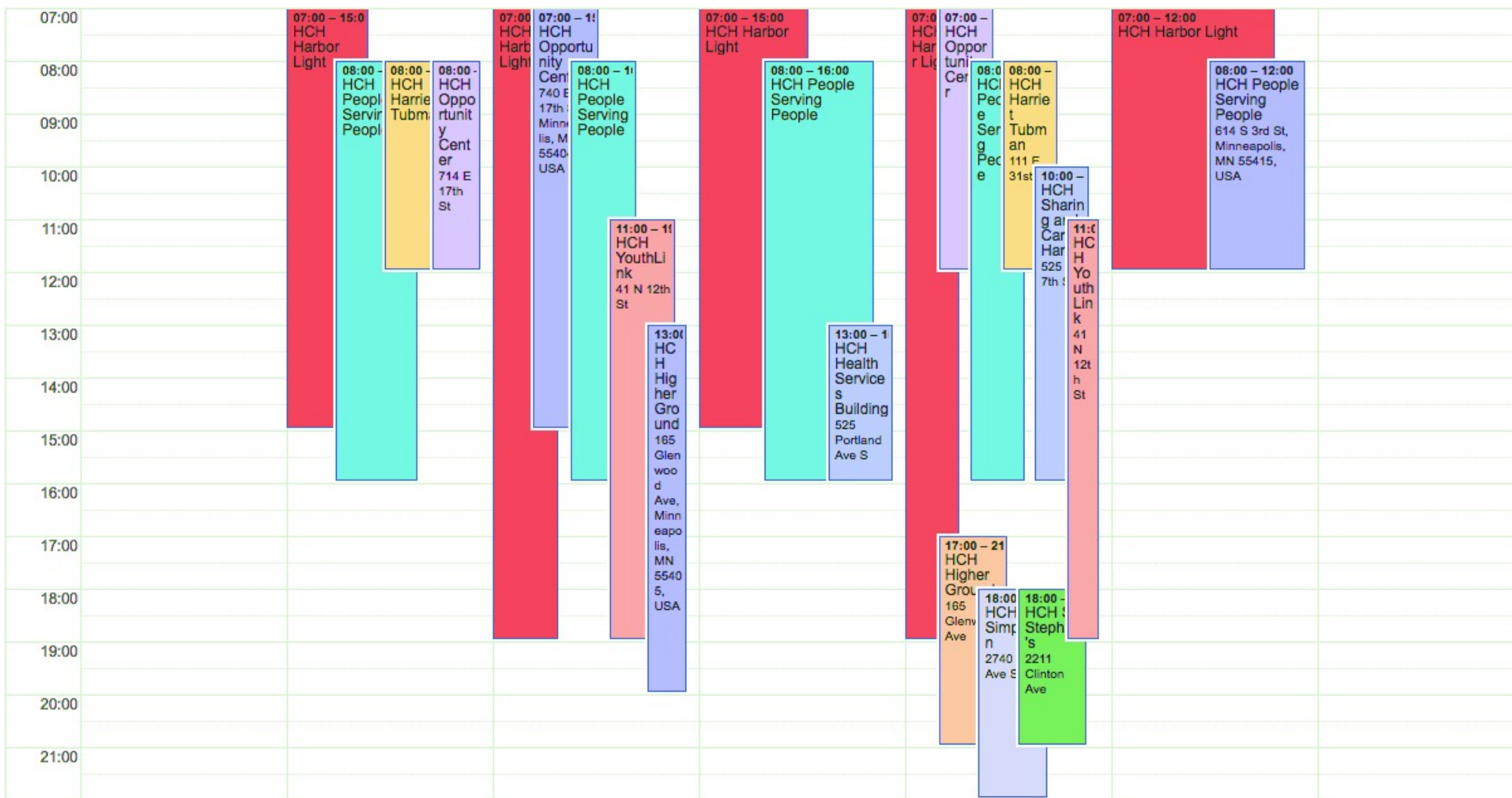
Another layer of coverage

Sunday Monday Tuesday Wednesday Thursday Friday Saturday

07h00

12h00

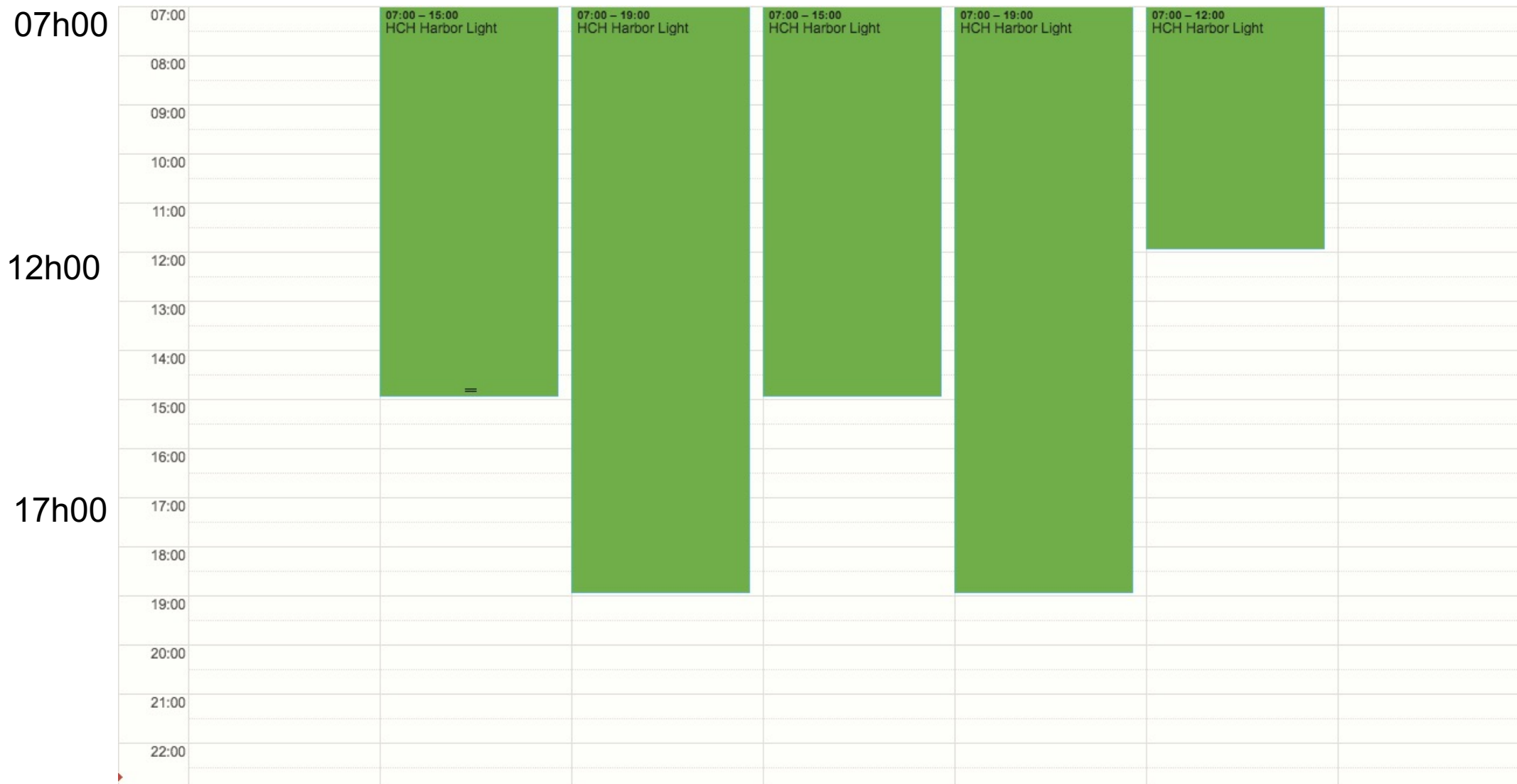
17h00





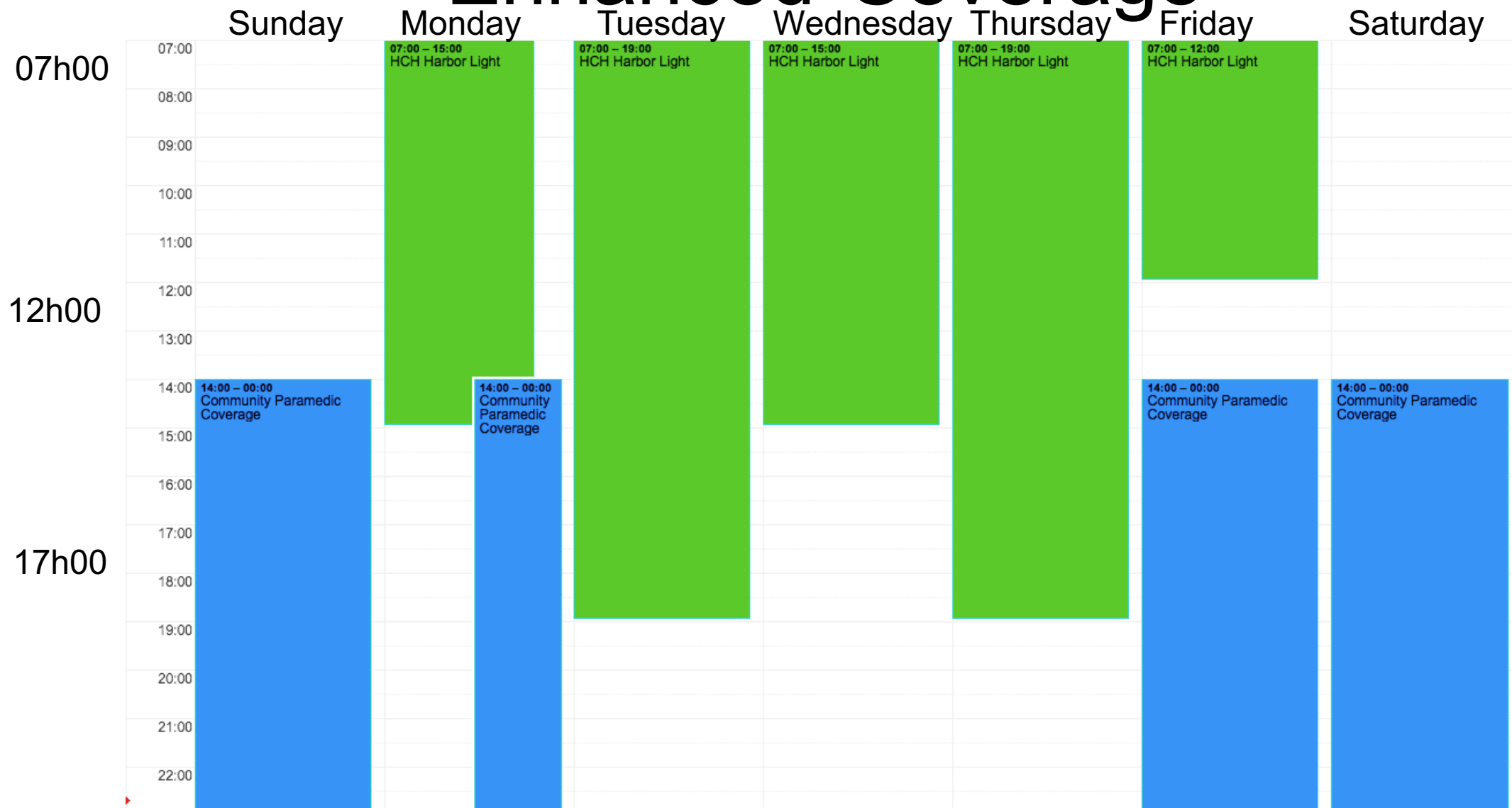
Healthcare for the Homeless

Saturday





Enhanced Coverage





- Two Community Paramedics dedicated to Harbor Light
 - 0.5 FTE as CP
 - 0.5 FTE on Paramedic Service
- Enhanced Standing Orders
