Flex Program Fiscal Year 2019 EMS Supplement

Sustainable Models Projects: Arizona, Ohio, South Carolina, Washington

Supplement supported by the Health Resources and Services Administration (HRSA), Federal Office of Rural Health Policy (FORHP)



Rural EMS Advanced Telemedicine Demonstration Initiative (AzREADI)



Description

To demonstrate a sustainable model of rural EMS care by providing EMS medical direction at the time of patient care to assist Basic Life Support (BLS) providers in the evaluation and triage of patients in rural communities.

Goals

Provide timely, high quality, cost efficient EMS care for two rural EMS agencies by:

- Enhancing access, referral to non-emergency health providers, such as urgent and primary care
- 2. Reducing cost and unnecessary transports
- 3. Measuring patient and provider satisfaction with telemedicine services

Partners

- Arizona Emergency Medicine Research Center
 — provides medical oversight
- General Devices provides communication platform, technical expertise and IT assistance
- FirstNet provides communication platform, technical expertise and IT assistance
- Arizona Telemedicine Program provides telemedicine technology and technical assistance
- Rio Rico Medical & Fire District provides 9-1-1 response to Rio Rico, AZ
- Sonoita-Elgin Fire District provides 9-1-1 response and transport service to Sonoita-Elgin and Patagonia, AZ
- AZ Department of Health Services ADHS's Treat and Refer Program provides cost recovery for services from Medicaid



Progress to Date

- Successful selection & testing of telemedicine communication platform:
 General Devices (GD) (e-Bridge) application
- Successful selection & testing of cellular/WiFi and hardware service provider: FirstNet/AT&T
- Successful selection of rural fire departments in focus: Rio Rico Medical & Fire District and Sonoita-Elgin Fire District
- Successful jump start to test equipment and software as a result of COVID-19 crisis response beginning March 2020: The University of Arizona and Banner Hospital partnered with General Devices (GD) to launch a telemedicine communication platform for COVID19 screening.
- COVID-19 project resulted in expedited selection of service providers, training of AzREADI resources, and provided real-time field testing of processes, software, and hardware to be used in the implementation of AzREADI.
- AzREADI project on track, in accordance with original projected timeline.



Questions/Comments

Please contact Aileen Hardcastle with any questions or comments:

Aileen J. Hardcastle

EMS Research Specialist | AEMRC
The University of Arizona
Department of Emergency Medicine

Phone: (832) 724-6555 | aileenhardcastle@aemrc.arizona.edu



Community Paramedicine Rural Pilot Program

Daniel Prokop

Daniel.Prokop@odh.ohio.gov Flex/SHIP Coordinator

Goals of CP Program

To create a self-sustaining rural community paramedicine (CP) model that other EMS and/or hospitals can replicate.

Partners

- EMS agencies
- Hospitals
- Paramedic Foundation
- Department of Public Safety



CP Selection Criteria

Three sites will be selected based on the following criteria:

- Serve a rural Ohio area
 - Preference for entire county
- Be a partnership between hospital and EMS agency
 - Preference for Critical Access Hospitals
- Focus on 30-day readmissions, ambulance runs and ED avoidances



CP Deliverables

The three sites will be required to submit the following deliverables (the model breakdowns and the final reports will be made available to other organizations interested in setting up CP programs):

- Work Plan
- List of Metrics
- Staffing Plan
- CP Model Breakdown
- Quarterly Reports
- Final Report



Project Description

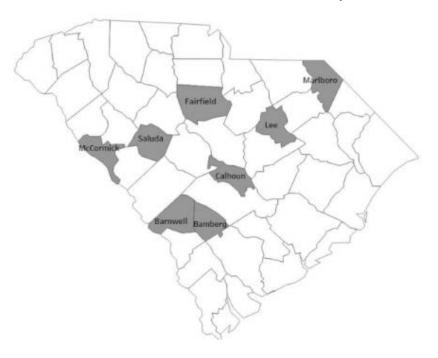
Focus

- Community Paramedics
- Alternative Destination
- Telehealth/Treat-no-transport

Process

- Select 3-6 agencies for inclusion
- Collect baseline data
- Develop & implement pilot programs
- Evaluate & finalize programs
- Increase access and determine sustainability of models

8 Rural Counties without a Hospital



Project Goals

- Community Paramedic Program Reimbursement
 - Medicaid reimbursement for Community Paramedic services
- Alternative Destination / Telehealth Approval
 - Pilot programs developed & approved for new models of care
 - Programs evaluated made available to all SC EMS agencies
- Chronic Disease Outcomes
 - Improved outcomes as shown through collected data
 - Enhanced access to the right level of care at the right time

Project Partners

EMS System

- SC Department of Health and
 Environmental Control (SC DHEC) –
 Bureau of EMS & Trauma
- SC EMS Association
- SC CP Advisory Committee
- SC PIER Team
- SC Regional EMS Offices
- SC EMS Educators Association
- SC Technical College System
- Rural EMS Agencies

Outside Partners

- SC Hospital Association
- Medical University of South Carolina
- SC Area Health Education Consortium
- SC Department of Health & Human
 Services (SC DHHS)
- SC RHCs & FQHCs

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Sarah Craig, MHA, CRCA
Director of
Health System Innovation
craig@scorh.net

Social:

(f) @SCORH

@scruralhealth

@scruralhealth

Website:

scorh.net

Address:

107 Saluda Pointe Drive Lexington, SC 29072

Phone:

803-454-3850





PRESENTER



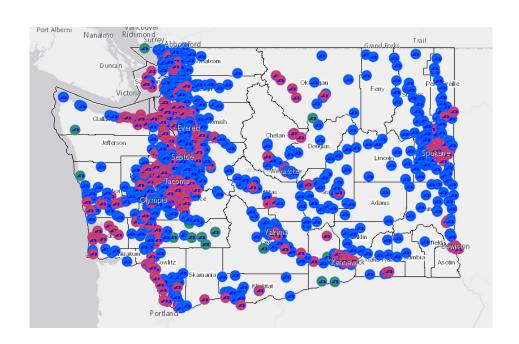
John Nokes
Rural EMS Project Coordinator

Office of Community Health Service, Emergency Medical Services Health Systems Quality Assurance

Washington State Department of Health

WASHINGTON STATE

481 EMS SERVICES 69.4 % Located rural areas



PROJECT DESCRIPTION

- Attributes of a Successful Rural Ambulance Service Assessment Tool, 2019
- Low scoring items = priority strategies

Recruitment and Retention

EMS leadership challenges and succession planning

Weak public information communication strategies

Low involvement with Community

PROJECT GOALS

- Strengthen workforce and increase skills
- Activate the will of community to fund EMS

Strengthen Workforce

- Learning action network
- Action plans
- Initial EMR/EMT training
- Cross training CHW / MA

Community Involvement

- Assess / refine and develop community guidance teams
- Action plans

PROJECT PARTNERS

- Washington State Department of Health
 - Office of Rural Health
 - Office of EMS
 - Office of Community Prevention and Health
 - Office of Health Professions
- Rural medical facilities and community health related organizations

