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Patient-centric Programs

Solving departmental
pain points.



IMAGETREND®

Case #1:

High Utilizers → Appropriate Resources

Integrated healthcare is quickly becoming the norm in the emergency response sector, and Memphis Fire Department is at the forefront of its adoption. As a busy, urban department, Memphis has high utilizers that rely on the department for needs that are not emergencies, but are otherwise legitimate health concerns. To help these high utilizers find appropriate care and assistance, Memphis developed the Healthcare Navigator program. Using ImageTrend Elite™, the Healthcare Navigator program allows providers to share data and information between agencies and helps identify those who could benefit from assistance.

2015

10.5%

From 2012–2015, the call volume faced by the city of Memphis' Division of Fire Services increased by roughly 10.5%, to around 125,000 calls a year. That's almost 3,600 calls per ambulance, around 10 per day, and **a fifth of the calls were not actual emergencies.**

2012



Lt. Kevin Spratlin, MS, NRP, who heads the Healthcare Navigator program, says **“Like a lot of other departments, we have an ever-increasing call volume, coupled with a decreasing budget and the staffing issues many agencies experience.”**

“It creates conditions where we have to innovate—we have to find better ways of caring for those we’re responsible for. Putting all that data together in a patient-centric record makes us more efficient in what we do.”

Case #2:

HIE

Read case specifics, next page.

Integrating Data to Improve Patient Care Throughout the Healthcare Spectrum

HIE. You know the term. It's all the rage. You know agencies are doing it - but what is "it"? HIE is an acronym for Health Information Exchange, an electronic method of sharing data among EMS, hospitals, trauma centers, and other health entities. The ability to exchange data ensures that all providers have access to a patient's medical record and care history, thus improving the speed and quality of care.

The problem is, EMS has traditionally been left out of HIE's information loop, forcing medics to investigate or make inferences when providing care. They need a way to tap into the HIE data so they can be better informed of medical history (such as medications or allergies) and provide proper care for the patient's needs.



“I work with all of the hospitals, fire departments and EMS agencies in the county on a daily basis, and continually hear how easy it is now for hospitals to access run reports, update records for billing and make the process smoother for physicians.” – Barbara, EMS QI Coordinator

Case #2 (CONT.)

HIE

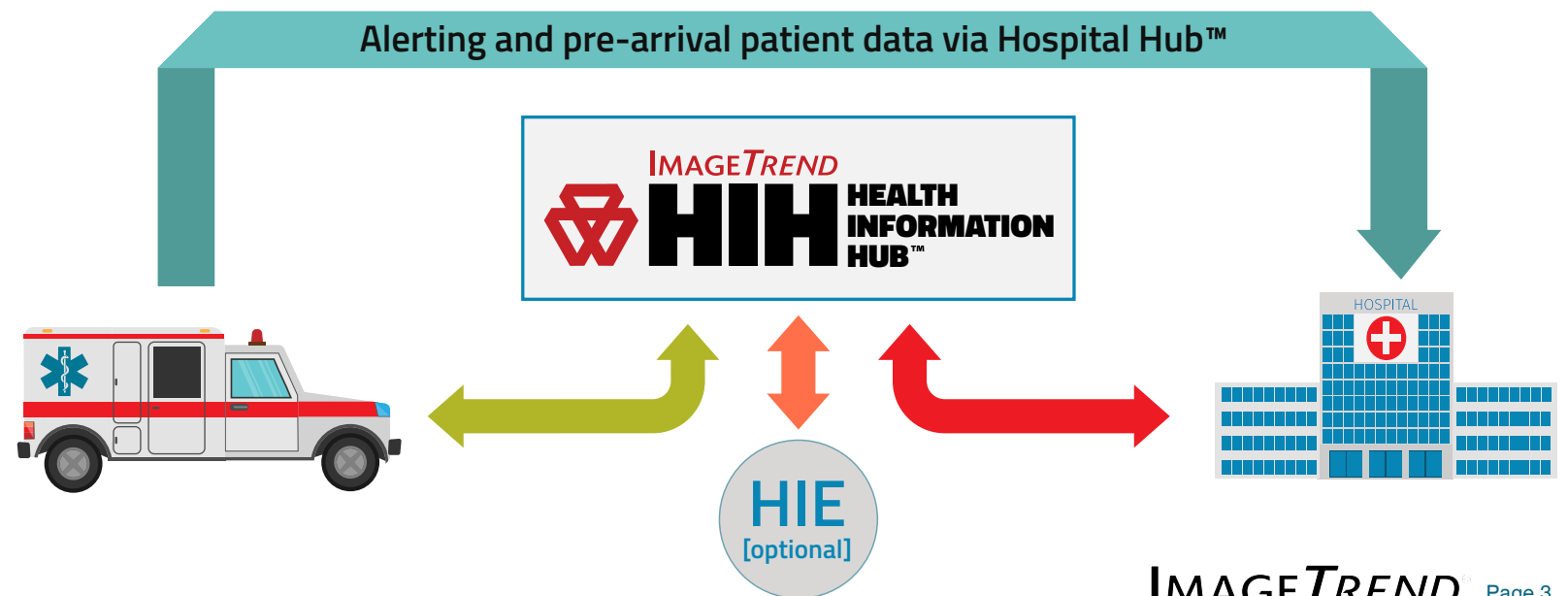
Orange County EMS in California has implemented the Search, Alert, File and Reconcile (SAFR) model for HIE. SAFR is a bi-directional Health Information Exchange between EMS provider agencies and receiving hospitals. The technically complex system can be boiled down to this basic explanation:

- S Search:** Look up patients from the field
- A Alert:** Send ePCRs to the ED before patient arrival
- F File:** Send ePCR data to EMRs and HIEs
- R Reconcile:** Use outcome data

While in the field, medics are able to search for a patient in ImageTrend Elite, which connects to the Orange County HIE via ImageTrend Health Information Hub™ (HIH™), where the patient's medical record is identified. When the record is identified, the ePCR is automatically populated with the patient's medications, allergies, recent hospitalizations and medical history. When medics are en route with a patient, they alert the receiving hospital through Hospital Hub™ and send pertinent information to the ED. Patient discharge, insurance and clinical information is collected via HIH, which gives the responding and transporting agencies accurate data to use for quality improvement.