 - Structured as addendum to Paramedic Service standing orders
- Unique Medical Control Approach
 - On Call Internist, Not EM MD





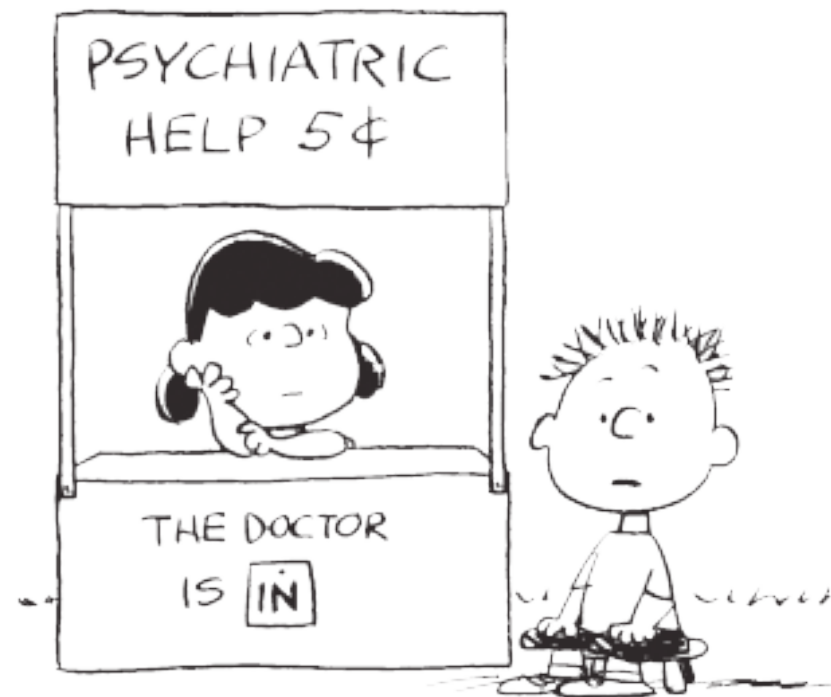
- Point of Care Testing
 - Basic Chemistry
 - International Normalized Ratio
- Expanded Medication Resources
 - Albeit mostly OTC medications
 - Acetaminophen, ibuprofen, phenol lozenge, diphenhydramine, ondansetron





What are we seeing?

