



City of San Antonio

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Title: Briefing on the San Antonio Fire Department's (SAFD) Mobile Integrated Health (MIH) Program [Presented by Charles Hood, Fire Chief]

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Date	Ver.	Action By	Action	Result
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DEPARTMENT: Fire

DEPARTMENT HEAD: Charles N. Hood

COUNCIL DISTRICTS IMPACTED: Citywide

SUBJECT:

Update on the San Antonio Fire Department's (SAFD) Mobile Integrated Healthcare (MIH) Program

SUMMARY:

Update on the SAFD Mobile Integrated Healthcare Program

BACKGROUND INFORMATION:

Historically, our 911 service was a catch-all for those who were unable to properly navigate their way to scheduled healthcare. The previous EMS structure provided only emergency transport for all patients with healthcare needs regardless of acuity. That process provided acute treatment, but lacked continuity for non-emergent conditions which is higher in cost than primary care. The National Association of EMTs defines Mobile Integrated Healthcare as "The provision of healthcare using patient-centered mobile resources in the out-of-hospital environment that are integrated with the entire spectrum of healthcare and social service resources

available in the local community.”

On October 1, 2014, the San Antonio Fire Department (SAFD) implemented the Mobile Integrated Healthcare (MIH) Pilot Program focused on patients with high volume use of our 911 system. The MIH program represents one of the most innovative, progressive evolutions in the delivery of community-based healthcare. SAFD Paramedics function within their current scope of practice in an expanded role through the use of non-emergent resources in the pre-hospital settings. Their focus is providing medical assessment and preventive healthcare education tailored to the needs of the individual, as well as navigating them through our community medical and social resources.

SAFD has worked in conjunction with Southwest Texas Regional Advisory Council (STRAC) and the City of Schertz towards data sharing within the medical community and building strong clinical, physician, and regional partnerships. SAFD has formed a MIH consortium, which currently includes STRAC, Schertz, Canyon Lake, and New Braunfels.

On May 1, 2016 the MIH program was staffed with 1 Lieutenant and 7 Engineers and associated equipment as an improvement authorized during the FY 2016 budget process. MIH increased the hours of operation by staffing 4 MIH paramedics 24 hours day and 3 maintain regular business hours.

ISSUE:

Since the inception of the program, SAFD MIH paramedics have made over 8,572 patient contacts with over 1594 participants. Currently the MIH program has 81 participants and has maintained a 63.7% reduction in calls for the SAFD from MIH participants. Working through the consortium, SAFD recently completed a \$392,000 grant working with juvenile asthma patients who were frequent utilizers of the 911 system. In June 2017, SAFD MIH entered into a paid contract with a Hospice provider through the consortium which flags high risk patients in our dispatch program and sends an MIH unit along with a First Responder for those patients. The intent is to assist the patient’s wishes to be home during their final stages of life and to reduce revocation of hospice services through a transport to an emergency room.

MIH has instituted an MIH taxi voucher which allows patients to be taken to other destinations besides a hospital. Permission to transport to an alternative destination such as clinics and/or doctor’s offices is provided by the SAFD Medical Director. SAFD MIH paramedics are also working with SAPD’s IMPACT team to help assist the homeless. MIH continues to help improve the quality of life and access for healthcare for some of the most informed citizens in San Antonio.

The SAFD MIH team was the recent recipient of the Texas Department of Family and Protective Services (TDFPS) ‘Commissioners Award of Excellence’. In the history of TDFPS, SAFD MIH is the first outside agency to receive the Commissioners (H.L. Whitman Jr.) Award of Excellence.

SAFD MIH continues to explore options for funding to sustain the current phase of the program and is focused on expansion through partnerships with area hospitals and insurance exchanges to progress to the next phase of the program including Wellmed, Humana, Gonzaba, and several Hospice providers.

RECOMMENDATION:

The MIH program serves the community by targeting citizens who are frequent utilizers of the 911 system by being proactive in their healthcare. SAFD proposes continued funding for the MIH program by the City while it continues dialog with local hospitals, insurance exchanges and seeks grant funding.