#### NORTH MEMORIAL HEALTH CARE

Community Paramedicine - Grocer

PETER CARLSON

**IRCP** 

FEB. 9-10<sup>TH</sup>, 2017

## Goals for today

- Learn about North Memorial's Community Paramedic group
- Focus on integrating care into a grocery store (CP/ACP)
  - Ground break April 2017-open December 2017
- Discussion welcome and encouraged





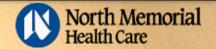
#### NORTH MEMORIAL HEALTH CARE

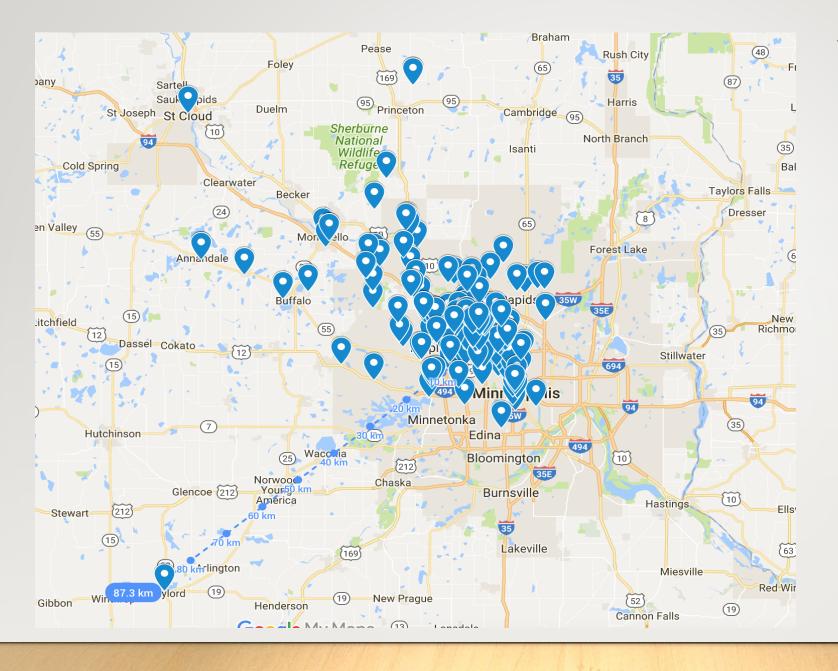
- 600 square mile Hennepin County coverage area
- 50 square miles of lakes and rivers
- 1.5 M residents
- 18 clinics (specific to NMHC)
- Level 1 trauma services
- Multi-state paramedic system
  - Air care division
  - PCP services
  - ICP services
  - ACP services
  - CP services
- 2 hospitals
  - Maple Grove hospital (Maple Grove) 100 bed
  - North Memorial hospital (Robbinsdale) Metro area 350 bed



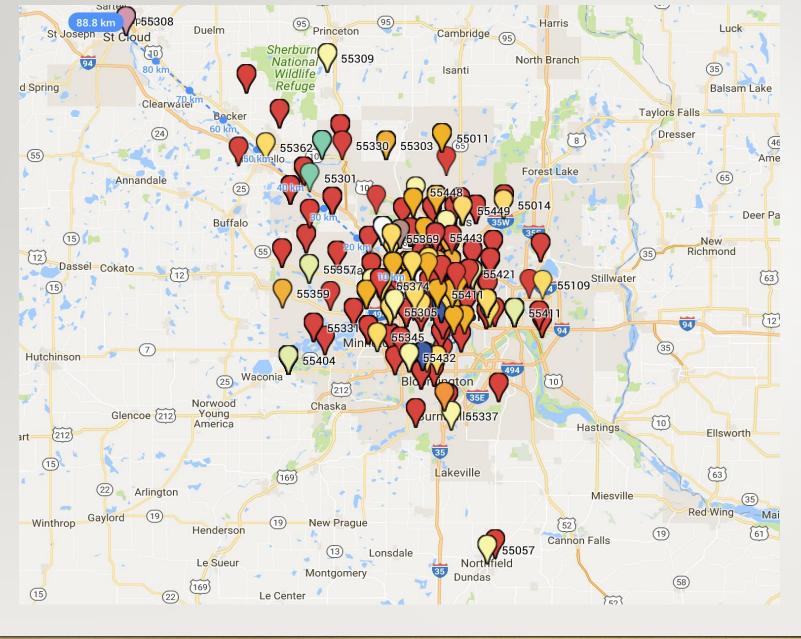
## Our approach to care delivery by grouping

