

Queen Anne's County

MOBILE INTEGRATED COMMUNITY HEALTH PILOT PROGRAM (MICH PP)

Program Overview



Queen Anne's County
Department of Health &



Queen Anne's County
Department of Emergency Services

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MOBILE INTEGRATED COMMUNITY HEALTH PILOT PROGRAM (MICH)



MISSION STATEMENT

To improve health outcomes among citizens of the county through multi-agency, integrated, and intervention-based healthcare.



VISION STATEMENT

To provide mechanisms for citizens to have better access to healthcare and to enhance individual health outcomes.

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QUEEN ANNE'S COUNTY

Population in 2010	47,918
Population in 2013	48,517

2013 STATISTICS FOR QUEEN ANNE'S COUNTY

- Households with one or more people 65 years and over 5,267
- Householders living alone who are age 65 years and over 1,710
- Number of individuals 65 years and older living with a disability 2,187

Source: <http://quickfacts.census.gov/qfd/states/24/24035.html>

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Queen Anne's County is a "Medical Desert"

- One of only two counties in the State of Maryland without a hospital
- One free-standing emergency department – Queen Anne's Emergency Center (University of Maryland Medical Services) located in Queenstown



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Initial Goals & Performance Measures

- To reduce the number of 911 calls by program participants by **25%** during the fiscal year.
- To ensure **75%** of program participants have a primary care provider.
- To ensure **90%** of program participants will receive at least one referral to a community resource as the result of a MICH PP home visit.



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Inclusion

- Adults 18 years and older
- **FIVE** 911 calls in any 6 month interval
- Resident of Queen Anne's County

Exclusion

- Already established as an individual with a home health care or visiting nurse agency *or*
- Refusal to participate in the program



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MICH Program Phases for Referrals for First Six Months

- First Phase – Frequent 911 Callers
- Second Phase – EMS Referrals
- Third Phase – Emergency Department Referrals from Free-Standing Emergency Center in Queenstown



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MICH Team

- Combination Field Team: Department of Health Nurse/ Nurse Practitioner, Queen Anne's County Paramedic and Behavior Health Professional
- Management falls under Health Officer/EMS Medical Director – Joseph A. Ciotola, Jr., M.D.
- Oversight/quality management team is interdisciplinary



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Delivery Systems' Problems Targeted by Community Paramedicine Programs

- Overuse of 911 system
- Repeat Emergency Department visits and hospital readmissions
- Lack of primary care



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MICH PP Home Visiting Team

QAC DES Paramedic

- Program introductions and overview of program to the client
- Physical examination
- Assessment of physical health
- Health and home safety assessment
- Discuss home safety issues with client and need to modify identified hazards

