

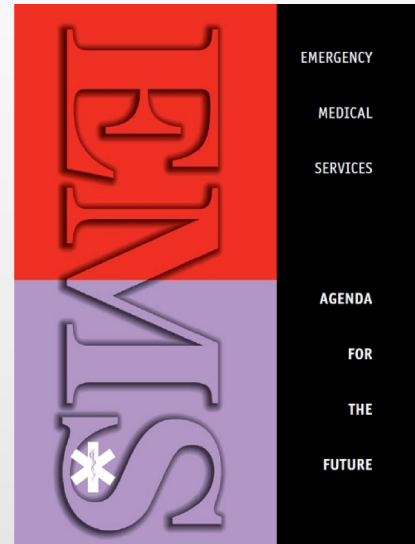
Sylvania & Springfield Township H.E.R.O. Community Paramedicine Program

AN INSIDE LOOK



EMS 1996 - 2050

- **NHTSA Innovation from 1996 titled “EMS Agenda for the Future”**
 - Described a time when Local Fire and EMS would start to work with Public Health Issues
 - “EMS treatment would be part of a complete health care program”
 - “with finances... linked to value”
- **Current Healthcare Reform**
 - Healthcare Expenditures have transitioned from a fee for service payment model to a value of care provided model (ACO)
- **EMS Innovation of 2050**
 - A People – Centered Vision for the Future of Emergency Medical Services
 - Local EMS services collaborate frequently with healthcare community partners, including public safety agencies, public health, social services and public works. Communication and coordination across the care continuum are seamless, leaving people with a feeling that one system, comprising many integrated parts, is caring for them and their families.



2020 – “A Look Back at the Future” Y2K

- **The Best Way to Predict the Future is To Create It**

- As EMS becomes more integrated into the broader healthcare delivery model, the need for collaboration and stakeholder engagement is going to be vital – Now is the time to have a seat at the table!

- **Mobile Medicine Predictions**

- Dr. James Augustine – “EMS will perform more home evaluation and treatment services,” “unscheduled care evolves from unscheduled needs.” Over the past 25 years an increasing amount of people live in a home setting with a variety of medical equipment. Coordination and collaboration is vital.
- Gordon Sachs – “mobile medicine” Alternative destinations including the home setting and clinics

- **The Next 20 to 30 Years**

- From entry level EMS to Doctors to Administrators to the Surgeon General

2020 Emergency Treatment and Triage (ET3)

- The ET3 Model aims to reduce expenditures and preserve or enhance quality of care by:
 - **Providing person-centered care** - beneficiaries receive the appropriate level of care delivered safely at the right time and place while having greater control of their healthcare through the availability of more options.
 - **Encouraging appropriate utilization of services** - to meet health care needs effectively.
 - **Increasing efficiency in the EMS system** - to more readily respond to and focus on high-acuity cases, such as heart attacks and strokes.

H.E.R.O. (H e a l t h E d u c a t i o n R e s o u r c e s O u t r e a c h)

- **Regional Consortium**
 - Northwest Ohio EMS Community Paramedic Think Tank.
- **Chief Collaboration**
 - Chief Michael Ramm and Chief Barry Cousino.
- **The Correct Personnel**
 - BSW and BSN
 - Healthcare language
 - Nationally Registered Paramedics
 - Future Community Paramedics
 - Motivation for change
 - “If everyone is thinking alike, then somebody isn't thinking.”— George S. Patton.
- **Regional Programs Collaboration** – Upper Arlington FD, Monroe FD, Violet TWP FD, Colerain TWP FD, Crawfordsville FD, San Antonio FD.

Sylvania and Springfield Township

DEMOGRAPHICS -

- Roughly 100,000 Residents Combined.
- Suburban Setting.
- Noted a Large Elderly Population.
 - Aging in place.
- Auto/Mutual Aid Agreements.

Integration With The Community

- **Community** – What are the current unmet needs?
- **Complementary** – Enhance not duplicate
- **Collaborative** – Interdisciplinary
- **Competence** – Qualified Practitioners
- **Compassion** – Respect for individuals
- **Credentialed** – Legally authorized to function

Points to Ponder

- **1. Culture shift**
- **2. Healthcare integration**
- **3. Identification of high utilizers**
- **4. Right-size your responses**
- **5. Establish partnerships**

Points to Ponder

- **6. Provide gap coverage to hospice patients**
- **7. Partner with home health**
- **8. Decrease hospital readmissions – (Later)**
- **9. Address the behavioral health issue**
- **10. Be patient advocates**

The 1st Year - 2020

- **Needs Assessment**
 - Data suggested frequent users of 911 include:
 - Progressing Chronic Disease
 - Mobility Issues / Frequent Falls / ADL difficulties
 - Chronic Mental Health
 - Basic Human Needs (Food, Shelter, Transportation)
 - Isolation Created by the Pandemic

The 1st Year - 2020

- 48 Patients
- 21 Not Evaluated
 - Factors
 - Not timely
 - Death
 - Long term placement
 - Unable to connect
 - Declined services
- 1 day per week
 - Roughly about 8-10 hours in a non emergent apparatus known as MIH1
 - Shut down for 8 weeks due to COVID. Restarted after safety practices put into place

The 1st Year - 2020

- Significant reduction in calls post HERO/MIH involvement (data)
 - What did the work yield?
 - For the 48 patients seen:
 - Pre HERO MIH 440 911 calls. Post HERO MIH 77 911 calls.
82.5% reduction in the use of 911.
- 1st response crews attitude/morale towards the program.
- Goodwill for the fire divisions collectively.
- Not a money making program, but a 911 call saving program.