Many agencies nationwide are beginning to understand the importance of a complete picture of healthcare in order to facilitate better care.

Isn't it time to consider sharing data among your local healthcare organizations?



Case #3: Cutting Down On Recurrences

CP/MIH

You may call it Community Paramedicine or Mobile Integrated Healthcare, or maybe even both, but regardless of the name you give it, the goal is the same: To provide better patient care through cost-effective ways to treat chronic conditions, reduce hospital readmissions, reduce unnecessary 911 transports and/or better reach underserved segments of the population.

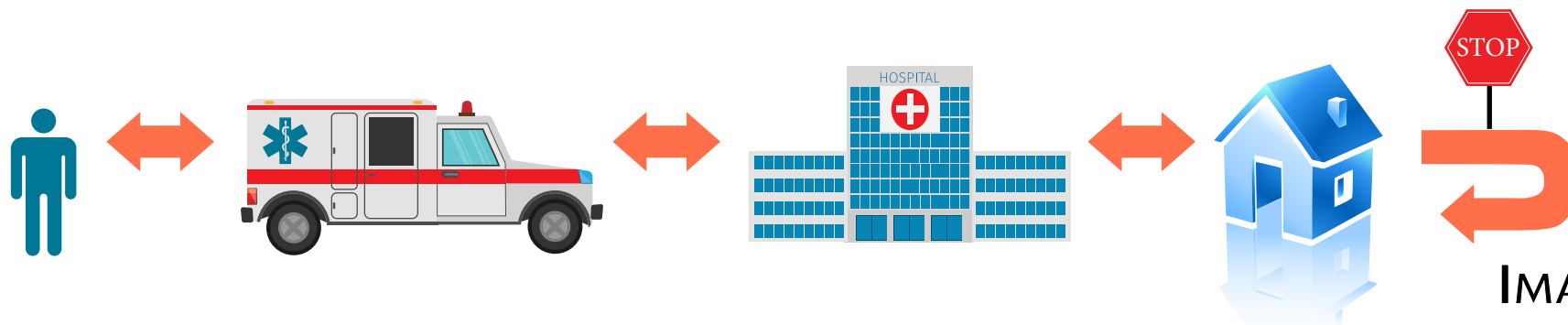
Medical Director, Dr. Michael Wilcox shares the story of one patient whose life dramatically improved with the help of a Community Paramedic.

“I had one patient presented to me by one of the larger healthcare organizations in the metro area here in Minneapolis-St. Paul. It was an individual with Chronic Obstructive Pulmonary Disease, oxygen dependent, who recurrently was being brought into the emergency room of one of the hospitals in distress with respiratory failure.”

“This patient was in the emergency department four different times within a month with this respiratory type of situation. They were admitted, they were stabilized, problems were handled appropriately, the patient was discharged back home.”

“A week later they were back in the ED with a problem. The case manager within that emergency department dispatched one of the community paramedics who was housed within that organization’s EMS service, to check on the welfare of the patient once they got home. The equipment wasn’t working properly, and as a result, the patient was recurrently coming into the hospital in crisis. So once that was corrected, the patient then no longer ended up recurrently calling 9-1-1 and ending up in the hospital emergency department.”

ImageTrend understands and works with the all types of MIH/CP programs from super rural to inner city. The community needs are different from program to program, but the data concepts are the same: identify, enroll, manage, report and improve – all of which is available within ImageTrend Elite Community Health™.



HOW TO BEGIN TALKS ON CP/MIH

ADVICE FROM MEDICAL DIRECTOR DR. MICHAEL WILCOX



GAP ANALYSIS

You need to bring to the table stakeholders in the community that are involved in healthcare. By bringing these folks to the table and reviewing the gaps in their healthcare organizations (i.e. EMS, hospitals, fire departments, EDs), you can develop partnerships between governmental bodies and private healthcare providers. These partnerships assist in managing the care collectively as a team by utilizing extenders and by doing work in the communities through the community paramedicine initiative and other frontline healthcare workers.

FINDING THE ROI

Not uncommonly, patients who end up in a community paramedicine program are either under-insured or not insured at all. Without a program in place, they end up then being cared for in the emergency room at the hospital, which is the most expensive area to achieve patient care. This becomes a problem financially for EMS agencies and hospitals, but it can be mitigated if agencies are able to manage these patients before they end up in crisis in the emergency room. Financially it's a much better way of handling patient care in the eyes of all parties – and it paves the way for better patient care.

“The community paramedic, through his or her program’s gap analysis of healthcare needs and attention to complex, underserved and vulnerable populations, will become a valuable resource to assist in addressing these gaps.” – Dr. Michael Wilcox, Medical Director

ABOUT

ImageTrend, Inc. is dedicated to connecting life's most important data in the healthcare and emergency response community. ImageTrend delivers software solutions, data analytics and services for EMS, hospitals, community paramedicine (CP), critical care, fire, and preparedness to enable fully integrated patient-centric healthcare and public safety. ImageTrend's commitment to innovation, its clients, and providing world-class implementation and support is unsurpassed. Based in Lakeville, Minn., ImageTrend combines business analysis, creative design and data-driven architecture to offer scalable solutions and strategies for today and the future.

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