- Hypertension
- Wound Care
- Dermatology
- Diabetes “The Sugar”
- Chemical Dependence
- Mental Illness
- Lack of Primary Care
 - Lack of Mental Health Care





We've got a car...

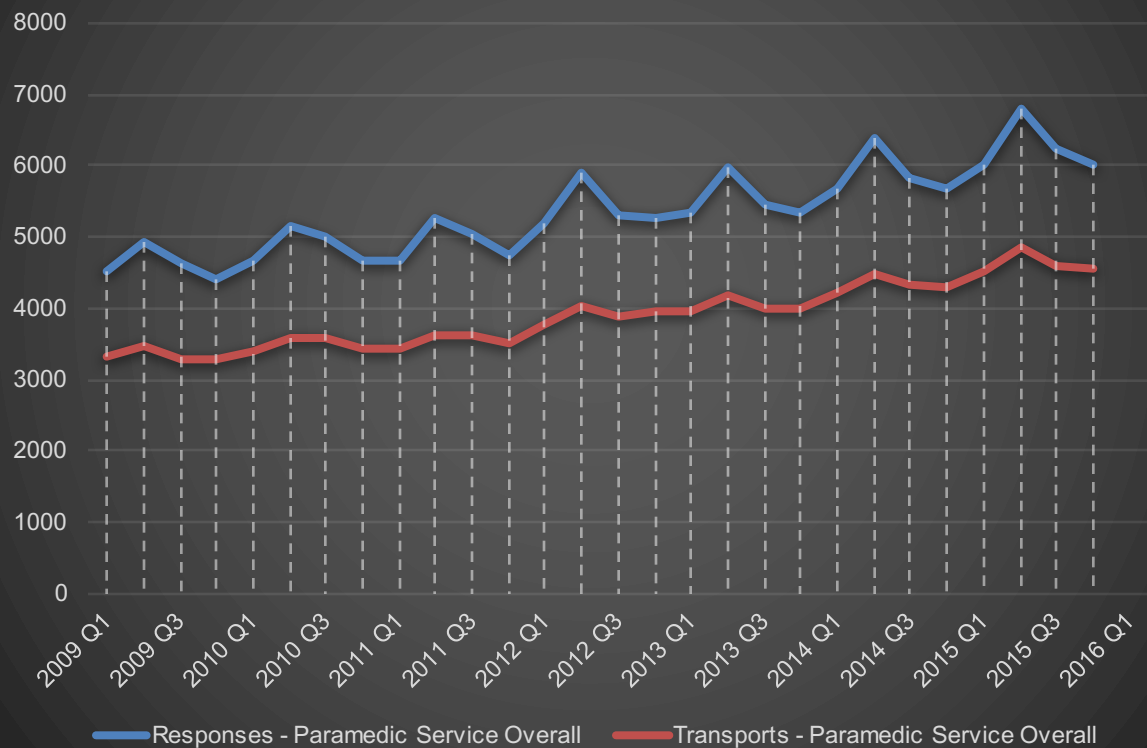
- As appropriate, Community Paramedics can drive the client places as needed.
 - Pharmacy
 - Where they actually should be
 - Emergency Department / Urgent Care
 - Psychiatric Emergency Department
- We can also bring services in.
 - COPE (Community Outreach for Psychiatric Emergencies)