- Care transitions
  - √ Improved experience
  - ✓ Readmission focus
  - ✓ Increased primary care access
- Chronic disease management
  - ✓ Increased primary care access
  - ✓ In home disease monitoring
- Community engagement
  - ✓ Attribution
  - ✓ Capture
  - ✓ Leakage
  - ✓ Increased primary care access

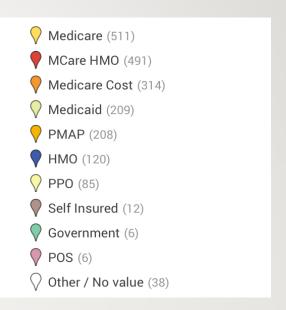




### Where we've been



#### Where we've been



Equates to 30% of our FTE=windshield time

## Action taken to decrease windshield time

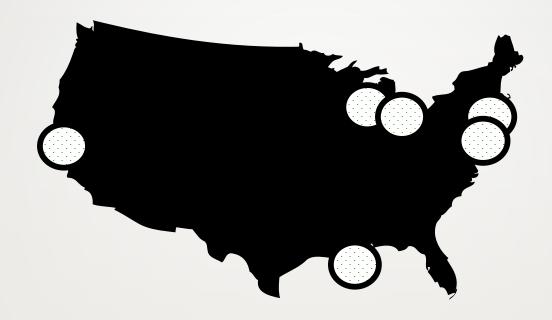
- Zone creation
- Focus on clinics with attribution and low empanelment
- Dedicated sites of operation
  - Chemical dependency center = in operation
  - Mental health clubhouse = in operation
  - Grocery Store = launch 2017

# North Market

More than a grocery store.



