NECESSARY PARTNERSHIPS
Community Paramedicine & Treat and Refer
• To provide the most appropriate care to the patient depending upon the need of the patient without the constraints of the previous system that required EMS to transport directly to Emergency Departments.

• Example: Transporting the behavioral health patient to a behavioral health facility, transporting the non-emergent patient to an urgent care or PCP office; or transporting a dialysis patient directly to a dialysis center.
POTENTIAL PARTNERS

• FQHC (FEDERALLY QUALIFIED HEALTH CENTERS)
• PRIMARY CARE PROVIDERS
• URGENT CARE
• DIALYSIS CENTERS
• REHABILITATION FACILITIES
• SKILLED NURSING FACILITIES
• HOME HEALTH AGENCIES
• BEHAVIORAL HEALTH FACILITIES
• HOSPITAL DISCHARGE PLANNERS
• AREA AGENCY ON AGING
FQHC’S

• PURPOSE OF PARTNERSHIP?

• **FQHCs** are safety net **providers** that primarily provide services typically furnished in an outpatient clinic. ... **FQHCs** are paid based on the **FQHC** Prospective Payment System (PPS) for medically-necessary primary health services and qualified preventive health services furnished by an **FQHC** practitioner.

• What can this mean? Individuals may use an FQHC for their primary care needs rather than establish care with a PCP.
  
  • An FQHC would be a source to determine patients that may be having difficulty managing their chronic disease, frequent flyers, patient’s who may need additional resources.
Partnering with your local PCP group is mutually beneficial for a community paramedic program and PCP.

The PCP group will be able to provide referrals to the community paramedic program for their patients that may require additional assistance in managing their chronic condition.

Having a partnership in place will allow the community paramedic or EMS provider to have a contact such as a care coordinator whom can be contacted if necessary to have the patient seen; to allow the loop to be closed in patient care by allowing info to be shared amongst providers.
URGENT CARE

- Persons may be using an Urgent Care facility for their primary care needs. Same as with the FQHC. A person may require additional health care resources. EMS under Treat and Refer would be able to refer patients to urgent care rather than an ED.

- Partnership beneficial because the UC could refer to community paramedic program if they identify a patient who may require more assistance.
URGENT CARES TREAT

- Abscess incision and drainage
- Allergies
- Asthma
- Athlete’s foot/fungus infection
- Bronchitis
- Burns from heat or chemical exposure
- Congestion
- Cough
- Diaper rash
- Ear infection
- Earache
- Eye infection
- Fever
- Flu symptoms
- Gastrointestinal disorders
- Insect bites
- Itchy skin
- Migraine
- Nausea
- Rashes
- Runny nose
- Sinus infection
- Skin allergy
- Skin infections
- Sore throat
- STD testing and treatment
- Stomachaches and stomach pains
- Urinary tract infections
- Wound infection
A partnership with the local dialysis clinic may provide data and subsequent referrals on patients who would benefit from the services of a community paramedic program to assist in the management of chronic renal disease/failure.
REHABILITATION CENTERS

• A partnership with a Rehab facility would allow for a local community paramedic program to be made aware when a patient is being discharged back into the community.
  • Community Paramedic programs are unique in that they can see the patient on the same day of discharge to ensure that discharge instructions are understood and that if there is any medical equipment or prescriptions ordered that they are on site for the patient.
SKILLED NURSING FACILITIES (SNF)

• A partnership with SNF’s in the region is beneficial to the patient in the same way it is for the Rehab facilities.
  • Discharge instructions
  • Equipment
  • Prescriptions
  • Follow up appointments
HOME HEALTH AGENCIES

• Services provided by Community Paramedic Programs in Arizona are still free so for patients that don’t qualify for ALTCS and would have to pay out of pocket of services can obtain services from community paramedics.

• When a participant is enrolled into CHIPP services but requires additional services CHIPP can refer the patient to Home Health.
  • An example would be if a patient wishes to apply for ALTCS
  OR
  • A patient requires help with ADL’s
BEHAVIORAL HEALTH FACILITIES

• As with the other agencies, having a partnership with Behavioral Health Facilities will enable them to refer patients who may require additional follow-up to community paramedic programs.

• It will also enable discharge planners to alert programs in the area of patient discharge if follow-up is recommended.
DISCHARGE PLANNERS

• When a patient is discharged back into a community where a community paramedic program exists, the discharge planner can ensure continuity of care for that patient by sending a referral.
A partnership with this agency is beneficial for:

- Patients that require additional resources, for example, public fiduciary
- Patients seeking resources for the aging population
- Patients who don’t qualify for home health services but still require services such as: Meals on Wheels or housekeeping.
IDEAS ON DEVELOPING PARTNERSHIPS

• Contact aforementioned facilities and set up a meeting.
• Provide facilities with referral form so that they are able to refer patients to your program.
• Consider forming a group within your region that can meet on a monthly or quarterly basis. Ex. Rio Rico formed a Collaborative Focus Group as a requirement for the HRSA grant. As a result of that group, many partnerships were formed and remain today.
CHALLENGES/BARRIERS

• As with any new concept or program, a challenge that arises is buy-in from the source of the referral along with the person needing to be referred.

• Funding sources: For example, it is identified that a patient needs to have safety equipment installed but cannot afford it or a patient requires transportation that is unavailable.
ET3 PARTNERSHIPS

• Regional approaches
  • Benefit
    • Collaboration between multiple agencies whom already have systems in place that can meet the needs of patient population in the region rather that creating new systems.
    • Rio Rico Fire is considering a partnership with Tucson Fire for an application for ET3 status.