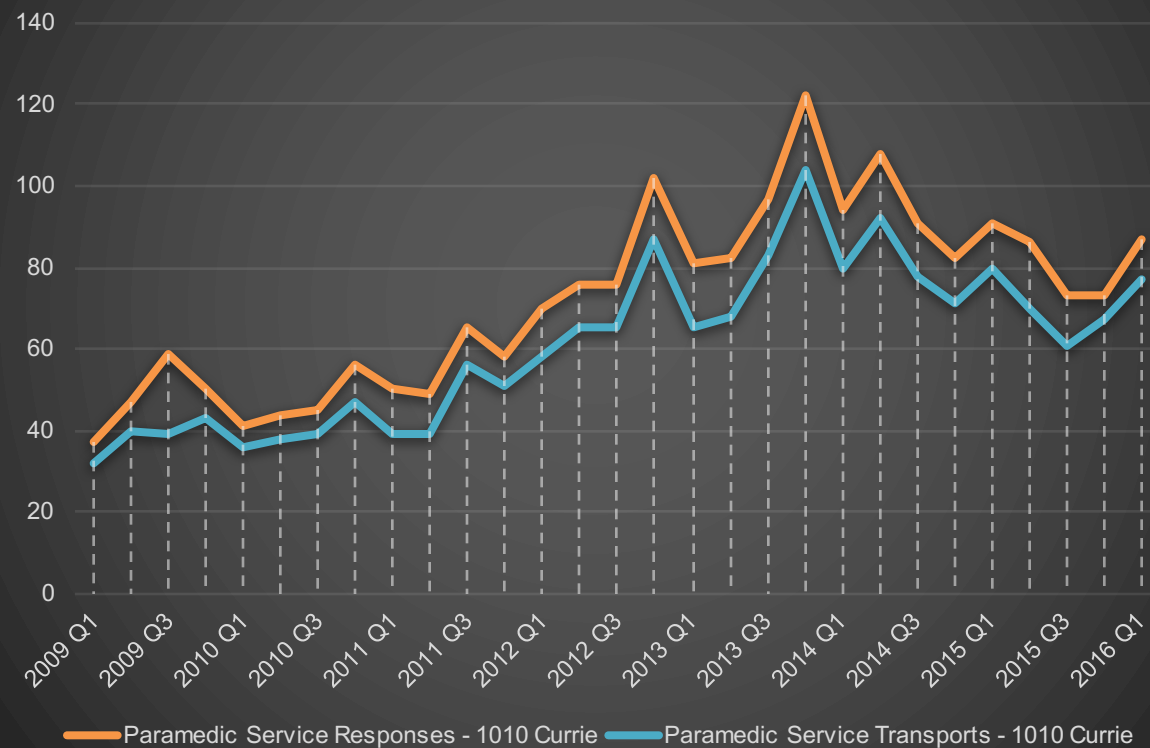


Who likes graphs?

