Community Paramedic

Overall Status: Good

Community Paramedic Pilot Program: June 2021 Update

Submitted: 07/01/2021

Status Code Legend

- On Track: Project is on schedule
- At Risk: Milestones missed but date intact
- High Risk: At risk, with a high risk of going off track
- Off Track: Date will be missed if action not taken

The project is Good 06/01/2021 - 06/30/2021,	 My general impression of the WWFD / PSMMC Population Health Community Paramedic Pilot Program remains GOOD!
due to the following:	 Both PSMMC Population Health and WWFD administration have been receptive to problems and reasonable solution.
	 There have been several very productive in person meetings since the COVID restrictions have started to lift. This is providing much needed networking time with local and state level organizations that work and offer valuable resources to targeted individuals.
Issues:	MDT is a valuable tool however there have been frequent frustrations switching between the Fire Mobile dispatch software and ESO. Multiple crashes occur throughout the day and much time in the field is used in troubleshooting and restarting the MDT and needed software. The easiest and cheapest solution is acquiring an iPad to use for the Pt. care reporting aspect. This will also allow for future use to facilitate telehealth appointments. This matter was brought to DC Wood's attention an was remedied with the purchase of an iPad.
	No cardiac monitor available for Community Paramedic to utilize. I understand this is a large capita purchase that was not budgeted for. The presence of a cardiac monitor would make this position much more dynamic in the event of multiple emergency calls and patient evaluations. Quotes have been obtained from both Zoll (\$37,000) and Lifepak 15 (\$28,000). This is a limiting factor to the type calls and evaluations that can be completed by the Community Paramedic. Having a full compliment of ALS equipment would make this position much more dynamic in the types of calls and Mobile Integrated Health visits that can be completed.
	Paperwork to allow access to EPIC/EDIE has been complicated and time consuming. Once completed, this should prove to be an easy way to access critical information to better assist target.

Milestones accomplished 06/01/2021 – 06/30/2021

• 54 Community Paramedic (MIH) visits completed for a total of approximately 1641 minutes on scene.

individuals and increase accuracy of treating to care plan. Should be completed in the next couple

27 Emergency Department diversions completed.

of weeks.

- Each ED diversion is estimated to save PSMMC \$2,400 at a bare minimum.
- June: 27 ED diversions = \$64,800 savings to SMMC in June.

WWFD referrals forms continue to work as intended.

May: 8 ED diversions \$19,200 savings to SMMC in May

Savings in first two months of Community Paramedic Program \$84,000 in total to SMMC from ED diversions. (Original Grant amount \$110,000) Presented with DC Wood and Becky Betts from SMMC Population Health to the Greater Columbia Accountable Community of Health (GCACH) on June 17, 2021, via Zoom. They facilitated a meeting regarding community paramedicine programs and possible funding solutions. Enrolled in WA State DOH Community Health Worker online training course, this is a 10-week course. Starts July 6th, 2021. \$5,000 Grant application submitted to GESA for money to assist in acquiring a cardiac monitor. Agenda for this coming Attend WWPD rollcalls and explain program, develop better understanding of their needs. week: Update all three shifts, teach depression awareness class (Requested by Capt. Hector) Assist YWCA in obtaining Narcan for their facility and teach class to YWCA staff pertinent to Narcan. 20 Community Paramedic (MIH) Visits Milestones planned for next week: Visit Uplay Youth Day Camps at Pioneer, Jefferson, and Washington Parks Get caught up on safety training and OTEP Areas/questions for General impression of program from stakeholder, are we meeting their expectation? discussion: If not, what do we need to do? General impression of WWFD administration staff, am I meeting their expectation? If not, what do I need to do? Questions or concern from shift personal? More discussion with Population Health regarding the possible use of injectable antipsychotic medications by community paramedic for patients who are non-compliant with oral medications. Stories of success: On Monday, June 7, 2021, I feel that a foreseeable and semi-frequent benefit of the Community Paramedic Program (CPP) occurred for the first time in the short duration of the CPP. The presence of the Community Paramedic on duty on this date allowed for the WWFD to better meet the needs of the citizens of Walla Walla during a time of high call volume. At 0842 Medic 3921 was dispatched to a call on 127 Kenwood St. Medic 3922 was then dispatched at 0907 to 1416 Pearl St. The Community Paramedic recognized this address and responded to the 911 activation of this frequent utilizer of EMS which the Community Paramedic and PSMMC Population Health have been working with to meet the unique challenges presented by this specific individual. Not only was this specific individual better served and an emergency department visit diverted, Medic 3922 was able to stay in service and available for a more legitimate call of medical necessity. Lastly, during the week of June 28, CM-391 was allowed to flex hours from the normal schedule of 7am to 4pm Monday through Friday to 9am to 7pm Monday through Thursday. This enabled CM-391 to be present during the heat of the day during the unprecedented heat wave. This ensured the presence of another paramedic on duty that could be utilized during a time of high call volume due to the heat. CM-391 spent much of this time patrolling city streets looking for individuals struggling in the heat. CM-391 handed out 5 cases of water and sport drinks to those in need on the streets. Several people were given ice packs. The water and sport drinks were purchased with funds from IAFF Local 404 Benevolent

Association.

Cody Maine

Community Paramedic

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Project Abstract

The Community Paramedic program is a one-year pilot program between Providence St. Mary Medical Center Population Health and the City of Walla Walla Fire Department. Funding was provided by Providence to address frequent and unneeded Emergency Department visits. This program is being viewed as a better way to use available resources in both the prehospital (EMS) and Emergency Department and providing a suitable level of care for non-life-threatening conditions. The goal of WWFD's Community Paramedic program is to find unique solutions for unique problems.

WWFD Community Paramedic Program Mission Statement

"To provide unique care and solutions for patients with unique needs."



"We do this for others."