EAST WALNUT HILLS – A new pilot partnership between Christ Hospital and six local fire departments scheduled to launch in April 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 Fire Department, Monroe Fire Department and Jefferson Township Fire Department.

“We would be the gap fillers,” said Larry Bennett, chair of the University of Cincinnati’s Fire Science and Emergency Management program, who is helping launch the pilot. “We would visit patients who do not have in-home care.”

The local pilot 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.

If it does, there could be many benefits, advocates say. It could help connect resources to poor, underserved communities, cut down on habitual 911 callers, and ultimately save taxpayers money.
Community paramedicine is an emerging practice throughout the nation, with programs or pilots in Monroe, Ohio, North Carolina, Colorado, Minnesota, Maine, and Texas. Depending on the program, paramedics administer several different types of services while out in the community, including:

- Identifying frequent 911 callers and referring them to non-emergency, primary care services.
- Assessing each medical situation differently, instead of transporting patients to the Emergency Room.
- Providing follow-up care to people who just left the hospital.
- Supporting patients with conditions like diabetes, asthma and congestive heart failure.
- Referring poor, underserved populations to community health partners that provide health services for free or at a minimal fee.

"It creates better health awareness," said Mark Johnston, EMS coordinator at Christ Hospital who is helping launch the pilot.

On Monday, Bennett and Johnston will begin teaching a one-week course on community paramedicine at the University of Cincinnati.

The course, which costs $1377 for non-matriculating students, will cover the foundations of community paramedicine and mobile integrated health care. It will also discuss the opportunity for partnerships and income opportunities.

Guest lecturers include Ohio Sen. Bill Seitz, R-Green Township; the assistant fire chief of Dallas Fire Rescue Department; and leaders from United Way of Greater Cincinnati and the Talbert House, a non-profit that helps people struggling with mental illness, addiction and homelessness.

**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.
Bennett and Johnston 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.

**Getting the pilot project started**

Before paramedics begin practicing community paramedicine in the Greater Cincinnati, a lot needs to be done.

Each participating fire department has identified one firefighter it intends to be the county's "community paramedic."

Beforehand, each paramedic will take a three-credit semester class that will teach the skills of community paramedicine.

You may think that would be natural for someone with medical training, but Johnston 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."

After paramedics complete the class, they will shadow an individual who is already practicing in the community.

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.

And once paramedics do begin practicing in the community, Bennett wants to make one thing clear: 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."

**Long-term benefits immense**
Johnston and Bennett are starting small, but they can see the pilot expanding throughout the region.

They hope other local hospitals and medical centers will be interested in partnering, as Christ Hospital has. A program like this doesn't really work without patient data on populations to target.

Long term, the benefits could be immense.

For example, community paramedicine could reduce the steep costs associated with ambulance transportation and emergency hospital care. A 2010 Rand Corp. report found that between 14 and 27 percent of all emergency room visits were for non-urgent needs, costing taxpayers roughly $4.4 billion.

It could also help poor, underserved populations, Johnston and Bennett said.

In 50-plus combined years in the fire service and EMT world, the two have found that low-income neighborhoods often call 911 the most often because they don't have access to a primary care doctor. In many cases, poor families aren't able to pay the ambulance or emergency care bill, leaving that cost to taxpayers.

If a community paramedicine program was established, it could help address that problem.

It could also help connect poor communities to social services and local centers.

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

**IF YOU GO**

What: A one-week community paramedicine course taught by Larry Bennett, chair of the University of Cincinnati's Fire Science and Emergency Management program. There will be dozens of guest speakers.

Where: Boy Scouts of America, 10078 Reading Road, Evendale and various locations throughout the week.

When: 9 a.m. to 4 p.m. Monday to Thursday, and 9 a.m. to 3 p.m. Friday.

Who: Anyone can take the class.

Cost: The community is invited to attend the first day free-of-charge. The week-long course costs $1377 for non-matriculating students.

Deadline: Monday morning.

Register at onestop.uc.edu/classes.html.