**Average Overall Monthly Response
Volume by Quarter,**
OPEN Inc. SafetyPAD Enterprise Data



**Average Harbor Light Monthly Response
Volume by Quarter,**
OPEN Inc. SafetyPAD Enterprise Data

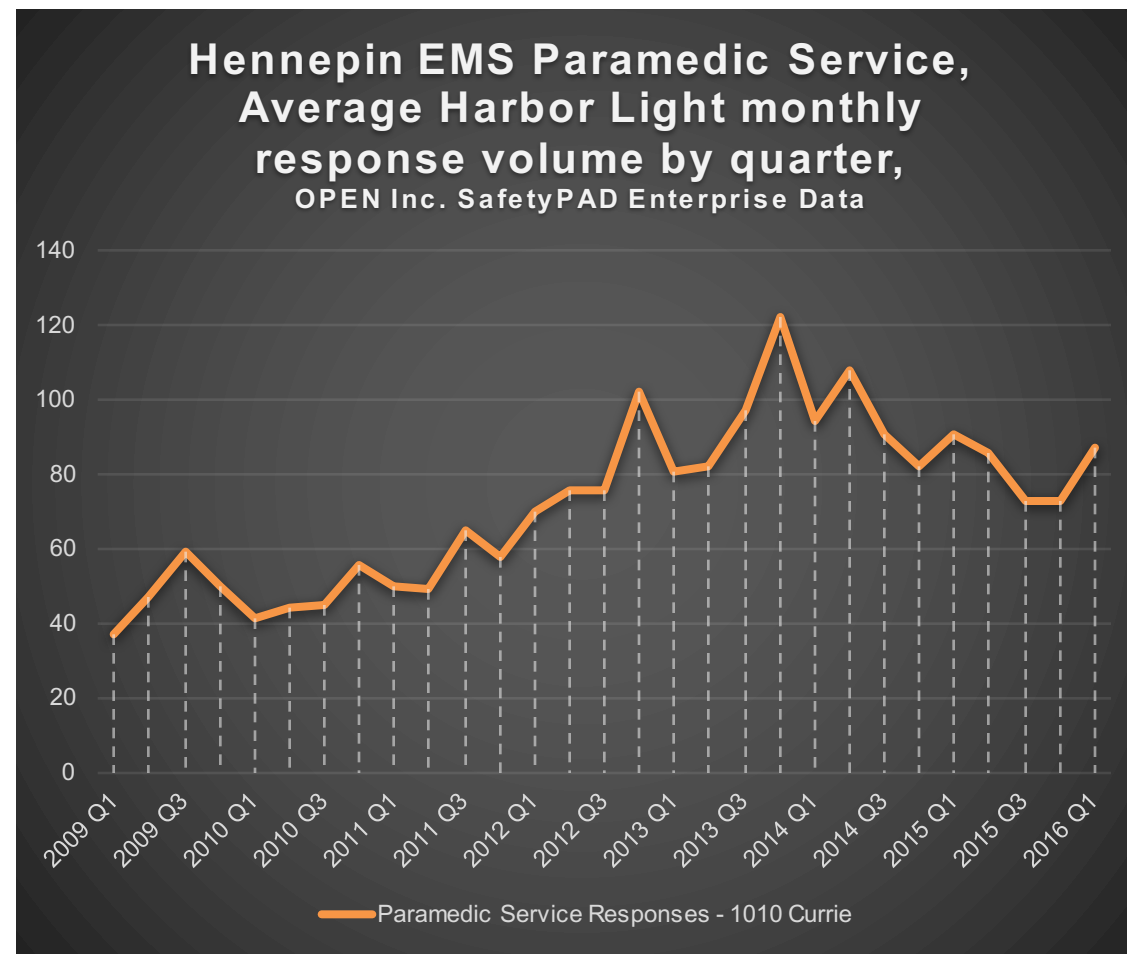




Primary Goal – Reduce EMS Utilization

