Community paramedicine can add followups to EMS service

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Emergency medical programs across the country are studying ways to get medical services to the people who need them, and community paramedicine is a program getting a lot of attention.

EMS programs in Springfield Township and Colerain Township are both investigating how to best use a paramedicine model in their communities.

Community paramedicine is an emerging practice nationwide. Depending on the program, paramedics move beyond emergency medical intervention and can provide medical services while out in the community, including follow-up care for patients recently discharged from the hospital, medical support for some chronic health issues, such as diabetes, asthma and congestive heart failure and providing referrals to non-emergency primary care services or community health partners that provide health services for free or at a minimal fee for frequent 911 users or poor or underserved populations to community health partners.

Last year, Ohio Sen. Bill Seitz, R-Green Township, introduced a bill that would allow paramedics and EMTs to perform services in non-emergency situations. The bill passed and went into effect Oct. 1. Prior to the passage of HB 64, paramedics were permitted to respond to a call only as an emergency and transport the patient to a hospital.

Springfield Township Trustee Gwen McFarlin and Fire Chief Robert Leininger are working on a community paramedicine program with an implementation program that will kick off this year.
The Springfield Township model would begin on a small scale as a pilot program before going community-wide. The program is developing policies and procedures for follow-up home visits, choosing software for documentation requirements and record retention compliance, paramedic training taught by home health care professionals, and development of performance measurement standards, and quality of service, cost and outcome measurement standards, as well.

Leininger said the first step would likely be to expand the use of existing emergency medical services by doing followups and referrals to connect residents with resources.

Future steps could involve establishing collaborative relationships between the Springfield Township Fire/EMS Department and other social service agencies to provide programs that help patients keep their independence and stay in their homes longer. In the future, paramedics will be able to follow-up an emergency trip for a fall with a referral to services that could provide grab rails in the bathrooms and hallways, such as People Working Cooperatively. A paramedic could make a referral to an agency such as the Council on Aging for meals on wheels if he or she observes that a resident does not have access to quality meals.

The program could eventually involve establishing a partnership via contact with a health care organization or an alliance to provide home health care for patients who have been discharged from the hospital with a particular medical need but do not have health insurance.

Both Leininger and McFarlin are members of the University of Cincinnati Emergency Medical Services Degree Program Advisory Board, which is developing a course and standards for community paramedicine. Leininger is also now sitting on the Southwest Ohio Council on Aging Advisory Board representing Hamilton County Fire Chiefs.

Leininger says he hopes the first step for his department will be ready to go in May.

“We are going to start slow and measure as we go,” he said. “And we need to decide if there is a real demand for this kind of service.”

He suspects there will be.

“We are probably a decade or so away from a new service model for EMS,” he said. “The cost of medical care and insurance will influence it, and the other factor will be the Baby Boomers. They will want to stay in their houses and there will be an even great demand for home nursing services.”

Colerain Township is part of a new pilot partnership with Christ Hospital that will train paramedics to serve outside their customary emergency roles as first responders.

Departments participating in the pilot include Cincinnati Fire Department, Colerain Township Fire Department, Deerfield Township Fire Department, Miami Township (Butler County) Fire Department, Monroe Fire Department and Jefferson Township Fire Department.
The pilot in which Colerain is partnering will start small, only serving Christ Hospital patients in select areas who have congestive heart failure, but organizers hope it will eventually expand to partnerships with many local hospitals.

Colerain Fire Capt. Will Mueller, in charge of Emergency Medical Services operation for the Colerain department, says the pilot program is not ready to fly, and won’t likely be rolling out before this fall.

“This is still in the development stages,” he said. “We still have a lot of work to do before we are making these visits.”

Each participating fire department has identified one firefighter it intends to be the “community paramedic,” who will take a three-credit semester class the skills needed for the new program and Mueller is helping teach that class. After paramedics complete the class, they will shadow an individual who is already practicing in the community. You may think that would be natural for someone with medical training, but Mark Johnston, EMS coordinator at Christ Hospital, who is helping launch the pilot, said it is not.

“Paramedics are used to asking yes or no questions,” Johnston said. “Instead, we need to teach them to communicate and ask questions like a doctor.”

Larry Bennett, chair of the University of Cincinnati’s Fire Science and Emergency Management program, is also helping get the pilot project up and running. He says once paramedics do begin practicing in the community, they will not be replicating other medical services. The program is designed to fill gaps – not provide the same service as a private in-home care provider. “We visit patients who do not have in-home care,” Bennett said.

“We want to work together,” Bennett said.

Each department’s program will differ. They may roll them out at separate times, and they may each serve a different number of patients, but Johnston and Bennett said they intend to encourage the partners to collaborate. Johnston and Bennett are starting small, but they can see the pilot expanding throughout the region.

“This is a public service,” Johnston said. “It will grow if we do it with well-trained medics.”

Mueller says this first foray into community paramedicine isn’t unfamiliar from the standpoint of being a followup. His department already makes follow-up visits for opioid overdoses and later this year, Colerain will launch a program to follow up with residents who needed EMS help due to a fall.

He says the beginnings of the community paramedicine services are evocative of the beginning of paramedic services in the 1970s.

“There will be some push back,” he said. “But we think these services are going to be increasingly necessary.”
Community paramedicine: An age-old idea

Community paramedicine is an emerging healthcare delivery model, but the idea has actually been in existence since the early 1990s, according to a report by the University of Washington School of Medicine.

One of the earliest known community paramedicine programs existed in Red River, New Mexico. The closest hospital to the rural town was roughly a 40-mile, one-hour trip, according to an article by Firehouse, a firefighting trade website.

In 1995, the New Mexico Senate passed an act that required the Department of Health to study the idea of community paramedicine. Soon after, the Red River community paramedicine pilot launched.

A later review of the program found many patients didn’t use the program for primary care, but it did reduce the number of times the ambulance went to the hospital by roughly 67 percent.

Larry Bennett, chair of the University of Cincinnati’s Fire Science and Emergency Management program, and Mark Johnston, EMS coordinator at Christ Hospital, said the idea of community paramedicine can be traced back even further, to when doctors provided home visits. Later, when departments began training firefighters as paramedics, paramedics played an important role in the community.

“Paramedics were designed to be the eyes and ears of the doctors in the community,” Johnston said.

In Ohio, the practice of community paramedicine is much newer.

Last year, Seitz introduced a bill that would allow paramedics and EMTs to perform services in non-emergency situations. The bill passed and went into effect Oct. 1.

Soon after, the Monroe Fire Department launched a six-month trial program. The program was one of the first in the state.

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