

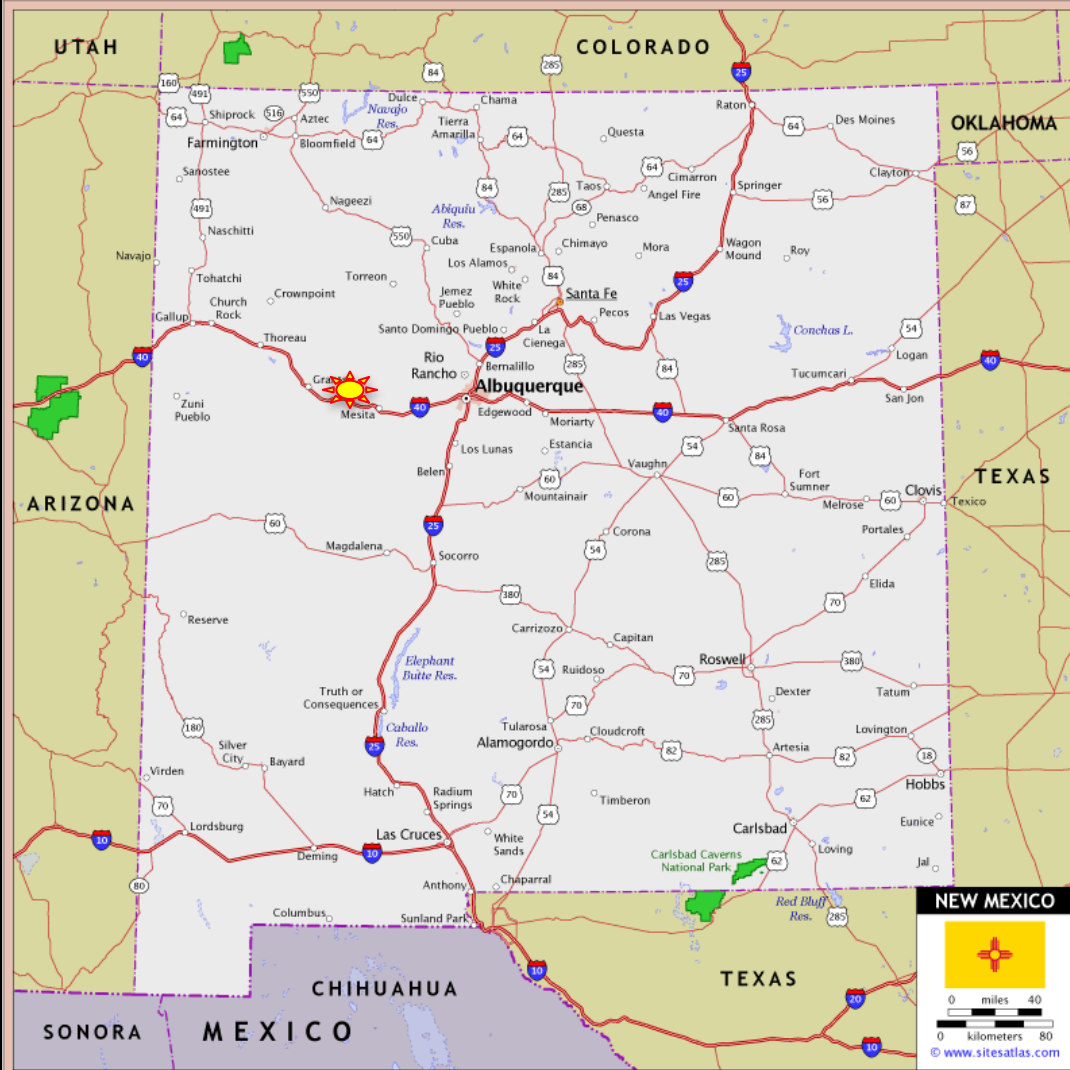
# **Uniting Health Disciplines Within a Frontier Tribal Community Paramedicine Program in Laguna Pueblo, New Mexico, USA**

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*Old Laguna, Laguna Pueblo, N.Mex.*







*Laguna Rescue 1 visiting CP patient, Laguna Pueblo, N.Mex.*





*Laguna CHRs and Community Paramedics, Laguna Pueblo, N.Mex.*



**The Indian Health Service (IHS), an agency within the US Public Health Service Department of Health and Human Services, is responsible for providing federal health services to the 2.2 million American Indians and Alaska Natives who belong to 567 federally recognized tribes**

# Community Health Representatives



*Indian Rt. 25, Laguna Pueblo, N.Mex.*



# Public Health Nurses



*Mt. Taylor, from Historic US Rt. 66, Laguna Pueblo, N.Mex.*

# Need for Laguna CP Program

- In 2015, Laguna CHRs met with Laguna Fire Rescue to develop alternatives for several pueblo members who had non-urgent, non-acute health needs outside of the CHR scope of practice
- These needs required the CHRs to transport pueblo members to medical appointments many miles off reservation