- Overall 16% Decrease in EMS Responses in year one

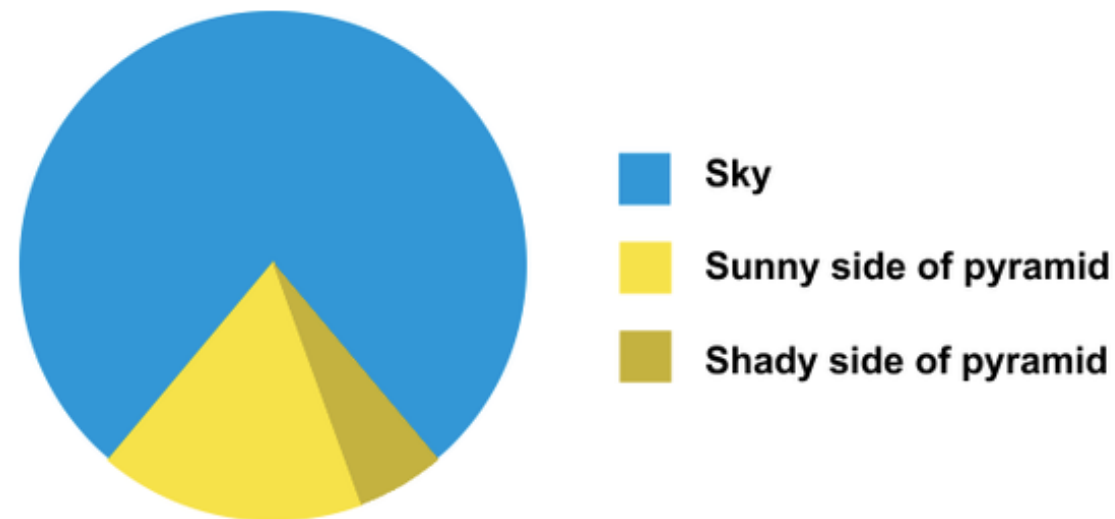
	2014 vs. 2015	2014 vs. 2016
Q1	↓ 3%	↓ 8%
Q2	↓ 26%	
Q3	↓ 25%	
Q4	↓ 12%	





Primary Goal – Enhance Access to Primary Care

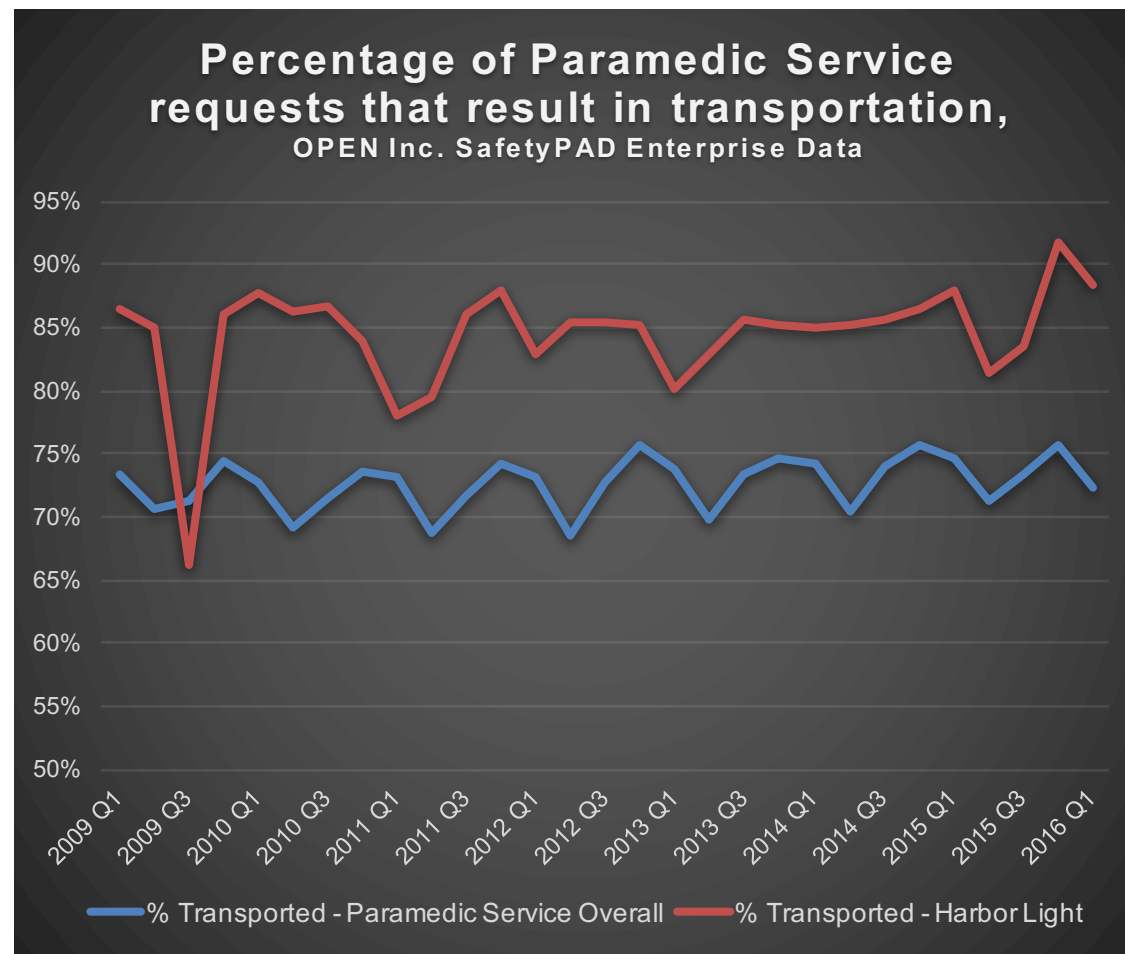
- Not restricted to HCMC
- Data Lives in EHR
- Anecdotal