Cost Of 911 Call

FIRST RESPONSE ENGINE:

Response Assumes a 1/2 hour call and:

4 Person Engine Crew:

Probationary Firefighter:

6 Yr. Firefighter

11 Yr. FF Medic

20 Yr. Lieutenant

Wages and benefits/Hr.

\$29.25/2= \$14.63

\$39.50/2= \$19.75

\$42.41/2= \$21.21

\$48.82/2= \$24.41

\$79.95

Vehicle Cost

\$72.25/2=\$36.13

(FEMA reimburses Engines at \$72.25/hr. assumes vehicle depreciation, maintenance, fuel)

Total \$116.08

Cost Of 911 Call

TRANSPORT:

Response Assumes a 1/2 hour call and:

2 Person Transport Crew:

2 Yr. Firefighter

5 Yr. Firefighter

Wages and benefits/Hr.

\$35.09/2= \$17.55

\$39.49/2= \$19.75

Vehicle Cost

\$40.50/2= \$20.25

(FEMA reimburses Transports at \$40.50/hr. assumes
vehicle depreciation, maintenance, fuel)

TOTAL \$57.55

Engine response with Transport

TOTAL \$173.63

Cost Savings

- \$173.63
- 363 potential calls averted
 - $\$173.63 \times 363 = \$63,027.69$
- These numbers do not include the benefit package from most career firefighter departments, but rather, hourly rates and reimbursement scales from FEMA. The numbers were tabulated in 2019. Each fire division will have varying scales.

The 1st Year - 2020

Relationships built with public and private agencies:

- Lucas County Job and Family Services
- Area Office on Aging
- Adult Protective Services
- Sylvania Area Family Services
- Blue Cross / Blue Shield / United Health Care
- Promedica Health System
- Mercy Health System
- McLaren St. Luke's Health System
- Lowe's
- Fickwood Plumbing
- Dr Boggus, Dr Peyton
- Toledo Clinic Health System
- Police Departments
- Zepf, Harbor, Unison Mental health services
- Senior Center Volunteers
- Ability Center
 - And the list goes on and on

Interventions

- **Family of 5 affected by COVID**
 - Major Danger Averted
 - Food
 - Clothing



Interventions

- **76 year old male**
 - Stroke
 - Mobility
- **88 year old female (Mother)**
 - Broken arm
 - TBI
- **Fall risk mitigation**
 - Grab bars
 - Platform for zero entry into house



Interventions

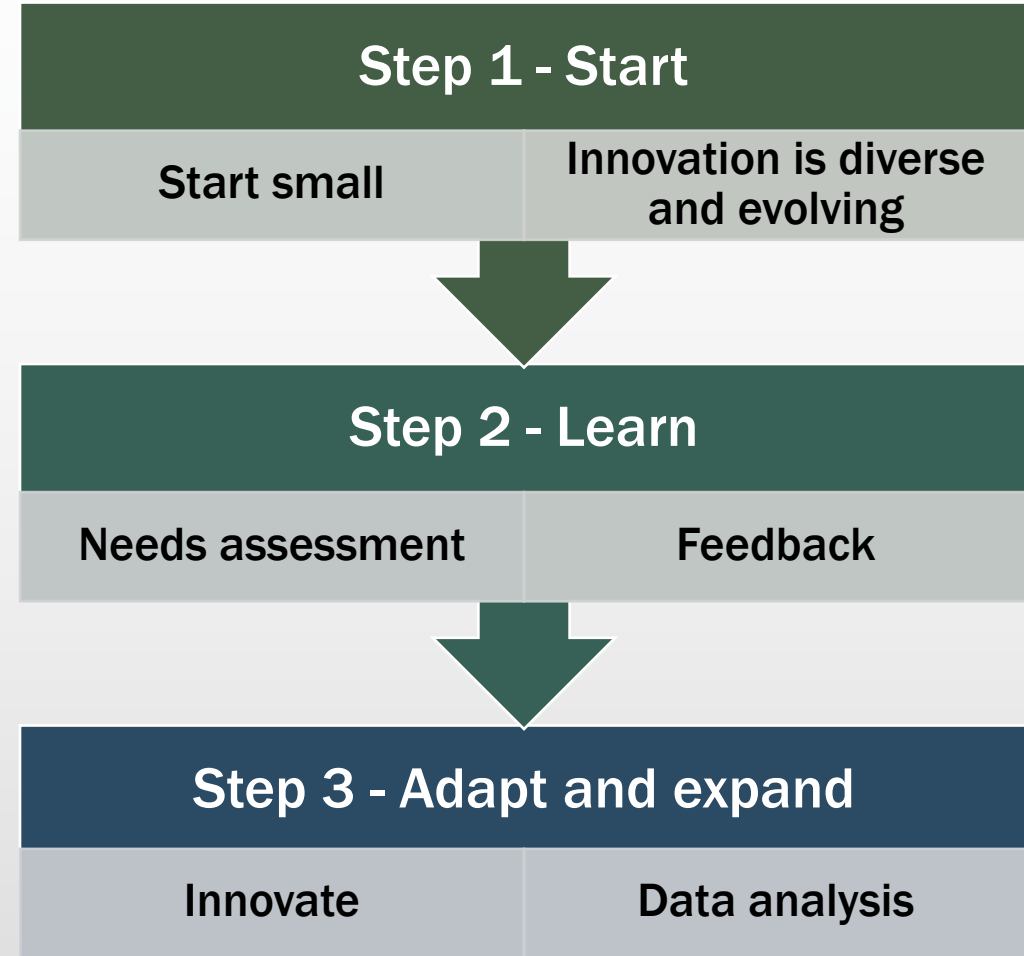
- 78 year old Female with Mental Illness and Heart Problems
- Overutilization of 9-1-1, Fire and Police, 49 EMS calls and over 100 Police calls
- Geriatric Psychiatric Hospitalization
- Poly-Pharmacy
- Assistance to the Family for POA Issues
- Transition to Long Term Care