# Start of Laguna CP Program

- The CHRs, LFR Administration, and the LFR Medical Director determined that LFR Paramedics could be trained to provide additional in home medical treatments and services
- Two paramedics were selected as the first LFR community paramedics (CPs)

# Community Needs Assessment



*Indian Rt. 53, Mesita, Laguna Pueblo, N.Mex.*



# Typical CP/MIHC programs

- Some focus on reducing hospital readmission
- Others focus on navigating non-urgent 911 callers away from Paramedic Services and Emergency Departments
- Most involve significant education above typical paramedic training to develop semi-independent practitioners

*“Typical” Community Paramedic, Ann Arbor, MI*

# Full Scope CP/MIHC Programs

- A full scope CP/MIHC training program is out of reach for the Pueblo of Laguna
- The costs in time and money are prohibitive
- The breadth and depth of such programs exceed community needs
- Still need Tony and Fern on the rescues

*“Typical” Community Paramedic, Ann Arbor, MI*



# The Laguna CHW Team

- The team is made up of the CHRs (5), the public health nurses (1 RN, 1 LPN), the CPs (2), and the medical director
- Each discipline brings unique medical skills as well as logistical skills to the team and the patient census

*Laguna CHRs and Community Paramedics, Laguna Pueblo, N.Mex.*

# CPs as CHW Team Members

- Laguna CPs were added to the team specifically to treat CHR patients that have needs beyond the scope of practice of CHRs
- Because of this, when compared to full scope CPs, the Laguna CPs are better described as CHR extenders

*Laguna Community Paramedics with patient, Laguna Pueblo, N.Mex.*



# Team Concept Essential

- Laguna CPs' skill set has been developed one special skill at a time, as dictated by community needs
- Since they are not semi-independent practitioners – in medicine or social work – they must be part of larger team

# Benefits of Team Approach

- Many of the CHR patients do not need paramedic level treatment
- Health assessments, home safety evaluations, and other social determinants of health needs can be addressed by CHRs within their scope



# Not starting from scratch

- No need for needs assessment – already done
- No need to develop referral system – in place
- Needed specific skills already identified
- Community already accepting of home visits

# Team Function

- Since the CHRs, PHNs, and CPs are on the same team, they share a common patient census
- The team discusses patients almost daily to coordinate patient care, based on patient needs and provider capabilities

*Laguna CHRs and Community Paramedics, Laguna Pueblo, N.Mex.*



# CP Role Within The Team

- Laguna CPs primarily perform wound care, medication management, and help patients negotiate the complexities of the IHS and off-reservation health systems
- CPs also coordinate with the rest of Laguna Fire Rescue, which has become a major referral source

*Laguna Community Paramedics, Laguna Pueblo, N.Mex.*

# Primary Care Physicians

- A CP program cannot exist in a vacuum
- CPs take the team lead with coordination of care with Primary Care Physicians
- Since many of the medical needs are chronic, the CPs work closely with Primary Care Physician to monitor success of treatments



# Medical Director Involvement

- Since the CPs are not semi-independent practitioners, close medical director involvement is essential
- CPs – and the CHRs and PHNs – contact the medical director frequently to discuss patients
- Title and scope expanded to “Medical Director of Community Health and EMS programs”

*UNM MD3, on scene with Laguna Community Paramedics  
Pagate, Laguna Pueblo, N.Mex.*

# Teamwork helps new familiar face

- Though the team does not focus on navigation away from emergency calls, it is well positioned to do so
- From 9/20/2017 to 10/3/2017 a single patient required 19 Laguna Fire Rescue responses
- This represented 25% of all LFR calls during that period (out of 74 total calls)



# Teamwork helps new familiar face

- The patient, who had just moved to his sister's house, was debilitated by a previous CVA
- His sister was unable to assist him around the house; almost all of the calls to LFR were for lift assists/help with getting to the bathroom

# Teamwork helps new familiar face

- The CPs quickly became aware of this patient's situation due to their regular paramedic duties and brought his case to the team
- The CHRs performed a health assessment, the CPs loaned the family a stair chair, and everyone helped the family with placement



# Teamwork helps new familiar face

- Despite several setbacks with nursing homes, the team found an accepting facility and helped the family prepare to relocate him
- Quick identification of the situation and a proactive team response rapidly helped the patient and his overwhelmed family

# Thoughts for Other Rural Areas

- The reason for sharing the Laguna story is to demonstrate that rural CP programs can work
- This model is best reproduced on other Native American Reservations, but as the Community Health Worker concept catches on nationally, such programs can be reproduced elsewhere

*near Paguate Village, Laguna Pueblo, N.Mex.*



# What's on the horizon?



*Laguna Pueblo viewed from Lobo Ranch, Cebolleta, N.Mex.*