QAC DOH NP/RN

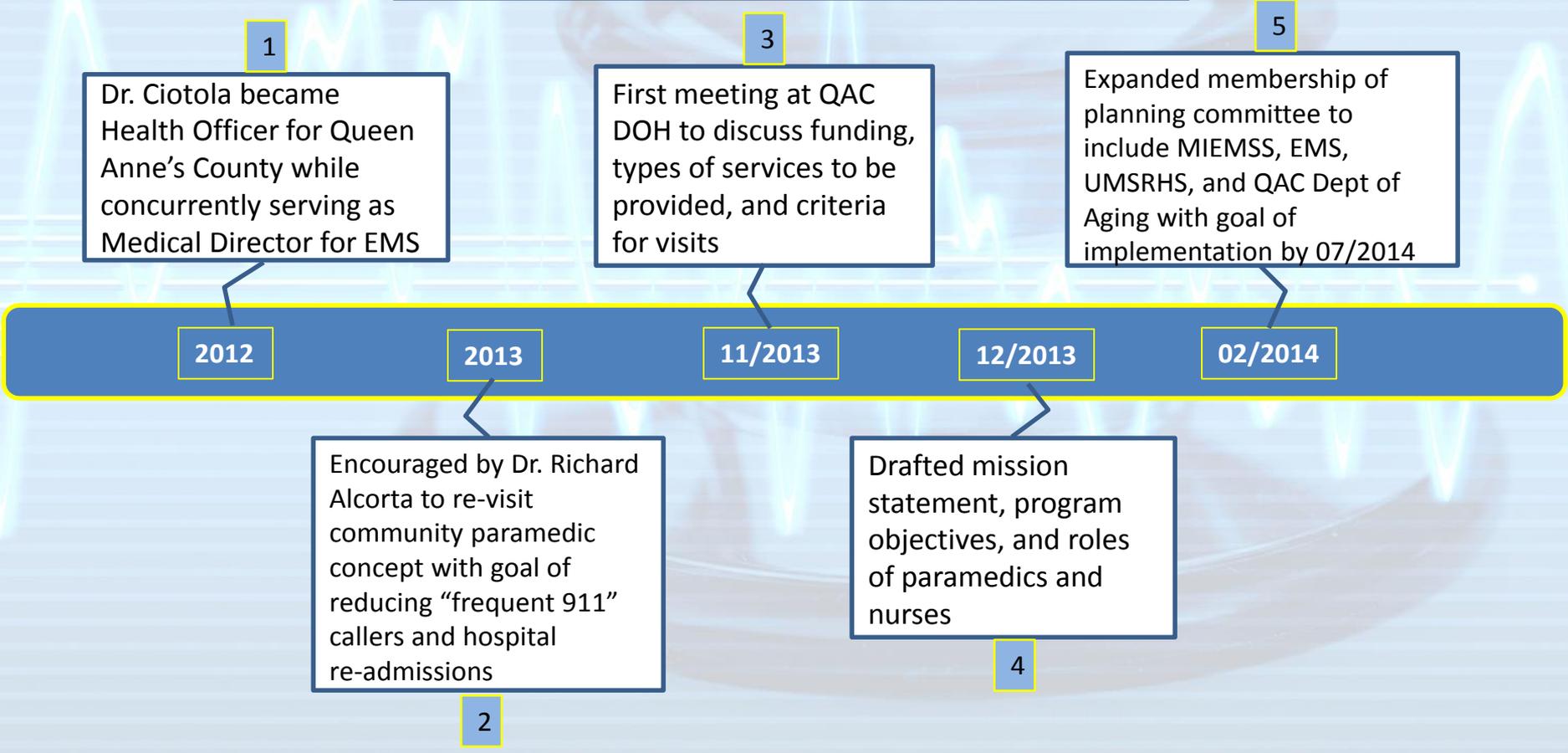
- Provide introductions and overview of program to the client
- Assessment of health history, medication inventory, review of systems, and current status
- Patient education assessment
- Assessment of Support System
- Referrals to appropriate health and community services

If emergent situation is determined, 911 call is initiated.
Paramedic will evaluate and stabilize the participant
until responding unit arrives.