Secondary Goal – Improve Paramedic Service Efficiency

- Closer ratio of Requests for service to completed transports by ACP ambulances = improved Paramedic Service efficiency

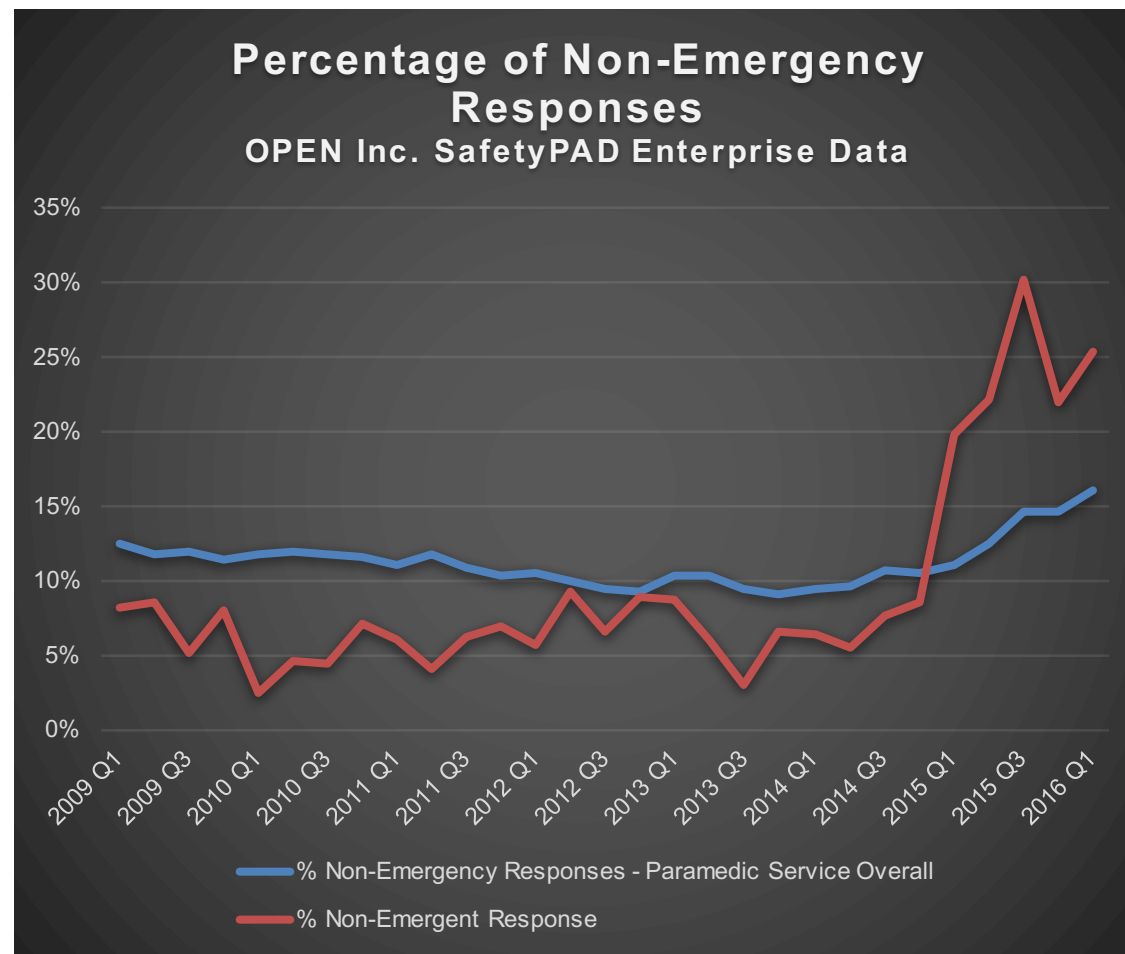




Secondary Goal – Reduce Emergent Responses

- Fewer 6400kg legal liabilities driving emergently = Reduced legal risk to organization

