



CITY OF  
**Goodyear**





# Community Paramedicine

Paul Luizzi, Fire Chief

# Community Paramedicine



## TONIGHT

- Current state
- Grant Opportunity
- Intergovernmental Agreement
- Questions

# Community Paramedicine



## THE ISSUE

### Goodyear:

- Since Jan 1, 2015, 81 patients accounted for 674 emergency medical service calls
- 462 patients *admitted* to hospital are accessing 911 system for help within 30 days of their discharge
- 872 patients *seen in emergency room* are accessing the 911 system within 30 days of their discharge

# Community Paramedicine



## DEFINITION

### Community Paramedicine (CP)

- Paramedics help coordinate care for patients that otherwise would use 911 system or emergency department to solve medical needs
- Still new and evolving model

# Community Paramedicine



## GOODYEAR PILOT PROJECT

Vitalyst Health Foundation (St Luke's Health Initiative non-profit)

- Proactively visit high frequency users
  - Part of the grant application
  - Needs assessment, patient education, safety checks, help finding healthcare resources
- Visit patients at high risk for 30 day readmission
- Requires different platform
- Crew members chosen specifically for program
  - Grant will provide for use of regional partners, conversations with Peoria, Avondale, Sun City Fire District, and Surprise

# Community Paramedic



## PILOT PROGRAM GRANT REQUEST

Grant awarded by Vitalyst Health Foundation (St Luke's Health Initiative)

- \$125,000
  - 64%: personnel
  - 36%: training development, necessary minor equipment
- Use existing fleet
  - Pool vehicle
  - PD vehicle due for replacement. Hold it for 6 months.
- All other equipment: use existing stock

# Community Paramedic



## STAFFING MODEL

Two-person units

- Safety
- One current Goodyear paramedic and our regional partners
  - Nationwide 77% of staffing model is paramedics
  - Another entity contributes second resource



# Community Paramedicine



## MEASURING SUCCESS

- We anticipate a 6 month pilot project
- Establish definitive training program
- Further define cost-per-call information
- Establish defined outcome indicators to measure effectiveness
  - Reduce non emergent calls to 911
  - Reduce 30 day readmission rate for Abrazo West Hospital
- Customer satisfaction survey on all Community Paramedic patient interactions

# Community Paramedicine



## MEASURING SUCCESS

Inputs	Activities	Outputs	Short term outcomes	Long term outcomes	Impact
Program Implementation, Referrals, data collection from ePCR, personnel training, shared information from other CP programs in the region, metro phoenix area, and state.	Train community paramedics	Minimum of 4 community paramedics trained per City	80% of candidates complete training program within the determined training time.	80% of community paramedics rate program as excellent in employee survey	Improve patient's quality of life through the CP program.
	Enroll patients into the program	Enroll the top 10% of each City's high frequency utilizers	20% reduction of 911 calls by high frequency utilizers for non-emergent complaints	10% reduction of low acuity emergency department visits	
	Implement intervention activities	Intervention activities provided for 60% of patients	Increase number of patients adhering to medications by 30%	75% of patients rate CP program excellent in their satisfaction survey	
	Refer patients to appropriate health resources		Increase number of patients referred to needed services by 30%	Realization of healthcare cost savings.	

# Community Paramedicine



## BENEFITS

- Fiscally responsible with taxpayer dollars
  - Reduce unnecessary 911 calls for non emergent or routine calls issues/complaints
  - Dedicated equipment less expensive than traditional fire call response unit(s)
- Decrease unnecessary emergency room burden
- Provide support to vulnerable population
- Public-private partnerships
- Opportunity for collaboration to maximize resources
- Provides outstanding, innovative customer service for residents

# Community Paramedicine



## CHALLENGES

- Creating a sustainable payment model
- Ensuring that other healthcare partners are willing to assist the patients
- Regulations from State or Federal Government
- Workforce challenges

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## NEXT STEPS

- IGA has been created and seeking approval to move forward with the pilot project.
- IGA allows us to share money between cities
- Continue to identify key stakeholders and resources in the community
- Standardized data for community paramedicine pilot
- Identify evaluation partner(s)
- Publish pilot project outcomes



# References



## COMMUNITY PARAMEDICINE REFERENCES

<http://www.acepnow.com/article/opinion-mobile-integrated-health-care-practice-can-bridge-gaps-in-system/>

<http://www.emsworld.com/article/11223187/naemt-issues-results-of-community-paramedicine-mobile-integrated-healthcare-survey>

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# Community Paramedicine



THANK YOU

Questions