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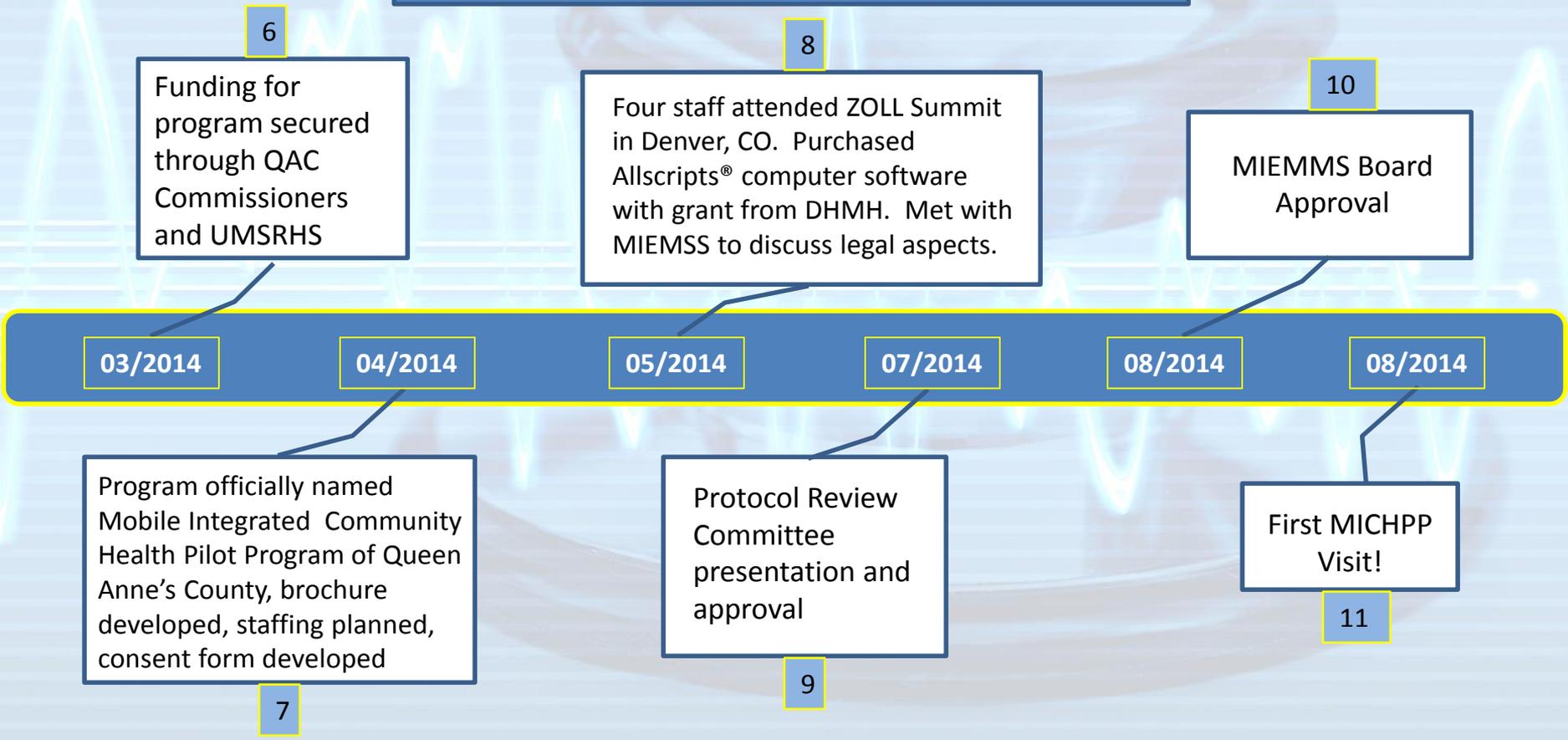
Planning Timeline



