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**Mobile Integrated Health Care and Community EMS Programs**

**Community EMS Program Application Overview**

September 21, 2018

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**Objectives**

* Review the Community EMS Program application requirements
* Understand the process for Community EMS program application submission to the Department, including the review timeline
* Learn more about each pre-approved service included in the Defined List of Community EMS Program Services

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**Benefits of Community EMS**

Paramedics and EMTs are familiar with their communities and their patients:

* Trusted in their community
* Mandated reporters
* See things in the home setting, that other health care providers may not be aware of:
	+ Loose rugs
	+ Piles of mail
	+ Nutrition issues
	+ Exercise habits
	+ Transportation issues
	+ Lack of hygiene
	+ Inability to read fine print (medication labels)
	+ Literacy issues
	+ Medication compliance
	+ Prescription Shopping
	+ Early signs of Dementia
	+ Timely input from family members

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**Community EMS Background**

* A collaborative system that utilizes a primary ambulance service’s EMS Personnel in partnership with a local public health authority to address illness or injury prevention through high value public health services.
	+ Operated under the local public health authority
	+ Developed in coordination with the designated primary ambulance service
	+ Approved by the local jurisdiction and the ambulance service's affiliate hospital medical director (AHMD)
* Community EMS services must fit in the scope of practice of the Emergency Medical Technician (EMT, AEMT or EMT-P) and should be high impact with low risk.
* Approved services are defined in a DPH list, and Programs may petition to add new services to this list

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**Community EMS Application Submission**

* The Department of Public Health will begin to accept Community EMS Program applications on Monday,
October 1, 2018
* All program and application information will be posted online at [www.mass.gov/MIH](http://www.mass.gov/MIH)

* Applicants for all programs will submit completed applications by fax
* There are no application or registration fees for Community EMS programs

* Program registration is valid for two (2) years; approved programs will be required to apply to renew their approval

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**Community EMS Program Application**

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**Page 1: Instructions and Review Process**

Image of Community EMS Application

Slide 8

**Page 2: Application Checklist**

Image of Community EMS Application

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**Page 3: Applicant Information**

Image of Community EMS Application

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**Page 4: Primary Ambulance Service Information**

Image of Community EMS Application

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**Page 5: Attestations**

Image of Community EMS Application

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**Page 6: Program Overview Narrative and Description of Services**

Image of Community EMS Application

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**Page 7: Attestations**

Image of Community EMS Application

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**Page 8: Document Submission**

Image of Community EMS Application

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**Defined List of Community EMS Program Services**

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**Defined List of Community EMS Program Services**

The **Defined List of Community EMS Program Services** provides information about each of the 24 evidence-based high value public health services that a Community EMS Program applicant may apply to operate

Services should reflect the need of the community or communities where a proposed program will operate

Community EMS applicants may submit a petition to add a new service to the pre-approved service list by submitting a written request with appropriate supporting evidence to DPH

Community EMS Program applicants should align proposals with the EOHHS/DPH priority areas: **substance use disorders; housing stability/homelessness; mental illness and mental health; and chronic disease**

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**Community EMS Program Services by Priority Area**

Chart of Defined List of Community EMS Services, by priority area

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**Community EMS Program Services**

Assistance with Environmental Lead (Pb) Testing

Assisting a community member with environmental lead testing processes (i.e., testing of lead-painted surfaces or soil) will allow for in-home risks to be understood by the community. EMS personnel can help with sample collection, mailing, and interpretation of results as well as providing resources to help with remediation. Neither EMS agencies nor EMS personnel should be responsible for the reporting of results. EMS personnel will not be responsible for the results of testing.

Assistance with Radon/Air Quality Testing

EMS personnel can assist with referral, placement, procedures and interpretation of results to community members who may have difficulty following up on initiating and completing a Radon or Air Quality test. EMS agencies and EMS personnel are not responsible for the reporting of results or for the results of testing but provide services to improve testing rates and completion.

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**Community EMS Program Services, cont’d**

Child Passenger Safety

EMS personnel can make referrals to a local Child Passenger Safety expert as well as make recommendations that improve the safety of children in vehicles. This can include car seats, the dangers of hot cars and seat belt safety education both in the community and in private residences. Referral to a local Child Passenger Safety Seat Technician must be available.

