COMMUNITY HEALTH EMS (CHEMS)

A PERSPECTIVE FOR PARTNERS & THE COMMUNITY

May 23rd, 2016
WHAT IS COMMUNITY HEALTH EMS (CHEMS)?

An evolving, innovative healthcare delivery model where emergency medical services (EMS) personnel extend the reach of primary care and preventative services outside of the traditional clinical settings and often into the patient’s home environment.
Community Health EMS (CHEMS) Concept

- Meeting Healthcare Gaps/Needs With Untapped EMS Providers and Infrastructure

- Closing Healthcare Gaps/Needs & Expanding Access By Expanding The Role Of EMS Professionals

- National Concept – Locally Tailored

- Leveraging Resources/Partnerships

- Comes With Additional Education
What Are Emergency Medical Services (EMS)?

- Education Of EMS Professionals
- State EMS Bureau / Physician Commission
- Medical Scope Of Practice
- Medical Direction
- Quality Assurance/Quality Improvement (QA/QI)
EMS Agencies

- Extend The Reach Of Providers
- System Designed To Deliver Care At The Point Of Need – Patient Environment
- Integrated With System Resources
- Interdisciplinary Team Approach
- Clinical Plan – Barriers To Care Plan Implementation
- Access Point Into The Healthcare System
- Perception Vs. Reality
Perception vs. Reality

**Perception** – Car Accidents And Heart Attacks

**Reality** – Mix of Emergent And Non-Emergent Patients

- Social Determinants of Health
- Mental Health
- Primary Care

Insert Agency Name Here

- FY2015 – ######## Total Calls

- Number - Lights and Sirens Return from Scene to the Emergency Department, ########
EMS Professionals

- EMS Professionals - communicate with every other individual involved in health care.

- EMS Professionals - perform many aspects of healthcare and care coordination which require multiple healthcare providers.

- EMS Professionals - work independently in nonclinical settings.
By utilizing CHEMS, the reach of primary care can be extended

- Healthcare navigators for patients
- Providing transitional care for patients after hospital discharge
- Medication inventories
- Resource and care coordination
- Basic medical therapeutics

Collection of data is essential to the funding and sustainability of CHEMS, and should prove:

- Value
- Better patient outcomes
- Economic impact
CHEMS AGENCIES

- Established CHEMS programs have found an overlap in patients who call 911 and those who benefit from CHEMS

- Additional education is available to CHEMS providers in efforts to enhance and streamline the healthcare delivery model

- A community health needs assessment can assist in the identification of specific issues and challenges within the community

- CHEMS services are not considered home health and do not replace home health services
CHEMS PROVIDERS

- Are a component of the patient-centered medical home (PCMH) model and the medical-health neighborhood which supports comprehensive, team-based, coordinated, accessible, safe and focused primary care.

- Assist in implementing a patient care plan in a proactive vs. reactive manner.

- Identify barriers to implementation with the goal to empower patients to independently manage their medical conditions.

- Promote and utilize an interdisciplinary approach to increasing access to healthcare.
**Statewide Healthcare Innovation Plan (SHIP)**

**Community Health EMS (CHEMS)**

Community Health Emergency Medical Services (CHEMS) is an innovative model where emergency medical services (EMS) personnel are incorporated into the general healthcare delivery system and extend the reach of primary care into a patient’s environment. CHEMS personnel are healthcare providers who receive additional education, work within a medical-health neighborhood, and assist the primary care team to implement a patient care plan. CHEMS personnel operate within their current scope of practice; however, act in an expanded role within the medical-health neighborhood. Examples of the roles of CHEMS personnel may include:

- Acting as healthcare navigators for patients
- Transitional care for patients after they are discharged from a hospital stay
- Vaccinations
- Medication inventories
- Resource coordination
- Basic medical therapeutics

Additional CHEMS information can be found at the Idaho Bureau of EMS and Preparedness.

**SHIP Overview:**
The Statewide Healthcare Innovation Plan includes the development and implementation of CHEMS programs in rural and underserved areas as part of the “virtual” Patient-Centered Medical Home. These programs help expand primary care reach and capacity, become assets in the medical-health neighborhood, and improve access to healthcare services.

**Getting Involved:**
For additional information about the SHIP-CHEMS initiative, please email the Idaho Department of Health and Welfare at icw@health.idaho.gov.

**Current Workgroup Activities:**
1. Establishing a CHEMS Measures Design Workgroup to identify metrics, data collection mechanisms, and data reporting strategy to test CHEMS against the Triple Aim.
2. Developing a CHEMS Agency Readiness Assessment.
3. Mentoring EMS agencies as they graduate personnel from additional education and begin to develop CHEMS programs in their areas.
ADDITIONAL EDUCATION
COMMUNITY PARAMEDIC PROGRAM
IDAHO STATE UNIVERSITY

• Year Long Certificate Program
  – January 12, 2016

• Synchronous Online Class Structure

• Lectures
  – Instructors
  – Subject Matter Experts

• Overview Didactic and Clinical Sections
  – Didactic - 96 Hours
  – Clinical - 150 Hours
MEASURES DESIGN WORKGROUP

Goal: Identify metrics, data collection mechanisms, and data reporting strategies to test CHEMS.

Points of Alignment: Triple Aim, SHIP Priorities, PCMH/medical-health neighborhood concept

Strategy:

• Planning, facilitation, member recruitment, great participation

• 32 members, diverse expertise and statewide representation

• Subject matter expert: Matt Zavadsky, MedStar Mobile Healthcare, National Measures Design Team

• 3 full-day facilitated meetings between January-March 2016
CHEMS MEASURE RECOMMENDATIONS

Quality and Experience Measure: Patient health-related quality of life

Utilization Measure: Reduction in emergency department use

Cost Measure: Expenditure savings related to a reduction in emergency department use

Quality Measure: Patient connection to primary care provider

Quality and Safety Measure: Medication inventory to identify and reduce medication discrepancies
Related to the delivery of healthcare in your community, if you could fix one thing, what would it be?

What do you see as your greatest needs or challenges in reaching the healthcare outcomes you are looking to achieve?

Do you believe this concept/provider could be used within your organization’s healthcare delivery model – if so, do have some initial thoughts on how?

Do you have any initial reservations to this concept? If so, what are they?

What pieces of information/items of interest do you feel might be missing from this concept right now?

Would you be interested in partnering with us to further develop this program?
References,

Thank You & Attribution

- National Association of Emergency Medical Technicians (NAEMT)
  - naemt.org

- MedStar Mobile Health
  - Medstar911.org

- The Paramedic Foundation
  - Paramedicfoundation.org
  - Communityparamedic.org
Questions?