COMMUNITY PARAMEDICINE

Presented by
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COUNCIL ON AGING of SOUTHWESTERN OHIO

- COA is part of the national aging services network. This network includes the U.S. Administration for Community Living at the federal level, and the Ohio Department of Aging at the state level. COA is one of 12 Area Agencies on Aging (AAA) in Ohio and 618 nationwide. As an Area Aging on Agency, we are responsible for planning, coordinating and administrating local, state and federally funded programs and services for older adults and people with disabilities in our planning and service area.

- Council on Aging of Southwestern Ohio (COA) is a nonprofit organization dedicated to enhancing quality of life for older adults, people with disabilities, their families and caregivers. We promote choice, independence, dignity and well-being through a range of services that help people remain in their homes for as long as possible.

- COA has more than 250 employees, more than 100 contracted providers, and an annual budget of over $100 million.

www.help4seniors.org
A growing aged population is a marker of a successful society, but this progress is accompanied by an increasing number of older Ohioans experiencing a long-term disability. Council on Aging of Southwestern Ohio currently care manages about 20,000 individuals annual, ensuring they have the home and community based services to ensure their safety.

At the same time, there is a growing trend involving emergency management personnel, such as paramedics, to provide community wellness, health and safety checks, as well as other services. While these services are not currently authorized in the state of Ohio, efforts are underway to make revisions to the Ohio Revised Code.

The purpose of this project is to identify the ways in which paramedics can collaborate with the Council on Aging of Southwestern Ohio to enhance home and community based services so that, if and when the laws are changed, we are prepared to move forward with a collaborative effort to keep older adults safely in their care setting of choice, their own home.
OBJECTIVES

- Identify what activities Council on Aging Care Managers perform today.
- Identify activities Council on Aging could subcontract and/or collaborate with local fire departments and paramedics:
  - Potential to increase the breadth/depth of the care management services.
  - Reduce admission to the emergency room, hospital, or skilled nursing facility.
- Incorporate learnings into the curriculum for the community paramedicine program.
CASE STUDY METHOD

- Used to capture representative client types for observation and analysis.
- UC/COA staff from the fire departments shadowed CoA care managers assigned to a purposive sample of CoA clients with complex psychosocial needs who are also high users or potentially high users of emergency services in each of the service areas.
- Interns observed and recorded the work performed by COA care managers.
- Study director and interns consulted relevant community paramedicine programs to identify best practices.
- Final steps are to recommend models, workflows, roles and responsibilities, and the overall business application of the best practices identified.
COLLABORATION

Pure Visits

- UC Interns initially observed a COA Care Manager completing a home visit with a Hamilton County Elderly Services Program client.
- UC Interns then observed a Paramedic completing a home visit during an emergency situation.

Combined Visits (Paramedics were unable to practice during these visits)

- Thirdly, UC Interns and Paramedics both observed a COA Care Manager complete home visits. Post visit, a de briefing was performed to discuss findings during the visit focusing on gaps between the care manager assessment and what the paramedic observed.
CASE STUDY

Types of Clients Visited

- Medically Intensive
- Environmentally Intensive

- Clients located in City of Cincinnati, Springfield Township, and Colerain Township
CASE STUDY FINDINGS

Areas where Paramedics could be utilized:

- Medically intensive clients at risk for hospitalization
- Clients who have recently been discharged from hospital
- Clients with environmental safety concerns
- Clients with medication discrepancies
- Reduce hospital readmissions

There are definitive gaps in care where Paramedics would be able to provide support where the Care Manager cannot.
RECOMMENDATIONS

- Develop Inter-Professional Training specific to Community Paramedicine for both COA and Paramedics
- COA would contract with local Fire/EMS Departments
- COA would identify clients appropriate for Paramedic Visits
- COA would coordinate information sharing between Care Managers and Paramedics.
CONCLUSION

COA is poised and ready with the needed infrastructure to move forward with Community Paramedicine if and when laws are changed, and funding is available.

With the growing population of older adults, the need for Community Paramedicine will continue to increase.

QUESTIONS?