Children with Special Care Needs Evaluation

An in-home visit by EMS personnel to families with children with special care needs can encourage proactive information exchange and minimize misunderstandings should EMS be called to the home in an emergency. A discussion with family members about the types of care needed as well as the technical aspects of any assistive equipment can enable adequate EMS emergency service provision when needed. Documentation should be prepared and shared with dispatch when possible.

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**Community EMS Program Services, cont’d**

Emergency Preparedness Individual Evaluation

EMS personnel can provide individuals or families with an evaluation of their home’s emergency preparedness. Checklists and reviews of current supplies and plans can help families be prepared for emergency situations. Preparation and prevention discussion on home safety, evacuation procedures and required supplies can help families and pets stay safe.

Fire and Burn Prevention and Education

Burns are a significant cause of pain, disfigurement, and infection. EMS personnel can provide education on prevention of burns, potential treatments for burns as well as indications for when to call 911. Prevention can include smoke and carbon monoxide alarms, water heater temperature checks and code evaluation of heat sources in the home.

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**Community EMS Program Services, cont’d**

Home and Community Falls Prevention

Falls Prevention can be accomplished by in-home visits and screenings along with simple improvements: clearing pathways, evaluating toilet and kitchen access, installing grab bars, removing access obstacles, and recommending additional appropriate tools to prevent falls.

Home Safety Evaluation

Home safety impacts residents, families, and the larger community. The Massachusetts Housing website includes resources to address home safety in the community. EMS personnel may be given access to a home when local fire or law enforcement may not and can provide crucial information about safety risks for a particular home.

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**Community EMS Program Services, cont’d**

Poison Control Home Evaluation

Household chemical and medication safety education, particularly around preventing overdoses and dosing errors in the home or community, can be a highly effective preventive measure. Education and assistance with this process can reduce unnecessary emergency department visits and provide opportunities to educate families about risks associated with certain types or combinations of medications. Home evaluations should follow Poison Control guidelines.

**Additional resource:** Regional Center for Poison Control and Prevention

Water Safety

EMS personnel can provide water safety advice that will prevent unnecessary risks in a water environment. This can include education, providing information on flotation devices, drowning prevention tips and improving compliance with the use of flotation devices as well as other water safety tools.

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**Community EMS Program Services, cont’d**

Welcome Family (Home Evaluation for New Caregivers)

Welcome Family is a program of the Massachusetts Home Visiting Initiative. The program offers a universal one-time nurse home visit to all mothers with newborns. Welcome Family assesses mother and newborn health and well-being and provides education, support, and referrals to services as needed. EMS personnel can participate in the program and provide required services after participating in training by the new parent initiative staff or make referrals in conjunction with the new parent initiative staff.

**Additional Resource:** Welcome Family Information for Providers

Windows Falls Prevention

EMS personnel can provide education to community members on egress and ingress in multi-story homes as well as provide and recommend/install window bars, appropriate window locks, and ladders for egress as needed.

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**Community EMS Program Services, cont’d**

Behavioral Health Home and Community Referrals

EMS personnel can assist with referral and scheduling appointments with behavioral health resources or provide brochures and contact information. Written documentation of the referral is required.

Depression and Suicide Prevention Resource Lists in the Community

EMS personnel can provide referrals, brochures and assist with locating community resources for depression and suicide prevention. EMS can also provide community education on recognizing the signs and symptoms of depression and suicide risks as well as treatment resources in the local community.

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**Community EMS Program Services, cont’d**

Fire Arms Safety

EMS personnel are given access to the home environment that allows for suggestions of safe storage and use of firearms. Providing family members who have a gun in the household with referral tools for local firearm safety classes encourages safe gun ownership. Providing gun locks and suggestions for gun safes and storage can increase pediatric safety and reduce impulse use. Lethal means counseling and education on gun safety have been shown to reduce gun incidents both in accidental and intentional gun deaths.

**Additional resource:** Suicide Prevention Resource Center Online Courses

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**Community EMS Program Services, cont’d**

Asthma Evaluation

EMS personnel can evaluate the home environment for asthma triggers and provide assistance with initial education on peak flow testing for asthmatics in the home environment. Referrals from the emergency department and an individual’s PCP can help evaluate if asthma is being well controlled in the home. Patients with active shortness of breath must be treated as a medical emergency when applicable.