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Planning Timeline



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MICH Data

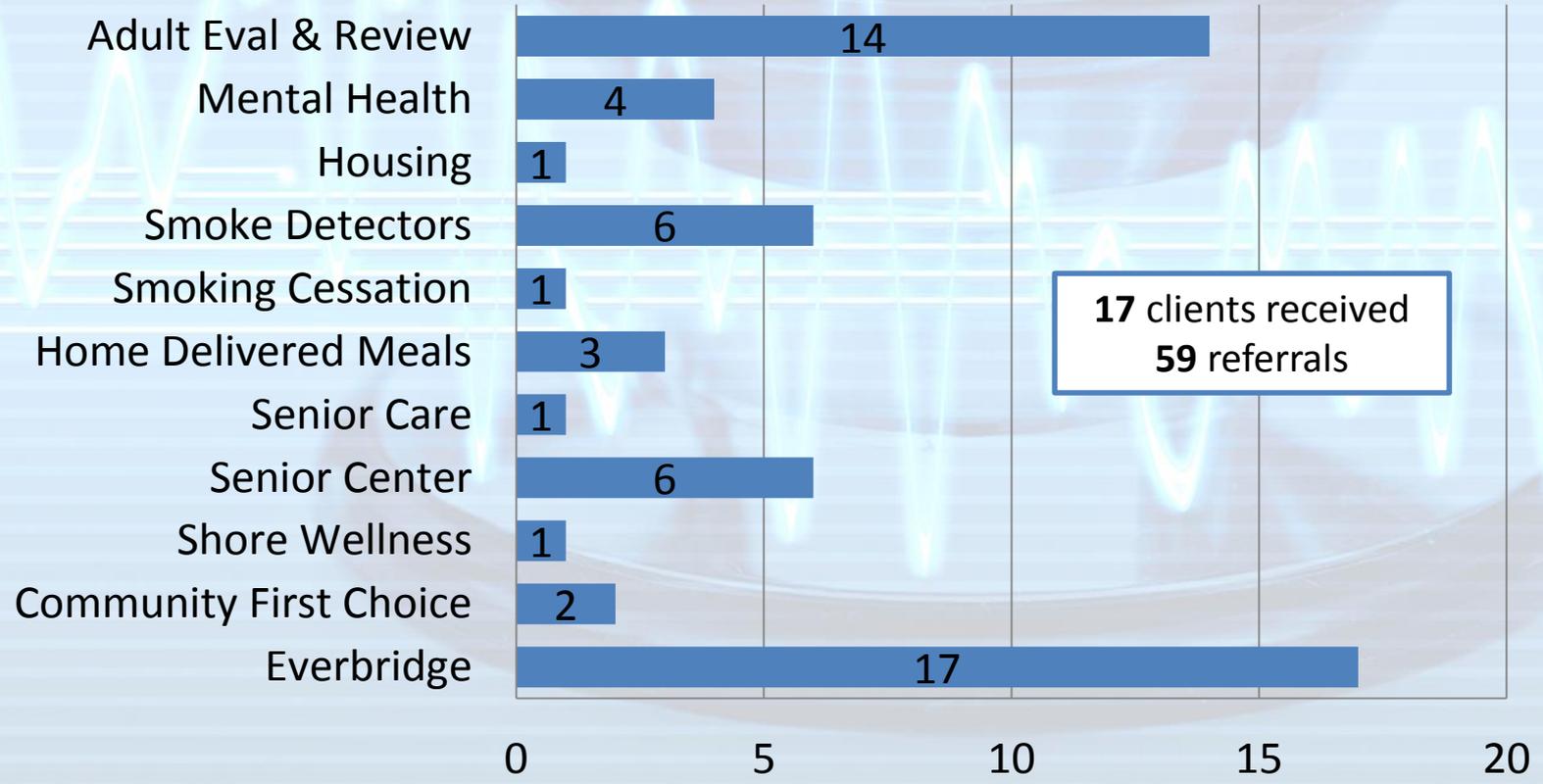
- Preliminary MICH data collected since the initiation of the program
- **Prior** to their first MICH visit, the initial **17** patients accounted for **122** calls to 911
 - **75** of those 911 calls resulted in transport
- **After** their first MICH visit, the initial **17** patients accounted for **33** calls to 911.
 - **21** of those calls resulted in transport

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MICH Data

Referrals



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Next Steps

- **Economic Healthcare Analysis of the Program**

- ✓ **Cost savings analysis**
- ✓ **Overall cost of the MICH program**
 - Staff time/cost tracking
 - Mileage cost tracking
 - Supply cost tracking

- **Broaden Referral Sources**

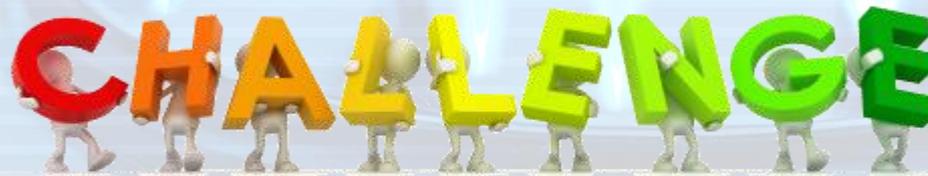


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Initial Challenges

- EMS Agency Considerations
- State EMS Agency Buy-In
- State Board of Nursing Buy-In
- Challenges with Multi-Agency Collaboration
- Funding