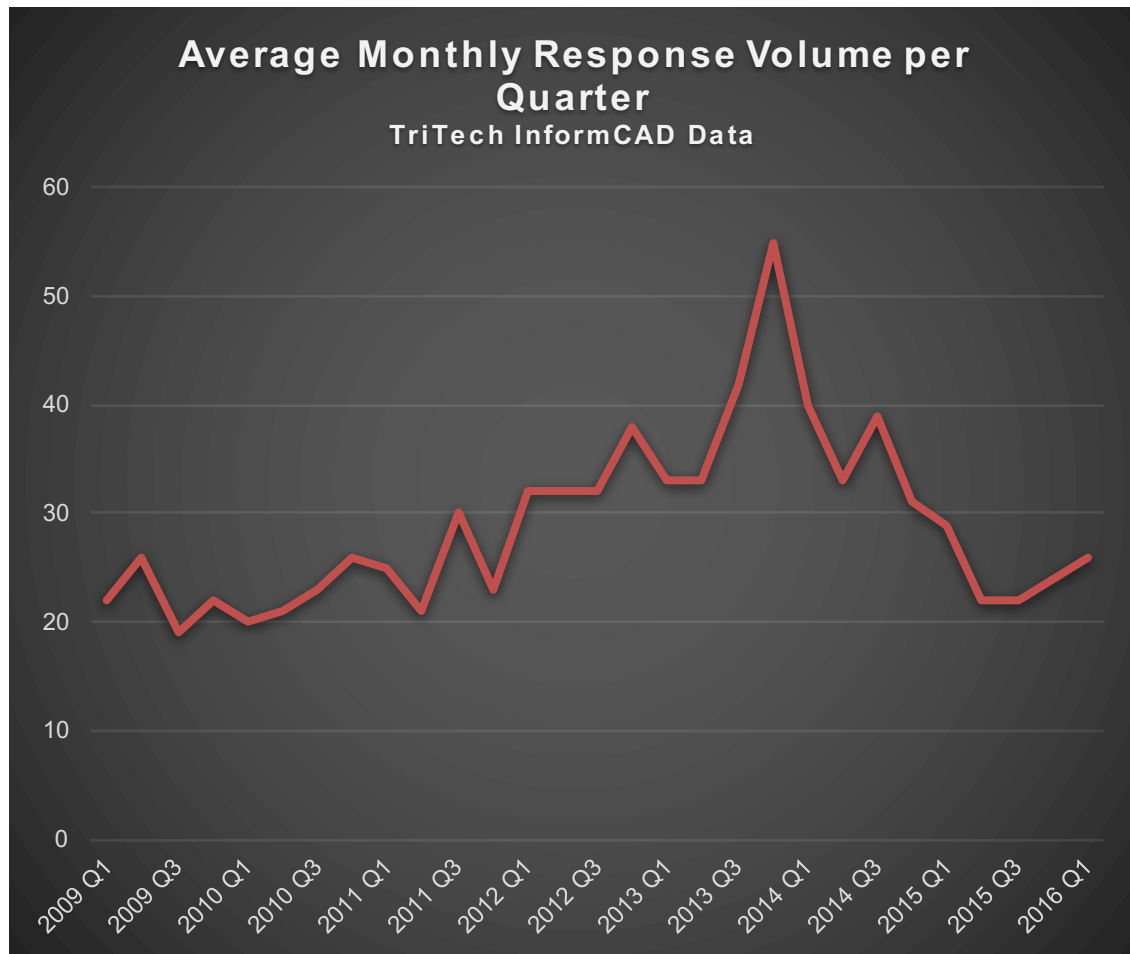
	2014 vs. 2015	2014 vs. 2016
Q1	↑ 68%	↑ 75%
Q2	↑ 75%	
Q3	↑ 74%	
Q4	↑ 61%	





Secondary Goal – Reduce Minneapolis Fire Response

	2014 vs. 2015	2014 vs. 2016
Q1	↓ 38%	↓ 54%
Q2	↓ 50%	
Q3	↓ 77%	
Q4	↓ 29%	





You're still here?

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*Available for Parties!