Health Promotion Screening

EMS personnel can provide community education and health promotion screenings at health promotion screening events. Laboratory testing at Health Promotion Screening events is subject to review and approval by the DPH Clinical Laboratory Program pursuant to 105 CMR 180.030 (D). Further information, including the Health Promotion Screening application, may be found at:

 **Additional resource:** Health Promotion Screen Application information

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**Community EMS Program Services, cont’d**

Vaccinations (by Paramedics ONLY)

Only paramedics may administer flu vaccines and other vaccinations designated by the Department to persons 18 years old and over, as authorized by clinical protocols in a Department-approved MIH or Community EMS Program. See 105 CMR 700.003(A) (4) of the Drug Control Program (DCP) regulations.

The primary ambulance service’s affiliate hospital medical director is responsible for establishing clinical protocols governing such vaccinations by paramedics.

If vaccine responsibility is to be maintained by the primary ambulance service at their base locations, all applicable vaccine storage requirements must be followed, as referenced in DCP regulations. Documentation of immunization must be maintained in accordance with local public health authority processes and comply with federal and DCP regulations. Description of program must include intended population for vaccination and how vaccine acquisition and storage will be handled. **Visit the Centers for Disease Control and Prevention website for more information on storage and handling of vaccines.**

Eligible healthcare providers who wish to receive vaccine from the Massachusetts Department of Public Health Immunization Program must enroll each year. **Find more information on eligibility, enrollment and additional requirements in the Program’s Frequently Asked Questions.**

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**Community EMS Program Services, cont’d**

Provision of Primary Care Resource List and Referral

EMS personnel can offer education to individuals who do not have a PCP, are frequent 911 callers or frequent visitors to emergency departments by providing them information about primary care and other health care specialty resources in the community. Assistance and support to help make a PCP connection for an individual is encouraged.

Well-being Checks

An evaluation of a patient for weight, blood pressure, blood pressure and medication confirmation with simple screening tools can occur in the home or community.

Medication Confirmation checks include a review of newly prescribed medications for a recently discharged patient upon arrival at home, ensuring the patient understands discharge instructions; and a review for any duplicate medication prescriptions noted. Referrals to the patient’s pharmacy or primary care provider (PCP) must occur immediately when any issues are noted. Documentation must be completed by EMS personnel and referrals back to discharging provider are required when indicated.

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**Community EMS Program Services, cont’d**

Sharps Awareness

Residential sharps are banned from disposal in the municipal waste stream. A large share of Massachusetts households do not have an option for residential sharps disposal. EMS services can provide sharps disposal drop-off locations (e.g. drop boxes), hold periodic waste collection dates, and provide referrals to resources that will reduce the number of accidental sharps injuries.

**Additional resource:** Medical waste regulations

Substance Use Disorder Education

EMS personnel can provide education and referral to programs to help reduce tobacco use as well as provide clinical information on the effects of various substances of abuse. Referrals should include notification of the individual’s PCP.

 **Additional resource:** Massachusetts Tobacco Cessation and Prevention Program

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**Community EMS Program Services, cont’d**

Naloxone Information and Training

Providing information about naloxone and its use as well as education on indications and contraindications will catalyze community health improvements. Education will include a demonstration of the procedure as well as the indications for a community member to call 911 to prevent further injury. Training can be provided to patient and family following a 911 call when family requests it but only after full medical evaluation of patient has been completed. Training to police officers and other first responders is encouraged.

**Additional resource:** MassTAPP Technical Assistance

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**MIH and Community EMS Application Overview Sessions**

Chart with upcoming webinars

Register online at: <https://www.mass.gov/service-details/mih-and-community-ems-educational-resources>

Materials from this webinar will be shared online early next week

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**Online Resources**

Information, application materials, and resources will be posted
online as they become available at:

**www.mass.gov/MIH**

**Applicant Resources:**

Application forms and instructions for each program type

MIH Regulations and Guidance

Data submission information and resources for each program type

Application resources, such as best practices for completing a gap in service delivery narrative

Upcoming webinars in-person informational sessions

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**Questions?**

Thank you for participating in today’s webinar!

Questions?

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