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EMS Agency Considerations

- Community Paramedicine is not for everyone
- Make sure that the providers you choose for your program are enthusiastic about the concept of community paramedicine



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State EMS Agency Buy-In

- Recruit state EMS agency members to assist in the development of your program
 - ✓ Our program invited our regional representatives from our state EMS agency to attend developmental meetings
- Have all your “ducks” in a row!
- Emphasize the intended scope of practice and roles of the community paramedicine paramedic



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Board of Nursing Buy-In

- Engage the nurses from the very beginning.
 - Meet with them face-to-face and obtain their input and expertise every step along the way.
 - Involve them at both a local and state level.
- Ask the nurses and the Board of Nursing what is it they fear about the development of a community paramedicine program
 - Community paramedicine being a substitute for home-centered nursing care programs?
 - EMS overreaching into the realm of nursing?

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Multi-Agency Collaboration

- Determine who your stakeholders will be and involve them in the developmental process.
 - ✓ Prevents information from being hearsay/rumor
 - ✓ Allows them to see what the program is about
- Establish a Memorandum of Understanding (MOU) with all involved collaborators and stakeholders.
- HIPAA
 - ✓ Sensitive information may be shared at any point during your development process

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PARTNERSHIPS

- Queen Anne's County Department of Emergency Services
- Queen Anne's County Department of Health
- Maryland Institute for Emergency Medical Services Systems (MIEMSS)
- University of Maryland Shore Regional Health
- Queen Anne's County Commissioners
- Queen Anne's County Addictions & Prevention Services
- Queen Anne's County Area Agency on Aging
- Department of Health and Mental Hygiene
- ZOLL Medical Corporation



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FUNDING

- Early in the program development stages, develop an estimated cost that will start/sustain your program through a fiscal year
- Engage stakeholders very early in the process
- Find out where your local/state governments stand on this concept
- Research shared savings strategies and risk-sharing arrangements



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Funded by Grants through:

- Shore Regional Health
- Queen Anne's County Government
- Department of Health and Mental Hygiene
- Queen Anne's County Department of Health
- Queen Anne's County Addictions & Preventions Services

Funding Currently Established Through June 30, 2016



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New Challenges and Lessons Learned

- Challenges faced with data collection
- Dealing with declinations
- Issues surrounding social isolation and mental health
- Home safety issues



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Data Collection

- Start early!
 - ✓ Determine required data elements, relevant outcomes, and data collection strategies
- Know your data collection limitations
- Customizing software for documentation and data collection
- Collect data at a central source to avoid mismatching data points
- Consider a cost savings analysis from a healthcare economist
- Remember, evaluation data on your program's performance and outcomes are necessary!

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Client Satisfaction Survey

 **Queen Anne's County**
MOBILE INTEGRATED COMMUNITY HEALTH PILOT PROGRAM
CLIENT SATISFACTION SURVEY 

Please answer the following questions by rating each of them:

1. MICH staff who contacted me regarding the program provided a thorough explanation of the service.				
<input type="checkbox"/> 1 <i>Strongly Agree</i>	<input type="checkbox"/> 2 <i>Agree</i>	<input type="checkbox"/> 3 <i>Disagree</i>	<input type="checkbox"/> 4 <i>Strongly Disagree</i>	<input type="checkbox"/> 5 <i>No Opinion</i>
2. Referrals given by the staff were appropriate and useful.				
<input type="checkbox"/> 1 <i>Strongly Agree</i>	<input type="checkbox"/> 2 <i>Agree</i>	<input type="checkbox"/> 3 <i>Disagree</i>	<input type="checkbox"/> 4 <i>Strongly Disagree</i>	<input type="checkbox"/> 5 <i>No Opinion</i>
3. I feel better prepared to manage my personal health.				
<input type="checkbox"/> 1 <i>Strongly Agree</i>	<input type="checkbox"/> 2 <i>Agree</i>	<input type="checkbox"/> 3 <i>Disagree</i>	<input type="checkbox"/> 4 <i>Strongly Disagree</i>	<input type="checkbox"/> 5 <i>No Opinion</i>
4. I feel my quality of life has improved since my enrollment in the MICH program.				
<input type="checkbox"/> 1 <i>Strongly Agree</i>	<input type="checkbox"/> 2 <i>Agree</i>	<input type="checkbox"/> 3 <i>Disagree</i>	<input type="checkbox"/> 4 <i>Strongly Disagree</i>	<input type="checkbox"/> 5 <i>No Opinion</i>
5. I would recommend this program to others.				
<input type="checkbox"/> 1 <i>Strongly Agree</i>	<input type="checkbox"/> 2 <i>Agree</i>	<input type="checkbox"/> 3 <i>Disagree</i>	<input type="checkbox"/> 4 <i>Strongly Disagree</i>	<input type="checkbox"/> 5 <i>No Opinion</i>
6. Can you offer suggestion on ways we might improve this program?				
<hr/> <hr/>				

QAC MICH Rev-2015

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Declinations

- Getting people to say “yes” to a home visit often proves challenging
 - Many patients are difficult to contact –
 - ✓ Don't answer their phones
 - ✓ Contact numbers given to provider are often disconnected
- Many patients are too proud to accept help from outside agencies
- Make sure that the program is being adequately explained to the patients before they are contacted to schedule a home visit



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Issues Surrounding Social Isolation and Mental Health

- Suggestions of attending the senior centers to participate in activities and to meet other people are often met with resistance
 - ✓ Senior centers are stigmatized
 - ✓ “Those places are for old people”
- We are finding that a large proportion of our elderly patients have undiagnosed depression
- The period of time between our home visit and the first available appointment for a mental health professional is far too long.
 - ✓ Patients are falling back through the cracks of the mental health system
 - ✓ How can we change this?

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Social Transportation

- Many MICH patients have expressed the inability to “get out of the house” to do normal, everyday things due to lack of transportation
- The lack of transportation also contributes to their feelings of loneliness
- Lack of transportation also contributes to noncompliance with medication refills and physicians’ visits



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Home Safety Issues

- Many patients are found to be living in less than ideal conditions
 - Some conditions being deplorable and unsafe
 - Do we have a responsibility to do something about this?
 - With many patients being on a limited budget, what can we do to improve these issues?



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Medically Complex Patients

- Patients who are frequent 911 users and have long lists of ailments and co-morbidities that will not be fixed after one MICH visit. These patients are complex and will take multiple visits and resources
 - ✓ *An action plan will need to be developed for those patients who frequently utilize 911 due to noncompliance*



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Summary

• Important Considerations

- ✓ Determine the health needs of your community
- ✓ Determine what the mission and vision of your program is and WHO your program will be targeting
- ✓ Involve stakeholders very early on in the development process
- ✓ Research funding
 - ✓ Local/state government
 - ✓ Grants
 - ✓ Shared savings plans

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Summary

- **Data Collection**

- ✓ Determine required data elements, relevant outcomes, and data collection strategies

- **Determine the resources you have at your disposal**

- **Set your program to adapt and overcome**

- ✓ There will be many hurdles and hiccups along the way



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*Congratulations to Joseph A. Ciotola, M.D., Health Officer
& to the Entire Mobile Integrated Community Health Pilot Program Team
of the Queen Anne's County
Department of Health and the Department of Emergency Services*

*Recipients of the
2015 Maryland Association of Counties'
President's Healthy Counties' Best Practices Award*

**Recognized by the Maryland Association of Counties as the
Recipient of the 2015 President's Healthy Counties'
Best Practices Award**



Queen Anne's County

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*Recipients of the
Maryland Institute
for Emergency Medical Services Systems*

**Outstanding
EMS Program Award**

Awarded May 19, 2015

Queen Anne's County

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Questions?