Interventions

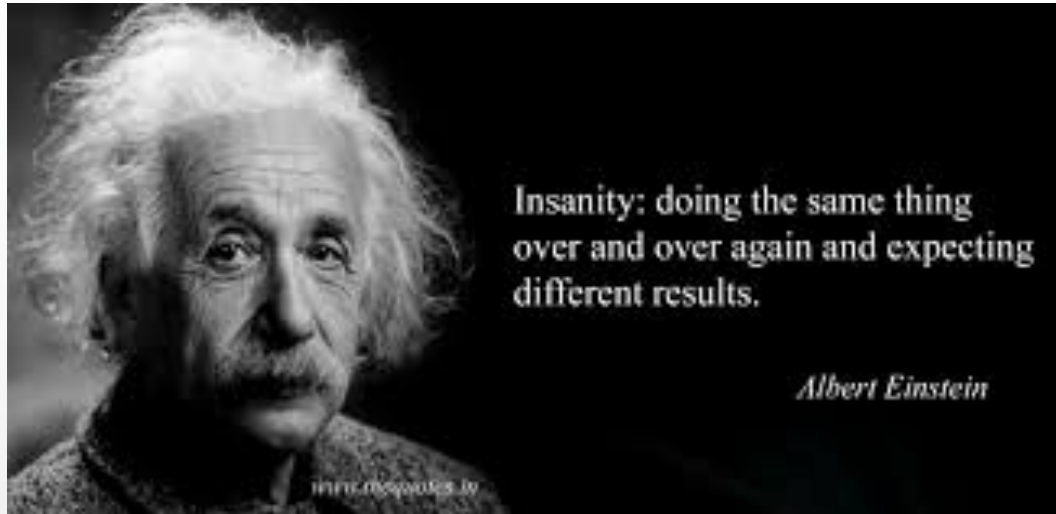
- **65 year old female**
 - frequent falls
 - Hoarding issues
 - Nonjudgmental assistance
 - Safety issues addressed- clear egress, smoke detectors, lighting
 - Falls did reveal an undiagnosed medical condition

Lessons Learned

- Just get started!
- Starting small is OK!
- Note the Success and Learn from the Failures
 - (MBA terminology - opportunities to improve)
- People are in Crisis
 - 911 is the EASY Button
 - COVID
- Adapt to your Community Needs
 - You might be surprised at the results
- Chiefs – Please Speak to Your Local and State Representatives



2021 – Where are we going?



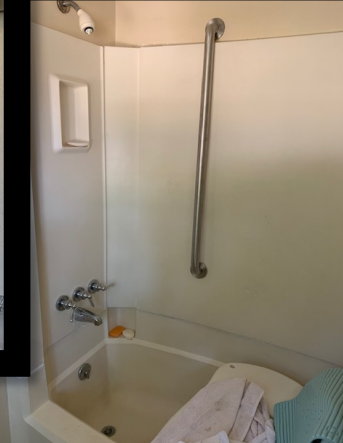
The Change Maker Group

Lead change

Be resilient

Be a change maker

A graphic illustration on a purple background. It features a group of six diverse people (three men and three women) standing in a row, looking upwards with expressions of curiosity and hope. Above them are six glowing yellow lightbulbs of varying sizes. A small orange triangle with the text "The Change Maker Group" is positioned above one of the lightbulbs. To the right of the group, the text "Lead change", "Be resilient", and "Be a change maker" is written in a yellow, sans-serif font, stacked vertically.



Where are we going?

Real Time Response

Questions

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