COMMUNITY PARAMEDICINE & MOBILE INTEGRATED HEALTHCARE

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TOPICS

- MIH vs. Community Paramedicine

- An Intro to MIH

- Health Needs Assessment

- Taxonomy

- Infrastructure

- Education

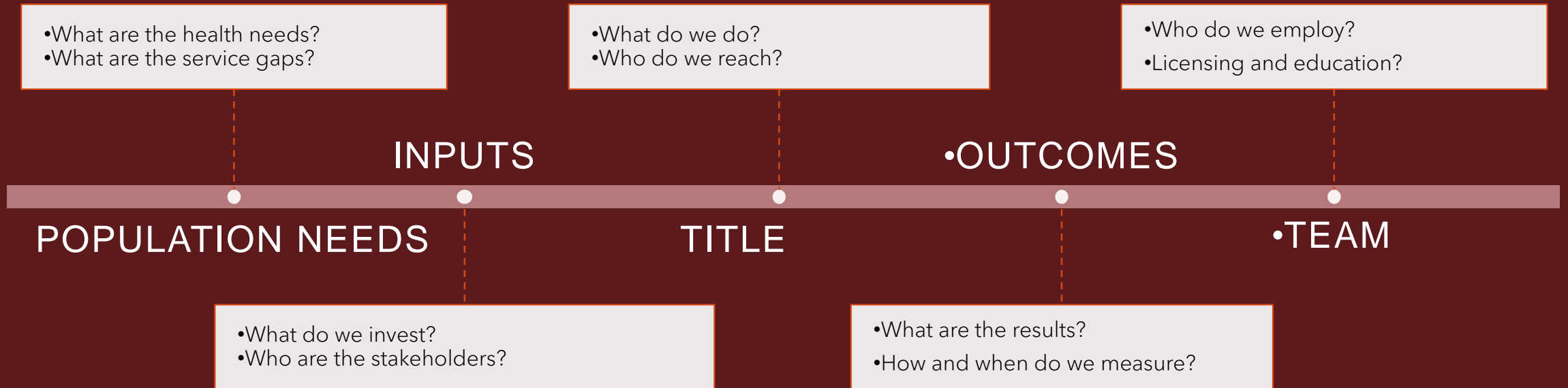- Medical Oversight

- Considerations

WHAT IS THE DIFFERENCE?

- Mobile Integrated Healthcare (MIH) addresses multiple factors in bridging the gap in acute care, home management, education, and follow-up care.

- Community Paramedicine is often focused on reduction in 911 calls and hospital readmissions with limited care in the home provided.

INFORMATION NEEDED TO START!

•What are the health needs?
•What are the service gaps?

•What do we do?
•Who do we reach?

•Who do we employ?
•Licensing and education?

INPUTS

•OUTCOMES

POPULATION NEEDS

TITLE

•TEAM

•What do we invest?
•Who are the stakeholders?

•What are the results?
•How and when do we measure?

HEALTH NEEDS ASSESSMENT

Best assessment tool for:

- Paints a picture of what is missing in the community that can be filled by the program.

- Is a collaborative effort among diverse healthcare providers

- Is a comprehensive assessment of the community to determine outcomes

Helps with:

- Answering questions

  Target population?

  Goals

  Barriers

- Identifying Resources

- Profiling the Population

  Wants?

  Problems?

  Current Health Status?

TAXONOMY
4 Main Types of MIH Services

Patient Navigation

- Designed to provide a patient with the right services for their needs
- Reduces reliance on EMS and Emergency Departments

Adjunctive Mobile Care

- Designed to fill gaps in available healthcare needs
- Reduces reliance on hospital usage for routine medical care

Occupational and Community Health Services

- Designed to focus on absentee reduction and workplace safety
- Injury assessment, drug and alcohol screening, injury prevention

Medicine in Underserved and Austere Environments

- Designed to focus on providing primary medical care in underserved remote communities

INFRASTRUCTURE
People and Positions Needed

Professional Workforce

- EMS Providers

- Mid-level Providers

- Physicians

- Community Health Providers

- Pharmacists

- Home Health Providers

- Hospice Providers

- Nutritionists

- Data Analysts

Other Support

- Medical Direction

- Strategic Partnerships

- Training and Education Resources

- Communications

- Mobile Resources and Transportation

- Sustainable Funding

- Evaluation and measurement tools

EDUCATION

Courses based on Competency Gaps

- Due to the complex interprofessional design the education is focused on gaps in initial education and training in fields needed for the program.

- IBSC Certification

- College Education Certificates

Courses are provided

- Face to face

- Remote

- Online

- Synchronous and asynchronous

- Through lecture, discussion, demonstration, modeling, and clinical training.

MEDICAL OVERSIGHT

Responsibility

- Scope of Practice

- Licensing and Credentialing oversight

- Legal Responsibility of the Practice

- Know the Needs and Expectations

- Funding Models and Reimbursements

- Regulatory Oversight

Qualifications

- Physician with Experience in Out of Hospital and Mobile Healthcare

- Partner Effectively with Other Local Medical Resources

- Advocate before Policymakers and Other Officials

- Communicate well with Diverse Audiences

- Develop, Measure, Evaluate, and Report on Program Measures

CONSIDERATIONS

Financial

- Cost of Service will vary based on size and scope of program

- Long term sustainability

- There is no standard model for program funding

- Reimbursements are still in the works for treat at home for 911 providers

Legal and Political

- Scope of practice concerns

- Opposition of existing local resources

- HIPAA Compliance

- Billing expertise in mobile healthcare

- Need for legal council dedicated to support the program

EVALUATIONS

Measures

- Operational Performances

- Healthcare Quality

- Total Cost of Services

- Overall Evaluation Based on Program Data

Ultimate Goal

- Better Healthcare

- Better Health

- Lower Healthcare Costs

QUESTIONS?

THANK YOU FOR TIME AND ATTENTION

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Reference: Mobile Integrated Healthcare Collaborative: Principles for Establishing a Mobile Integrated Healthcare Practice, Medtronic Philanthropy, 2014.