# Who lacks access to healthy food?



23.5 MILLION



North Minneapolis is MN's most severe food desert

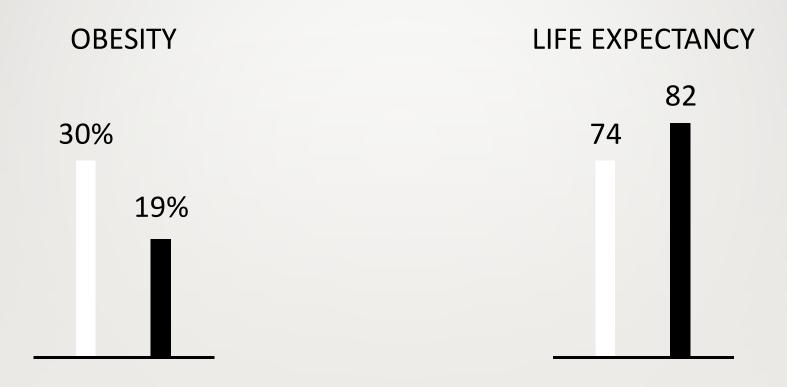
67,000 residents

30 convenience stores

1 supermarket



# A public health crisis



NORTH MINNEAPOLIS VS. CITY-WIDE

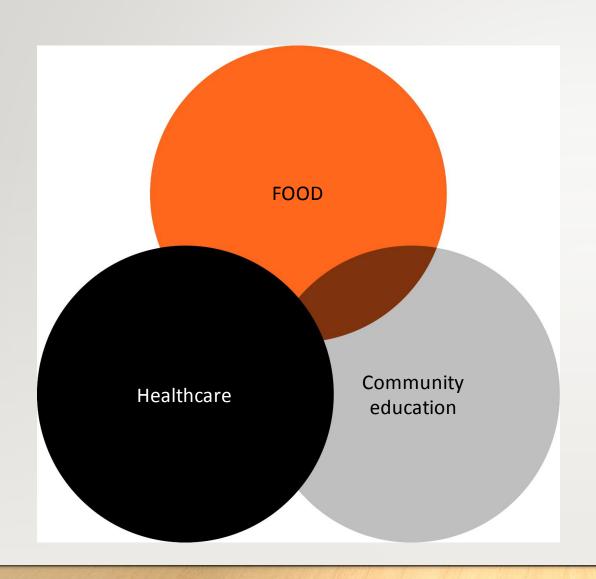


# Intentional collaboration between Pillsbury United Communities and North Memorial Health Care



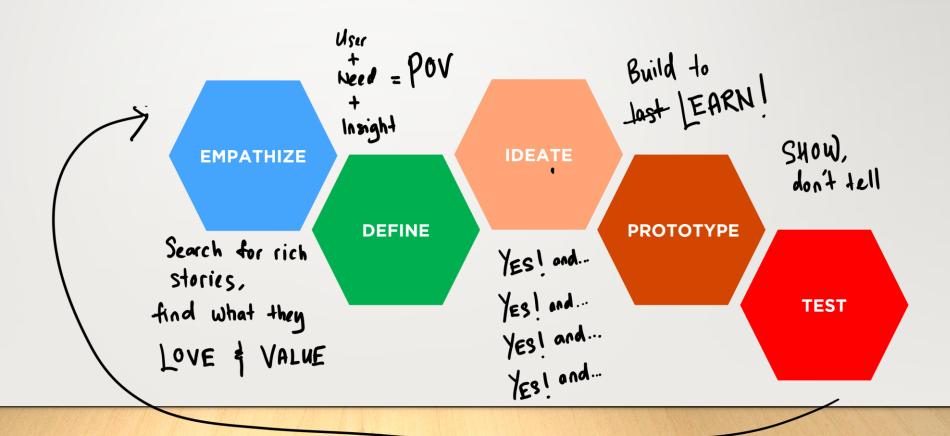
Simple solutions won't fix the problem.

We need a new approach.



# Purposeful Integration

# Human-centered design, a new way to engage the community





## What we heard from the community...

I would like to try some of the things that they recommended at the doctor, like salmon. I don't know how to cook it and that is an expensive mistake to make if you can't eat it.

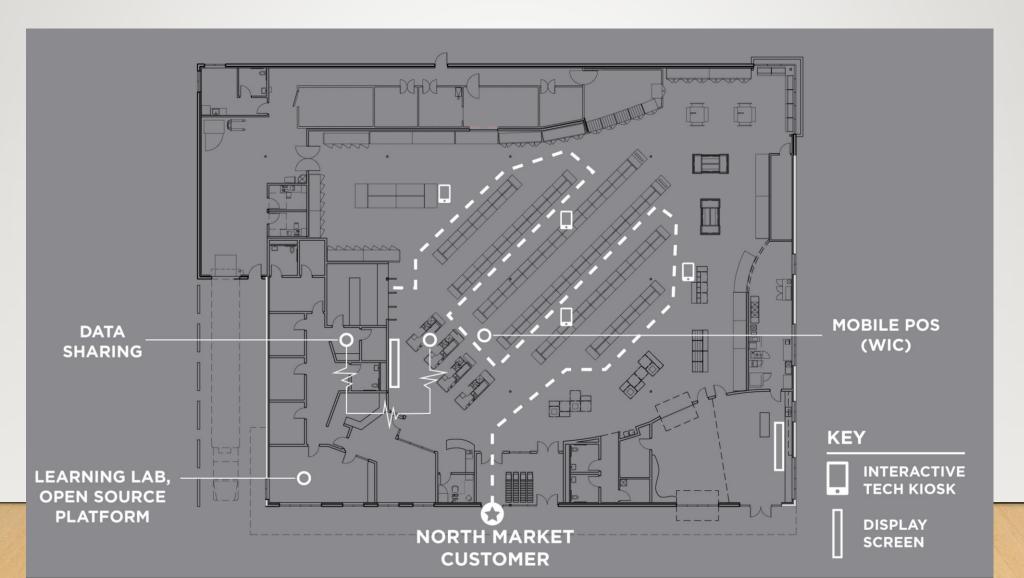
We usually run short of money in the 4<sup>th</sup> week of the month, so that is the point where I am looking for things that can really stretch my budget. I want to try to eat healthier, but the most important thing is just that we eat.

I only get to shop about once a month (that is when my sister can take me to the big store), otherwise I am filling in from the convenience store.

I am working and am on the road a lot. I have some medicines I take for anxiety, but I haven't been going to my therapist because it is hard to get there with my job schedule.

You know, we've had some experiences with the hospital and they aren't very positive. I feel like they can look down at you.

## A°customer journey map



### Services to be provided by community paramedic;

#1 Support healthy eating – improve health literacy



our dog from begging!"

#### **Direct Care**

Wound care

IV hydration

Advanced Life Support Assessment

Resuscitation

Listening

Access EMS physician prescription

Suturing

Triage

#### **Medication Reconciliation**

Medication education- side effects/indications Monitoring for side effects Medication error prevention

Depo injection

#### **Health Screening**

Hypertension

Diabetes

STI

Asthma care and

treatment

Asthma education

Asthma care and

treatment

mantoux

#### **Lab Testing**

Pertussis

Strep Throat

UTI

INR

Basic Metabolic

Panel/electrolytes

CBC

Other labs PRN

## Documentation for the patient, by the patient

#### • Community Paramedic Note

- Home grocer visit on 10/9/2017 was requested by @PCP@
- Reason for visit: {home visit reason:19975}
- Time in: \*\*\*
- Time out: \*\*\*
- Vitals:
- @vs@
- Oxygen liter flow per minute: {Oxygen Liter flow:19941::"not applicable"} {Oxygen Status:19943::"not on oxygen"}
- Blood Glucose: {BG results:19057}

#### Skilled Observation

Cardiovascular: {Findings; ROS cardiac:30506::"negative"}
Respiratory: {Findings; ROS respiratory:30504::"negative"}

Neurological: {Findings; ROS neuro:30532::"negative"}

GU: {Findings; ROS genitourinary:30516::"negative"}

GI: {Findings; ROS gastrointestinal:30513::"negative"}

Musculoskeletal: {Findings; ROS musculoskeletal:30524::"negative"}

Skin: {Findings; ROS skin:19972::"negative"}

Psych: {Psych, Brief Ex:19442::"Alert, oriented x 3;

normal cognition, memory and judgement; normal

speech, behavior and thought content. "}

Pulses: {Findings; Pulse:14315::"negative"}

#### Cont documentation

- Diet:{Diet:18884::"normal"}
- Referrals for nutrition: {Nutrition:19058}
- Last BM: {time frame:19982::"today"}
- Past 24 hour diet recall: {adequate/inadequate:112339::"adequate"}
- Physical review of available food in home with patient; fridge/pantry/cabinets
- Living situation: {Living Situation:19945}
- Abuse: {abuse:19977::"no concern"}
- Home safety eval: {Home Safety Eval:19059}
- Functional limitations: {Functional limitations:19944::"none"}
- ADL's: {ADL's:19955::"independant in all areas"}
- Barriers to care: {Barriers to care:19958::"none"}

Medications were reviewed for duplication, effectiveness and potential risks and benefits. The patient {IS:13220} taking her medications as directed.

Barriers to self medication management: {med manage barriers:19959::"none"}

Referral to Medication Therapy Management Services: {YES/NO:10305}

Teaching tool used/given: {teaching tools:19983}, {instruction:19974}

Coordination with: {coordination with:19973::"physician/provider"}

Community resource information/referral given: {community resources:19976::"none "}
Tele-Med/Monitoring resources in possession of or needed: {Telemed resources:19061}

## Final documentation-----Q&A

- Community Paramedic listed on the Care Team: {YES/NO:10305}
- FYI tab reviewed: {YES/NO:10305}
- Health Maintenance reviewed, action taken to update all items {HM update:19062}
- Advanced Directive: {Advanced Directive: 12455}
- POLST: {STATUS:19960::"not needed"}
- Assessment/Plan
- Based on assessment by Community Paramedic @ME@ and with the agreement of the patient, goals have been set/reviewed in the chart. Patient will be followed up in {weeks/months:114137}, number of anticipated visits: {NUMBER:12132}, Next visit, or Phone call scheduled: {YES/NO:10305}
- Care plan is being followed: {YES/NO:10305}
- Thank you for involving our program in your patient's care.
- @ME@
- Community Paramedic
- North Memorial Clinics